

REAL-WORLD PERSISTENCE OF RISANKIZUMAB TREATMENT IN ITS APPROVED INDICATIONS

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BACKGROUND AND IMPORTANCE



- Risankizumab is an anti-interleukin-23 monoclonal antibody used in psoriasis (PsO), psoriatic arthritis (PsA), Crohn's disease (CD), and ulcerative colitis (UC).
- To evaluate treatment in a real-world setting, drug persistence is a commonly used measure

AIM AND OBJECTIVES

- Calculate Risankizumab treatment persistence in its different indications: PsO, PsA, CD and UC.

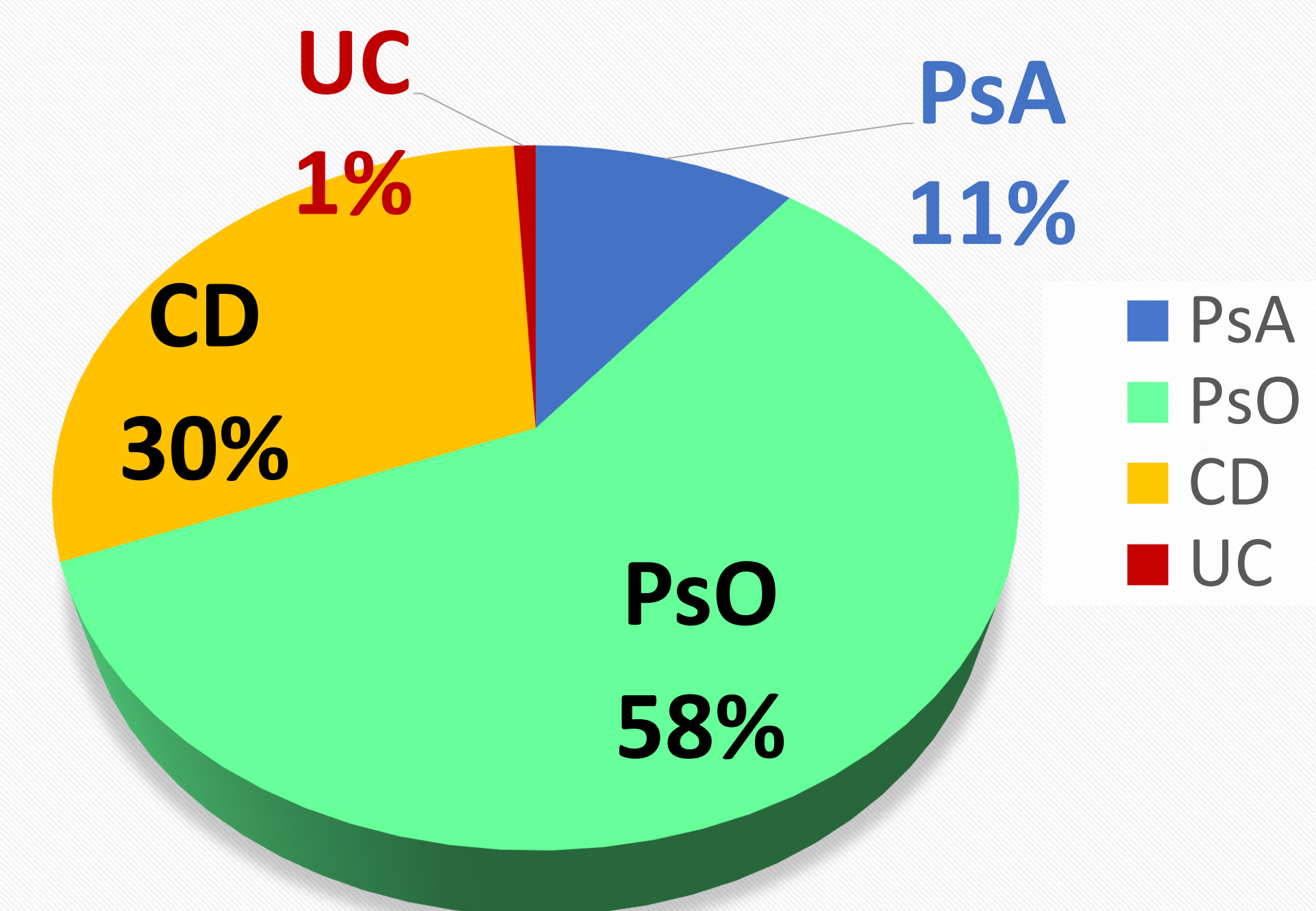
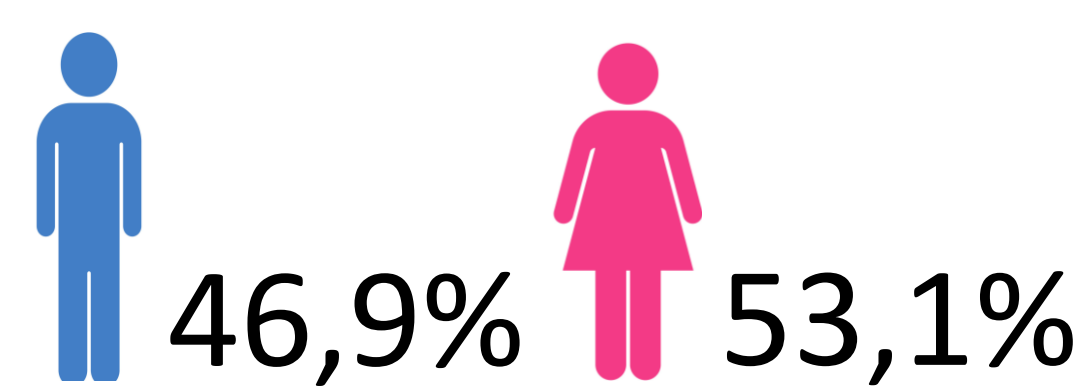


