

Reasons and clinical outcomes of switching strategy between Dupilumab and Tralokinumab in atopic dermatitis in clinical practice

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Background and importance

Dupilumab (D) and tralokinumab (T) are biological agents approved to treat moderate-to-severe atopic dermatitis (AD). Clinical outcomes of switching strategy between them have not been thoroughly studied in real-world settings.

Aim and objectives

To evaluate the reasons and clinical outcomes of switching between D and T.

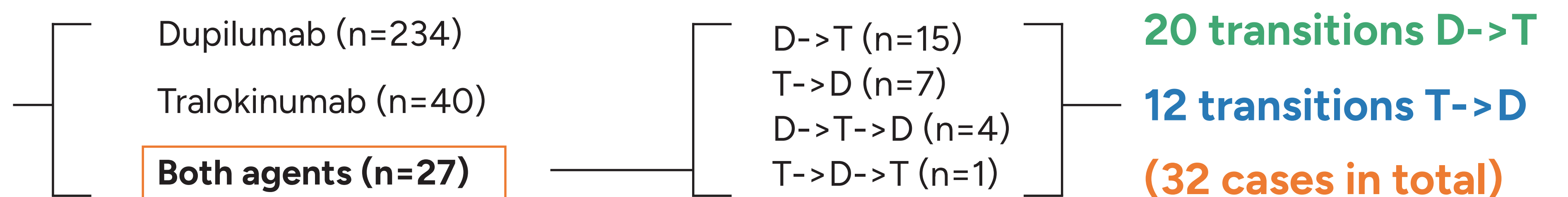
Material and methods

A retrospective study was conducted at a tertiary hospital from 01/2020 - 07/2024. We included all AD patients who initiated treatment with D or T and switched to the other agent. We collected the following data from medical records: age, sex, reasons for switching and adverse effects (AEs).

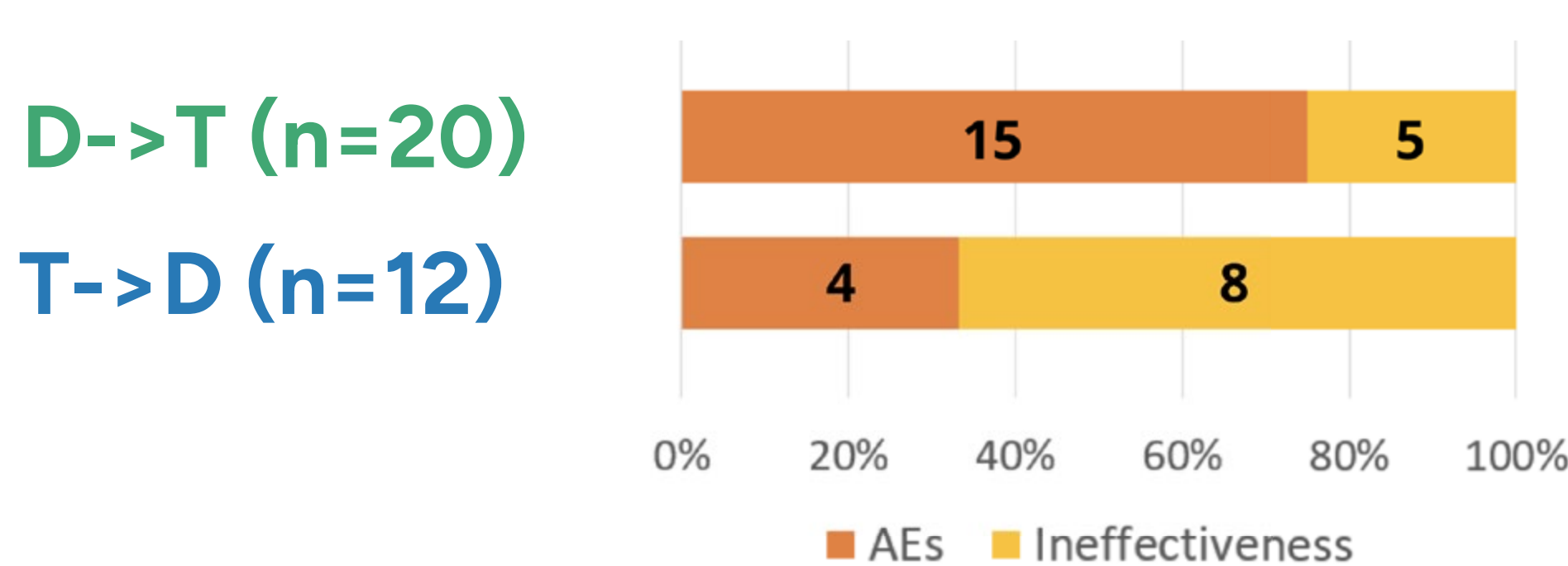
Results

A total of **301 patients** initiated a biologic treatment for AD during the study period

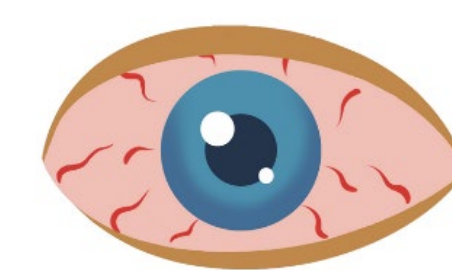
Mean age: 48 (±17) years Sex: 51% male



Switch reason



Most common adverse effects



Conjunctivitis



Facial erythema

Among patients who switched their treatment for conjunctivitis.

D->T (n=9)

3/9 cases also experienced it with T

In 2 this led to treatment discontinuation

T->D (n=3)

1/3 cases also developed it with D

Continued treatment with close ophthalmologic follow-up

At time of analysis



Conclusion and relevance

- In our study, the main reason for D->T switching in AD patients was conjunctivitis, whereas for T->D was ineffectiveness.
- Our results suggest that some patients may benefit from a switching strategy between biological agents for AD.

