

ANALYSIS OF USTEKINUMAB INTENSIFICATION IN INFLAMMATORY BOWEL DISEASE ACCORDING TO LINE OF TREATMENT

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Background and Importance

Ustekinumab has been shown to be effective and safe in the long term in inflammatory bowel disease. However, its use in advanced treatment stages results in decreased effectiveness, leading to intensified usage and an associated additional cost.

Aim and Objectives

The objective is to analyze the posological intensification of ustekinumab in ulcerative colitis (UC) and Crohn's disease (CD) in real clinical practice according to the line of treatment used.

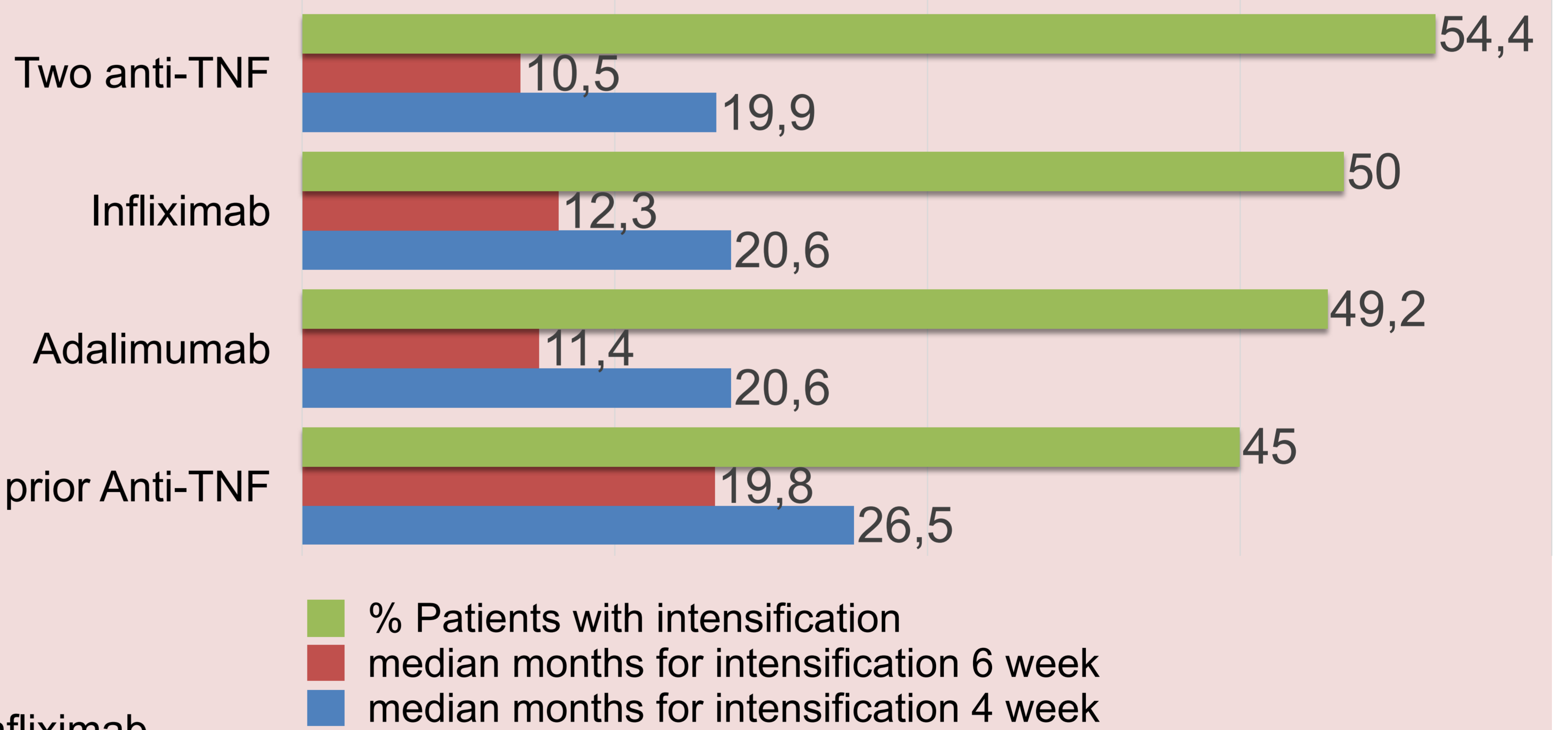
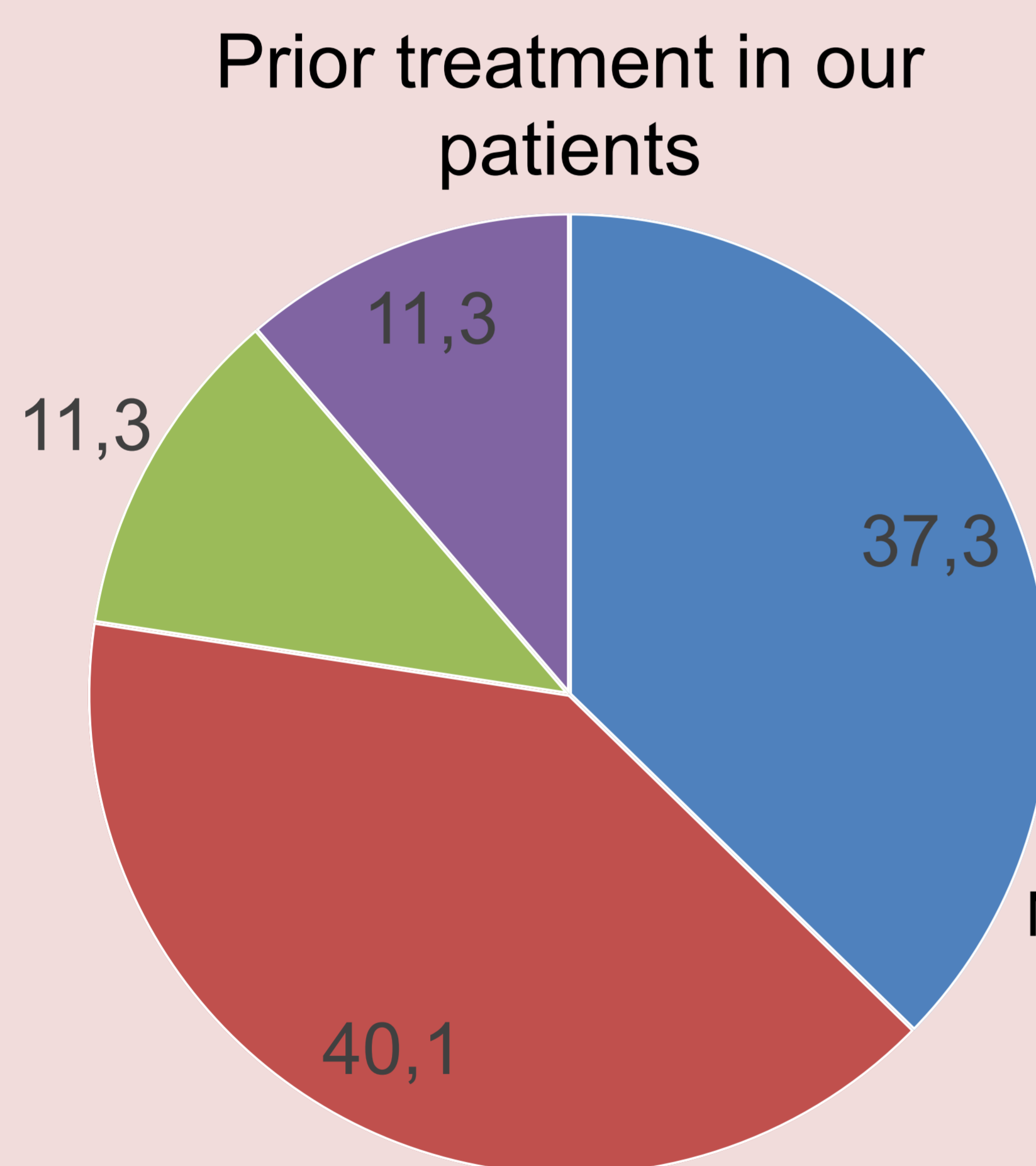
Material and Methods

- ✓ Retrospective observational study :January 1, 2017, to September 15, 2023.
- ✓ Data collected: age, sex, previous anti-TNF therapy, intensified patients, months from the start of Ustekinumab until needing intensification to 6 weeks and 4 weeks, causes of Ustekinumab use in first line treatment.
- ✓ Data were obtained from the electronic prescription application Prisma® and the computerized medical record system Diraya®.

Results

177 patients
51,9% men
mean age: 48

Intensification of Ustekinumab according to previous therapies



- Adalimumab+Infliximab
- Adalimumab
- Infliximab
- No prior Anti-TNF

Patients had not previous any anti-TNF

- ✓ 46,7% neoplasia
- ✓ 20% infections
- ✓ 13,3% HLA-DQA1*05
- ✓ 13,3% multiple sclerosis
- ✓ 6,7% others

Conclusion and Relevance

The percentage of patients intensified with ustekinumab is higher in those treated with anti-TNF than in those not treated.

In addition, patients treated with one anti-TNF or no anti-TNF required more time to intensify than patients treated with two anti-TNFs.



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