

# Vedolizumab: early experience and medium-term outcomes in inflammatory bowel disease.

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## Background

• Vedolizumab is a monoclonal antibody approved for the treatment of moderately to severely inflammatory bowel disease (IBD) who have had inadequate or loss of response or were intolerant to a tumor necrosis factor-alpha inhibitor (anti-TNF).

## Purpose

• To assess prescribing patterns and effectiveness of vedolizumab in patients with IBD.

## Material and Methods

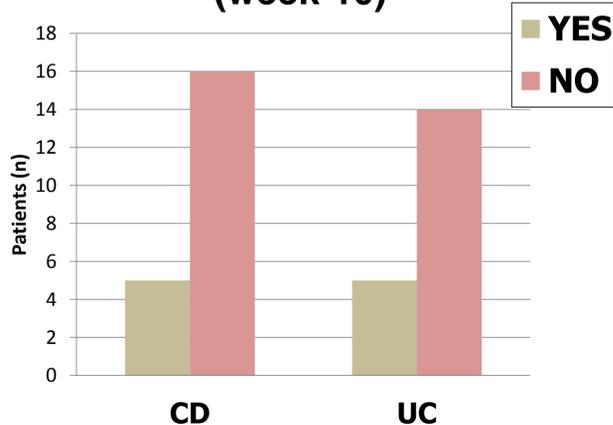
- Retrospective review of patients with Crohn's disease (CD) and ulcerative colitis (UC) treated with vedolizumab (July 2015- September 2017).
- Variables:
  - Demographic, clinical and pharmacotherapeutic information.
  - Reasons for starting vedolizumab.
  - Previous treatment with anti-TNF, dose regimen and use of an additional induction dose (week-10) of vedolizumab.
  - Biochemical parameters [(C-reactive protein (CRP) and fecal calprotectin (FC)].

## Results

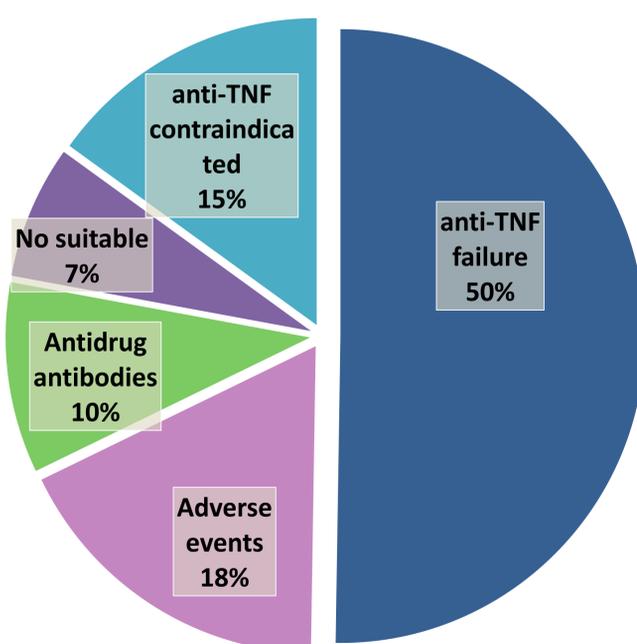
### Demographic characteristics

<b>Patients (women)</b>	<b>40 (21)</b>
Age (years) median (range)	48.4 (12-87)
Diagnosis	21 CD / 19 UC
Weight (Kg) Average (SD)	51.1 (31.6)

### Additional induction dose (week-10)\*



### Reasons for starting vedolizumab



- ❖ 7 patients had seen their posological interval reduced to 4-6 weeks.
- ❖ 1 patient received lower dose of vedolizumab than 300 mg (12-year-old patient).

- ❖ Previous treatment with anti-TNF
- ❖ Shortened the dosage interval
- ❖ Additional induction dose



Did NOT SHOW significant relevance in clinical response.

ONLY CD WAS IDENTIFIED AS A NEGATIVE PREDICTIVE FACTOR  
(OR: 0.12; 95% CI 0.03-0.53; p<0.001)

**52.5 % REACHED A GOOD CLINICAL RESPONSE**

## Conclusion

- The suitability of vedolizumab treatment in patients with IBD was appropriate in a high percentage of patients.
- In terms of efficacy, approximately half of the patients benefited from the treatment.
- It would be necessary to evaluate the continuity of treatment with vedolizumab in patients who had not responded to therapy.