PERSISTENCE AND REASONS FOR DISCONTINUATION OF TREATMENT WITH APREMILAST IN DERMATHOLOGICAL DISEASES

C. PASTOR MONDÉJAR[1], C. INISTA NAVALÓN[1], A. MARTINEZ SOTO[1], P. ORTIZ FERNANDEZ[1], P. FERANDEZ-VILLACAÑAS FERANDEZ[1], I. SALAR VALVERDE[1], L. RENTERO REDONDO[1], E. URBIETA SANZ[1].
[1]HOSPITAL GENERAL UNIVERSITARIO REINA SOFÍA, PHARMACY, MURCIA, SPAIN.

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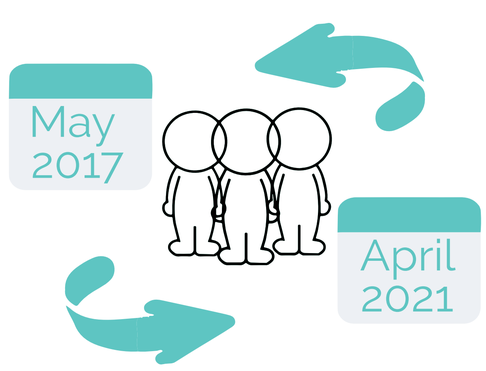
BACKGROUND AND IMPORTANCE

Apremilast is a selective inhibitor of type 4 phosphodiesterase taken orally indicated in psoriasis and psoriatic arthritis whose response should be evaluated at 24 weeks of treatment.

AIM AND OBJECTIVES

The aim of this study was to analyse the causes of secukinumab's treatment discontinuation.

MATERIAL AND METHODS

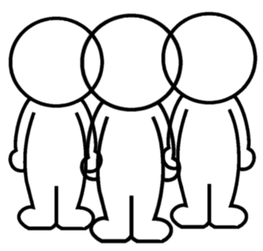


Data collected:
-Dispensations
-Diagnose
-Causes of treatment discontinuation
-Sex, age

RESULTS

50% Men

(53,4 ±11.32) years



n=32

84,4% naïve

n=9

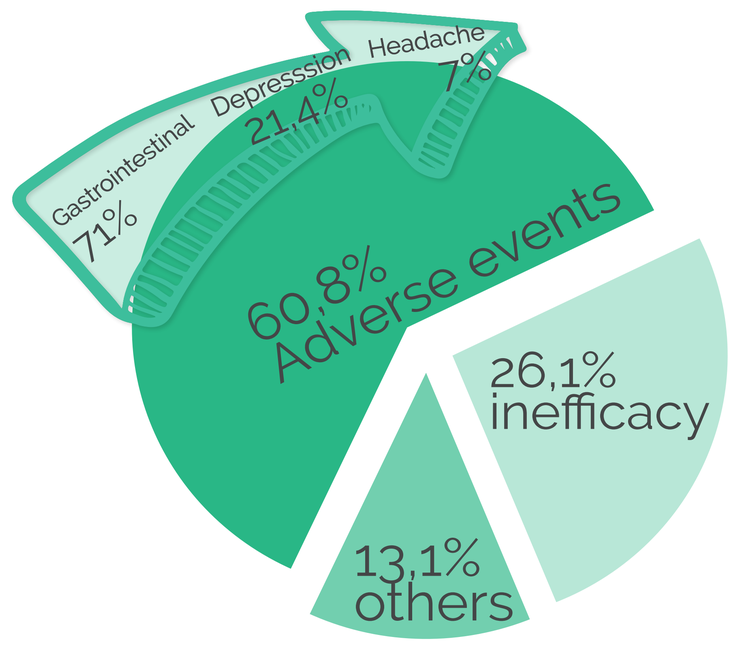
16 <24 weeks 1

5 <24-52 weeks 3

11 >52 weeks 7

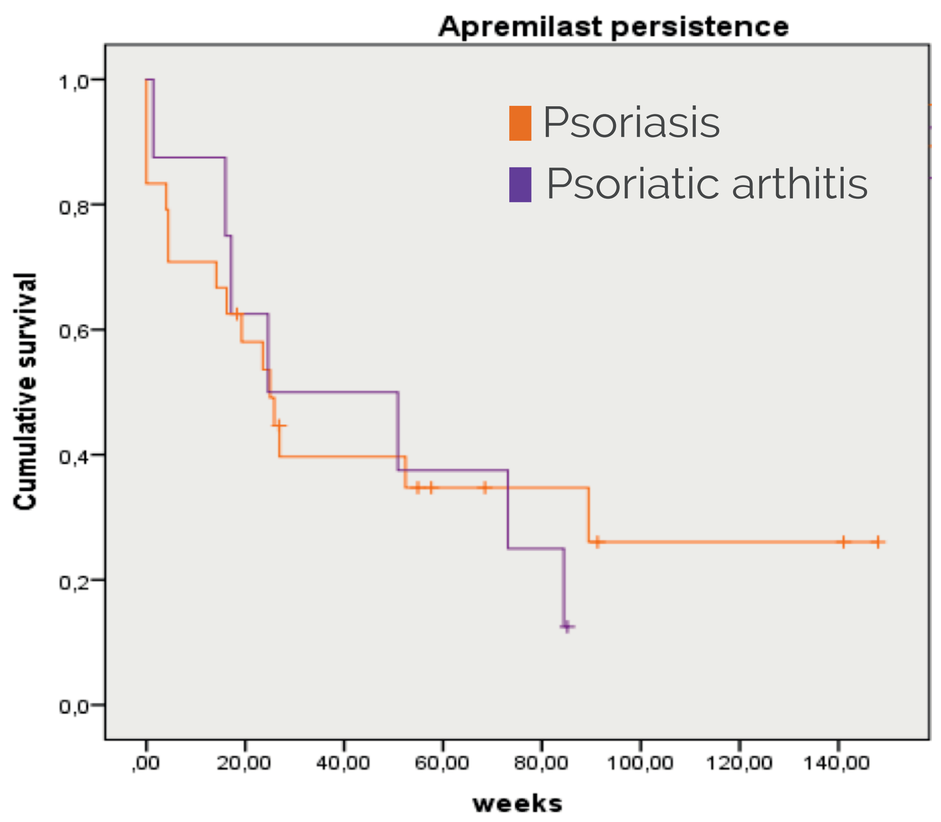
n=23

71,8%



Causes for apremilast treatment discontinuation

The persistence of apremilast was 52.68 weeks (IC 95% 32.85-72.44). 50% of patients discontinued treatment before completing 24 weeks of treatment due to adverse events (75%) or inefficacy (25%). The rest of the patients achieved at least 24 weeks of treatment (5 < 52 weeks and 11 (34.7% of the total) were treated > 52 weeks). 9 patients (28.1%) continuing treatment at the end of the study, being 7 of them treated for more than 52 weeks .



CONCLUSIONS AND RELEVANCE

There is a high prevalence of adverse events with apremilast discontinuation, follow by inefficacy. However, patients who have good tolerance also achieve a high persistence showing the need to select patients who may take benefit of apremilast.

REFERENCES

Paul C, CatherJ, GooderhamM et all. Efficacy and safety of apremilast, an oral phosphodiesterase 4 inhibitor, in patients with moderate-to-severe plaque psoriasis over 52weeks: a phaseIII, randomized controlled trial (ESTEEM 2). Br J Dermatol. 2015 Dec;173(6):1387-99.