

IBD CARE IN CZECH REPUBLIC

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Gastroenterology care in Czech Republic

- ~300 GE units, 900 members of the Czech Society of Gastroenterology (CSG)
- postgraduate specialisation in GE
- no formal specialisation in IBD
- insufficiency of primary care (individual approach)

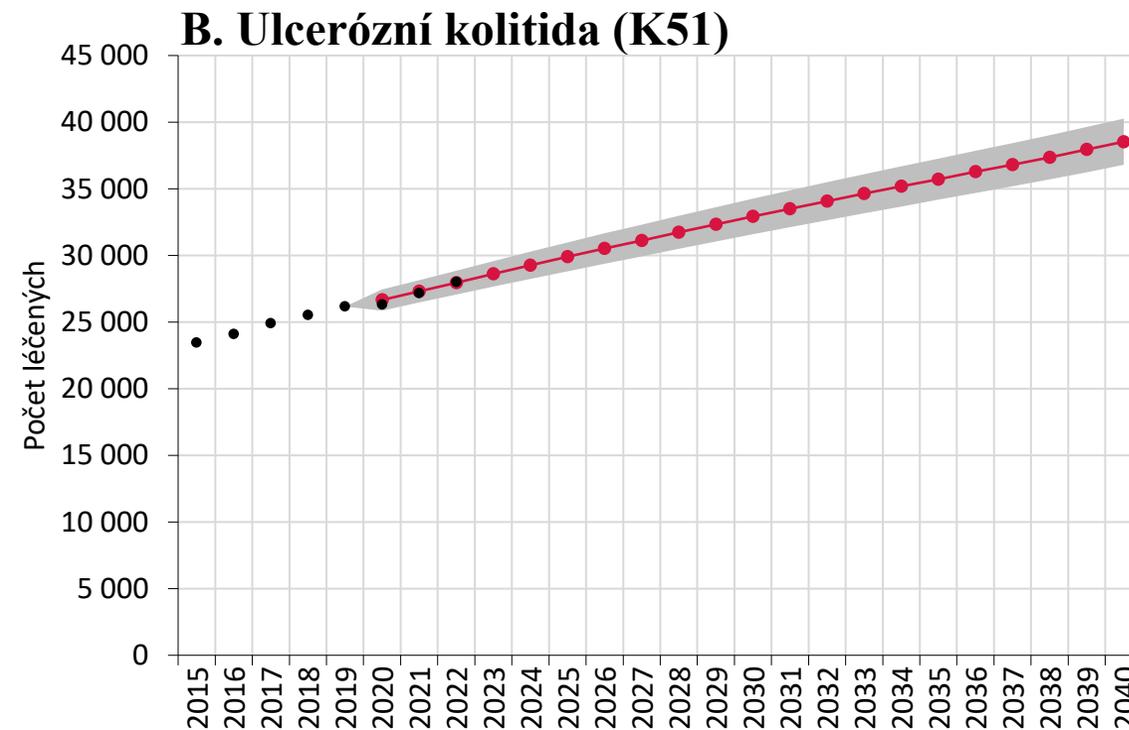
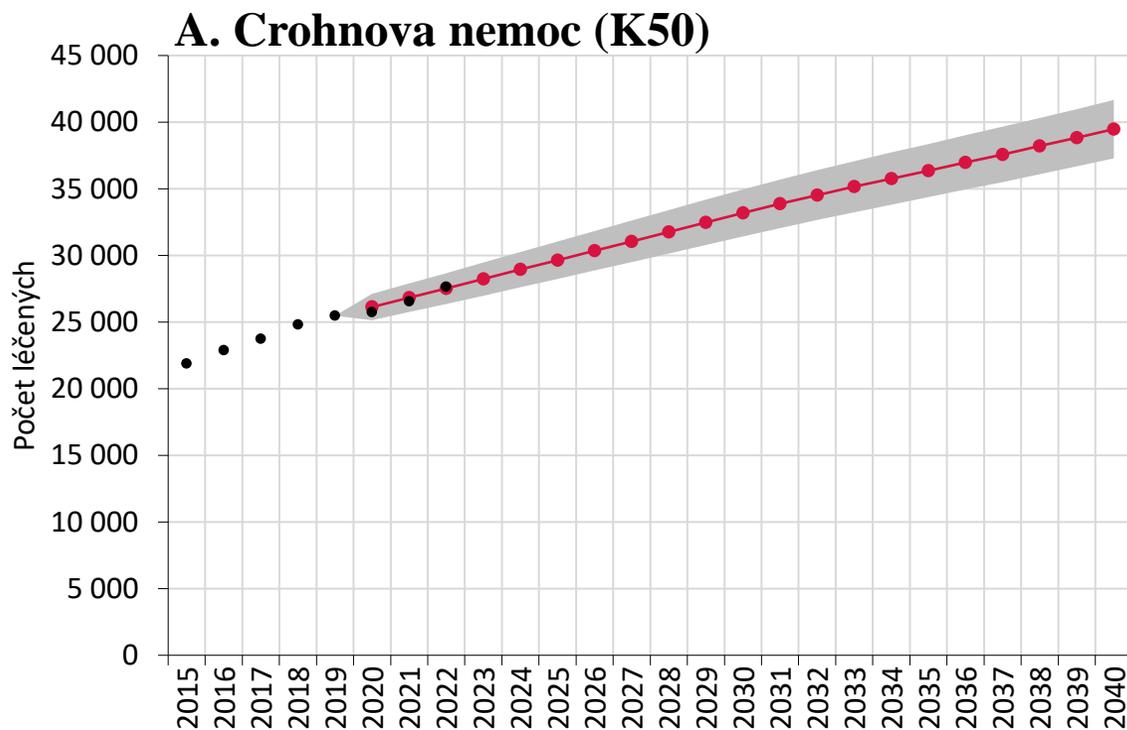
Gastroenterology care in Czech Republic

