

Phase 3, multicentre, randomized double-blind, placebo-controlled and sequential-escalating-dose study.

Patients with active mild-moderate CD were randomized to SC rhIL-10 (1, 4, 8 or 20 μg /kg) or placebo once daily for 28 consecutive days.

Primary endpoint: CDAI remission (<150 points with at least a decrease of 100 points) after induction.

Results: N=329

- Clinical remission was: 1 μg , 18%; 4 μg , 20%; 8 μg , 20%; 20 μg , 28% and placebo 18%, with no statistical differences.
- Responders to rhIL-10 showed inhibition of NF-kB p65 activation in contrast to non-responders.

Conclusion:

No differences against placebo. A tendency toward clinical improvement but not remission was observed in the 8mg/kg dose group. Up to 8 μg /kg of rhIL-10 was well tolerated.

Clinical remission

