ESPEN 2019 Abstract Submission

Topic: Liver and gastrointestinal tract

Abstract Submission Identifier: ESPEN19-ABS-1431

EFFECT OF APRAGLUTIDE, A GLUCAGON-LIKE PEPTIDE-2 ANALOG, ON PATIENTS WITH SHORT BOWEL SYNDROME: PRELIMINARY RESULTS FROM AN OPEN-LABEL STUDY

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Rationale: Treatment with glucagon-like peptide (GLP)-2 and its analogs have been shown to improve intestinal function in patients with short bowel syndrome (SBS). This study investigates the safety and efficacy of weekly dosing of apraglutide, a novel long-acting GLP-2 analog, in development for the treatment of SBS.

Methods: A total of 8 patients will be enrolled in an open-label phase II trial with a 5 mg once-weekly subcutaneous injection of apraglutide for 4 weeks. Main inclusion criteria include an average fecal output ≥1500 g/day and a urine volume <2000 ml/day. We present preliminary results from 3 patients. Safety was the primary endpoint. As secondary endpoints, we examined changes from baseline in stoma wet weight output and intestinal absorption of wet weight and energy measured by metabolic balance studies.

Results: Common adverse events (AEs) were peripheral edema, polyuria and stoma nipple enlargement. AEs were transient with a mild to moderate severity. No safety concerns were observed with laboratory values, vital signs or ECGs. We observed a decrease in stoma wet weight output and an increase in intestinal absorption of wet weight and energy (Table 1). Initial pharmacokinetic analysis supports once-weekly dosing.

Table 1. Results from 3-day metabolic balance studies: Change from baseline after 4 weeks of apraglutide treatment. SBL=short bowel length.

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3-day average	63-year old female with jejunostomy	61-year old male with jejunostomy	65-year old female with jejunostomy
	SBL=150cm	SBL=140cm	SBL=230cm
Stoma wet	-1533 (-28%)	-1632 (-33%)	-280 (-15%)
weight output,			
g/day (%)			
Wet weight	1607 (+98%)	1732 (+83%)	95 (+4%)
absorption,	, , ,		· · ·
g/day (%)			
Energy	2164 (+34%)	3038 (+37%)	388 (+5%)
absorption,	, , ,		, , ,
kJ/day (%)			

Conclusions: Preliminary results from this open-label phase II study showed that weekly dosing of apraglutide was safe and well tolerated and improved intestinal absorption in patients with SBS.

Disclosure of Interest: None Declared

Keywords: Short bowel syndrome