

Medication Changes After Dose Escalation of Risankizumab in Crohn's Disease



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Purpose

- Risankizumab (RZB) was the first specific IL-23 inhibitor used to treat moderate-to-severe Crohn's Disease
- Treatment options for patients who do not respond or have an incomplete response to RZB include dose escalation or switching therapies
- The purpose of this study is to evaluate medication changes following dose escalation and associated outcomes within 8 months of RZB dose escalation

Methods

Design

Retrospective cohort analysis performed at Vanderbilt Health System Inflammatory Bowel Disease Clinic with an integrated health system specialty pharmacy (HSSP)

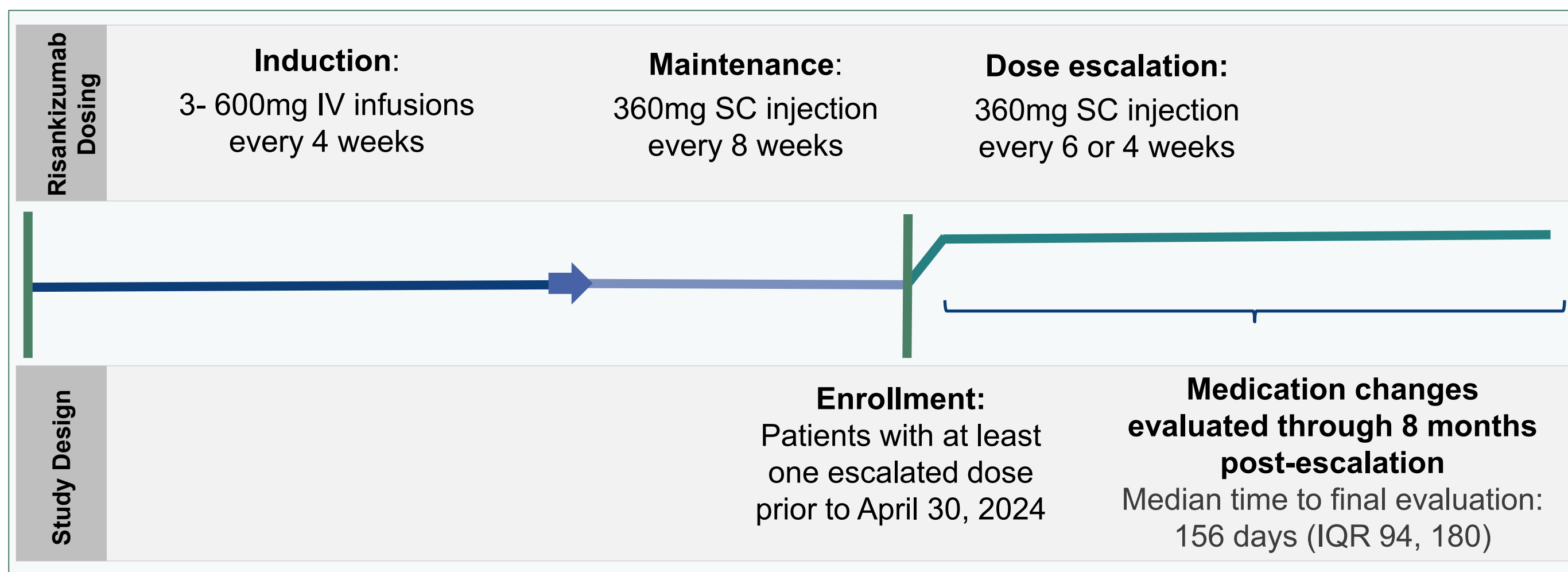
Population

Patients were included if they received at least one escalated dose of RZB between June 2022 and April 2024. Current analysis evaluated a subgroup of patients with a medication change within 8 months of escalation

Outcome Measures

- Time to medication change
- Rate and type of medication change
- Medication change details

