2012. SWITCH

OL/ IFX-ADA/ CD/ Relapse

Switch to adalimumab in patients with Crohn's disease controlled by maintenance infliximab: prospective randomised SWITCH trial

Randomized. Open-label.
CD patients controlled with IFX were randomized to switch to ADA.
Dose optimisation allowed, loss of response/intolerance could cross over to the alternative group.

Outcomes: proportion of patients in the ADA group preferring ADA over IFX and the proportion of patients who needed rescue therapy with steroids, intensified antiTNF or need to stop treatment.

Results:

- Dose optimization or interruption 47%ADA vs 16% IFX; p=0.006
- Interruption due to loss of response: 2%IFX vs 28% ADA; p=0.003
- Injection site reactions more frequent than infusion reactions; p=0.01
- AntiTNF levels were stable during the 1 year period

Conclusion:

Elective switching from IFX to ADA associated with loss of tolerance and loss of efficacy within 1 year. Adherence to the first antiTNF is recommended.

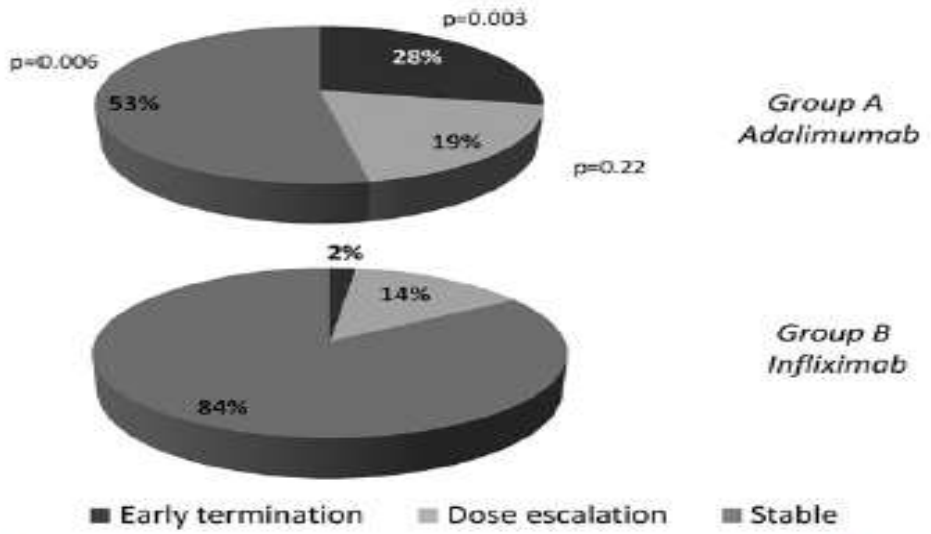

Figure 3 Graphical overview of the need for dose adjustments and the proportion of patients discontinuing the assigned treatment throughout the trial.

Van Assche et al. Gut 2012;61:229