CLINICAL EFFICACY AND SAFETY OF ANTI-TNF THERAPY IN INFLAMMATORY BOWEL DISEASE IN THE ELDERLY: A UK TERTIARY REFERRAL CENTRE EXPERIENCE

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Introduction

- Older (≥65) patients are often excluded from clinical trials.
- Little real life data exists on the safety and efficacy of anti-TNF in this group.
- Considerations when using immunosuppressive drugs in the older cohort include:

➢ Increased risk of drug interactions with polypharmacy
➢ Reduced drug metabolism
➢ Innate immune system senescence and increased risk of infections
➢ Increased risk of malignancy

Objectives

Primary endpoint: Week 14 and week 54 steroid free clinical remission (HBI<5 or SCCAI<3)

Secondary endpoint: proportion of patients remaining on anti-TNF at the end of follow up

Methods

657 anti-TNF patients *between:* Jan 2009- Nov 2015

29 patients ≥60 years identified

Comparison group: **58** randomly selected IBD patients on anti-TNF <60 years

Efficacy data collated on: clinical, biochemical & endoscopic outcomes

Safety data: incidence of serious infections, drug reactions & malignancy

Results

	< 60 years	**≥ 60 years**
	n= 58	n= 29
Wk 14 steroid free remission	**28/41** (68.3%)	**8/16** (50%)
Wk 54 steroid free remission	**24/40** (60%)	**8/15** (53.3%)
Patients on anti-TNF at end of follow up	**38/58** (65.5%)	**12/29** (41.4%) p<0.05
Reasons for stopping anti-TNF	**8** primary non-response **7** secondary loss of response **1** infusion reaction **1** remission **2** infections **1** non-adherence	**4** primary non-response **5** secondary loss of response **1** infusion reaction **1** remission **1** infection **1** cancer (colorectal) **2** side effects **2** non adherence
Anti-drug antibodies	**3/58** (5.2%) – 3 IFX	**4/29** (13.8%) -3 IFX, 1 ADA
Adverse events	**3/58** (5.2%) **1** cancer (testicular) **1** infusion reaction **1** infection	**7/29** (24%) **3** cancers (colorectal, prostate & thyroid) **1** perforation **1** infusion reaction **2** infections

Conclusion

- Similar clinical efficacy between both groups.
- In the ≥ 60 group there were:

1. More adverse events, including new cancers
2. Significantly higher rate of anti-TNF discontinuation
3. More anti-drug antibodies