Persistence of Inhibitors of interleukin-23 (anti-IL-23) for the treatment of moderate-to-severe psoriasis (msPs) in the routine clinical practice conditions.



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BACKGROUND AND IMPORTANCE

Inhibitors of interleukin-23 (anti-IL-23) have emerged as safe and effective options for the treatment of moderate-to-severe

psoriasis (msPs).

OBJECTIVES

To evaluate the persistence of anti-IL-23 (guselkumab and risankizumab) in patients with msPs. Secondarily, these patients'

clinical outcomes and health-related quality of life (HRQL) and the safety profile were also assessed.

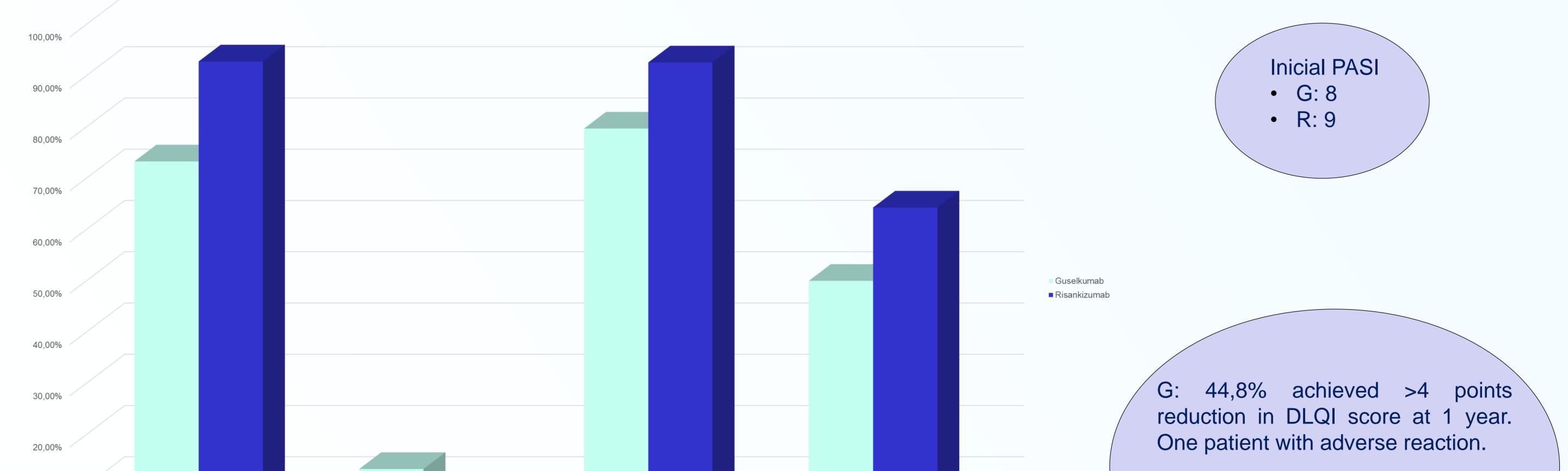
METHODS

Retrospective observational study from January 2019 to September 2022. Patients with msPs receiving anti-IL-23 were included. Demographic (sex, age) and clinical data (previous biological treatments, therapy duration and baseline Psoriasis Area and Severity Index (PASI)) were collected from the digital medical record. Non-persistence was defined as treatment discontinuation or a treatment gap > 90 days. The cumulative probability of treatment persistence was analysed by Kaplan Meier method. Secondary endpoint: PASI90 response at 1 year, change in HRQL through dermatology life quality index

(DLQI) at 1 year, and safety profile.

RESULTS

•44 patients were included (26 women), with a median age of 53,5 years



10,00%				
0,00%	patients remained treatment	extended dose interval	persistance at 1 year	PASI90 at 1 year
Guselkumab	73,30%	13,30%	79,70%	50%
Risankizumab	92,80%	7,10%	92,60%	64,30%

R: 71,4% % achieved >4 points reduction in DLQI score at 1 year. . Two patient with adverse reaction.

5PSQ-116

CONCLUSION

Our cohort shows a moderate persistence rate and PASI improvement at 1 year with Guselkumab and a

moderate benefit in improving HRQL. High persistence rate and moderate PASI improvement was reached with

Risankizumab and a substantial improvement in HQRL. No important adverse reaction were found, without

treatment withdrawals.

