Primary biliary cholangitis (PBC)-autoimmune hepatitis (AIH) overlap syndrome: Characteristics and response to obeticholic acid (OCA) in TARGET-PBC, a diverse, large United States (US) real- world cohort



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Table 1 Descriptive characteristics

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INTRODUCTION

- A subset of patients with primary biliary cholangitis (PBC)
 have an overlap syndrome with autoimmune hepatitis.
- Patients with overlap syndrome may have a poorer response to ursodeoxycholic acid (UDCA) and higher rates of progression to cirrhosis.
- The aim of this study was to compare clinical characteristics and outcomes in PBC patients with and without overlap syndrome.

METHODS

Cohort

- TARGET-PBC is an ongoing longitudinal, observational cohort of patients with PBC managed according to local practice standards at 35 academic and community sites in the United States.
- Participating clinics provided redacted medical records (structured and unstructured data) from consented patients. Patient narratives, laboratory, pathology, and imaging data were extracted and stored in a secured database. Patient reported outcome (PRO) measures were also collected approximately every 6 months. Patients contributed blood samples to a biospecimen repository for biomarker validation and translational research.

Study Population

 The study population included 532 patients enrolled in TARGET-PBC between November 9, 2016 and February 14, 2019.

Outcome Measure

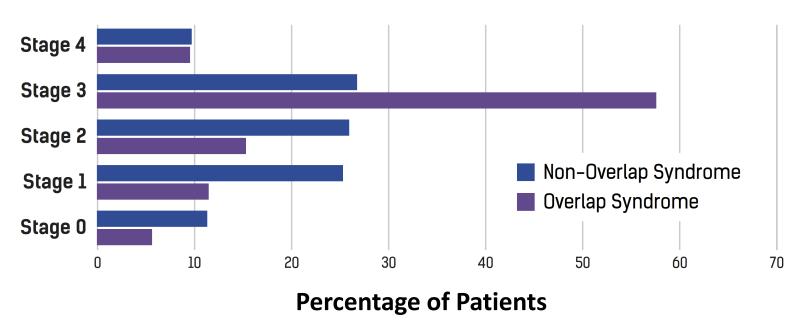
• The presence of overlap syndrome was ascertained from the time of enrollment through February 14, 2019 or in the three years prior to enrollment.

Statistical Analysis

• The percentage of clinical characteristics among patients with PBC was calculated and compared among patients with and without the presence of overlap syndrome. Chi squared and t tests were used to assess the difference in proportions and means respectively.

RESULTS

Figure 1. Distribution of fibrosis stage among patients with PBC by presence of overlap syndrome



	•	Syndrome	Overlan	P
		•	Overlap Syndrome	
	(N=52)		(N=264)	
	n	%	n	%
Stage 0	3	5.8	31	11.7
Stage 1	6	11.5	67	25.4
Stage 2	8	15.4	69	26.1
Stage 3	30	57.7	71	26.9
Stage 4	5	9.6	26	9.8

Patients without

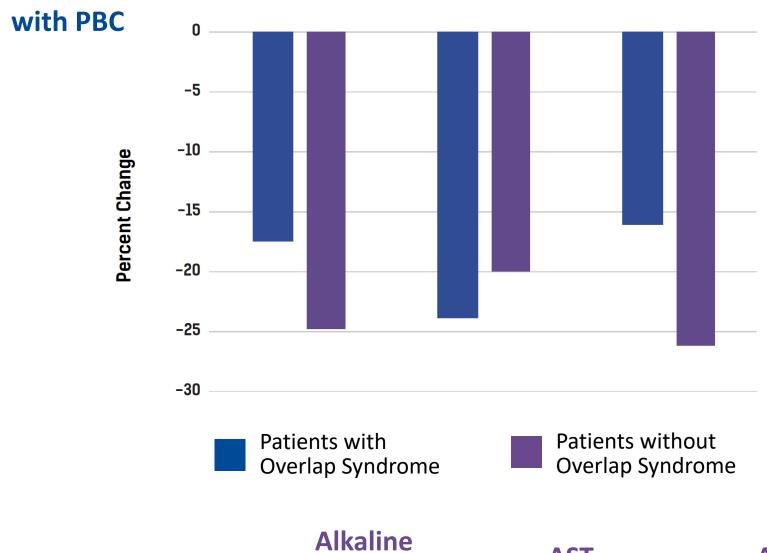
Patients with Overlap

Overlap Syndrome: 32% of staging is missing. Non Overlap Syndrome: 42% of staging is missing.

lable 1. Descriptive char	acteristics	Syndrome	Overlap Syndrome
Patient Characteristics		(N=76)	(N=456)
		Mean (SD)	Mean (SD)
Age at Study Entry		57.7 (11.8)	61.0 (11.2)
Age at Diagnosis		51 (13.0)	52 (11.1)
		N(%)	N (%)
Gender	Female	66 (86.8)	412 (90.4)
	Not Available	-	_
Race	White	56 (73.7)	388 (85.3)
	Black	7 (9.2)	19(4.2)
	Other	7 (9.3)	18 (3.9)
	Not Available	6 (7.9)	30 (6.6)
Ethnicity	Hispanic or Latino	16 (21.1)	76 (16.7)
	Not Available	6 (8.0)	23 (5.0)
Cirrhosis	Yes	39 (51.3)	170 (37.3)
	Not Available	-	-
Decompensation	Yes	21 (27.6)	80 (17.5)
	Not Available	37 (48.7)	286 (62.7)
≥1 Autoimmune Condition	on	41 (54.67)	93 (59.9)
Liver Biopsy		58 (76.3%)	28 (62.7%)
	Not Available	-	· -
Current Treatment*	UDCA Only	33 (43.4)	311 (68.2)
	UDCA,OCA(including Fenofibrate, Immunosuppresant)	10 (13.2)	65 (14.3)
	OCA only	-	3 (0.7)
	Not Available	2 (2.6)	14 (3.1)
Interface Hepatitis	Yes	37 (60.5)	76 (16.7)
	Not Available	30 (39.5)	286 (62.7)
Positive Antibody Test	Antimitochondrial	51(67.1)	351 (77.0)
	Not Available	6 (7.9)	57 (12.5) [°]
	Antinuclear	35 (46.1)	101 (22.1)
	Not Available	27 (35.5)	240 (52.6)
	Smooth Muscle	18 (23.7)	39 (8.6)
	Not Available	38 (0.50)	271 (59.4)
* Other combination of UD	CA, Fenofibrate, Immunosuppressants not shown	, ,	, ,

Advisory/Consulting Agreements: Cymabay Therapeutics, Target PharmaSolutions, Cara Diagnostics, Regeneron Pharmaceuticals, Glaxo Smith Kline





Patients with Overlap Syndrome Patients without Overlap Syndrome Overlap Syndrome Patients without Patients

CONCLUSIONS

- AIH overlap was diagnosed in 14% of this cohort.
- Overlap patients were more likely to have antinuclear and smooth muscle antibodies, interface hepatitis, and advanced fibrosis, but were otherwise similar to PBC patients.
- •OCA was administered to 10 overlap patients with safety and efficacy comparable to PBC patients.

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