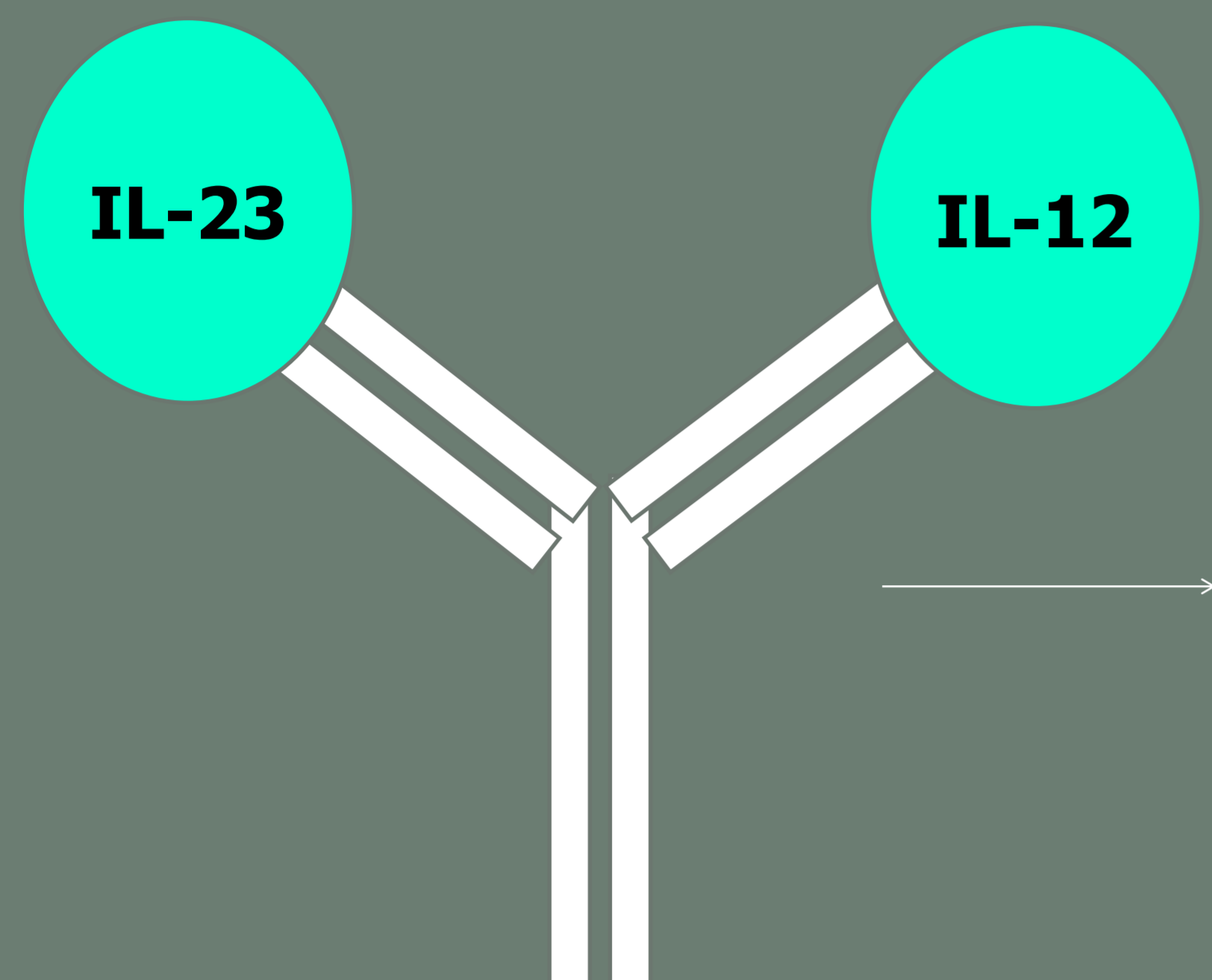


EFFECTIVENESS AND SAFETY OF USTEKINUMAB IN CLINICAL PRACTICE FOR CROHN'S DISEASE

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BACKGROUND:



Causing the decrease of inflammatory markers in Crohn's disease (CD)

OBJETIVE



To evaluate the efficacy and safety of ustekinumab in patients diagnosed with CD in a real clinical setting.

