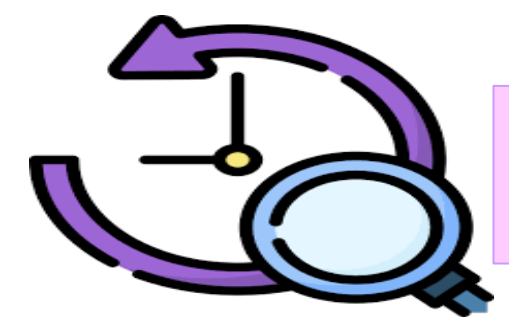




PERSISTENCE OF UPADACITINIB TREATMENT IN ITS DIFFERENT INDICATIONS

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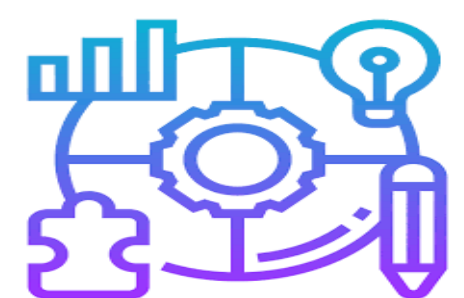
BACKGROUND AND IMPORTANCE

Upadacitinib, a Janus kinase (JAK) inhibitor, is widely used to treat chronic inflammatory conditions such as rheumatoid arthritis (RA), psoriatic arthritis (PsA), atopic dermatitis (AD), Crohn's disease (CD), and ankylosing spondylitis (AS). Understanding treatment persistence how long patients stay on therapy without discontinuation—is key to evaluating the drug's real-world effectiveness and long-term benefits. Persistent treatment often indicates better disease control, while early discontinuation may suggest therapeutic failure or intolerance.



OBJECTIVES

The study aimed to **determine the persistence of upadacitinib** treatment across its various indications, **including PsA, RA, AD, CD, and AS.**



MATERIALS AND METHODS:

This **descriptive, observational, retrospective study** involved adult patients treated with upadacitinib **between January 2021 and January 2024.**

Data collected included patient demographics (sex, age), diagnosis, treatment line, start and end dates, and reasons for discontinuation (e.g., primary failure, secondary failure, intolerance, or loss of follow-up).

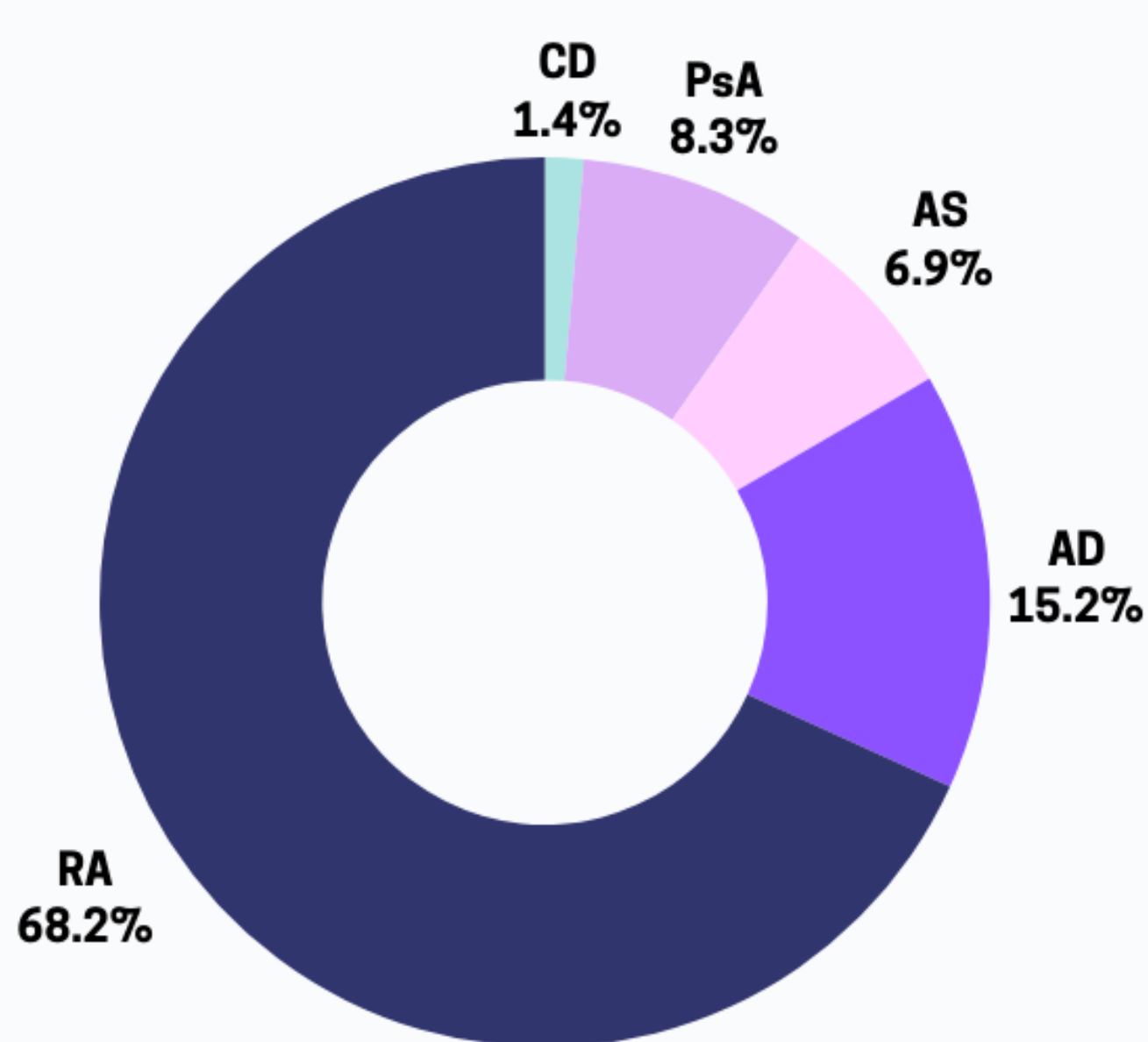
Persistence was assessed at 12 and 24 months and analyzed by condition and treatment line.