Figure 1. Risankizumab Dosing and Study Design



CONCLUSION

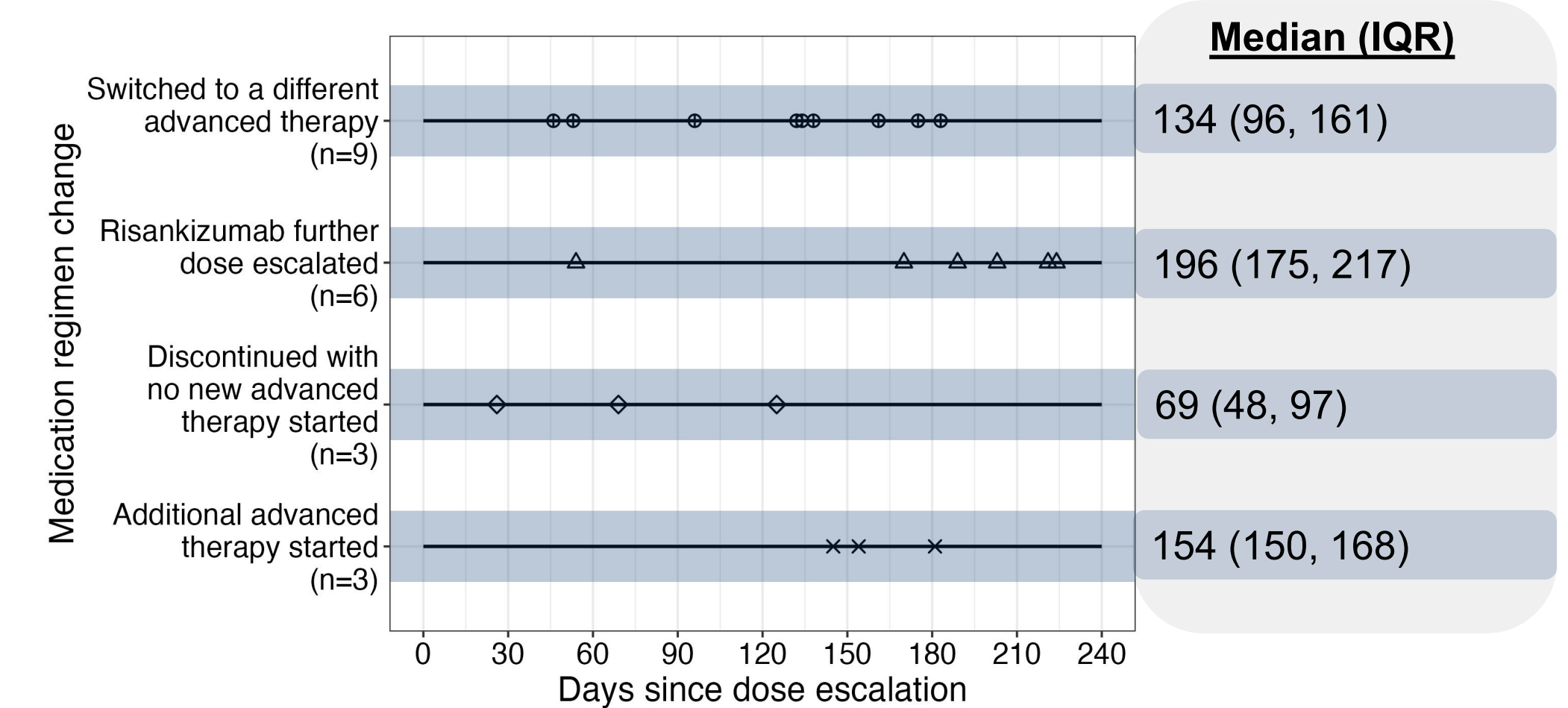
- About 1 in 3 patients needed a medication change within 8 months, mostly from not reaching remission
 - Over half of the changes were **risankizumab switches or discontinuation**
- More studies are needed to see if adding or adjusting therapy helps patients reach remission

