GRANULOCYTE APHERESIS IN REFRACTORY ULCERATIVE COLITIS: COMPARISON BETWEEN TWO THERAPEUTIC REGIMENS

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INTRODUCTION

- Granulocyte apheresis (GMA) is used in the treatment of Ulcerative Colitis (UC). However, the most adequate treatment regimen has not been established yet.
- Short regimen: 5 sessions. It is the conventional régimen, but presents high rates of recurrence.
- Long regimen: > 5 sessions. Novel technique, with better results but not standardized

AIMS

To analyze the response to two treatment regimens with GMA in severe UC with indication for colectomy.

Variables	Short regimen	Long regimen	p
Age (years)	46,5 (± 17,17)	40,13 (± 16,45)	ns
Sex	50 % males	62,5 % males	ns
Extension	- 50% Pancolitis - 25% Left Colitis	- 62,5% Pancolitis - 25 % Left Colitis	ns
	- 25% Extensive Colitis	- 12,5% Extensive Colitis	
Time since diagnosis (years)	10,5 (± 9,29)	6,63 (± 4,24)	ns

METHODS

- •12 patients with UC refractory to conventional treatment. Two regimens:
- A) SHORT regimen: 4 patients. Weekly session for 5 consecutive weeks
- B) LONG regimen: 8 patients. Two phases:
- •Induction phase (Weekly session for 11 consecutive weeks) +
- Maintenance phase (monthly session)
- Evaluation of remission/response: At week 6 (SHORT regimen). At week 12 and every 3 months (LONG regimen)

Response

Partial Mayo Score (PMS) -

Remission

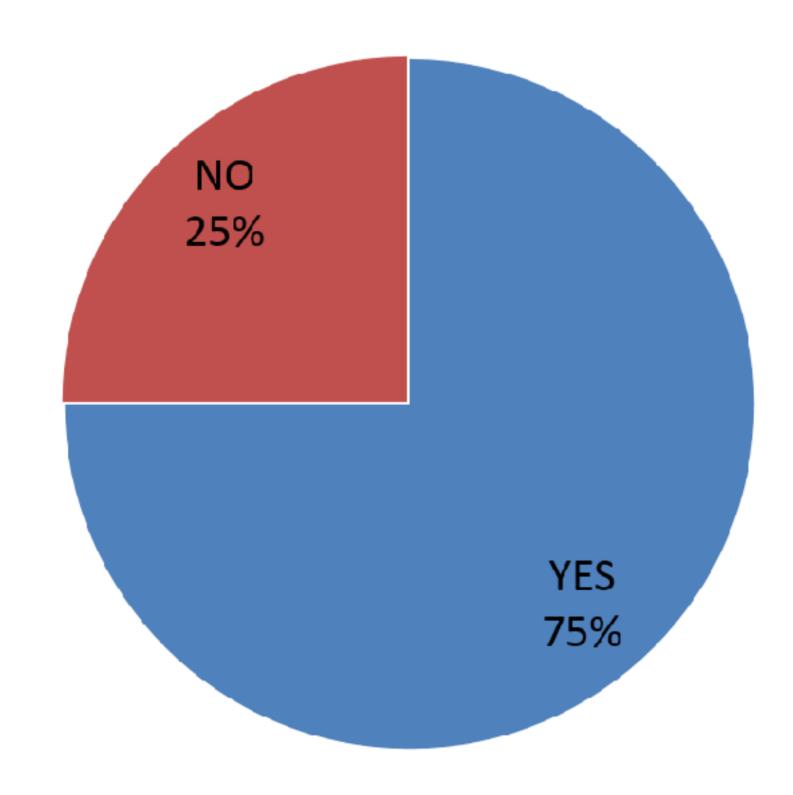
Results

- •A) SHORT regimen: 50% response to treatment or remission, but all patients suffered from recurrence after 3-6 months.
- •B) LONG regimen: 75% remission. Out of these, 40% suffered from recurrence and the technique was discontinued, but the rest maintained remission. In a patient recurrence was treated by intensification of sessions with good results.

SHORT REGIMEN

Patient	Previous treatment	Initial Partial Mayo Score	Final Partial Mayo Score	Response/ Remission	Follow-up
55-year old male	CS AZA	6	0	Remission	Recurrence after 6 months
52-year old male	CS AZA	5	3	No	
21-year old female	CS AZA	5	6	No	Colectomy
58-year old female	CS INFLIXIMAB	5	2	Response	Recurrence after 3 months

REMISSION AT WEEK 12



LONG REGIMEN

Patient	Previous treatment	Initial PMS	Final PMS	Response/ Remission	Follow-up
52-year old male	CS AZA	7	0	REMISSION	10 months 14 sessions Colectomy
20-year old female	CS AZA Infliximab	5	0	REMISSION	62 months 52 sessions
23-year old male	CS, AZA Infliximab	5	1	REMISSION	16 months 22 sessions
40-year old male	CS, AZA, MTX, Infliximab	5	2	RESPONSE	9 months 24 sessions
23-year old male	CS, AZA, MTX	6	-	NO	1 month 5 sessions
49-year old male	CS, AZA, CyA, Infliximab	7	5	NO	2 months 8 sessions
47-year old female	CS, AZA	5	0	REMISSION	55 months 94 sessions
66-year old female	CS, AZA	4	0	REMISSION	22 months 41 sessions

CONCLUSIONS

- •GMA is a treatment option that can prevent colectomy in patients with severe colitis refractory to medical treatment.
- •In those who respond to induction a maintenance regimen is necessary.
- •In short regimens the risk of recurrence is very high.





