

Can Short-Term Trajectories of Neopeptides After Initiation of Antifibrotic Treatment Predict Therapy-Related Outcomes in IPF?

STUDY DESIGN

Prospective study of 203 treatment-naïve patients with idiopathic pulmonary fibrosis (IPF) assessing antifibrotic response and serum concentration of matrix metalloproteinase-degraded C-reactive protein (CRPM) at baseline and 6 months

Association of neopeptides and their longitudinal kinetics (+/↑ or -/↓ slope)

- Mortality
- Progression- and transplant-free survival



50% received nintedanib
35% received pirfenidone
15% received no antifibrotic treatment

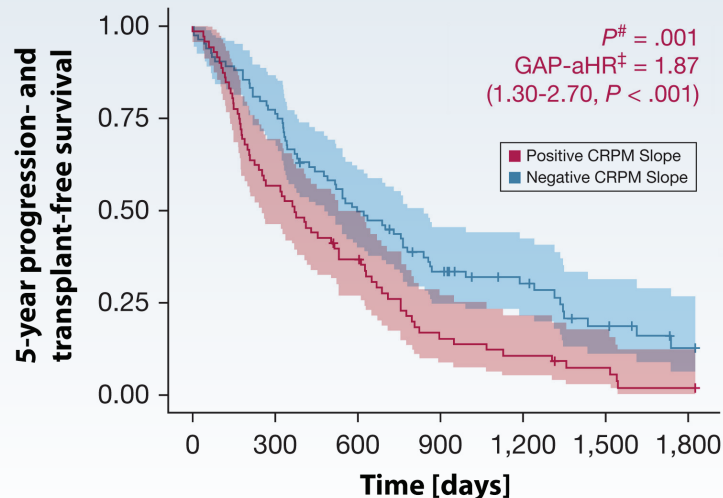


↑ CRPM levels ↑ mortality in patients treated with nintedanib but **not** pirfenidone

↓ Progression- and transplant-free survival with ↑ CRPM levels of all tested neopeptides

RESULTS

Progression- and Transplant-Free Survival



The results of this study show that positive/increasing CRPM slopes were associated with higher mortality and disease progression in the nintedanib-treated group but not in the pirfenidone-treated group, and that serum CRPM dynamics unmask a subgroup of patients with IPF at risk for adverse outcomes despite initiation of the current standard antifibrotics.