- IBD epidemiology...

Statistical prediction of treated IBD patients

Zdroj dat: NRHZS 2010–2022 (predikční báze 2015–2019); Český statistický úřad – Projekce obyvatelstva České republiky (2018–2100)

	Pozorované počty léčených pacientů			Predikce počtu léčených pacientů (95% interval spolehlivosti)		
	Rok 2016	Rok 2019	Rok 2022	Rok 2025	Rok 2030	Rok 2040
Crohnova nemoc	22 875	25 482	27 629	29 645 (28 239–31 053)	33 191 (31 431–34 953)	39 478 (37 289–41 668)
Ulcerózní kolitida	24 083	26 173	28 005	29 895 (28 817–30 974)	32 918 (31 586–34 259)	38 530 (36 797–40 264)



● Reálné pozorované hodnoty

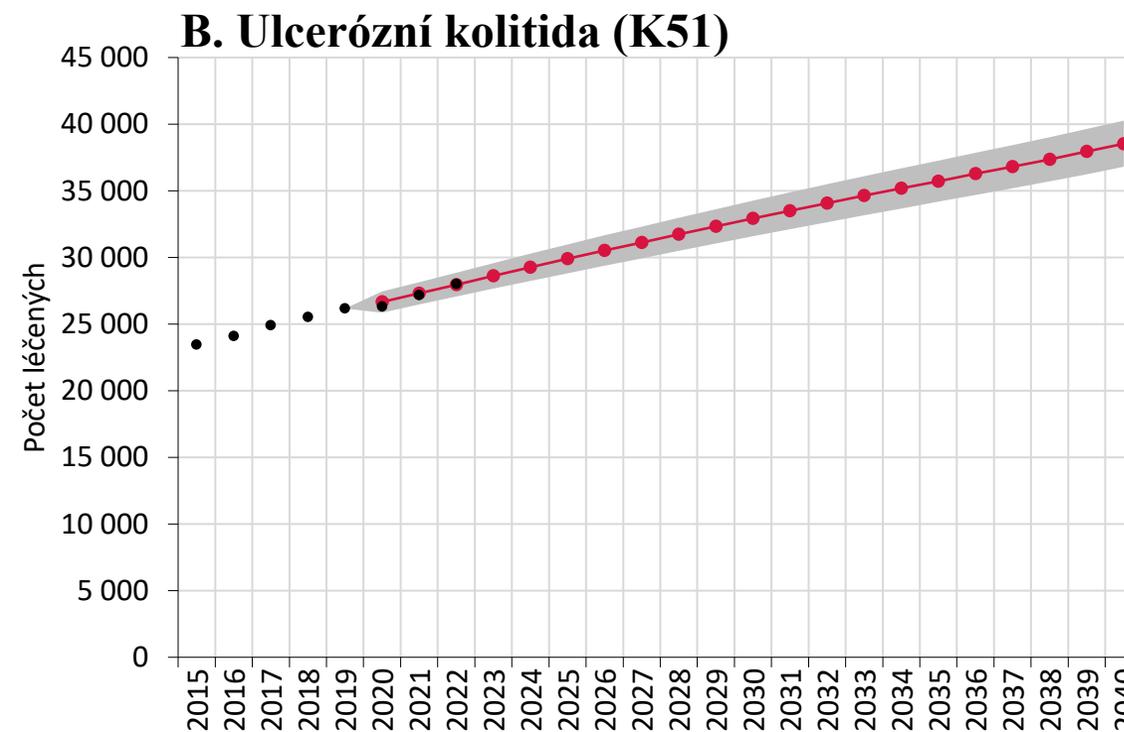
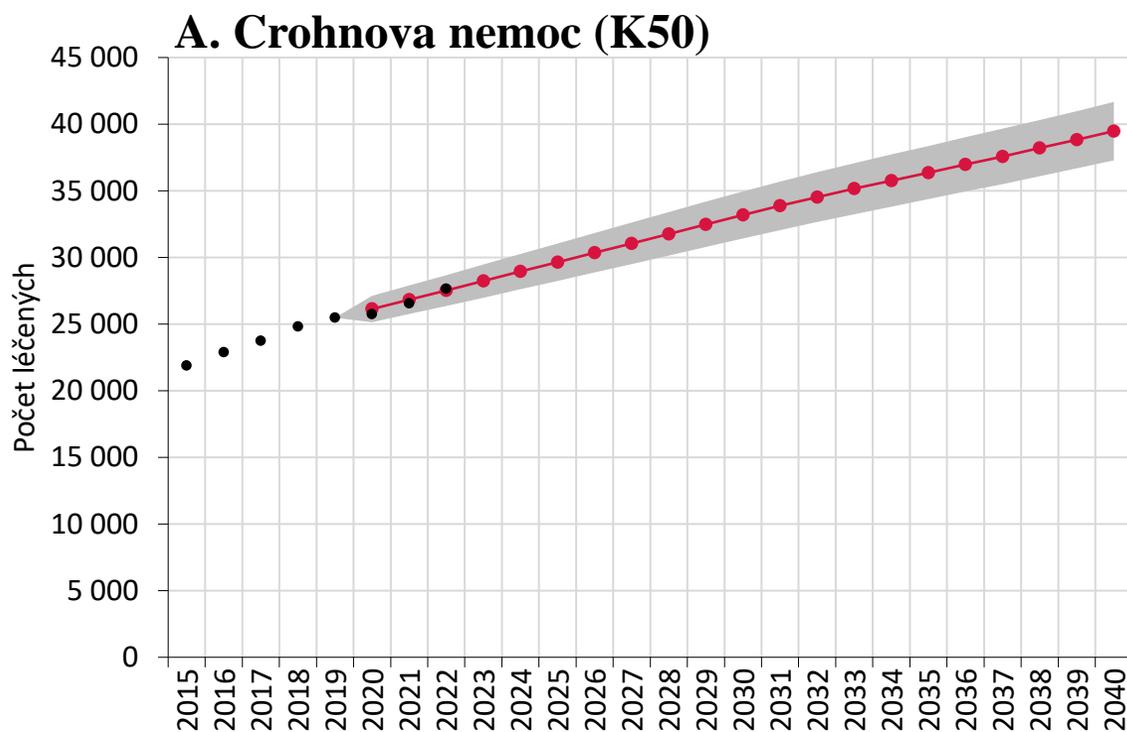
—●— Predikované hodnoty; 95% interval spolehlivosti (na grafu znázorněn šedou plochou) je důsledkem statistické neurčitosti odhadu věkově-specifické prevalence.

