

*Step-up top-down

2-year Open label randomized trial. Patients with CD. 2 arms:
Conventional management: steroids and after tapering if flare AZA
Early combined: IFX 0,2,6 plus AZA and then only AZA

Primary outcome: free steroid remission (CDAI<150) without surgery need w26 and 52.

Secondary: time to relapse, mean CDAI and IBDQ scores; mean CRP and endoscopic severity scores.

Results:

- Remission without surgery w26: 60% E-combo vs 35.9% conventional; $p=0.006$.
- Remission without surgery w54: 61.5% E-combo vs 42.2% conventional ; $p=0.028$.
- No differences in serious adverse events related to treatment.

Conclusions:

Combined therapy more effective than conventional for induction and reduction of steroid use in recently diagnosed CD.

Early combined immunosuppression or conventional management in patients with newly diagnosed CD: an open randomised trial

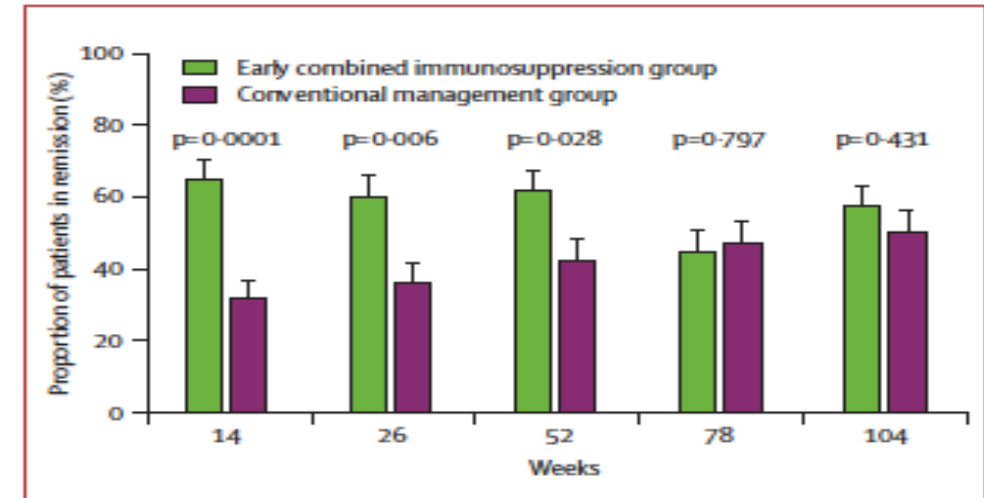


Figure 2: Proportions of patients in remission

