

Neuroimmune modulation through vagus nerve stimulation reduces inflammatory activity in Crohn's disease patients: a prospective open label study

Multicenter, open-label clinical trial.

Patients with Crohn's disease moderately-severely active who were treatment-refractory were implanted a vagus nerve stimulator (VNS) for 16 weeks.

*AZA, MCP and MTX could be continued. After a protocol modification biologics (antiTNF and vedolizumab) were allowed if stable dose for >6 months

Primary endpoints: Mean change in CDAI between preimplantation and week 16.

Results: N=16

(4 of the patients were on biologics, the rest 12 were on VNS monotherapy)

- There was a significant and clinically meaningful decrease in CDAI ($p=0.003$), fecal calprotectin ($p=0.015$), decrease
- There was one study-related SAE: a post-operative infection requiring device explantation.

Conclusion:

Neuroimmune modulation via vagus nerve stimulation was generally safe and well-tolerated with a clinically meaningful reduction in clinical disease activity associated with endoscopic improvement, reduced levels of faecal calprotectin and serum cytokines, and improved quality-of-life.