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+ 20%
10 y



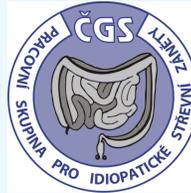
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IBD care in Czech Republic

- Czech IBD Working Group

- est. 1996



- Activities

- Education (IBD Intensive course, IBD Congress, Czech-Slovak IBD Day)
 - Publication (Guidelines, etc.)
 - Cooperation (ECCO, Slovak IBD Working Group, IBD Patients)
 - Policy (payers, State Institute for Drug Control, Ministry of Health, etc.)
 - Research

IBD care in Czech Republic

- Advanced therapy – biologics and small molecules
 - 45 adult centers
 - 12 paediatric centers
 - special contract with payers, annual budget, irregular audits
 - drug availability – 2 steps (EMA → State Institute for Drug Control)
 - price
 - conditions for reimbursement

Advanced therapy – CReDIT Registry

Czech Registry of IBD patients on biological and Innovative Therapy



Design:

Non-interventional, multicentric, retrospectively-prospective, longitudinal follow-up of patients treated with biological and innovative medication for IBD

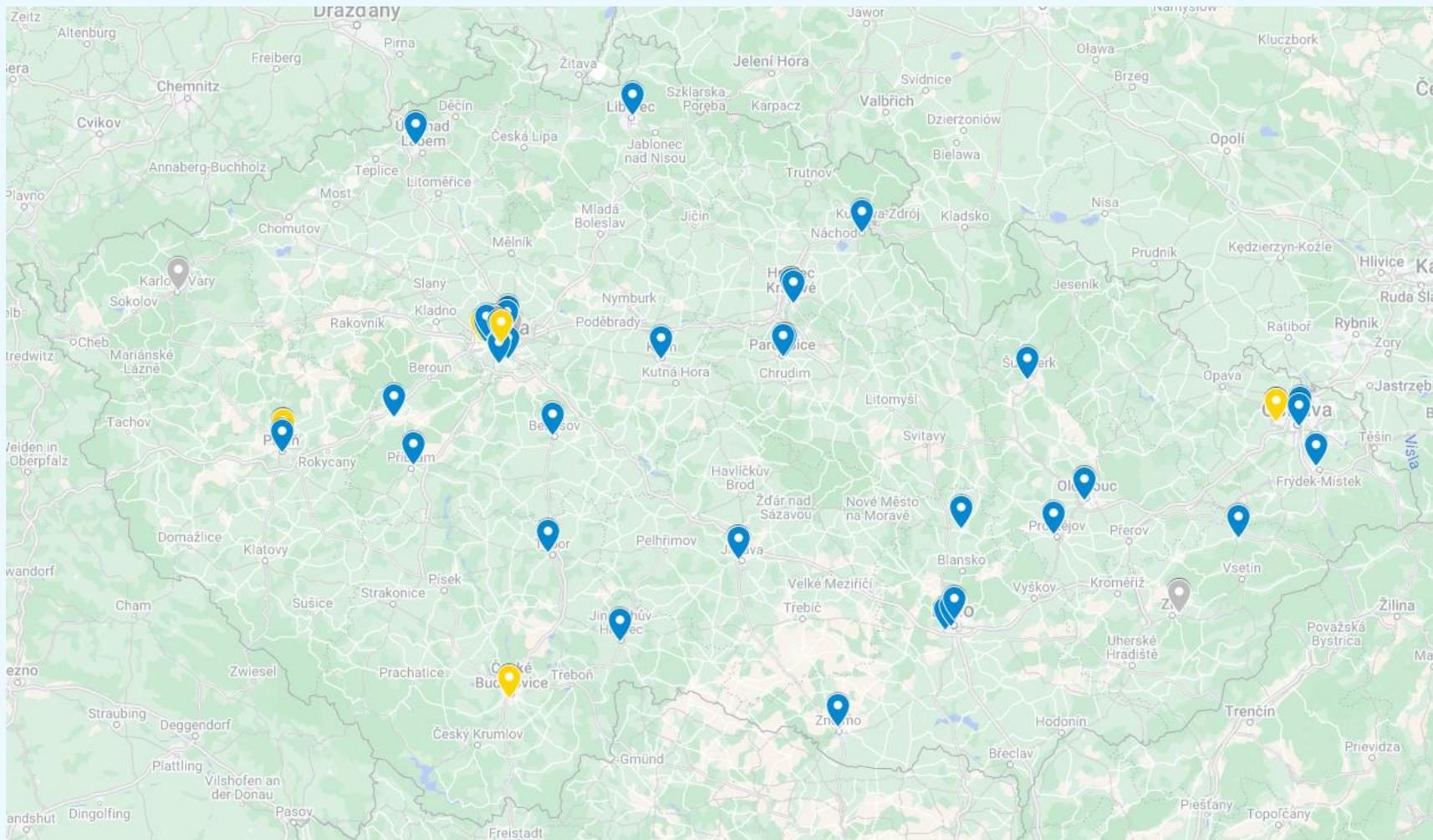
Objectives:

Primary: To monitor the IBD patients treated with biological and innovative therapies in the Czech Republic

Secondary:

- Assessment of effectiveness of biological and innovative therapies
- Assessment of safety of biological and innovative therapies
- Assessment of therapeutic regimens
- Monitoring of duration of biological and innovative therapy in IBD patients

