

# Efficacy and safety of golimumab in pediatric ulcerative colitis: A Systematic literature review

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## Background and objectives

- Ulcerative colitis (UC) is a chronic inflammatory bowel disease that is autoimmune in its origin.
- Tumor necrosis factor- $\alpha$ -antagonist monoclonal antibodies are first-line biologicals used in adult patients with moderate-to-severe UC<sup>1</sup>.
- However, Infliximab is the only approved biological therapy for children with UC<sup>1</sup>. With this understanding, golimumab might be another option for pediatric moderate-to-severe UC.
- Hence, this study aimed to evaluate the efficacy and safety of golimumab in pediatric UC patients.

## Methodology

- A literature search was conducted in Embase<sup>®</sup> and MEDLINE<sup>®</sup> via Ovid to identify English language articles published from database inception to 8th of June 2022 for studies assessing the efficacy and safety of golimumab in pediatric UC patients.
- All the identified studies were screened based on the title/abstracts and followed by full-texts screening against the eligibility criteria (**Table 1**) and data extraction by one reviewer.
- The quality assessment of included study was evaluated using Downs and Black check list.<sup>2</sup>

Table 1: Study eligibility criteria

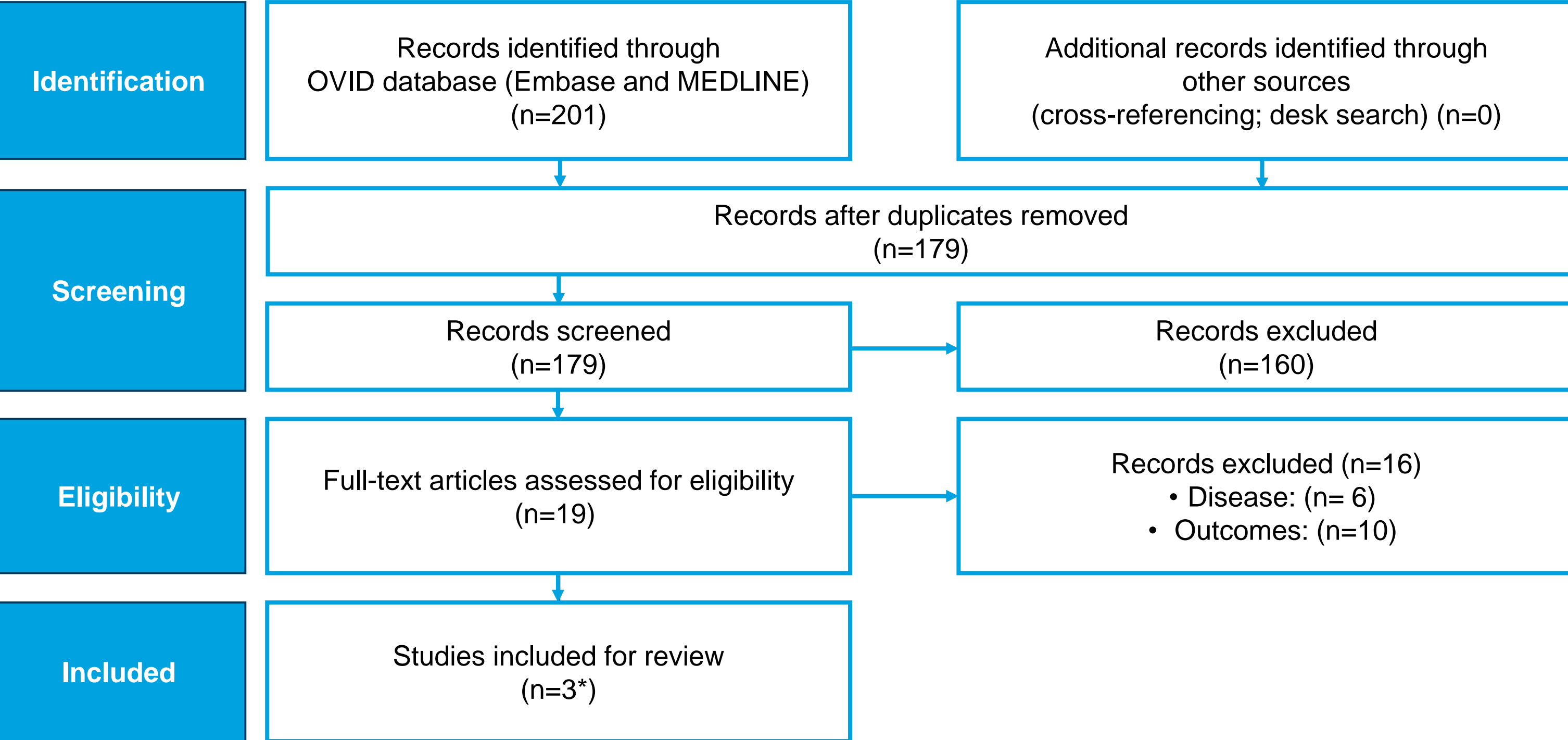
PICOS	Inclusion criteria
Population	Pediatric patients with ulcerative colitis
Intervention/Comparators	Golimumab
Outcomes	Efficacy and safety
Study design	No restriction

