REAL CLINICAL PRACTICE RESULTS OF INTERLEUKIN23 BLOCKERS IN REFRACTORY PSORIASIS

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BACKGROUND

Risankizumab and guselkumab are anti-interleukin-23 monoclonal antibodies used for moderate to severe psoriasis (msPs).

AIM

To evaluate the effectiveness and safety of interleukin-23 blockers in patients with msPs refractory to other biological agents in clinical practice.

MATERIAL AND METHODS

Patients



msPs receiving risankizumab or guselkumab and previously treated with other biological agents

DATA: Electronic medical history and Farmatools® application

- Age
- Sex
- Previous biological treatments
- Anti-interleukin-23 monoclonal antibodies used
- Therapy duration
- Baseline Psoriasis Area and Severity Index (PASI)

Effectiveness endpoint: PASI90 (≥90% reduction from baseline PASI) at 16 and 52 weeks

Effectiveness

Safety

Endpoints: adverse events (AE) and treatment withdrawals associated with AE.

Schemes

Guselkumab: 100 mg by subcutaneous administration at weeks 0 and 4, followed by a maintenance dose of 100 mg every 8 weeks. Risankizumab: 150 mg by subcutaneous injection at weeks 0 and 4, followed by a maintenance dose of 150 mg every 12 weeks.

RESULTS

- **Patients**: 37 patients
- Sex: 40% of patients were female and 60% were male
- Age: median of 48 (28-82) years.
- Previous biological treatments: median number of previous therapies was 4 (1-6).
- Most frequent previous biologic treatments:
 - \rightarrow 94.3% adalimumab
 - \rightarrow 88.6% etanercept
 - \rightarrow 77.1% ustekinumab
- Duration of interleukin-23 blocker treatment: median of 12 (1-31) months.
- Regimens of interleukin-23 blockers :
 - \rightarrow 65.7% guselkumab
 - → 34.3% risankizumab
- **Baseline PASI:** Median of baseline PASI values was 13 (7-21)

Safety:

 \rightarrow <u>AE:</u> 17.1% of patients. \rightarrow Total of AE: 14. Distribution: 5 hypercholesterolemia, 3 hypertriglycerdidemia, 2 hypertransaminemia, 2 hyperglycemia, 1 albuminuria and 1 non-alcoholic fatty liver. \rightarrow <u>No treatment withdrawals associated with AE</u> were observed.







CONCLUSION

The effectiveness of anti-interleukin-23 antibodies increased over time in our patients with msPs refractory to other biological agents.

Almost three-quarters of patients reached PASI90 at week 52. Safety was acceptable, without treatment withdrawals



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