EFFECTIVENESS AND SAFETY OF BIOLOGICAL THERAPY OPTIMISATION IN CHRONIC PLAQUE PSORIASIS

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BACKGROUND

Biologic drugs have demonstrated efficacy and safety in the treatment of chronic plaque psoriasis. Frequently, label doses tend to be reduced in clinical practice when a sustained response has been reached.

PURPOSE

To assess the effectiveness and safety related to the optimisation of biological therapies in mild to moderate psoriasis (mmP) patients.

MATERIAL AND METHODS

A prospective observational study of patients with mmP receiving treatment with optimised doses of etanercept(ETA), adalimumab(ADA) or ustekinumab(UST).

Patients included

Patients with response maintained for at least 6 months (defined as maintenance of at least 75% improvement in psoriasis area and severity index (PASI75) reached with standard doses).

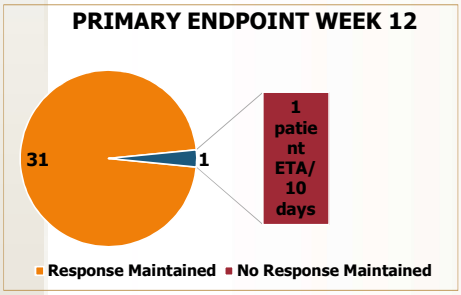
Endpoints effectiveness

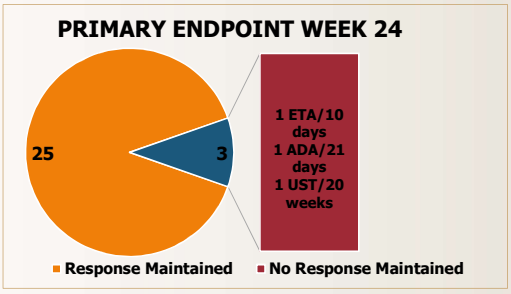
Primary endpoint	• Proportion of patients with response maintained (ie, PASI reached with standard doses) at weeks 12 and 24 after dose reduction.
Secondary endpoints	• Proportion of patients with a maintained response distributed by drug • Treatment regimen • Quality of life, assessed by DLQI (score from 0 (no impact of skin disease on quality of life) to 30 (maximum impact)) at weeks 0 and 24. • The main adverse reactions.

Treatment regimens

ETA	50mg/10 days	50mg/14 days	50mg/30 days
ADA	40mg/21 days	40mg/28 days	
UST	45mg/16 weeks	45mg/20 weeks	

RESULTS





Quality of life

Mean DLQI after and before dose optimisation was maintained in 1.
At week 24, DLQI was above 10 in 1 patient.

Adverse reactions

There were no adverse drug events

Patients' treatment distribution

ETA (N=11)	50mg/10 days (N=9)	50mg/14 days (N=2)
ADA (N=17)	40mg/21 days (N=12)	40mg/28 days (N=5)
UST (N=4)	45mg/16 weeks (N=3)	45mg/20 weeks (N=1)

CONCLUSION

- Efficacy was maintained after biological therapy dose optimisation in most of the mmP patients.
- Adalimumab was the most frequent biological drug optimised, followed by etanercept and ustekinumab.
- Safety and quality of life after drug dose reduction was maintained in most patients.