## Results

### Study Selection:

- After removing duplicates, 179 records were obtained through databases and additional searches.
- One single-arm, phase 1b, multicenter, open-label trial with long-term extension (3 publications) was included for the review (**Figure 1**).
- Of 179 identified studies, one single-arm trial was included with three associated publications. The trial was performed for 126 weeks.
- At week 6, Hyams et al. 2017 reported Mayo clinical response in 21 (60.0%), Mayo clinical remission in 15 (43%), Pediatric Ulcerative Colitis Activity Index (PUCAI) clinical remission in 12 (34%), and mucosal healing in 19 (54%) patients.<sup>3</sup>

Figure 1: PRISMA chart of included studies



Note: \* one study (3 publications) included for review

References:

- 1.Flamant M, Paul S, Roblin X. Golimumab for the treatment of ulcerative colitis. Expert Opin Biol Ther. 2017;17(7):879-86.
- 2.Downs SH, Black N. The feasibility of creating a checklist for the assessment of the methodological quality both of randomised and non-randomised studies of health care interventions. J Epidemiol Community Health. 1998;52(6):377-84
- 3.Hyams JS, Chan D, Adedokun OJ, Padgett L, Turner D, Griffiths A, et al. Subcutaneous Golimumab in Pediatric Ulcerative Colitis: Pharmacokinetics and Clinical Benefit. Inflammatory Bowel Diseases. 2017;23(12):2227-37.
- 4.Hyams JS, O'Brien CD, Padgett L, Rosh JR, Turner D, Veereman G, et al. Maintenance Golimumab Treatment in Pediatric UC Patients With Moderately to Severely Active UC: PURSUIT PEDS PK Long-Term Study Results. Crohn's & Colitis 360. 2020;2(4).
- 5.Hyams J, O'Brien CD, Padgett L, Rosh J, Turner D, Veereman G, et al. P396 Pharmacokinetics, immunogenicity and clinical outcomes of golimumab from the PURSUIT PEDS ulcerative colitis study long-term (through week 126) extension. Journal of Crohn's and Colitis. 2018;12(supplement\_1):S304-S5.

## Results

- Of the 21 patients who achieved mayo response, PUCAI remission was observed in 9 (45%), 11 (55%), and 10 (50%) patients at weeks 30, 54, and 110, respectively.<sup>3,4</sup>
- Through week 14, 20 patients entered long-term extension (LTE) and 50% (10/20) of patients were in remission at week 126.<sup>5</sup>
- Adverse events were reported in 33/35 (94.3%) patients through week 14 and 19/20 (95%) patients through week 126 (LTE).<sup>3</sup>
- Frequently reported AEs were UC exacerbation (50%) and headache (35%). Deaths were not reported from weeks 14 through 126.<sup>3,4</sup>
- More detailed efficacy and safety results are presented in **Table 2 and 3**.

### Quality Assessment:

- The overall methodological quality of the single-arm trial (PURSUIT PEDS PK study (Hyams et al. 2017; Hyams et al. 2020; Hyams et al. 2018))<sup>3,4,5</sup> was “fair” according to the suggested categorization scheme for the Downs and Black checklist.<sup>2</sup>(**Figure 2**).

