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Editorial

Tofacitinib- the Turning Point in the Management of Ulcerative Colitis

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Ulcerative colitis (UC) is a chronic disease of the large bowel that affects all age groups [1].

The current set of treatment for UC involves steroids, immunomodulators, biologics and Janus kinase inhibitors, namely tofacitinib [1].

Tofacitinib, a second generation Janus kinase inhibitor, inhibits the JAK1 enzyme. It had acquired FDA approval for a variety of indications, including ulcerative colitis as well [2].

The introduction of tofacitinib has revolutionized the management of UC, Odue to its shorter half-life and a higher bioavailabity which leads to a faster action.

A couple of clinical trials parallel its efficacy in moderate to severe UC to that of vedolizumab, an anti-integrin inhibitor and found it to have similar rates of remission.

It acts on the JAK stat pathway inhibiting multiple cytokines at the same time.1 and is rapidly absorbed after oral intake but has a short half-life [1].

Approved by the FDA in 2018 [3], it is mainly used for those having moderate to severe ulcerative colitis in whom the disease process has either deteriorated or in individuals who have not yet responded to conventional treatment options including mono clonal antibody [4].

Tofacitinib's dose in the induction phase is 10mg twice daily, which is given for a period of 8 weeks. However, the treatment duration may be extended for another 8 weeks if remission cannot be reached [4].

However, its effectiveness in the less severe disease spectrum is not yet known.

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