

Serum level of $tnfa$ as the indicator of remission of infliximab treatment in patient with moderate to severe ulcerative colitis

Тематика: Гастроентерологія

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The aim of the study was to try to define optimal duration of infliximab treatment (IFXt) in patient with moderate to severe ulcerative colitis (MSUC); the correlation between the initial serum level of TNF α (ITNF α) and got response for treatment; to evaluate the efficacy of INFt for patients with MSUC without using previously conventional therapy (CT).

Study included 51 patients with MSUC which were divided into two groups: 1) 26 patients who have never received previously CT; 2) 25 patients who had received CT, they didn't achieve clinical and endoscopic remission (CER) or got relapse after CT. All patients received IFXt 5 mg/kg 0,2,6 week.

Before IFXt the average ITNF α in 1 group was 94.01 \pm 46.40 pg/ml(p<0.01), in 2 group – 156.76 \pm 96.03 pg/ml(p<0.001).

After IFXt in 1 group 21 patients (80.8%) and in 2 group 20 patients (80.0%) achieved CER, ITNF α became normal (p<0.05). These patients didn't have exacerbations during one follow up year. In 1 group 5 patients (19.2%) and 5 patients (20.0%) in 2 group got better clinical, endoscopic indicators and decreased ITNF α that meet mild UC activity criteria (p<0,001). Average ITNF α in 1 group was 43.06 \pm 28.41 pg/ml(p<0.05), in 2 group – 63.62 \pm 54.52 pg/ml (p<0.05). During following 6 months they got relapse.

The study results allow suggest next:

1. The longest period of remission, after IFXt, was in patients which ITNF α became normal.
2. In patients who had achieved CER but increased ITNF α was remained, the fast return of UC symptoms was occurred.
3. ITNF α allows determine following prescribing of IFX, that is treatment duration before getting normal ITNF α
4. High initial ITNF α doesn't matter for remission on IFXt
5. More expediently the initially prescribing anti-TNF α therapy for patients with MSUC without previous prescribing CT.