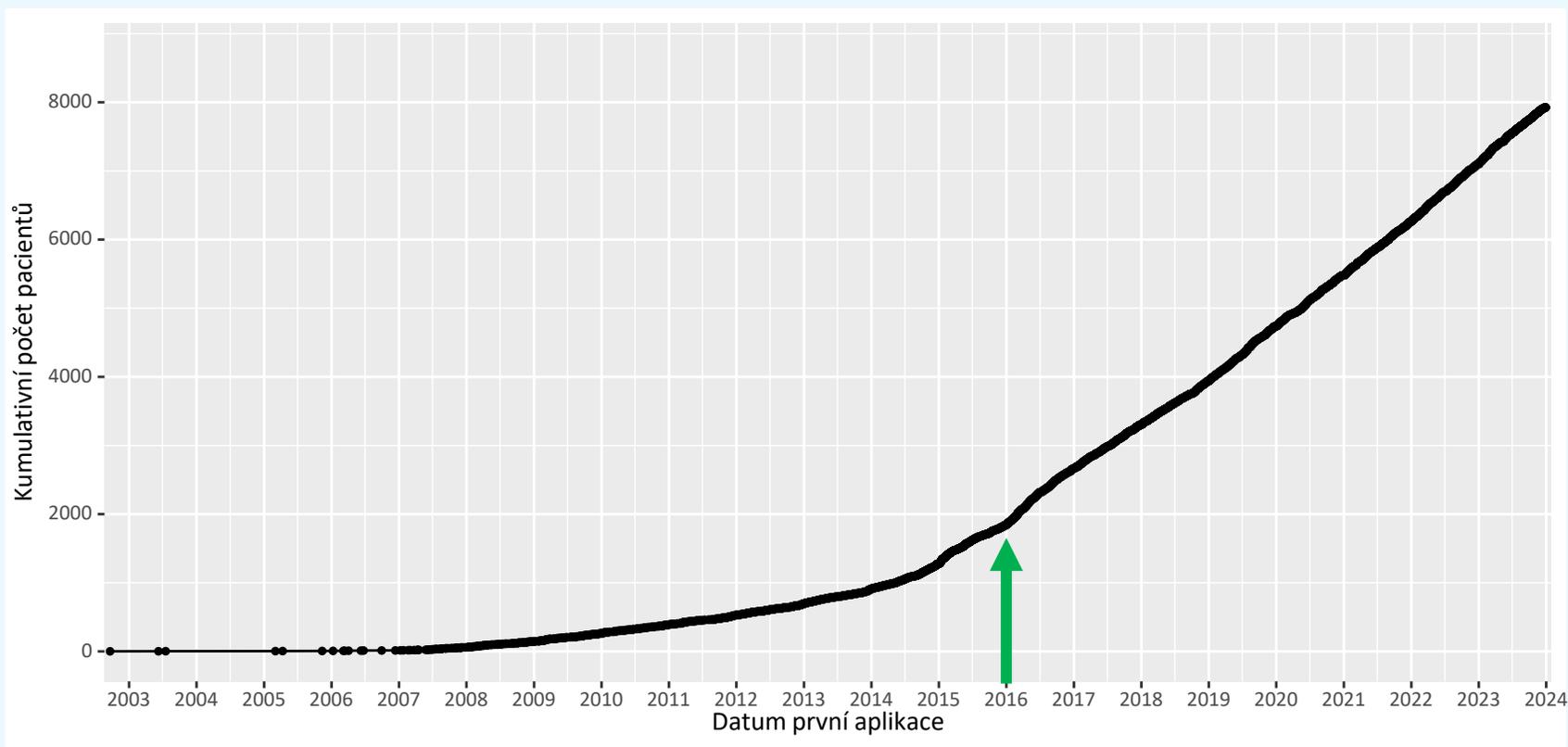
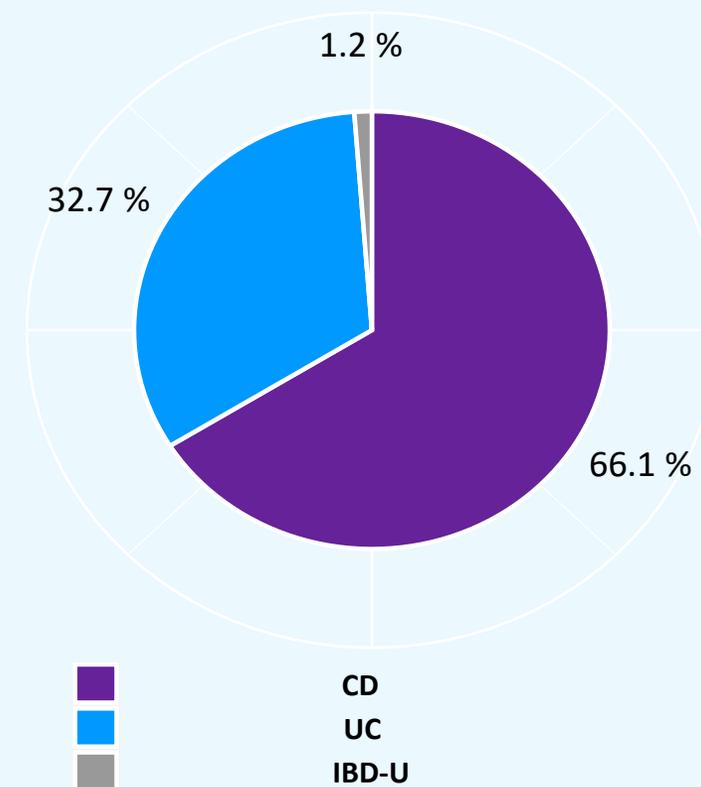
Advanced therapy – CReDIT Registry



Advanced therapy – CReDIT Registry



Diagnosis



Advanced therapy – CReDIT Registry



Crohn's Disease

HB index při posledním zahájení léčby (n=3740)		HB index na poslední kontrole (N=4071)	
HB index (n)	Podíl pacientů (%)	HB index (n)	Podíl pacientů (%)
Remission (n=2056)	55.0 %	Remission (n=3246)	79.7 %
Mild disease (n=755)	20.2 %	Mild disease (n=474)	11.6 %
Moderate disease (n=837)	22.4 %	Moderate disease (n=327)	8.0 %
Severe disease (n=92)	2.5 %	Severe disease (n=24)	0.6 %