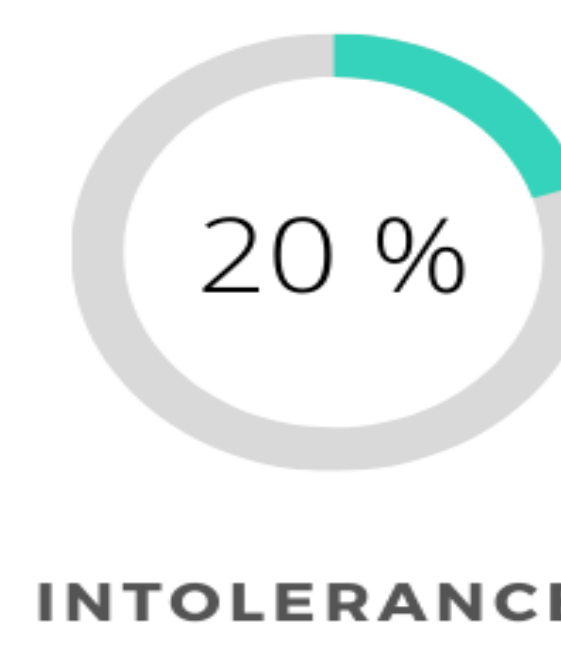
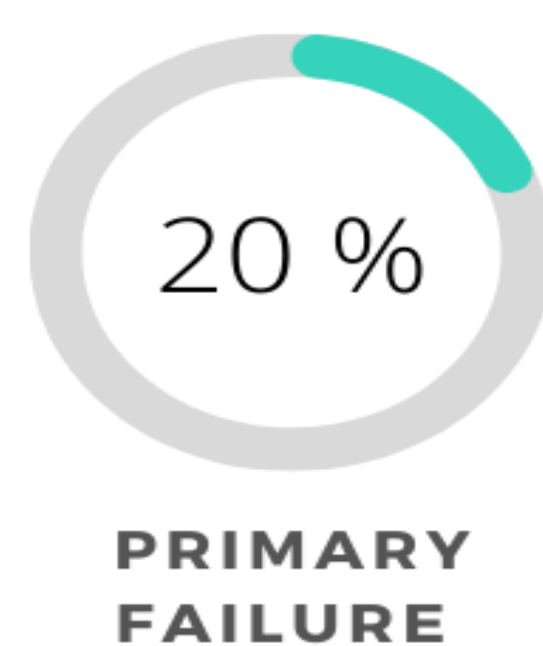
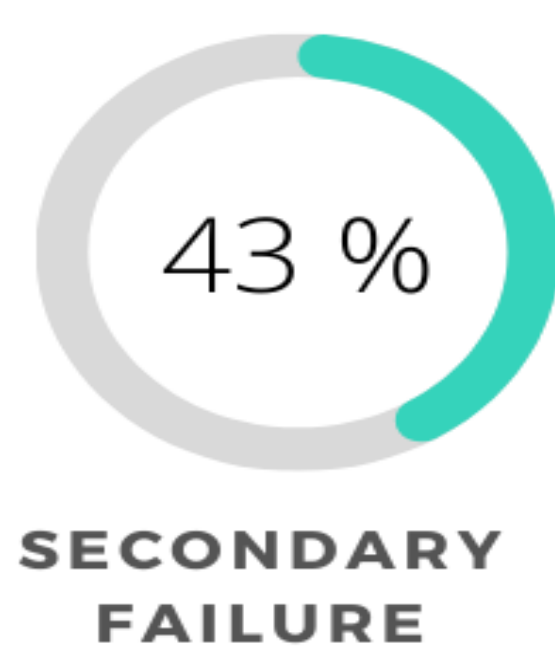
RESULTS:

