

Persistence of Musculoskeletal Deficits in Paediatric Crohn's Disease Following Anti-Tumour Necrosis Factor Therapy



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Background

Anti-tumour necrosis factor(TNF) can improve disease and linear growth in children with CD but its effect on bone and muscle development is unclear.

Methods

Prospective longitudinal study of bone and muscle development in 19 CD(12M) commencing treatment with anti-TNF. Outcomes measures: Bone and muscle parameters by pQCT at nondominant distal radius and tibia, IGF axis and bone biomarkers.

Objectives

1- To assess changes in bone density, geometry and muscle mass after 12 months of anti-TNF in paediatric.

2- To assess changes in IGF axis and bone biomarkers after 12 months of anti-TNF in paediatric CD.

Conclusion

1- Improvement in markers of disease and bone turnover 12 months following anti-TNF- α was not translated into meaningful improvements in bone mineral density or geometry.

2- Bone mass and geometry were closely related to muscle which

Results

Table 1: Clinical Details of Patients

	Baseline	6 months	12 months
Disease Duration (years)	3.1 (0.20, 10.7)		
Age (years)	14.9 (11.2, 17.2)		
Height SDS	-0.7 (-2.7, 1.7)	-0.5 (-2.9, 1.7)	-0.5 (-3.1, 1.9)
BMI SDS	-0.4 (-2.7, 3.2)	-0.4 (-2.3, 2.9)	0.2 (-1.8, 2.7)
II-6	52 (34, 153)	50 (17.5, 151.5)	44 (22, 116)
Oral Prednisolone	9 (47)	2 (11)	2 (11) *
Pre-pubertal(I)	2 (11)	0	0
Early pubertal(II-III)	8	7	5
Late pubertal (IV-V)	9 (47)	12	14

Figure 1: Weighted Paediatric Disease Activity Index

*

remained low.

	Results contd							
	Figure 3: IGF axis and bone biomarker							
SDS	IGF-1	SDS	IGFBP-3					
2-		2						
0		o- -						
-2-		-2-						
-4-		-4-						
-6	ALS	-6	IGFBP-2					
4]		47						
2-		2-						
0								
-2-		-2-						
-4-		-4-						



Baseline 2 weeks 6 weeks 6 months 12 months

Anti-TNF led to significant improvement in disease (wPCDAI)





Baseline 2 weeks 6 weeks 6 months 12 months Baseline 2 weeks 6 weeks 6 months 12 months

Anti-TNF led to significant improvement in marker of bone formation

Table 2: Multivariate Mixed-Model Regression Analysis for pQCT BoneOutcomes (Independent variables: IL-6, glucocorticoids, IGF-1, IGFBP-3)

Independent
variablesTrabecular BMDSDSCortical BMD SDSCortical Thickness SDS

	Estimate	p-value	Estimate	p-value	Estimate	p-value
	(SE)	(95%CI)	(SE)	(95%CI)	(SE)	(95%CI)
ALS SDS	0.69	0.02*	-0.18	0.57	0.19	0.30
	(0.29)	(0.11, 1.28)	(0.31)	(-0.80, 0.45)	(0.17)	(-0.17,0.54)
Muscle CSA	0.427	0.02 *	0.36	0.049 *	0.32	0.003 *
	(0.17)	(0.09, 0.77)	(0.18)	(0.00, 0.71)	(0.11)	(0.12, 0.52)

Multivariate analysis showed that muscle was independently associated with all bone parameters

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