

Meta-analysis compares tx for inducing remission in Crohn's

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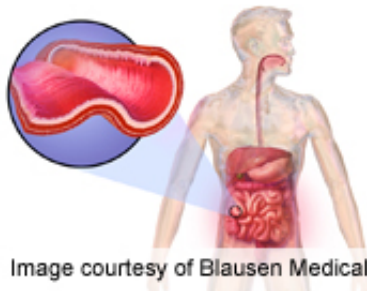


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(HealthDay)—For adult patients with Crohn's disease, adalimumab and infliximab + azathioprine are most effective for induction and maintenance of remission, according to a meta-analysis published in the February issue of *Gastroenterology*.

Glen S. Hazlewood, M.D., from the University of Calgary in Canada, and colleagues conducted a systematic review to compare therapies for induction and maintenance of remission in patients with Crohn's disease. Data were included from 39 randomized controlled trials that compared methotrexate, azathioprine/6-mercaptopurine, infliximab, adalimumab, certolizumab, vedolizumab, or combined therapy with placebo or an active agent in adults with Crohn's disease.

The researchers found that for induction of remission, infliximab,

infliximab + azathioprine, adalimumab, and vedolizumab were superior to placebo. In pairwise comparisons, infliximab + azathioprine and adalimumab were superior to certolizumab for induction of remission (odds ratios, 3.1 and 2.1, respectively). For maintaining remission, all treatments were superior to placebo except for the combination infliximab and methotrexate. For maintenance of remission, adalimumab, infliximab, and infliximab + azathioprine were superior to azathioprine/6-mercaptopurine (odds ratios, 2.9, 1.6, and 3.0, respectively). Adalimumab and infliximab + azathioprine were superior to certolizumab (odds ratios, 2.5 and 2.6, respectively); adalimumab was superior to vedolizumab (odds ratio, 2.4).

"Based on a network meta-analysis, [adalimumab](#) and infliximab + azathioprine are the most effective therapies for induction and maintenance of [remission](#) of Crohn's disease," the authors write.

Several authors disclosed financial ties to the pharmaceutical industry.

More information: [Abstract](#)
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