

## O08 METHOTREXATE IN THE TREATMENT OF INFLAMMATORY BOWEL DISEASE : AN 8 YEAR RETROSPECTIVE STUDY IN A CANADIAN PEDIATRIC IBD CENTER

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**Background:** Methotrexate (MTX) is used as an alternative immunosuppressive treatment for patients with inflammatory bowel disease (IBD). The aim of the study was to evaluate effectiveness and tolerance of MTX for children with IBD.

**Methods:** A retrospective study was conducted in our pediatric IBD center on 93 children having received MTX for the treatment of their IBD between 2000 and 2008. Remission was defined as discontinuation of steroids and Harvey Bradshaw Index <4 for Crohn's disease (CD) patients or PUCAI<10 for ulcerative (UC) or indeterminate colitis (IC) patients.

**Results:** Seventy five patients had CD, 5 UC and 13 IC. There were 46 girls and 47 boys, with a mean age at diagnosis of 11 (0. -17.) years. Duration of disease prior to MTX therapy was 2. (0. - 11.) years. Ninety patients were previously treated with purine analogues : 76 had failure and 14 had intolerance to this treatment. Twenty six patients previously received anti TNF. Clinical remission was observed in respectively 27%, 34%, 23% and 15% of patients 3, 6, 12 and 24 months after initiation of MTX. The one year remission rate for CD patients was significantly higher in patients with colonic disease. Forty nine patients (52%) experienced side effects but only 14 (15%) had to discontinue treatment because of intolerance, mostly because of nausea.

**Conclusion:** The long term remission rate with MTX in our pediatric IBD population was low. However MTX was generally well tolerated and induced and maintained remission in some patients who previously had failed a purine analogue and/or anti TNF.