LONG-TERM EFFECTIVENESS OF ADALIMUMAB IN SECOND-LINE OF BIOLOGICAL THERAPY IN ULCERATIVE COLITIS AND INFLUENCE OF THE FIRST-LINE TREATMENT

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5PSQ-055
ATC 4. Historical research

Background and importance
- Ulcerative colitis (UC) presents high levels of tumor necrosis factor-α (TNF) in colonic mucosa.
- Poor response to re-treatment with a second TNF antagonist agent (anti-TNF) has been suggested in patients refractory to first line with an anti-TNF.

Aim and objectives
To evaluate long-term effectiveness of adalimumab as second anti-TNF and influence of the first anti-TNF treatment in UC.

Material and methods
• Variables: age, sex, previous anti-TNF, response to anti-TNF treatment, duration of therapy and Mayo clinic score (MCS)
• Effectiveness was evaluated by MCS at 6, 36, and 72 months

  • Clinical remission (R): MCS ≤2 points
  • Clinical response (CR): ↓ of ≥3 points in MCS baseline
  • Lack of response (LOR): none of the above

• Primary non-response (PNR) to anti-TNF → LOR in induction period
• Secondary non-response (SNR) to anti-TNF → LOR after induction period

Results

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<th>R</th>
<th>CR</th>
<th>LOR</th>
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<tbody>
<tr>
<td>6 months</td>
<td>10 (32.2%)</td>
<td>6 (19.4%)</td>
<td>15 (48.4%)</td>
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<tr>
<td>36 months</td>
<td>8 (25.9%)</td>
<td>1 (3.2%)</td>
<td>22 (70.9%)</td>
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<tr>
<td>72 months</td>
<td>2 (6.5%)</td>
<td>1 (3.2%)</td>
<td>28 (90.3%)</td>
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PNR to adalimumab

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<tr>
<th>PNR to first anti-TNF</th>
<th>2/10 (20%)</th>
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<tbody>
<tr>
<td>SNR to first anti-TNF</td>
<td>8/10 (80%)</td>
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Conclusion and relevance
- Adalimumab as a second anti-TNF maintained more than a quarter of patients with UC in R at 36 months, but almost all patients lost effectiveness at 72 months.
- Adalimumab’s PNR was less frequent in patients with PNR to a first anti-TNF therapy than in those with SNR.