

以生物製劑治療發炎性腸道疾病的新進展

Recent advance in biologic therapy for inflammatory bowel disease

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Since the year 1998 the medical management of inflammatory bowel disease (IBD) has been polished up into a biologic era, thanks to the emergence of anti-TNF monoclonal antibody therapy. Following this major paradigm shift of IBD treatment, improvement has never stopped with the advents of newer anti-TNFs of less immunogenicity and better safety profile, as well as monoclonal antibodies against other key pro-inflammatory adhesion molecules, lymphocyte trafficking molecules, cytokine, or their receptors. At the same time, biosimilars developed from earlier biologics are being rolled out as an alternative option for whom biologics are less affordable. Besides antibodies, newer target therapy aiming at signal transduction pathways constitutes another exciting tract of small-molecule drug development that requires no injection while exerting comparable or even stronger clinical efficacy. The rapid expansion of biologic classes and variety in modes of action has led to the realization of new challenges. Most advanced studies are being conducted that have never been considered before, including head-to-head comparative trials, trials that compare endoscopy or histology-based outcomes, biologic withdrawals, and biologic combo therapy. Undoubtedly, as the reform is moving on the management of IBD is directed on the fast track towards precision medicine and hopefully the ultimate cure of disease.