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PERSISTENCE OF BIOLOGICAL DISEASE-MODIFYING DRUGS AND PHOSPHODIESTERASE-4- INHIBITORS IN PATIENTS WITH PSORIATIC ARTHRITHIS

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Background and Importance

- Persistence provides information on treatment effectiveness, durability, and tolerance in real-world patient populations.
- Little is known about the persistence of treatments used in Psoriatic Arthrithis (PsA).

Aim and Objectives

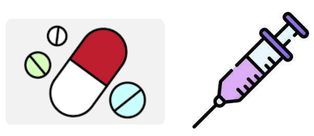
- To compare the persistence of biological disease-modifying drugs **(**bDMARDs) and phosphodiesterase-4-inhibitors (PD-4-Is) in PsA patients.
- To investigate the reasons for treatment discontinuation.

Materials and Methods

- ✓ Longitudinal, retrospective, and observational study.
- ✓ PsA patients who initiated bDMARDs (**anti-TNF**,**anti-IL12/23**, **anti-IL17** and **anti-IL23**) and **PD-4-Is.**
- ✓ January 2014 -June 2022 (with follow-up until December 2023).

Variables collected: age, gender, treatment line, treatment start and end dates, reasons for discontinuation, treatment-naive and adherence (medication possession ratio >90%).

Persistence
(period from initiation to discontinuation)

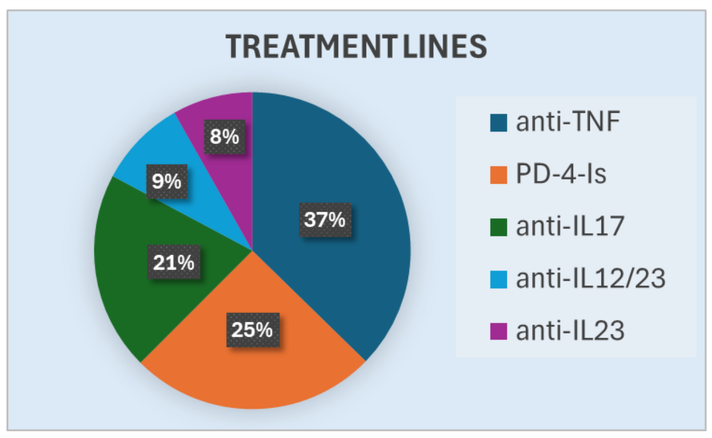


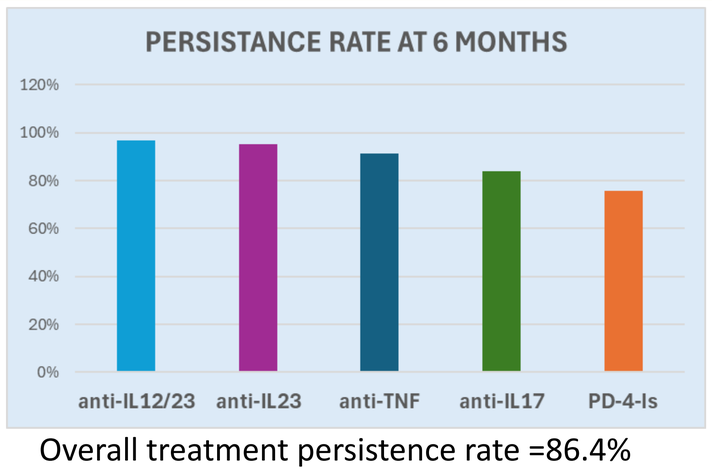
- -Was also calculated as a dichotomous variable at 6 months from the treatment initiation.
- **-** The permissible gap (threshold of a period without treatment) was 60 days.
- - Persistence after six months was compared using the χ^2 test.
- -Kaplan-Meier survival analysis was performed, and differences were evaluated using the log-rank test.
- -Adjusted risk of discontinuation was assessed with Cox Proportional Hazard models.
- -Statistical analysis was conducted with SPSS®V27.0.

Results

N=206 patients
47.6% were men
53.2±11.6 years.

354 treatment lines were recorded



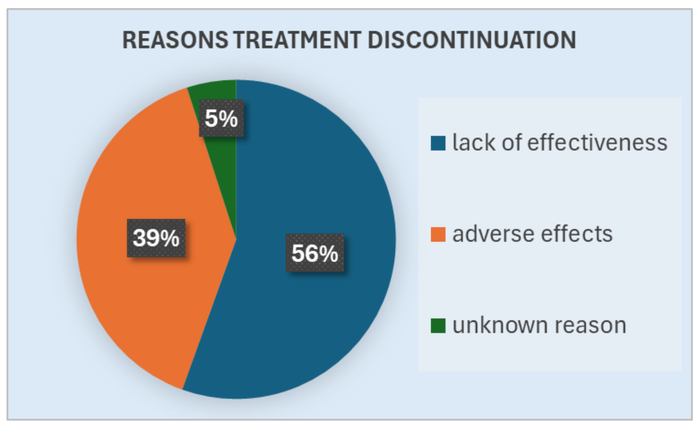


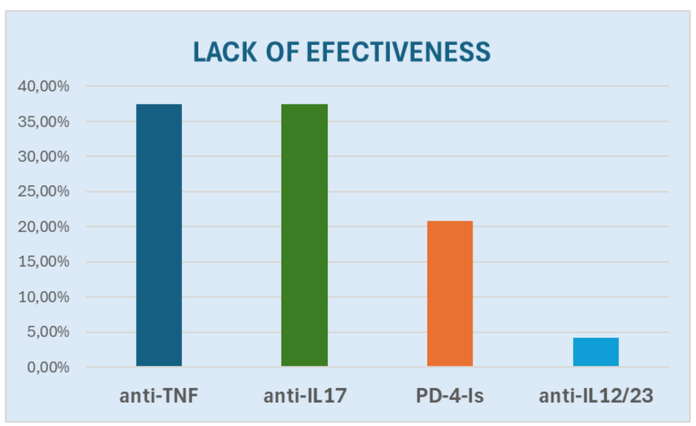
Overall treatment persistence rate =86.4%

- ✓ Mean overall persistence duration was 1542 days (CI 95% 1376-1707).
- ✓ According to Cox regression, the mean persistence was 1626 (CI 95% 1436-1815) days for bDMARDs and 1086 days (CI95% 863-1310) for PD-4-Is.
- ✓ Men were more persistent [HR 1.41 (CI95% 1.04-1.93), p<0.05].
- ✓ bDMARDs were more persistent [HR 1.11 (CI95% 1.02-1.21) p<0.05].

13.6% (n=46) PsA patients discontinued treatment before 6 months.

All adverse effects associated with PD-4-Is.





Conclusion and Relevance

- Patients with greater treatment persistence are those treated with bDMARDs and are predominantly male.
- Lack of effectiveness were the main reason for early discontinuation of treatment.
- All patients who discontinued treatment for adverse effects were treated with PD-4-Is.

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