

## ECP may be effective in treating Crohn's disease

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(Washington, DC - May 23, 2007) -- Results from an international multicenter Phase II clinical trial suggest that extracorporeal photopheresis (ECP) may be effective in treating patients with clinically active (OR symptomatic) Crohn's disease who cannot tolerate or are refractory to immunosuppressants and/or anti-TNF agents. A 50% response rate after 3 months of ECP treatment was noted in the study, using standard disease activity criteria, as presented this afternoon at a scientific research session of Digestive Disease Week (DDW). The majority of patients who responded to ECP therapy had a notable improvement in their disease symptoms and signs after only six weeks of treatment.

"We show in this pilot study that ECP is effective in patients with Crohn's disease (CD) that have previously failed the strongest therapies we currently have," explains Maria Abreu, MD, Associate Professor in The Henry D. Janowitz Division of Gastroenterology and in the Center for Immunobiology at The Mount Sinai Medical Center. ECP is believed to bolster tolerance in the immune system, which may be important in immune-mediated diseases such as Crohn's. In contrast, most patients with inflammatory bowel disease are currently treated with medicines that suppress the immune system. Unlike ECP, those medications can have many serious side effects.

The 28 patient trial studied the safety and efficacy of ECP in patients with a Crohn's Disease Activity Index (CDAI) of at least 220 and less than 450 indicating that at least moderately active symptomatic CD was present. Clinical response was defined as a CDAI decrease of 100 or



greater from baseline and/or a CDAI of less than 150 at week 12. Patients received two treatments of ECP weekly from weeks 0-4 and two treatments every other week from weeks 6-12 with no infectious complications reported.

"The findings of our study suggest that Crohn's disease patients who have not responded to other therapies may benefit from ECP," concludes Dr. Abreu.

Source: The Mount Sinai Hospital / Mount Sinai School of Medicine

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