

# Treatment Persistence<sup>a</sup> in IBD

A **real-world surrogate marker** of treatment effectiveness and tolerability<sup>1</sup>

<sup>a</sup>Persistence refers to the number of days patients continue to take the prescribed medication without exceeding a permissible gap.<sup>2</sup>

IBD=inflammatory bowel disease; HCPs= health care professionals; QoL=quality of life.

**References:** 1. Yiu TH, et al. *Aliment Pharmacol Ther.* 2024;59(11):1312-1334. 2. Matsuoka K, et al. *Intest Res.* 2025;23(3):358-371. 3. Bodger K, et al. *Ther Adv Gastroenterol.* 2026;19: 17562848261446551. 4. Lenti MV, et al. *Intern Emerg Med.* 2025;20(5):1361-1370.

**Disclaimers:** This infographic was commissioned by Lilly Medical and is intended to be used by HCPs for medical, scientific, and educational purposes. It is not intended for promotional use.

## Treatment persistence reflects:

- Improved patient-reported disease control over time<sup>b,3</sup>
- Sustained efficacy and tolerability<sup>2,3</sup>
- Patient satisfaction<sup>2,3</sup>
- Improved perception towards treatment<sup>3</sup>

<sup>b</sup>Patients remaining on treatment reported significant improvement in QoL, with less impact on day-to-day activities and lower rates of pain, sleep disturbance, altered mood, and fatigue.

Persistence may reflect treatment decisions made by patients and prescribers, potentially influenced by perceived benefit-risk considerations.<sup>1</sup>

**Real-world treatment persistence is an important consideration when aligning patients with therapies to support long-term management of IBD.<sup>1,3,4</sup>**