

LOCAL INJECTION OF INFLIXIMAB FOR THE TREATMENT OF PERIANAL FISTULAS IN CROHN'S DISEASE

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BACKGROUND

- Perianal fistulization is a serious complication that affects up to 30% of patients with Crohn's disease (CD).
- It has been suggested that intrafistula injection of infliximab could have some potential healing benefit becoming an adjuvant therapy or an alternative when intravenous infusion is contraindicated.



PURPOSE

We describe...

- Preparation
- Posology
- Effectiveness
- Tolerance



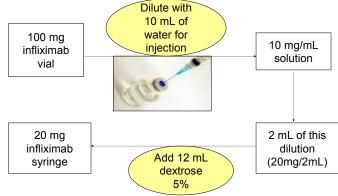
MATERIALS AND METHODS

Our patients:

- 27 year-old woman and 30 years-old man diagnosed with CD with luminal disease control with certolizumab and adalimumab, respectively.
- Both with multiple perianal draining fistulas without abscesses.
- Both previously treated with infliximab. One experienced infusion reaction and the other one relapsed.
- The gastroenterology physician requested our service for the preparation of infliximab syringes to inject into each patient's fistula of the patients.

RESULTS

• Preparation: In the pharmacy service, under aseptic conditions



Posology:

- → One syringe per fistula: at the internal and external orifices and along the tract.
- → Scheduled at weeks 0, 4, 8, 12, 16 and 20.
- → Under general anaesthesia
- → Once informed consent was signed.

• Effectiveness:

- → Assessed before the injection of the next dose.
- → Remission: complete cessation of fistula drainage
- → Response: > 50% reduction of the draining orifices.
- → Results: after the third dose (week 8) both patients had achieved response, one without remission.

Tolerance:

No adverse effects were reported.



CONCLUSIONS

 Although cases reported are very scarce, local infliximab injections may help in fistula healing and have good tolerance even for patients not suitable for intravenous infusion.

Conflict of interest: None.

