

Randomized, multicentre, open trial.
 Patients with moderate-severe steroid dependent UC (Mayo score 4-10 and inability to withdraw steroids in 3 months or relapse within 3 months of discontinuation).
 Randomized to: prednisone 40mg/d tapering and GMA (7 sessions) or prednisone 40mg/d tapering alone

Primary endpoints: Steroid free remission at w24, with no reintroduction of steroids.

Results:

- W24, steroid free remission at w24 13% GMA vs 7% control, $p=0.11$. ITT analysis
- GMA group time to relapse was longer HR 1.7 (1.16-2.48), $p=0.006$

Conclusion:

The addition of 7 weekly sessions of GMA to a conventional course of oral prednisone did not increase the proportion of steroid-free remissions in patients with active steroid-dependent UC, though it delayed clinical relapse.

Addition of Granulocyte/Monocyte Apheresis to Oral Prednisone for Steroid-dependent Ulcerative Colitis: A Randomized Multicentre Clinical Trial

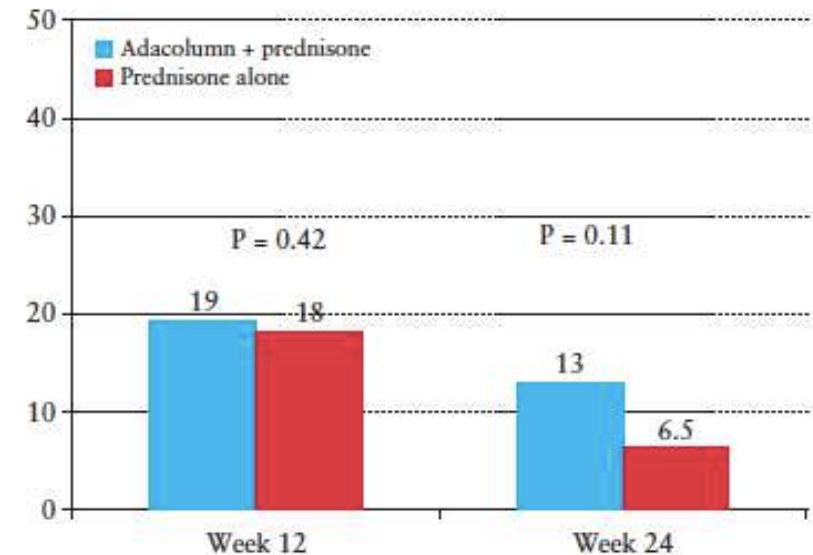


Figure 3. Steroid-free clinical and endoscopic remission at Weeks 12 and 24.