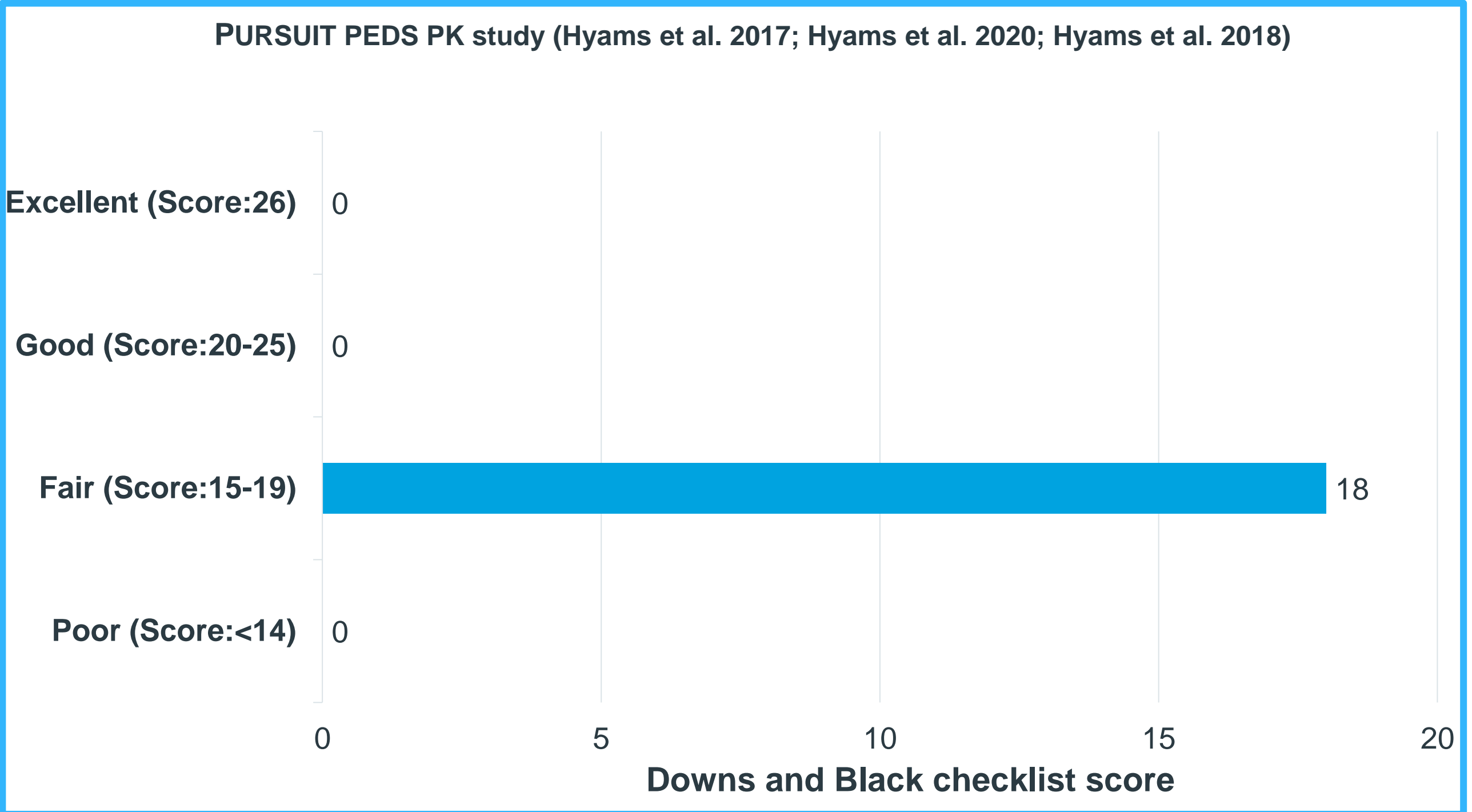
Table 2: Efficacy outcomes

Study name	Timepoint	Sample size (N)	Mayo clinical response n (%)	Mayo clinical remission n (%)	PUCAI clinical remission n (%)	Mucosal healing n (%)
Hyams 2017 <sup>3</sup>	Week 6	35	21 (60)	15 (43)	12 (34)	19 (54)
Hyams 2020 <sup>4</sup>	Week 30 Week 54 Week 110	20	NR	9 (45) 11 (55) 10 (50)	11 (55) 12 (60) 10 (50)	NR
Hyams 2018 <sup>5</sup>	Week 126	20	NR	NR	10 (50)	NR

Table 3: Safety outcomes

Study name	Timepoint	Sample size (N)	AE, Dropout n (%)	Death n (%)	Any AE n (%)	SAE n (%)	UC exacerbation n (%)	Headache n (%)
Hyams 2017 <sup>3</sup>	14 Weeks	35	3 (8.6)	0	33 (94.3)	11 (31.4)	13 (37)	9 (26)
Hyams 2020 <sup>4</sup>	126 Weeks	20	3 (15.0)	0	19 (95.0)	5 (25.0)	10 (50.0)	7 (35.0)

Figure 2: Quality Assessment



## Conclusions

- Golimumab demonstrated continued clinical benefit in pediatric UC patients and an acceptable safety profile.
- Further studies in larger populations are needed to ascertain the therapeutic benefit of golimumab in pediatric UC.

Keywords: AE: Adverse events; SAE: Serious adverse events; UC: Ulcerative colitis; PUCAI: Pediatric Ulcerative Colitis Activity Index