MATERIALS AND METHODS

- Observational, retrospective and descriptive study (Mar 2021 - Jul 2025) of Risankizumab persistence in its different indications. Drug persistence was assessed at 6, 12, and 24 months, both overall and by indication and line of treatment (early vs later lines (>3 lines)). Excel® was used for data analysis.

RESULTS

- A total of 113 patients were studied, the median age was 50 (16-84) years
- During the study 17.6% (n=20) discontinued treatment
- Median duration of treatment was 15 (2-28) months
- No patients discontinued treatment due to intolerance

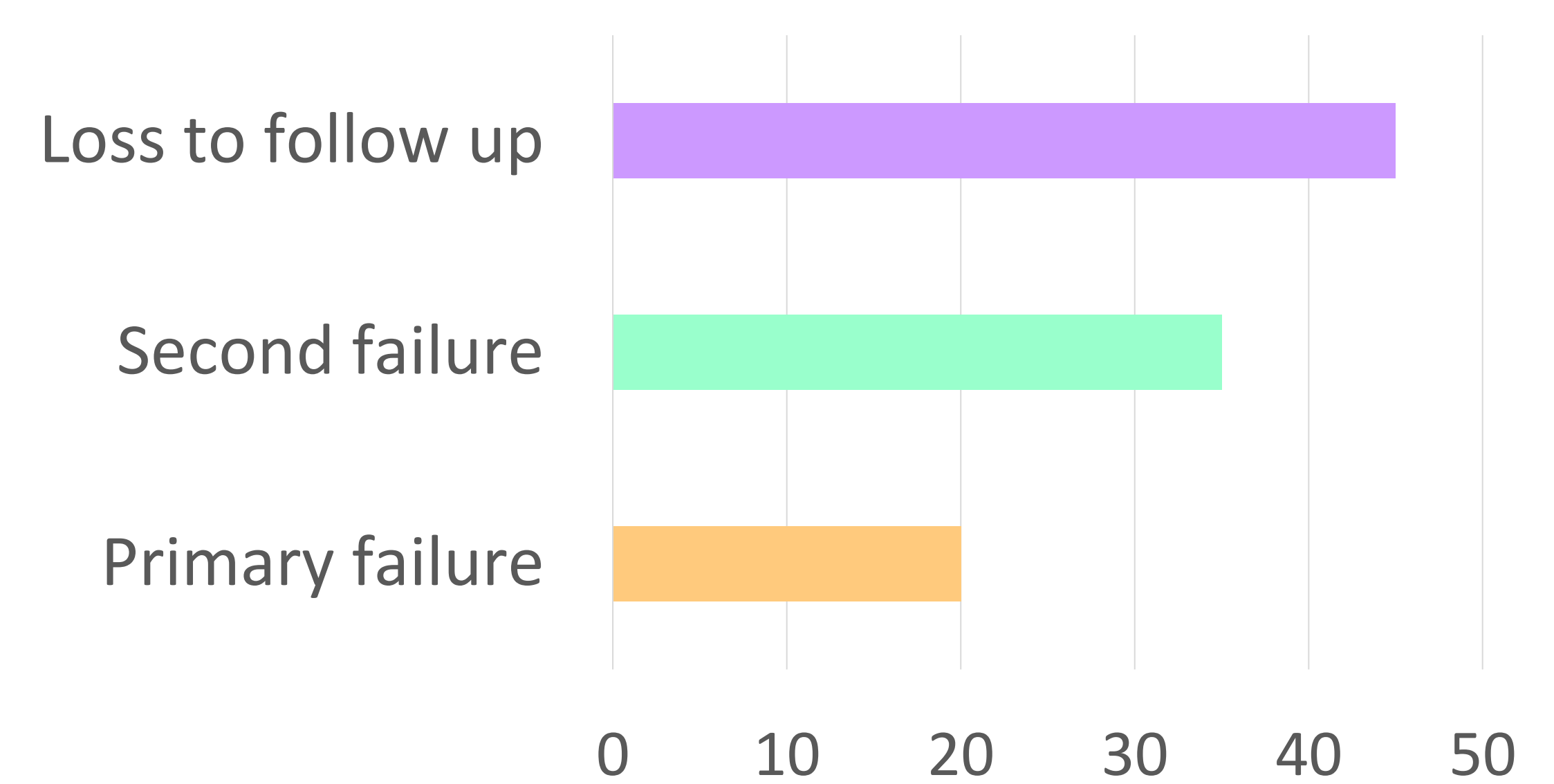


Risankizumab prescriptions

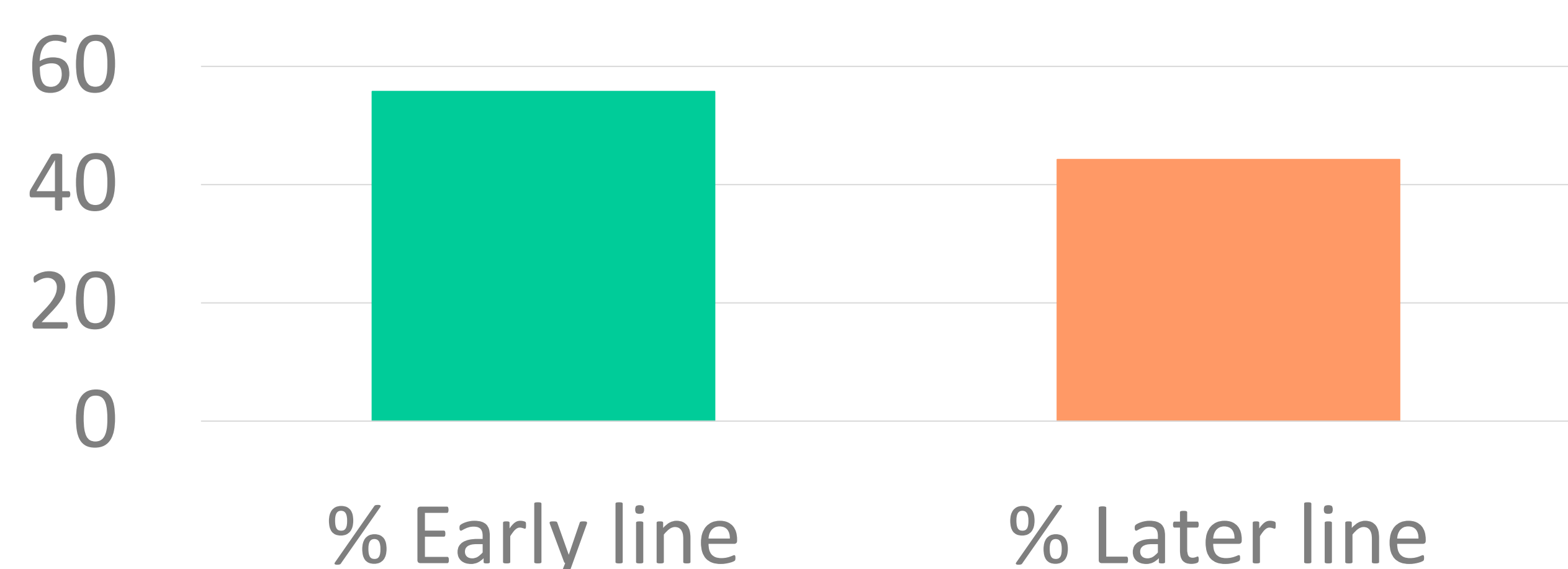
Drug persistence according indication and line of treatment

Indication	Treatment lines	Drug persistence		
		6 months	12 months	24 months
PsO	Earlier-lines	90%	75%	40%
	Later-lines	96.2%	92.3%	57.7%
PsA	Earlier-lines	80%	60%	0%
	Later-lines	71.4%	42.9%	28.6%
CD	Earlier-lines	77%	55.9%	0%
	Later-lines	77%	47.1%	0%
All indications	Earlier-lines	84.1%	65.1%	25.4%
	Later-lines	84%	70%	32%

Causes of discontinuation



Distribution of Patients Across Treatment Lines



CONCLUSION AND RELEVANCE

The greatest drug persistence was observed in patients with psoriasis. Results regarding initiation in early or late treatment lines are contradictory. Further studies are needed to confirm these findings



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