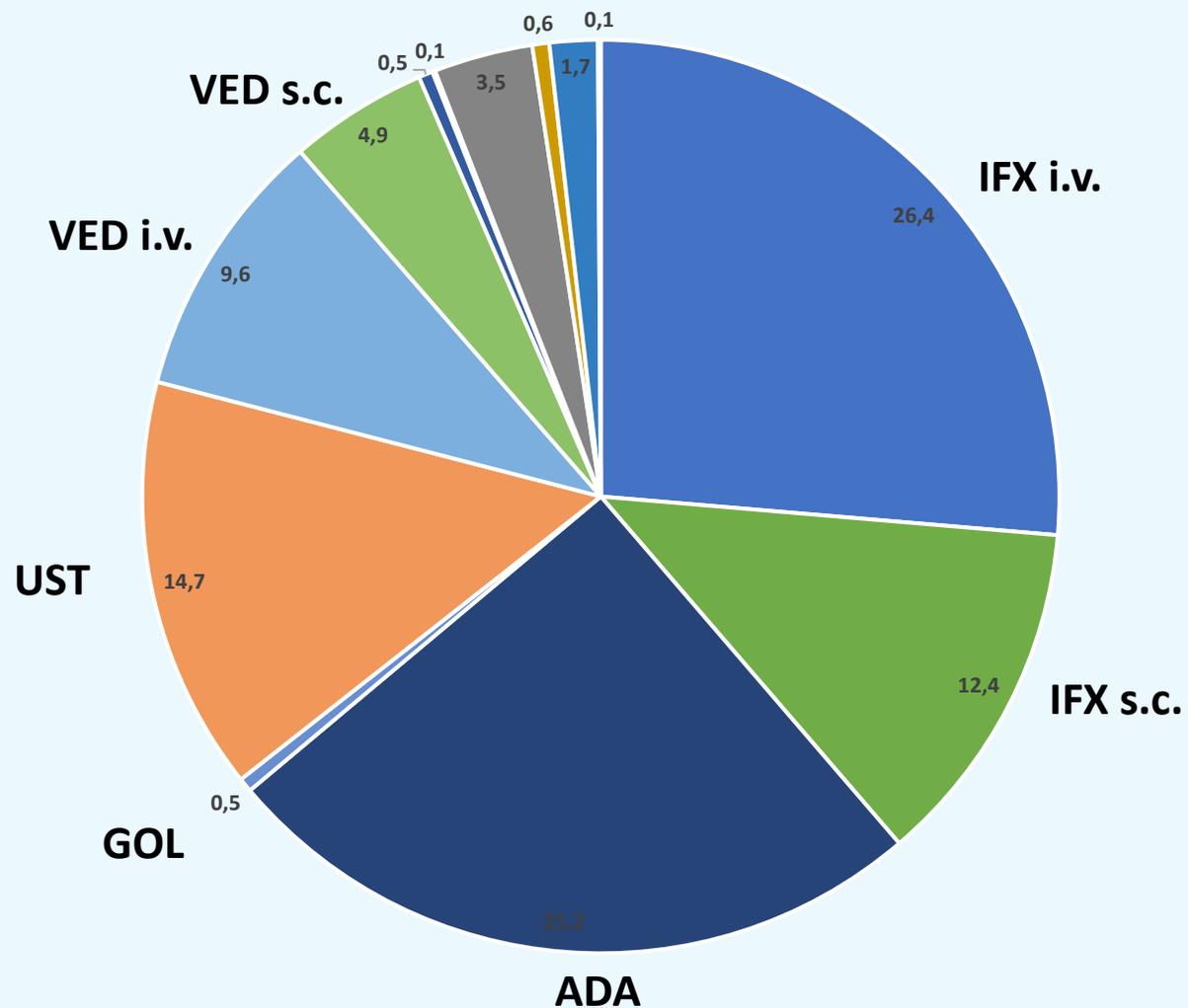
Advanced therapy – CReDIT Registry



Ulcerative colitis

Mayo skóre při zahájení poslední léčby (n=1972)		Poslední hodnocené Mayo skóre (N=1902)	
Mayo skóre (n)	Podíl pacientů (%)	Mayo skóre (n)	Podíl pacientů (%)
Remission (n=385)	19.5 %	Remission (n=1122)	59.0 %
Mild disease (n=451)	22.9 %	Mild disease (n=539)	28.3 %
Moderate disease (n=907)	46.0 %	Moderate disease (n=202)	10.6 %
Severe disease (n=229)	11.6 %	Severe disease (n=39)	2.1 %

Advanced therapy – CReDIT Registry



Ongoing therapy

Total pts: 8 945

- CD 6 008 (67%)
- UC 2 822 (32%)
- IBD-U 115 (1%)

IBD care in Czech Republic

- Czech IBD Working Group – Clinical Research



CLINICAL RESEARCH
Scandinavian Journal
JOURNAL



Journal of
Clinical Medicine



ORIGINAL
Pregnancy
bowel
through

Infliximab Article

Response to Fecal Microbial Transplantation versus Mesalamine Enema for Treatment of Active Left-Sided Ulcerative Colitis—Results of a Disease-Modifying Randomized Controlled Trial

Martin Bortlik, Lukáš Hrdina, Jana Koželuhová, Milan Lukáš, Jakub Mrázek, Kateřina Olša Fliegerová, Simona Kvasnová, Mekadim Chahrazed, Jan Mareš, Julius Špičák and Pavel Drastich

