

A new ERA for global Dermatology 10 - 15 JUNE 2019 MILAN, ITALY

PSORIASIS

THE LONGTERM SAFETY AND RATE FREQUENCY OF NEW ONSET INFLAMMATORY BOWEL DISEASE IN PATIENT WITH PSORIASIS TREATED WITH IL17 INHIBITORS: OUR EXPERIENCE

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BACKGROUND: Psoriatic patients are at increased risk of developing inflammatory bowel disease (IBD). The use of interleukin (IL)-17 inhibitor has been associated with exacerbations of IBD in patients with psoriasis. The prescribing information for antagonists of IL17 (secukinumab and ixekizumab) include warnings/precautions of use in patients with a personal or familiar history of IBD.

OBSERVATION: Since year 2016, 145 psoriasis patients afferent at our dermatology unit started treatment with IL17 inhibitors. Secukinumab is the first IL17 inhibitor used in Italy to treat psoriasis and a year later ixekizumab was available for treatment. In our experience in these two years of exposure, we did not observed new onset of IBD.

KEY MESSAGE: Interleukin (IL)-17 is a pro-inflammatory cytokine that demonstrated to be involved in the pathogenesis of IBD. However, an IL-17A antagonist has been associated with worsening symptoms compared to placebo in clinical trials of Crohn's disease. From our point of view, secukinumab and ixekizumab resulted safe in long-term treatment. The risk of new-onset of IBD in patients being treated with IL 17 antagonists for other conditions is controversial yet.





