UDCA in UC: A true disease modifier or symptoms reliever?

Dear Editor,

I read with great interest the paper recently published by Wang *et al.*^[1] looking at the efficacy of ursodeoxycholic acid (UDCA) in combination with mesalazine in patients with ulcerative colitis (UC). The authors concluded that the combination therapy is superior to mesalazine monotherapy, using the Mayo score and the Inflammatory Bowel Disease Questionnaire (IBDQ) to assess the clinical outcomes.

Looking at the Endoscopic Mayo sub-score: both groups scored 2 at the baseline with no subsequent improvement observed at week 1 post-treatment (both groups continued to score 2 with P = 0.65). At week 4 post-treatment, patients who received mesalazine monotherapy continued to score 2, while those who received the combination therapy scored 1 (P = 0.017). It should be noted that the lack of a central reading in this study could have potentially compromised the results because of the high rate of subjectivity and variability among the endoscopists when calculating the score.^[2] Moreover, the Endoscopic Mayo score has its limitations for assessing the clinical outcomes and predicting prognosis in UC compared with other scores, for example, the Ulcerative Colitis Endoscopic Index of Severity (UCEIS).^[3,4]

On the other hand, combination therapy of UDCA and mesalazine performed better at improving patients' symptoms. This is evident from the Mayo scores at weeks 1 and 4 post-treatment for both groups (5.5 vs. 4, P = 0.15and 3.5 vs. 2, P = 0.045), respectively. In view of the above, one can speculate that the results were driven mainly by the improvement in the clinical sub-score. The same can be said of the IBDQ total score and sub-scores at week 4 post-treatment. The total, social ability, emotional ability and systemic symptoms scores were significantly better among the combination arm compared to the mesalazine monotherapy arm with P values of < 0.001, 0.04, 0.009and 0.012, respectively. All results taken together, UDCA did improve the clinical outcomes in terms of quality of life and symptoms relief. However, it failed to show impressive endoscopic outcomes.

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Conflicts of interest

There are no conflicts of interest.

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