During the study, 41.7% (n=30) discontinued treatment, with an average duration of 7.4 ± 5.4 months. The discontinuation rate at 12 months was 34.7% mainly due to:

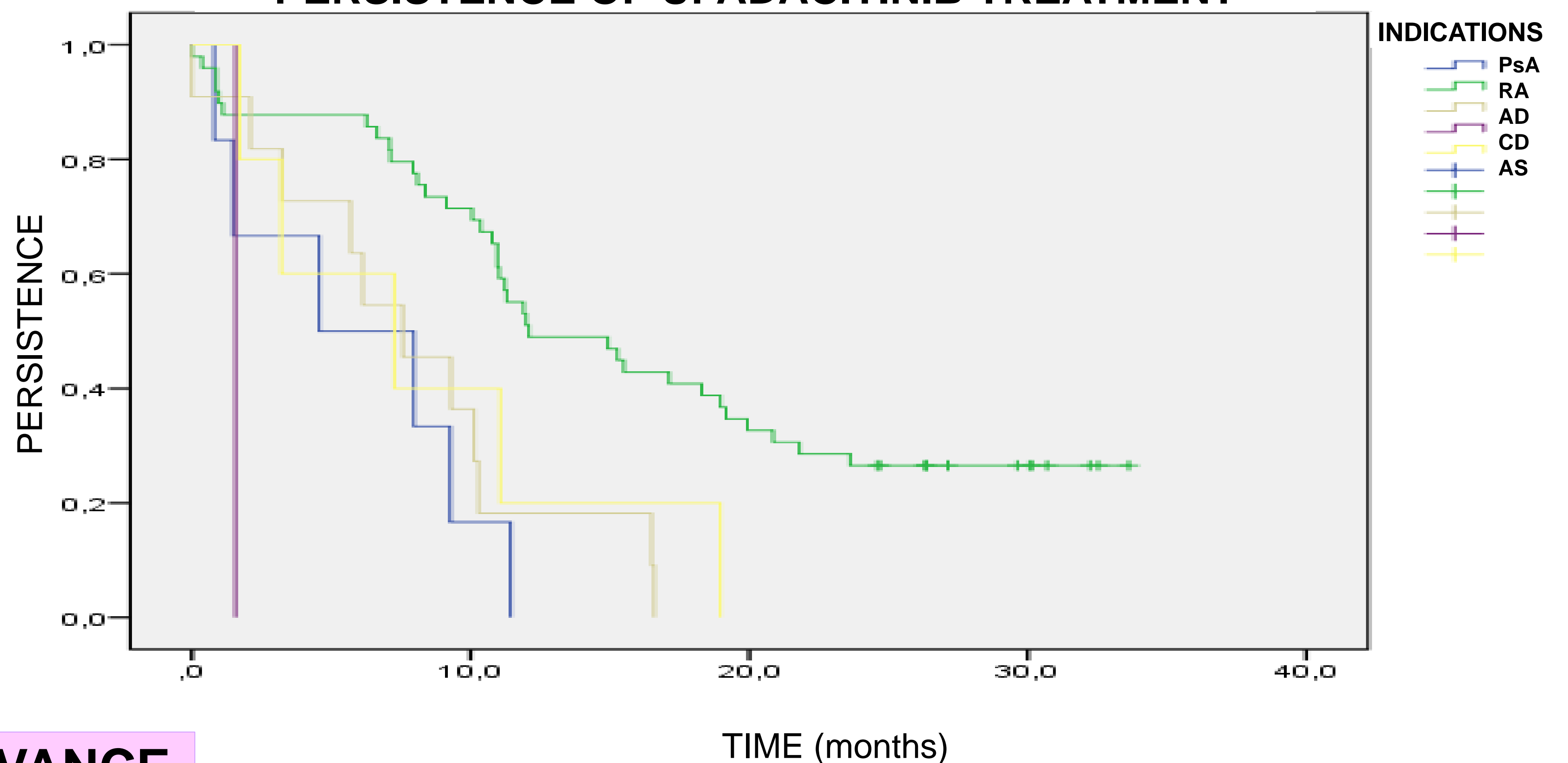
CLASSIFICATION ACCORDING TO THE INDICATION OF UPADACITINIB



Overall, **41.7% of patients maintained treatment for 12 months or more, and 18.1% for 24 months or longer. Persistence was highest in RA patients (15.7 ± 9.8 months) and those in earlier treatment lines (13.6 ± 9.5 months for second and third lines).**



PERSISTENCE OF UPADACITINIB TREATMENT



CONCLUSION AND RELEVANCE:

Upadacitinib persistence is influenced by the specific condition and timing of treatment initiation. Higher persistence was observed in RA patients and those treated in earlier lines of therapy, which may reduce therapeutic failure. Further studies with larger sample sizes are needed to confirm the true persistence of upadacitinib across different conditions.



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