



EVALUATION OF HEALTH IMPACT IN INFLIXIMAB-TREATED PATIENTS WITH INFLAMMATORY BOWEL DISEASE: INCORPORATION OF PATIENT REPORTED OUTCOME MEASURES (PROMS)

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BACKGROUND AND IMPORTANCE

Anti-TNF-alpha therapy, such as infliximab, is the initial choice among biologic treatments for inflammatory bowel disease (IBD) when conventional therapies fail. IBD can impacts patient's life quality. Therefore, integrate Patient Reported Outcome Measures (PROMs) offers a valuable approach to monitor treatment from the patient's perspective.

AIM AND OBJECTIVES

Assess disease impact in infliximab-treated patients affected with IBDs using PROMs.

MATERIAL AND METHODS

Cross-sectional study including outpatients treated with biological agents for ulcerative colitis (UC) and Crohn's disease (CD) ≥18 years.

Health Status Evaluation

- CD: Harvey-Bradshaw Index (HBI)



- CU: Partial Mayo Score Index (PMSI)



We used 2 questionnaires to evaluate PROMs

- IBD-Control**
 - IBD-Control-8 plus (0-16)
 - Visual analog scale (VAS) (0-100)

Higher scores represents better disease control

IBD-Disk (0-100)

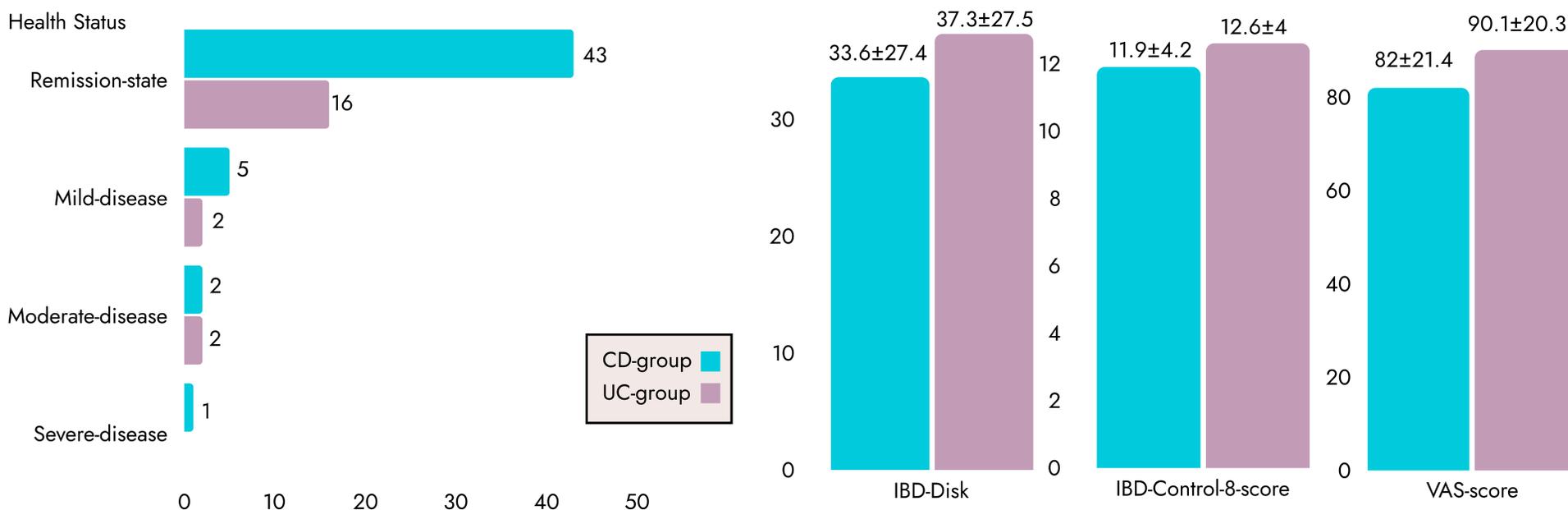
Higher score represents higher IBD daily-life burden

Socio-demographic and clinical characteristics: age, gender, type of IBD, diagnosis year, biological treatment, starting date of biological treatment, previous biological treatment, concomitant immunosuppressive treatment, previous surgeries due to IBD and smoking habits.

RESULTS

51 patients with CD and 20 with UC were included (mean age 44.4±13.5, 63.4% men).

The mean number of patients previously treated with biologic agents in CD and UC was 13.7% and 35%, respectively. In both groups the majority of patients were treated >6 months with their current biological agent (CD: 50, UC:19). Patients took concomitant treatment with oral immunosuppressants in 80.4% in CD and 65% in UC



Regarding the IBD-Disk, 70.6% of patients in the CD group had a score below 50 points, while in the UC group, 60% of patients scored below 50 points.

CONCLUSIONS AND RELEVANCE

The results show that most patients in both groups were in remission as reflected in the IBD-Control-8 and VAS scores. IBD-DISK shows moderate daily life impact, with ≥60% scoring <50. Therefore, PROMs are useful tools and could be included within pharmaceutical practice strategies.