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European Crohn's and Colitis Organisation Congress

Stockholm, Sweden
February 18-21, 2026

J&J Sponsored Studies

Abstract Number	Title	Presentation time (CET)
TREMFYA® (guselkumab)		
QUASAR Study		
Digital Oral Presentation		
DOP104	Efficacy and safety of guselkumab for ulcerative colitis through week 140 of the QUASAR long-term extension study	Friday, February 20 18:09-18:15
Oral Presentation		
OP10	Symptomatic improvement with intravenous guselkumab induction therapy is observed early in patients with moderately to severely active Ulcerative Colitis: post-hoc analysis of QUASAR	Friday, February 20 10:25-10:35
Poster Presentations		
P0805	Predictors of endoscopic remission at 1 year in patients with ulcerative colitis treated with guselkumab: Post-hoc analyses of the QUASAR trial	Friday, February 20 12:40-13:40
P0980	Association of endoscopic, histologic, and composite outcomes with long-term guselkumab efficacy in ulcerative colitis: 2-year results from the QUASAR long-term extension	Friday, February 20 12:40-13:40
ASTRO Study		
Digital Oral Presentation		
DOP105	Efficacy of subcutaneous guselkumab in moderately to severely active ulcerative colitis by induction week 12 clinical response status: Week 48 results from the phase 3 ASTRO study	Friday, February 20 18:15-18:21
Poster Presentation		
P1155	Evaluation of bowel symptomatic remission in ASTRO study participants with ulcerative colitis (UC) using a novel patient-reported outcome (PRO) composite endpoint	Friday, February 20 12:40-13:40
QUASAR/ASTRO Studies		
Digital Oral Presentation		
DOP103	Intravenous and subcutaneous guselkumab induction are similarly efficacious in patients with ulcerative colitis across weight quartile and BMI subgroups: Week 12 results from the phase 3 QUASAR and ASTRO studies	Friday, February 20 17:45-18:45
Poster Presentation		
P0925*	Pharmacokinetics and exposure-response relationships of guselkumab intravenous or subcutaneous induction in participants with ulcerative colitis	Friday, February 20 12:40-13:40
GALAXI Study		
Digital Oral Presentation		
DOP001	Extraintestinal manifestations in participants with moderately to severely active Crohn's disease: Results from the phase 3 GALAXI 2 & 3 studies	Thursday, February 19 17:45-17:51
Poster Presentations		
P0596	Efficacy and safety of guselkumab in participants with moderately to severely active Crohn's disease who had maintenance dose adjustment: Results from the phase 3 GALAXI 2 & 3 long-term extension	Friday, February 20 12:40-13:40

*Encore abstract

P1102	Impact of disease duration on clinical and endoscopic responses at 1 year in patients with Crohn's disease treated with guselkumab: Pooled analysis of the GALAXI 2 & 3 studies	Friday, February 20 12:40-13:40

GALAXI/GRAVITI Studies		
Poster Presentations		
P1099*	Efficacy and safety of guselkumab through week 96 after intravenous or subcutaneous induction in participants with Crohn's disease: Phase 3 long-term extension data from GALAXI 2, GALAXI 3, and GRAVITI	Friday, February 20 12:40-13:40
P1110	Efficacy of intravenous and subcutaneous guselkumab induction by weight and body mass index in patients with Crohn's disease: Results from the phase 3 GALAXI and GRAVITI studies	Friday, February 20 12:40-13:40
P1043	Unsupervised machine learning to identify distinct CDAI-based response patterns to guselkumab in participants with Crohn's disease: Post hoc analysis of the pooled GRAVITI and GALAXI 2/3 studies	Friday, February 20 12:40-13:40

Other Studies		
Poster Presentations		
P1069	Safety of guselkumab in patients aged ≥60 years with immune-mediated inflammatory diseases: a pooled analysis of registrational trials in UC, CD, PsA and PsO	Friday, February 20 12:40-13:40
P1042	Pregnancy outcomes in maternal exposure to guselkumab: Review of cases reported to the Company Global Safety Database	Friday, February 20 12:40-13:40

Icotrokinra		
ANTHEM Study		
Oral Presentation		
OP29	Icotrokinra, the first targeted oral peptide that selectively blocks the interleukin-23 receptor, reduces systemic and tissue inflammatory burden in Ulcerative Colitis: Results from the ANTHEM-UC study	Saturday, February 21 8:30-8:40

