Intervals between infliximab infusionsassociation with pharmacokinetics

Arrow project presentation

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BACKGROUND

- Infliximab is a therapeutic agent in IBD
- It is a scheduled therapy administered IV at pre-defined time-points
- Intervals between infusions affect pharmacokinetics
- Patients are diverse
 - Real life pharmacodynamic information is required
- Adherence to therapeutic schedule how important is it?

OBJECTIVES

- To evaluate the relations between the **number of days (+\-7d) elapsed from previous to current infusion, to Infliximab serum level** in patients receiving scheduled infliximab therapy after induction on 8 week intervals.
- To determine what are the **deviation boundaries** in days of scheduled Infliximab therapy that would compromise therapy efficacy due to serum levels lower than therapeutic window.
- To evaluate the relations between the number of days (+\-7d) elapsed from previous to current infusion to the clinical score in patients receiving scheduled infliximab therapy after induction – 8 week intervals.

METHODS

Study design:

- A retrospective cohort study
- Settings venous blood samples were obtained from patients with Crohn's
 disease and Ulcerative colitis that received Infliximab infusion in SMC between
 the years 2009-2018. Serum samples were routinely and systematically
 collected at trough, before infliximab infusions. Infliximab and anti-infliximabantibodies levels were measured by a previously described drug- tolerant
 assay at Sheba medical center.

We focused on 8 week interval events within the scheduled therapy limits (+\- 7 days).

- Patients with less than 3 TL measurements were excluded.
- Patients that had persistent ATI (over 3 consecutive measurements of Ablevels>2.5ug/ml), were excluded from this study.
- Correlation with clinical score determined upon infusion will be analyzed at a later time-point

METHODS-2

Variables gathered:

Date of infusion, infliximab and anti infliximab serum levels.

Sample size calculation:

- Convenience Sample- medical records
- Samples were obtained from patients with Crohn's and Ulcerative colitis that received Infliximab infusion in SMC between the years 2009-2018. Samples that were taken during immunogenic loss of response were excluded (Ab levels>2.5ug/ml).
- Mix model taking into account repeated measurements of Infliximab serum level
- Significance level- 5%
- Power-80%
- To achieve a moderate effect of 0.3-0.5, n=252