PSORIASIS

DURABLE ABSOLUTE PSORIASIS AREA AND SEVERITY INDEX IMPROVEMENT THROUGH 52 WEEKS OF RISANKIZUMAB TREATMENT: AN INTEGRATED ANALYSIS OF PATIENTS WITH MODERATE-TO-SEVERE PLAQUE PSORIASIS

M Gooderham [1] - A Pinter [2] - H Photowala [3] - T Zhan [4] - B Strober [5]

Skin Centre For Dermatology, Dermatology, Peterborough, Canada [1] - Goethe-universität, Department Of Dermatology, Frankfurt, Germany [2] - Abbvie, Inc., Global Medical Affairs, Dermatology, North Chicago, United States [3] - Abbvie, Inc., Statistical Innovation, Statistical Sciences, Dss, North Chicago, United States [4] - University Of Connecticut, Department Of Dermatology, Farmington, United States [5]

Introduction: Risankizumab is a humanized immunoglobulin G1 monoclonal antibody that binds to the p19 subunit and selectively inhibits interleukin-23, a cytokine that plays a key role in the development and maintenance of psoriatic lesions. UltIMMa-1 (NCT02684370) and UltIMMa-2 (NCT02684357) were 2 double-blind, randomized, placebo- and ustekinumab-controlled, phase 3 trials that compared the efficacy and safety of risankizumab and ustekinumab through 52 weeks of treatment in patients with moderate-to-severe plaque psoriasis.

Objective: To evaluate efficacy responses based on absolute Psoriasis Area and Severity Index (PASI) improvements using integrated data from UltIMMa-1 and UltIMMa-2.

Materials and Methods: Patients were randomized to receive either risankizumab 150 mg, or ustekinumab 45 or 90 mg (weight-based per label). The proportion of patients achieving absolute PASI response thresholds of 0, ≤ 1, and ≤ 3 at week 16 and 52 were calculated.

Results: Baseline demographics and disease characteristics were generally similar between the risankizumab (n=598) and ustekinumab (n=199) treatment arms, (baseline PASI, 20.6 and 19.2, respectively). At week 16, a higher proportion of patients receiving risankizumab achieved the absolute PASI response thresholds of PASI=0 (43.1% vs 18.1%), PASI ≤ 1 (58.9% vs 30.2%), and PASI ≤ 3 (82.9% vs 60.8%), P<.001 for all; compared with patients receiving ustekinumab. These higher rates of response were durable at week 52. The proportion of patients achieving absolute PASI response thresholds remained higher with risankizumab than with ustekinumab (PASI = 0, 57.9% vs 25.6%; PASI ≤ 1, 69.9% vs 38.7%; PASI ≤ 3, 87.1% vs 59.8%, P<.001 for all).

Conclusions: Risankizumab treatment provided significantly higher and durable rates of efficacy based on absolute PASI = 0, PASI ≤ 1, and PASI ≤ 3 thresholds through 52 weeks compared with ustekinumab.