Jan Březina ^{1,*}, Lukáš Bajer ¹, Pavel Wohl ¹, Dana Ďuricová ², Pavel Hrabák ³, Aleš Novotný ³, Jana Koželuhová ⁴, Milan Lukáš ², Jakub Mrázek ⁵, Kateřina Olša Fliegerová ⁵, Simona Kvasnová ⁵, Mekadim Chahrazed ⁵, Jan Mareš ¹, Julius Špičák ¹ and Pavel Drastich ¹

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<https://doi.org/10.1016/j.crohns.2012.10.019>

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Study on Long-Term
Multicenter

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IBD care in Czech Republic

- Clinical Research – ongoing projects
 - Infliximab IV vs. Infliximab SC: Prospective observational study
 - Patients´ Pathway: Retrospective, administrative study
 - Advanced therapies in UC proctitis: CREDIT Registry analysis



Persistence of advanced therapy in patients with ulcerative proctitis – analysis from the population-based registry CReDIT

Ondrej Hradsky, Milan Lukas, Pavel Drastich, Tomas Vanasek, Zuzana Serclova, Lenka Nedbalova, Martin Bortlik, Dana Duricova

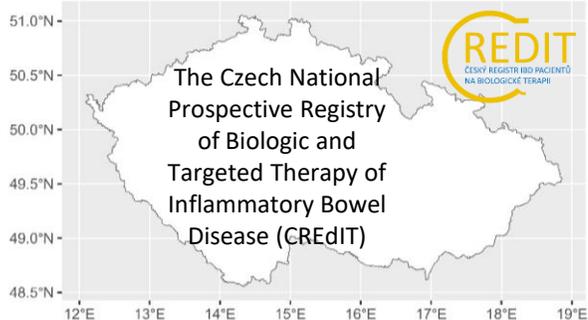
Gastroenterology and Nutrition Unit, Department of Paediatrics, 2nd Faculty of Medicine, Charles University and University Hospital Motol, Prague, Czech Republic; Clinical and Research Centre for IBD, ISCARE a.s., Prague, Czech Republic; Institute of Pharmacology, 1st Medical Faculty, Charles University in Prague, Czech Republic; Department of Hepatogastroenterology, Institute for Clinical and Experimental Medicine, Prague, Czech Republic; Hepato-Gastroenterologie HK, outpatient clinic, 2nd Department of Internal Medicine, University Hospital Hradec Králové, Czech Republic; ZS ISCARE + Surgical Department, Faculty Hospital Kralovské Vinohrady, Prague, Czech Republic; Department of Gastroenterology, Hospital Liberec - Turnov - Frýdlant v Čechách a.s., Clinical Centre for IBD, Hospital Liberec - Turnov - Frýdlant v Čechách a.s.; Department of Gastroenterology, Hospital Ceske Budejovice, Department of Internal Medicine and Institute of Pharmacology, First Medical Faculty, Charles University, Prague, Czech Republic, Clinical and Research Centre for IBD, ISCARE a.s., Prague, Czech Republic, Institute of Pharmacology, 1st Medical Faculty, Charles University in Prague, Czech Republic

Introduction

Data regarding the outcomes of advanced treatment for patients with UC proctitis are limited, largely because these patients are usually excluded from randomized controlled trials.

Our aim was to evaluate the persistence of advanced treatment in patients with UC proctitis.

Study design

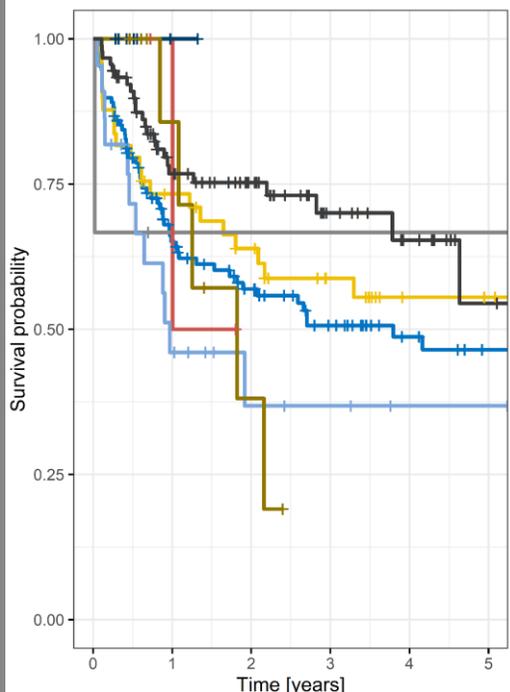


318 treatment courses of advanced therapy among 251 patients with UC proctitis

Each therapy cycle was considered an observation, so mixed-effect regression models were used. Propensity score analysis was applied to compare vedolizumab and anti-TNF therapy.

