



## SESSION 5

# ADVANCED THERAPIES: GO BIG OR GO SMALL!

## Advanced Therapies in IBD: Positioning and sequencing

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The advent of biologics and small molecules has revolutionized outcomes for patients with IBD. Current positioning and sequencing of IBD therapies is informed by comparative effectiveness research, which involves generation and synthesis of evidence that compares the benefits and harms of each therapy. Head-to-head comparative efficacy trials designed as superiority trials, non-inferiority trials, or placebo-controlled trials with a non-powered reference arm are considered the gold standard. However, they are difficult to perform and cannot be extended to all available drugs. Alternative approaches to comparative effectiveness research include network meta-analyses, indirect treatment comparison using patient-level data from clinical trials, and well-designed observational comparative effectiveness research using real-world data. Expert recommendations (guidelines) are also used in clinical practice. Finally, given the multiplicity of choices and heterogeneity of IBD the physician's experience and patient's choice often prevail in share-decision making. Initiatives are needed to perform quantitative benefit-risk evaluation taking IBD drugs' specificities into account. The future of positioning and sequencing of treatment options is in personalization and rationalization based on a deep understanding of mechanisms of action and resistance to drugs.

### Key References

Ahuja D, Singh S. Comparative efficacy trials in inflammatory bowel disease: current and future implications for practice. *Curr Opin Gastroenterol*. 2022; 38:337–46.

Caron B, D'Amico F, Jairath V, et al. Available methods for benefit-risk assessment: lessons for inflammatory bowel disease drugs. *J Crohns Colitis*. 2022 Aug 11. Online ahead of print.