

EFFECTIVENESS OF BARICITINIB IN ALOPECIA AREATA

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Background and importance

Alopecia areata (AA) is a condition characterised by hair loss resulting from the production of pro-inflammatory cytokines that induce the cessation of hair follicle growth via the JAK/STAT pathway. Therefore, **inhibiting the JAK/STAT pathway** using drugs such as **baricitinib** represents a therapeutic strategy to treat this disease.

Aim and objectives

To evaluate the **effectiveness** of baricitinib in the treatment of AA.

Materials and methods


→ **Study design:** retrospective, observational study until 31 August 2024 at a tertiary care hospital.

→ **Population:** All patients with AA treated with baricitinib with a baseline Severity of Alopecia Tool (SALT) score ≥ 50 .

→ **Variable collected:** demographic variables (sex and age), previous treatment with tofacitinib, baricitinib dosage, treatment duration, adverse events (AEs) and SALT score.

Effectiveness was evaluated based on the proportion of patients who achieved a **SALT ≤ 20** at week 36 of treatment. To assess long-term effectiveness, patients who achieved SALT ≤ 20 at week 52 were measured.

Results


39 patients were included

}	56% female and 44% male
	Median age: 44 (11-68) years

}	5 were previously on tofacitinib	}	✗ 4 discontinued due to ineffectiveness
			✗ 1 due to approval of baricitinib

At the **start** of the study:

- 89,74 % started with a 4 mg dose
- 10,3% started with a 2 mg dose → <18 years old

The **main objective (SALT < 20)** was achieved:

- ✓ 36 weeks of treatment: 11/26 patients (42,3%)
- ✓ 52 weeks of treatment: 11/21 patients (52,4%)

At the **end** of the study:

- 10,3% discontinued due to ineffectiveness → median time 71 weeks
- The most common adverse effect was **hypercholesterolemia**



Conclusion and relevance

The results confirm that **baricitinib is an effective treatment in AA**. The proportion of patients with SALT ≤ 20 was higher than the efficacy data obtained in the clinical trials BRAVE-AA1 and BRAVE-AA2, where SALT ≤ 20 was achieved in 34% of patients at week 36.