STELARA® (ustekinumab)		
UNITI Jr Study		
Oral Presentation		
OP18	The UNITI Jr Study: Safety and efficacy results of ustekinumab in paediatric patients with Crohn's Disease	Friday, February 20 16:10-16:20
Poster Presentations		
P0849	Dose escalation in participants with primary/secondary loss of response to conventional dosing of ustekinumab in paediatric Crohn's Disease (UNITI Jr study)	Friday, February 20 12:40-13:40
P0746	Endoscopic and histologic results from the UNITI Jr study of ustekinumab in paediatric Crohn's Disease	Friday, February 20 12:40-13:40
P0548	Symptom assessment of IBD-related quality of life after ustekinumab treatment in paediatric Crohn's disease	Friday, February 20 12:40-13:40
P1070	PCDAI eligibility criteria into clinical trials: Post-hoc analysis of the UNITI Jr study of ustekinumab in paediatric Crohn's disease (CD)	Friday, February 20 12:40-13:40

*Encore abstract

UNIFI Jr Study		
Poster Presentations		
P1154	Safety and efficacy of ustekinumab in paediatric ulcerative colitis (UC): Results from the phase 3 UNIFI Jr study	Friday, February 20 12:40-13:40
P1010	Exposure optimisation substudy (EOS) of ustekinumab in paediatric ulcerative colitis (US): Q4W results from the phase 3 UNIFI Jr study	Friday, February 20 12:40-13:40

UNIFI/UNIFI Jr Studies		
Poster Presentation		
P0366	Computer vision endoscopy scoring for ulcerative colitis disease severity (ARGES-CMES): A comparison between adult and paediatric clinical trials	Friday, February 20 12:40-13:40

K-STAR Study		
Poster Presentations		
P0715	Real world evidence of Ustekinumab on health-related quality of life in patients with Crohn's disease: A prospective nationwide K-STAR study in Korea	Friday, February 20 12:40-13:40
P0688	Clinical characteristics and treatment patterns of ustekinumab in patients with Crohn's disease: Sub-group analysis from a one-year prospective nationwide K-STAR study in Korea	Friday, February 20 12:40-13:40

Other Study		
Poster Presentation		
P0735	Safety and efficacy of ustekinumab in Indian patients with moderate to severe Crohn's disease: A multicentre, interventional, phase IV study	Friday, February 20 12:40-13:40

Clinical Practice

Abstract Number	Title	Presentation time (CET)
IBD-GAPS Study		
Poster Presentation		
P0675	IBD-GAPS: Inflammatory bowel disease guidelines alignment in clinical practice survey	Friday, February 20 12:40-13:40
Physician Survey Study		
Poster Presentation		
P1035	Use of intestinal ultrasound and other imaging tests in ulcerative colitis and Crohn's disease: insights from a German physician survey	Friday, February 20 12:40-13:40

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*Encore abstract

WHAT IS TREMFYA® (guselkumab)?

TREMFYA® is a prescription medicine used to treat adults and children 6 years and older who also weigh at least 88 pounds (40 kg) with moderate to severe plaque psoriasis who may benefit from taking injections or pills (systemic therapy) or phototherapy (treatment using ultraviolet or UV light).

TREMFYA® is a prescription medicine used to treat adults and children 6 years and older who also weigh at least 88 pounds (40 kg) with active psoriatic arthritis.

TREMFYA® is a prescription medicine used to treat adults with moderately to severely active ulcerative colitis.

TREMFYA® is a prescription medicine used to treat adults with moderately to severely active Crohn's disease.

TREMFYA® IMPORTANT SAFETY INFORMATION

What is the most important information I should know about TREMFYA®?

TREMFYA® is a prescription medicine that may cause serious side effects, including:

- **Serious Allergic Reactions.** Stop using TREMFYA® and get emergency medical help right away if you develop any of the following symptoms of a serious allergic reaction:
  - fainting, dizziness, feeling lightheaded (low blood pressure)
  - swelling of your face, eyelids, lips, mouth, tongue or throat
  - trouble breathing or throat tightness
  - chest tightness
  - skin rash, hives
  - Itching
- **Infections.** TREMFYA® may lower the ability of your immune system to fight infections and may increase your risk of infections. Your healthcare provider should check you for infections and tuberculosis (TB) before starting treatment with TREMFYA® and may treat you for TB before you begin treatment with TREMFYA® if you have a history of TB or have active TB. Your healthcare provider should watch you closely for signs and symptoms of TB during and after treatment with TREMFYA®.