Results

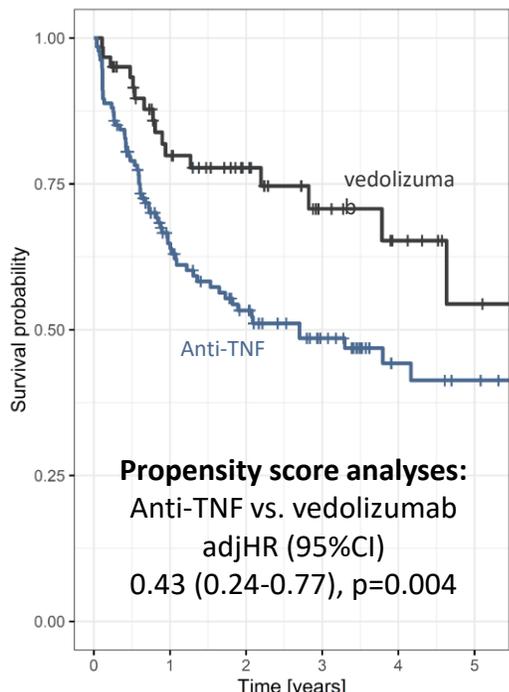
Sustainability



Number at risk

Therapy	0	1	2	3	4	5
therapy=infliximab	128	69	51	36	24	18
therapy=adalimumab	149	39	26	18	10	6
therapy=filgotinib	300	22	10	0	0	0
therapy=golimumab	10	0	0	0	0	0
therapy=tofacitinib	23	10	4	0	0	0
therapy=upadacitinib	10	0	0	0	0	0
therapy=ustekinumab	91	54	37	19	12	10
therapy=vedolizumab	61	40	27	15	10	5

Sustainability

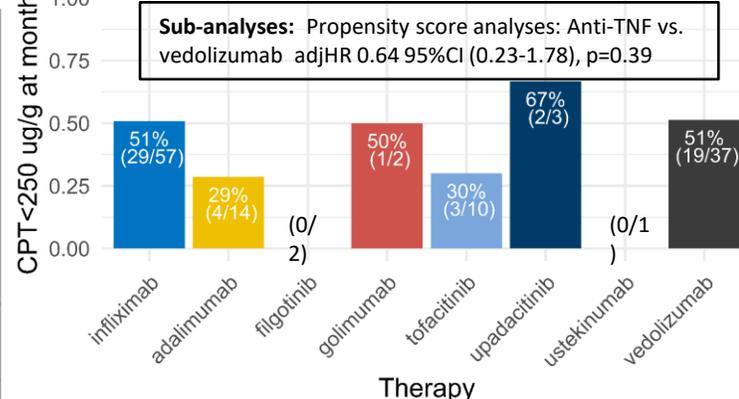


Propensity score analyses:
Anti-TNF vs. vedolizumab
adjHR (95%CI)
0.43 (0.24-0.77), p=0.004

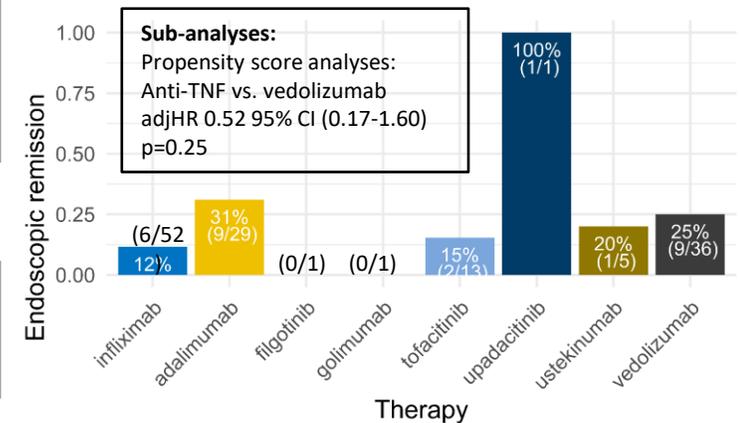
Number at risk

Strata	0	1	2	3	4	5
aTNF=no	61	40	27	15	10	5
aTNF=yes	134	72	51	32	15	12

Calprotectin <250 ug/g at month 3



Endoscopic Mayo remission (≤1) at month 6



Based on real-world clinical data, the persistence of advanced treatment in UC proctitis appears to be low. Treatment with vedolizumab shows greater persistence compared to anti-TNF therapy. Despite this, efficacy outcomes, measured by both laboratory and endoscopic remission rates, are comparable between anti-TNF and vedolizumab therapies.

Unmet needs

- Availability of advanced therapy for IBD patients
 - Geographical distribution, personal and financial barriers
- Cost-effectiveness of advanced therapy assessment
 - Patients pathway, Health economic assessment methods, etc.
- Standardization/optimization of IBD care
 - Guidelines, education, interdisciplinary cooperation (surgeons, pathologists, etc.)



Czech IBD Working Group (2024)

