PSORIASIS

INFLIXIMAB IN TREATMENT OF MODERATE-TO-SEVERE PLAQUE PSORIASIS IN CHINESE PATIENTS

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Background: TNF-α is thought to play a substantial role in the pathogenesis of psoriasis. Infliximab is highly effective in the treatment of moderate-to-severe plaque psoriasis.

Objectives: To report the experience of infliximab in the treatment of moderate-to-severe plaque psoriasis in Chinese patients.

Methods: Patients with moderate-to-severe psoriasis treated with infliximab between May 2014 to December 2017 were enrolled into this study. Efficacy and safety were recorded throughout the time period when patients were on infliximab therapy. The measures of disease severity were recorded with PASI and PGA.

Results: 12 patients were enrolled. All patients had moderate-to-severe disease with the baseline PASI score of 23.50±6.64 (mean±SD) and had received at least one systemic therapy previously. Significant improvement in disease was seen with infliximab with 50% of the patients attaining PASI 50 response at week 2. At week 14, 90% of patients attained PASI 75 response and 40% attained PASI 90 response. At week 22, 80% of patients maintained the PASI 75 response while the proportions of patients attaining PASI 90 increased to 60%. The adverse events reported were acute infusion reaction, delayed hypersensitivity reaction, neutropenia and new onset of psoriatic arthritis (one patient each). Four patients in our study switched the treatment to other TNF-α antagonists due to loss of response or intolerance to infliximab before or after week 22. All the patients who switched the treatment had good response to the respective treatment after switching.

Conclusions: Infliximab was seen to be highly effective and safe in the patients with moderate to severe plaque psoriasis. 2 patients in our study have been in infliximab treatment for 24 months with good response and free of adverse event. Notably, good response after switching the treatment from infliximab to either etanercept or adalimumab explains the specific mechanism of action of different TNF-α antagonists.