

Treatment Discontinuation Due to Lack of Efficacy During Maintenance Phase of Infliximab or Vedolizumab Treatment in Patients with Crohn's Disease: A Comparative Analysis of Randomized Controlled Trials

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October 14 – 17
ueg.eu/week

BACKGROUND AND AIM

- A previous meta-analysis in Crohn's disease (CD) patients suggested lower discontinuation rates due to lack of efficacy in infliximab (IFX) compared to vedolizumab (VDZ) during a one-year maintenance phase.¹
- Aim:** To compare the discontinuation rates due to lack of efficacy between VDZ and IFX by adding the one-year results of LIBERTY-CD (A randomised, pLacebo-controlled, double-BIInd, phase 3 Study to evaluate the Efficacy and Safety of the SuBcutanEous Injection of CT-P13 (CT-P13 SC) as Maintenance Therapy in Patients with moderately to severely active Crohn's Disease).

METHOD

- In addition to the previous results¹, the LIBERTY-CD² study results were included in this comparative analysis.
- The pooled discontinuation rates for each treatment using a random-effect model were reported as forest plots with 95% confidence intervals (CI).
- A sensitivity analysis was conducted among patients who responded to induction therapy in VDZ.
- Statistical analyses were performed using MetaProp in R (version 4.2.2).
- The I^2 statistic was used to estimate the heterogeneity across trials.

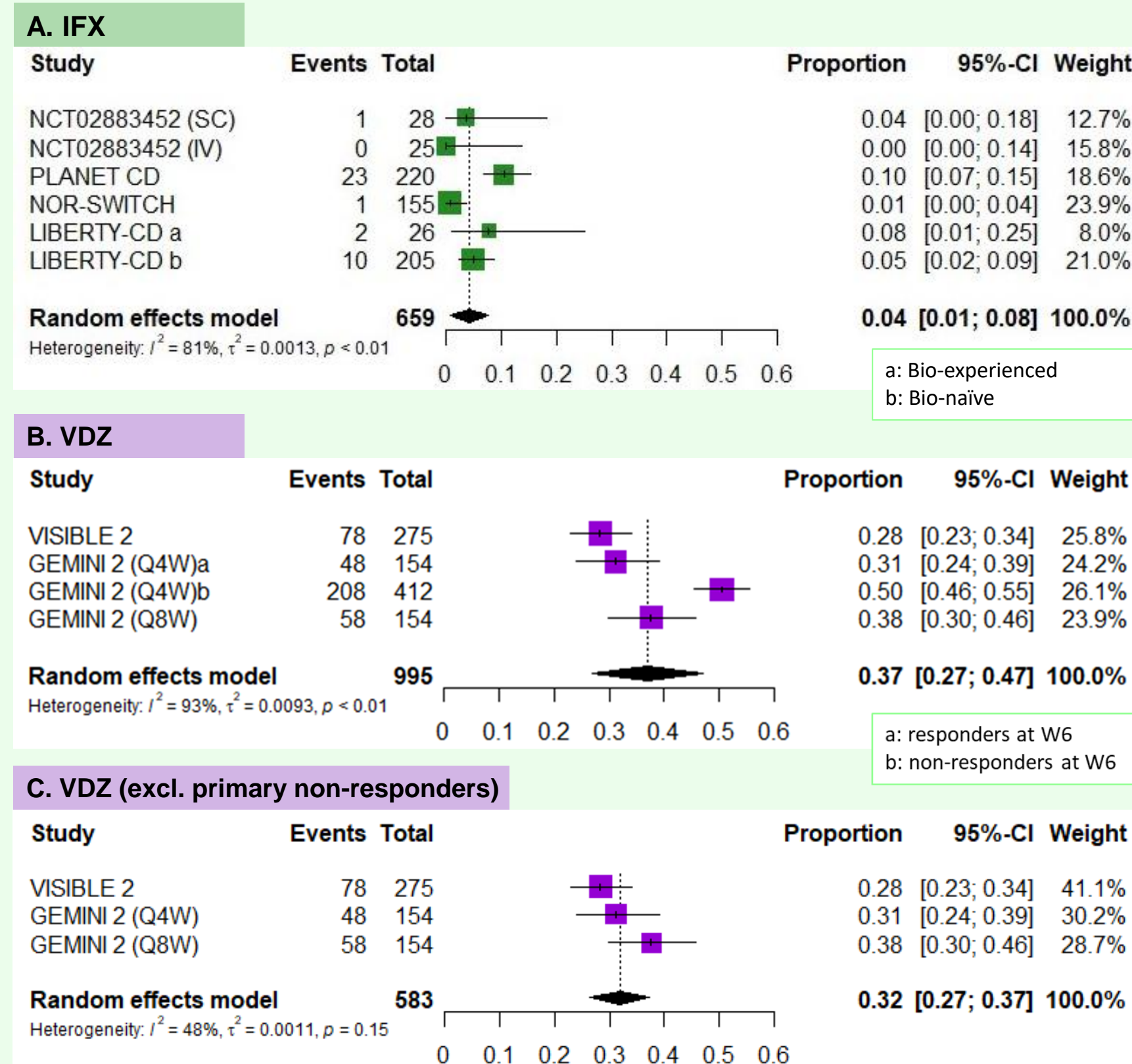


Figure 1. Forest plots of the discontinuation rates due to lack of efficacy during the one-year maintenance phase

RESULTS

- Four RCTs on IFX and two RCTs on VDZ were included in the analysis (IFX [N=659], VDZ [N=995]).
- The **discontinuation rate due to lack of efficacy during the one-year maintenance phase was significantly lower in IFX (0.04 [95% CI: 0.01-0.08, heterogeneity: $I^2=81%$] compared to VDZ (0.37 [95% CI: 0.27-0.47, heterogeneity: $I^2=93% in CD patients. (Figure 1A, 1B)$**
- The significant difference was maintained in a sensitivity analysis, which excluded non-responder to induction therapy in VDZ (0.32 [95% CI: 0.27-0.37], heterogeneity: $I^2=48%$). (Figure 1C)

CONCLUSIONS

- IFX showed significantly lower rates of discontinuation due to lack of efficacy during the one-year maintenance compared to VDZ in CD patients, even after excluding non-responders at week 6 from the VDZ groups.**
- Results from this study support previous findings that discontinuation due to the lack of efficacy of IFX was lower than that of VDZ in CD patients.

REFERENCES

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