  Tell your healthcare provider right away if you have an infection or have symptoms of an infection, including:
  - fever, sweats, or chills
  - muscle aches
  - weight loss
  - cough
  - warm, red, or painful skin or sores on your body different from your psoriasis
  - diarrhea or stomach pain
  - shortness of breath
  - blood in your phlegm (mucus)
  - burning when you urinate or urinating more often than normal

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- **Liver Problems.** With the treatment of Crohn's disease or ulcerative colitis, your healthcare provider will do blood tests to check your liver before and during treatment with TREMFYA®. With the treatment of plaque psoriasis or psoriatic arthritis, your healthcare provider may do blood tests to check your liver before and as necessary during treatment with TREMFYA®. Your healthcare provider may stop treatment with TREMFYA® if you develop liver problems. Tell your healthcare provider right away if you notice any of the following symptoms:
  - unexplained rash
  - vomiting
  - tiredness (fatigue)
  - yellowing of the skin or the whites of your eyes
  - nausea
  - stomach pain (abdominal)
  - loss of appetite
  - dark urine

Do not use TREMFYA® if you have had a serious allergic reaction to guselkumab or any of the ingredients in TREMFYA®.

Before using TREMFYA®, tell your healthcare provider about all of your medical conditions, including if you:

- have any of the conditions or symptoms listed in the section "What is the most important information I should know about TREMFYA®?"
- have an infection that does not go away or that keeps coming back.
- have TB or have been in close contact with someone with TB.
- have recently received or are scheduled to receive an immunization (vaccine). You should avoid receiving live vaccines during treatment with TREMFYA®. Children should be brought up to date with all vaccines before starting TREMFYA®.
- are pregnant or plan to become pregnant. It is not known if TREMFYA® can harm your unborn baby.

  Pregnancy Registry: If you become pregnant during treatment with TREMFYA®, talk to your healthcare provider about registering in the pregnancy exposure registry for TREMFYA®. You can enroll by visiting www.mothertobaby.org/ongoing-study/tremfya-guselkumab, by calling 1-877-311-8972, or emailing MotherToBaby@health.ucsd.edu. The purpose of this registry is to collect information about the safety of TREMFYA® during pregnancy.
- are breastfeeding or plan to breastfeed. It is not known if TREMFYA® passes into your breast milk.

Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements.

What are the possible side effects of TREMFYA®?
TREMFYA® may cause serious side effects. See "What is the most important information I should know about TREMFYA®?"

The most common side effects of TREMFYA® include: respiratory tract infections, headache, injection site reactions, joint pain (arthralgia), diarrhea, stomach flu (gastroenteritis), fungal skin infections, herpes simplex infections, stomach pain, bronchitis, feeling very tired (fatigue), fever (pyrexia), and skin rash (rash).

These are not all the possible side effects of TREMFYA®. Call your doctor for medical advice about side effects.

Use TREMFYA® exactly as your healthcare provider tells you to use it.

Please read the full Prescribing Information, including Medication Guide, for TREMFYA® and discuss any questions that you have with your doctor.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

Dosage Forms and Strengths: TREMFYA® is available as 100 mg/mL and 200 mg/2 mL for subcutaneous injection and as a 200 mg/20 mL (10 mg/mL) single dose vial for intravenous infusion.

STELARA® IMPORTANT SAFETY INFORMATION

STELARA® is a prescription medicine that affects your immune system. STELARA® can increase your chance of having serious side effects, including:

Serious Infections

STELARA® may lower your ability to fight infections and may increase your risk of infections. Some people have serious infections during treatment with STELARA®, which may require hospitalization, including tuberculosis (TB), and infections caused by bacteria, fungi, or viruses.

- Your healthcare provider should check you for TB before starting STELARA® and watch you closely for signs and symptoms of TB during treatment with STELARA®.
- If your healthcare provider feels that you are at risk for TB, you may be treated for TB before and during treatment with STELARA®.

You should not start STELARA® if you have any kind of infection unless your healthcare provider says it is okay.

Before starting STELARA®, tell your healthcare provider if you:

- think you have an infection or have symptoms of an infection such as:
    - fever, sweats, or chills
    - muscle aches
    - cough
    - shortness of breath
    - blood in phlegm
    - weight loss
    - warm, red, or painful skin or sores on your body
    - diarrhea or stomach pain
    - burning when you urinate or urinate more often than normal
    - feel very tired
- are being treated for an infection or have any open cuts.
- get a lot of infections or have infections that keep coming back.
- have TB, or have been in close contact with someone with TB.

