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Lighting the way for steroid withdrawal in Crohn's disease

Extracorporeal photopheresis (ECP) could be a promising approach to combat steroid dependency in patients with Crohn's disease, according to new findings published in *Inflammatory Bowel Diseases*.

Corticosteroids are an effective treatment for Crohn's disease, but a number of patients experience recurrent symptoms as the corticosteroid dose is tapered or withdrawn, and can become dependent on these drugs.

ECP promotes a tolerogenic response and this treatment has previously been shown to have a steroid-sparing effect in steroid-dependent patients with Crohn's disease. The procedure is split into three basic stages: leukapheresis (whereby blood leukocytes are treated *ex vivo* with the photoactivable drug 8-methoxypsoralen); photoactivation (to induce apoptosis and, ultimately, production of regulatory T cells); and reinfusion.

In this open-label, multicentre study, the researchers enrolled 31 steroid-dependent patients with established Crohn's disease

(baseline corticosteroid dose ≤ 40 mg). Individuals received ECP for 24 weeks during which time the dose of steroids was tapered. Patients then went on to receive a further 24 weeks of ECP during the maintenance period.

After 24 weeks, 22.6% of patients had discontinued corticosteroids. Moreover, in those still taking corticosteroids, 64.5% had reduced the dose by half. By 48 weeks, three patients had achieved steroid-free remission.

"ECP may be useful in permitting steroid withdrawal in selected steroid-dependent Crohn's disease patients," write the authors. Further prospective, randomized, sham-controlled trials are needed to confirm these findings.

Katrina Ray

Original article Reinisch, W. *et al.* Extracorporeal photopheresis (ECP) in patients with steroid-dependent Crohn's disease: an open-label, multicenter, prospective trial. *Inflamm. Bowel Dis.* doi:10.1002/ibd.23012