ABSTRACT BOOK ABSTRACTS



PSORIASIS

PATTERNS OF USE OF SYSTEMIC THERAPIES IN PSORIASIS PATIENTS IN AREAL-WORLD SETTING IN ITALY.

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Introduction: Real-world data on the use of systemic therapies in moderate-to-severe psoriasis (PSO) are limited in Italy.

Objectives: To estimate the incidence and prevalence of PSO and to examine the pharmacoutilization profile and treatment patterns in Italy.

Methods: This is a retrospective data analysis using administrative databases of healthcare resources consumption from four Italian Local Health Units from January 2010 to March 2017. Drugs available on the Italian market at the time of analysis were: etanercept, adalimumab, golimumab, certolizumab, infliximab, secukinumab, ustekinuamb and apremilast. Eligible patients were defined by at least one prescription of a conventional (cs), biological (b) or targeted (ts) Disease Modifying Antirheumatic Drug (DMARD) or a topical therapy for PSO. Only patients with b/tsDMARD were included in the study. For each patient, the date of first prescription of a b/tsDMARD during inclusion period was defined as index date (ID); patients were characterized during a 12-month period before ID and followed for 12 months after ID.

Results: Within a population of 3,259,390 inhabitants, 146,828PSO patients were identified (incidence 0.33%, prevalence 4.5%). This analysis includes 1,211 patients with documented systemic therapy; the most frequently b/tsDMARDs prescribed at ID were adalimumab (n=409; 33.8%), etanercept (n=367; 30.3%), secukinumab (n=166; 13.7%) and ustekinumab (n=148; 12.2%). During the characterization period 49.2% (n=596) of patients received csDMARDs, 34.2% (n=414) b/tsDMARDs and 48.8%(n=591) topicals.

Conclusions: This analysis provides a snapshot of patterns of drug utilization for PSO in an Italian real-world settingand estimates a prevalence of 4.5% for PSO in the regions analyzed. Preliminary results indicate that, yearly, around 10% of patients treated with b/tsDMARDs need a therapeutic switch, while one third requires an add-on therapy. This











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findings highlight that unmet therapeutic needs still exist in clinical practice and emphasize the need for additional therapeutic options for patients affected by moderate-to-severe PSO.



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