After starting STELARA®, call your healthcare provider right away if you have any symptoms of an infection (see above). These may be signs of infections such as chest infections, or skin infections or shingles that could have serious complications. STELARA® can make you more likely to get infections or make an infection that you have worse.

People who have a genetic problem where the body does not make any of the proteins interleukin 12 (IL-12) and interleukin 23 (IL-23) are at a higher risk for certain serious infections that can spread throughout the body and cause death. People who take STELARA® may also be more likely to get these infections.

Cancers

STELARA® may decrease the activity of your immune system and increase your risk for certain types of cancer. Tell your healthcare provider if you have ever had any type of cancer. Some people who had risk factors for skin cancer developed certain types of skin cancers while receiving STELARA®. Tell your healthcare provider if you have any new skin growths.

Serious Allergic Reactions

Serious allergic reactions can occur. Stop using STELARA® and get medical help right away if you get any symptoms of a serious allergic reaction such as: feeling faint, swelling of your face, eyelids, tongue, or throat, chest tightness, or skin rash.

Posterior Reversible Encephalopathy Syndrome (PRES)

PRES is a rare condition that affects the brain and can cause death. Tell your healthcare provider right away if you get any symptoms of PRES during treatment with STELARA®, including: headache, seizures, confusion, and vision problems.

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Lung Inflammation
Cases of lung inflammation have happened in some people who receive STELARA® and may be serious. These lung problems may need to be treated in a hospital. Tell your healthcare provider right away if you develop shortness of breath or a cough that doesn't go away during treatment with STELARA®.

Before you use or receive STELARA®, tell your healthcare provider about all of your medical conditions, including if you:

- have any of the conditions or symptoms listed above for serious infections or cancers.
- ever had an allergic reaction to STELARA® or any of its ingredients. Ask your healthcare provider if you are not sure.
- are allergic to latex. The needle cover on the prefilled syringe contains latex.
- have recently received or are scheduled to receive an immunization (vaccine). People who are being treated with STELARA® should avoid receiving live vaccines. Tell your healthcare provider if anyone in your house needs a live vaccine. The viruses used in some types of live vaccines can spread to people with a weakened immune system and can cause serious problems. **You should avoid receiving the BCG vaccine during the one year before receiving STELARA® or one year after you stop receiving STELARA®.**
- have any new or changing lesions within psoriasis areas or on normal skin.
- are receiving or have received allergy shots, especially for serious allergic reactions.
- receive or have received phototherapy for your psoriasis.
- are pregnant or plan to become pregnant. It is not known if STELARA® can harm your unborn baby. You and your healthcare provider should decide if you will receive STELARA®.
- are breastfeeding or plan to breastfeed. STELARA® can pass into your breast milk.
- talk to your healthcare provider about the best way to feed your baby if you receive STELARA®.

Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements.
Know the medicines you take. Keep a list of them to show your healthcare provider and pharmacist when you get a new medicine.

When prescribed STELARA®:

- Use STELARA® exactly as your healthcare provider tells you to. The healthcare provider will determine the right dose of STELARA®, the amount for each injection, and how often it should be given. Be sure to keep all scheduled follow-up appointments.
- STELARA® is intended for use under the guidance and supervision of your healthcare provider. In children, it is recommended that STELARA® be administered by a healthcare provider. If your healthcare provider decides that you or a caregiver may give your injections of STELARA® at home, you or a caregiver should receive training on the right way to prepare and inject STELARA®. Do not try to inject STELARA® until you have been shown how to inject STELARA® by a healthcare provider.

Common side effects of STELARA® include: nasal congestion, sore throat, and runny nose, upper respiratory infections, fever, headache, tiredness, itching, nausea and vomiting, influenza, redness at the injection site, vaginal yeast infections, urinary tract infections, sinus infection, bronchitis, diarrhea, stomach pain, and joint pain. These are not all of the possible side effects with STELARA®. Tell your doctor about any side effect that you experience. Ask your doctor or pharmacist for more information.

Please click to read the full Prescribing Information and Medication Guide for STELARA® and discuss any questions you have with your doctor.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch or call 1-800-FDA-1088.

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