RCT/Golimumab / UC/ Maintenance

Phase 3, double-blind, placebo-controlled, parallel group, randomized withdrawal study.

Patients with moderately-severe active UC received 200mg GOLI SC at week 0 and 100mg at week 2 durnig the 6-week open-label induction. Patients who responded entered maintenance and were randomized to 100mg q4w or placebo for 52 w.

<u>Primary endpoint</u>: Maintenance of clinical response through the end of maintenance at w54.

Results: N=144

- Of the 144, 123 (85.4%) completed the induction phase and 63 (43.8%) were randomized.
- Clinical response was maintained at w54 in 56.3% (18/32) GOLI vs 19.4% (6/31) placebo, p<0.05.
- Clinical remission at w30 and w54 GOLI 50% vs 6.5% placebo, p<0.05.
- Mucosal healing at w54 was 59.4% GOLI vs 16.1% placebo.

Conclusion:

Golimumab SC treatment maintained clinical efficacy through week 54 among induction responders, and no new safety signals were observed in the patients with moderate to severely active UC.

Efficacy and safety of golimumab 52-week maintenance therapy in Japanese patients with moderate to severely active ulcerative colitis: a phase 3, double-blind, randomized, placebo-controlled study-(PURSUIT-J study)

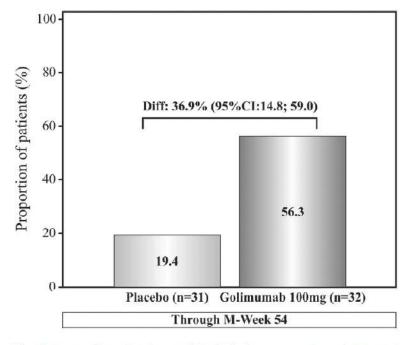


Fig. 2 Proportion of patients with clinical response through M-week 54, Full analysis set-DB. CI confidence interval, DB double-blind, M-week maintenance week

