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EFFECTIVENESS AND SAFETY OF RISANKIZUMAB AS INDUCTION THERAPY FOR CROHN'S DISEASE

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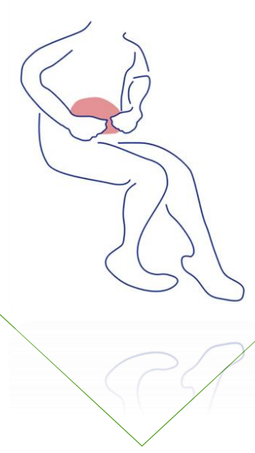
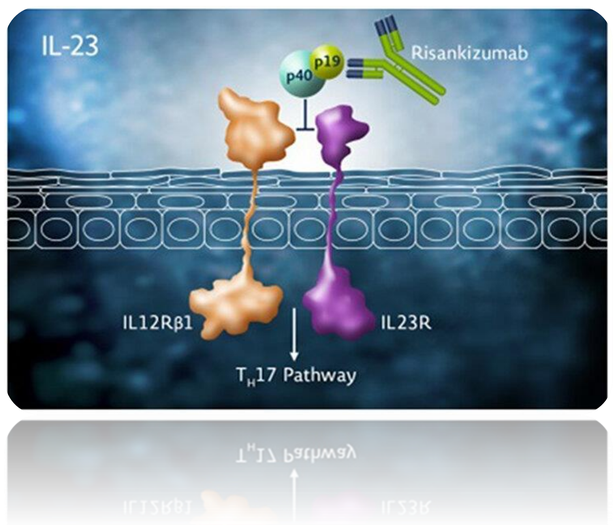
BACKGROUND AND IMPORTANCE AIM AND OBJETIVES

Different studies have demonstrated **promising efficacy** and safety with Risankizumab. **Real-life studies** are commonly performed to confirm this results.

To analyze the effectiveness and safety of **Risankizumab** as **induction therapy** in clinical practice for the treatment of Crohn's disease in a tertiary hospital.





MATERIAL AND METHODS

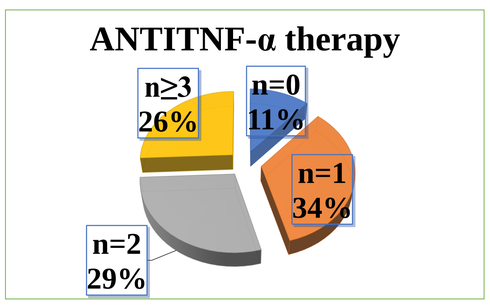
Observational, **retrospective** study that included all patients with moderately to severely active **Crohn's disease** treated with **Risankizumab** between September 2023-April 2024. **Variables collected** were age, sex, previous biological therapies, adverse events (AEs), interruptions and their causes.

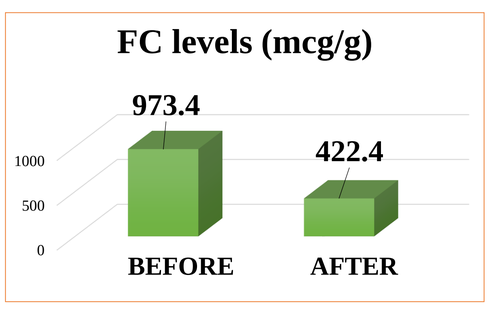
To evaluate effectiveness, the **symptomatic improvement** reported by patients was analyzed (absence of abdominal pain, fever and vomiting).

The average daily stool frequency and fecal calprotectin (FC) level were measured **before** and **after** induction.

RESULTS

35 patients (42.9% men) were included; **median age** 45 years (IQR = 19-75).
82.9% patients had received antiTNF-α therapy, with a **median 2 previous biological treatments** (IQR = 0-4).
A **median treatment duration** of 28 weeks.
15 patients (**42.9%**) reported **symptomatic improvement** at the end of the study, although 60% (n = 21) continued with abdominal pain and the daily frequency of bowel movements remained high (>5 per day) in 54.3% (n = 19).
The **median of FC levels was reduced by 56.6%** [973.4 (IQR 10.7-5051.4) vs 422.4 (IQR 0-5217.3) mcg/g] after induction with Risankizumab and no patient had disease outbreak during induction treatment.
1 patient reported edema in the lower limbs. No patient discontinued treatment due to **AEs**.





CONCLUSION AND RELEVANCE

Risankizumab was **effective** and **well tolerated** as induction therapy in our patients, although it appears to enhance analytical parameters to a greater extent without translating into symptomatic improvement.

Further studies with a **larger sample size** and **longer follow-up period** are needed to confirm real-life results.

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