Results

Table 1. Baseline Characteristics

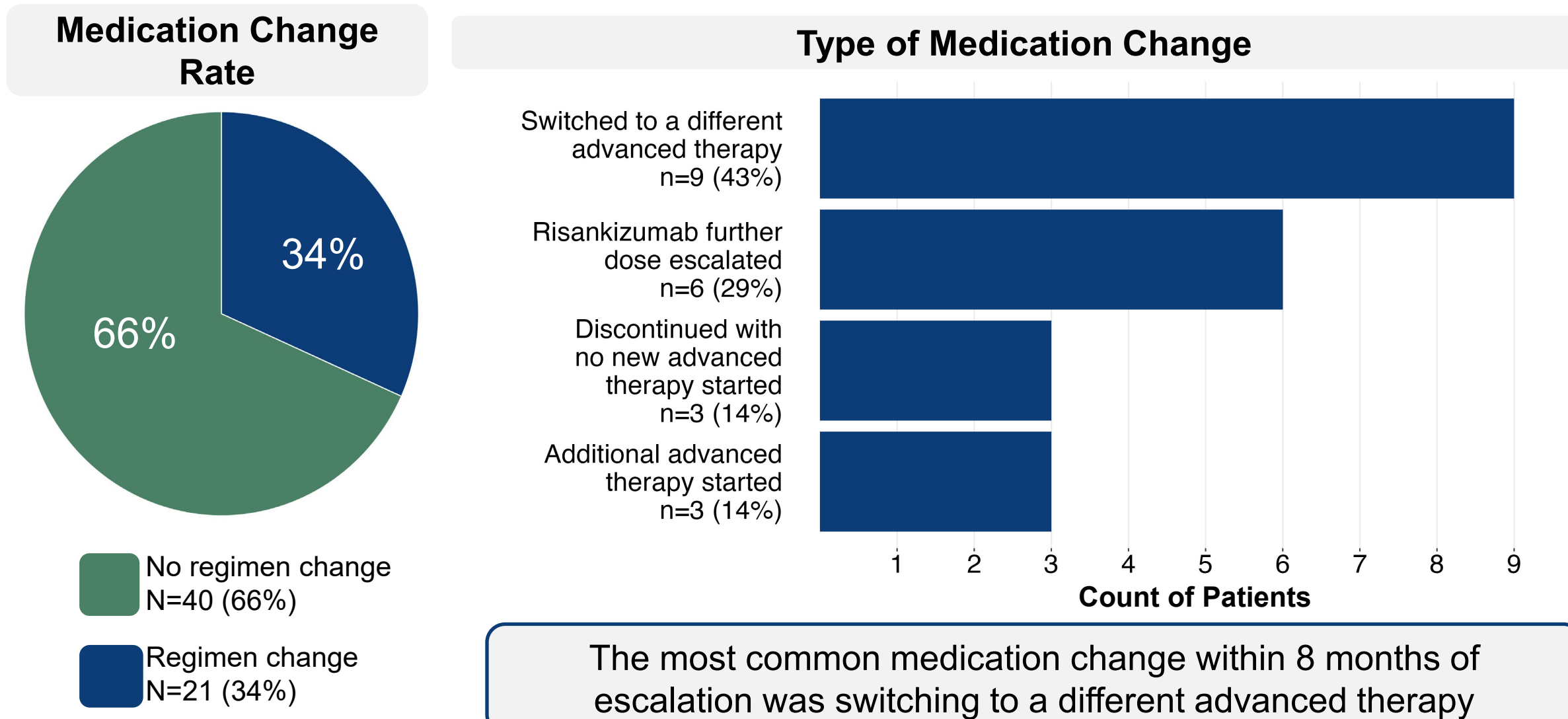
Patient Characteristics	Change in medication regimen (n=21)	No change in medication regimen (n=40)
Gender, Female- n (%)	14 (66.7%)	20 (50.0%)
Age, years- median (IQR)	45.7 (38.0, 62.0)	39.4 (31.8, 51.8)
Number of previous treatments tried- median (IQR)	4.0 (3.0, 5.0)	3.0 (2.0, 4.0)
No. of previous treatments escalated- median (IQR)	2.0 (1.0, 2.0)	1.0 (1.0, 2.0)
Disease duration, years- mean (SD)	18.5 (±9.0)	16.8 (±11.9)

Figure 2. Time to Medication Change (Days)



Risankizumab discontinuations occurred sooner than other medication changes. Subsequent dose escalations occurred after the longest interval from the initial increase.

Figure 3. Rate and Type of Medication Changes



The most common medication change within 8 months of escalation was switching to a different advanced therapy

Figure 4. Medication Change Details

- Additional advanced therapy started:**
 - Certolizumab: n=2
 - Vedolizumab: n=1
- Further escalated dose:**
 - 360mg every 4 weeks: n=6
- Advanced therapy changed to:**
 - Upadacitinib: n=7
 - Infliximab: n=1
 - Vedolizumab: n=1