

Optimizing Interleukin-23 Inhibitor Dosing in Inflammatory Bowel Disease



How can clinicians navigate dose optimization of interleukin (IL)-23 inhibitor therapies in patients with inflammatory bowel disease (IBD)? This question is explored in my *Advances in IBD* column in this month's issue of *Gastroenterology & Hepatology*. In the column, there is a comparison of the pharmacokinetic and pharmacodynamic profiles of IL-23 inhibitors with those of other biologic classes and a discussion of the clinical rationale behind dose optimization strategies for IL-23 inhibitors in IBD. The column also examines real-world evidence and side effects that have been reported, as well as other related topics such as combining IL-23 inhibitors and immunomodulators and using dual biologic therapy prior to dose optimization with IL-23 inhibitors.

Coverage of IBD continues in a feature article that explores therapeutic drug monitoring (TDM) in adolescents and children with the disease. As Dr Samantha Saul, Dr John J. DeCaro III, and Dr Jeremy Adler point out, TDM is the standard of care for these patients, who have variable pharmacokinetics as they grow with more rapid drug clearance and often have more aggressive disease than adults with IBD. The authors examine the evidence for TDM for different advanced therapies, including infliximab, adalimumab, golimumab, and vedolizumab, and discuss recommended dosing for pediatric IBD in different clinical scenarios.

This month's *Advances in Hepatology* column provides an update on hepatitis delta treatment. Dr Tatyana Kushner discusses the recent approval of bulevirtide by the US Food and Drug Administration, which patients are candidates for this therapy, and its treatment duration and monitoring. Other topics of discussion include promising drugs currently being evaluated for hepatitis delta and whether there is still a role for pegylated interferon in this area.

In this month's *MASH in Focus* column, Dr Samer Gawrieh discusses measuring liver stiffness with vibration-controlled transient elastography (VCTE) in patients with metabolic dysfunction-associated steatotic liver disease, including metabolic dysfunction-associated steatohepatitis. He discusses the prognostic accuracy of

VCTE-based liver stiffness for predicting liver-related events in these patients and factors that might impact its prognostic reliability. Also discussed are the prognostic value of a single baseline measurement vs serial measurements, the use of composite scores, and other methods for measuring liver stiffness.

Our *Advances in IBS* column features an interview with Dr Michael Camilleri on whether glucagon-like peptide-1 receptor agonists (GLP-1 RAs) may affect gastrointestinal symptoms in patients with irritable bowel syndrome (IBS). He discusses the evidence on how the effects of these agents vary by IBS type and changes in colonic transit. He also discusses factors to consider in IBS patients taking GLP-1 RAs and recommendations for managing gastrointestinal adverse effects in these patients, while considering whether effects of these agents can be leveraged to the benefit of IBS patients.

Our *Advances in Endoscopy* column, authored by Dr Jason A. Dominitz, examines colonoscopy and stool-based testing for the detection of colorectal cancer (CRC). He discusses the current status of CRC screening and recommendations for screening tests, the pros and cons of screening with colonoscopy and with stool-based tests, and the effectiveness of stool-based tests vs colonoscopy. He also discusses recent research on cost-effectiveness and utilization of CRC screening modalities.

Finally, in our *Case Study Series* section, Dr Brennan Spiegel presents a case of an IBS with constipation patient that shows how quality-of-life questioning derived from the JUST ASK study can help in the assessment of overall treatment benefit and in the decision-making process to switch mechanisms of action.

May this issue provide you with helpful information that you can put to good use in your clinical practice.

Sincerely,

Gary R. Lichtenstein, MD, FACG, AGAF, FCCF, FACP