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Name of Study: **A Study of the Safety and Efficacy of Etrolizumab in Patients with Moderately to Severely Active Crohn's (Bergamot & Juniper Open-Label Extension)- (Genentech-Hoffman-La Roche)**

LINK:

https://clinicaltrials.gov/ct2/show/NCT02394028?term=crohn%27s&recr=Open&state1=NA%3AUS%3ANC&phase=123&rank=4&submit_fld_opt=

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SUMMARY: This is a multicenter, Phase III, double-blind, placebo-controlled study evaluating the safety and efficacy of etrolizumab during induction and maintenance treatment of moderate to severely active Crohn's disease (CD) in patients who are anti-tumor necrosis factor (TNF) naive (TNF-naive) and in patients who are refractory or intolerant of tumor necrosis factor inhibitors.

Inclusion:

- CDAI score of ≥ 220 to ≤ 480 and PRO score (patient reported outcome) of ≥ 14 within 7 days prior to randomization, along with presence of active inflammation (SES-CD score of ≥ 7 or ≥ 4 in cases of isolated ileitis or post-ileoresection)
- Experienced intolerance, refractory disease, or no response to at least one of the following within 5 years of screening- Immunosuppressants, and/or Anti-TNF therapy
- Diagnosis of CD based on clinical, histopathological, and endoscopic evidence established ≥ 3 months prior to screening
- Involvement of ileum and/or colon with at least 4 colonic segments traversable by a pediatric scope or 3 segments (colon and/or ileum) for patients who have undergone a bowel resection for CD
- Completed a surveillance colon ≤ 12 months prior to screening if disease of ≥ 10 yrs duration of ≤ 5 yrs prior to screening if patient has any risk factors for bowel cancer (may be done during screening)
- Conditions other than CD that might require > 20 mg/day of prednisone (or equivalent) during course of study

Exclusion:

- History of alcohol, drug or chemical abuse ≤ 6 months prior to screening
- Most cancer diagnosis < 5 yrs including leukemias, melanomas, renal, Kaposi, abnormal cervical smear, high-grade intraepithelial neoplasia grade > 1 , solid tumors, hematologic malignancies, and CIS
- Hospitalizations (other than elective) ≤ 4 wks prior to and during screening
- Prior history of active/latent TB or recent suspicious chest x-ray
- Active positive HBV, HCV, HIV
- Organ transplant