MATERIALS AND METHODS

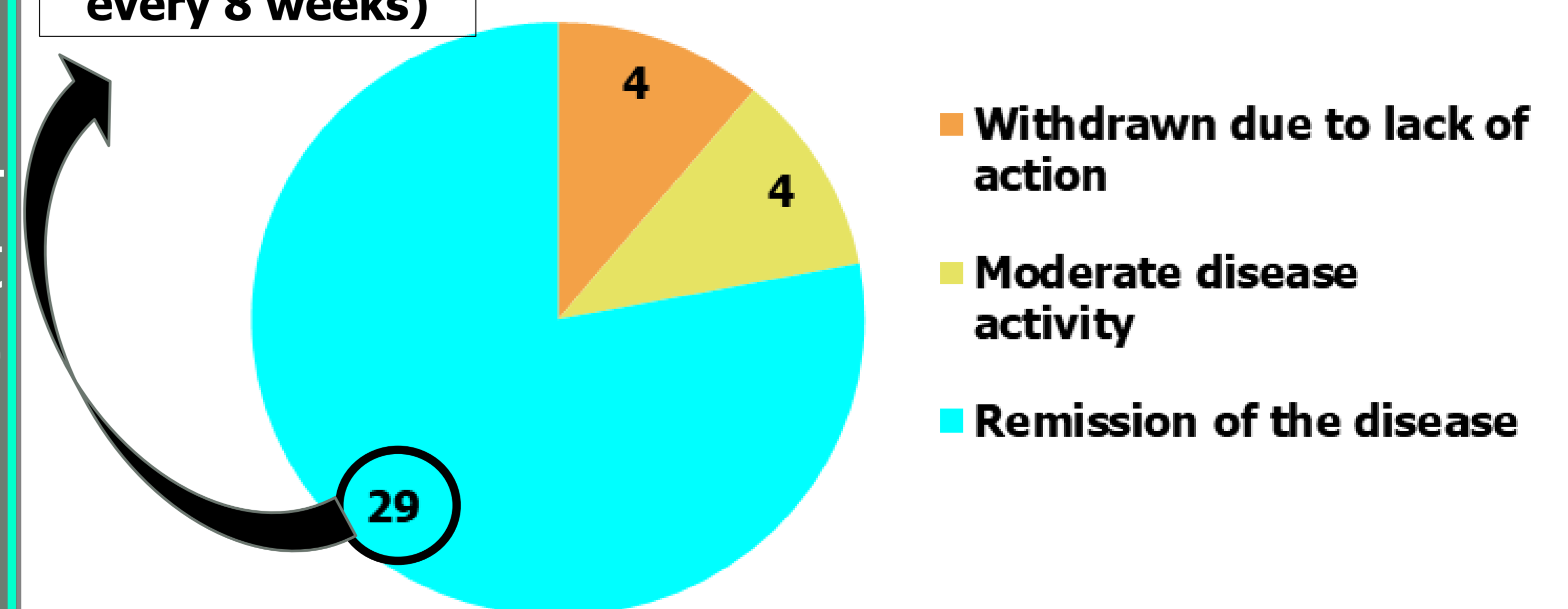
Retrospective observational study, in two regional hospitals, of patients with CD who received doses of ustekinumab between January 2018 and September 2019, both included. The data were obtained from the PRISMA-APD outpatient care program, and by reviewing medical records in Diraya. To assess efficacy, the Harvey-Bradsaw index (HBI) was considered, for which the following variables: general condition of the patient, abdominal pain, number of daily liquid bowel movements, presence or absence of abdominal mass, and other associated symptoms. Remission of the disease was considered an HBI between 1 and 6. Other clinical variables included were: age, sex, previous treatments with anti-TNF, concomitant use with immunomodulators and / or corticosteroids, need or not for intensification, and treatment interruption. To assess the safety, the related adverse effects associated with ustekinumab were considered.

RESULTS

37 patients were included in the study: 21 women and 16 men. The median age was 45 years. With the exception of 3 patients, all had received prior therapy with one or more anti-TNF. 20 of the patients received concomitant corticosteroid and immunosuppressive medication. The only adverse reaction recorded was atypical erythema nodosum in a patient.

23 had an intensified pattern (90 mg every 8 weeks)

EFFICACY



CONCLUSIONS AND RELEVANCE

Ustekinumab seems to have good efficacy in CD with an intensified regimen, since it is the pattern that has the disease in remission (HBI between 1 and 6 points) in most patients. Its safety profile was optimum as it reacted adversely in only one of the included patients and not mandatory to the withdrawal of the drug.