



INFLAMMATORY SKIN DISEASES (OTHER THAN ATOPIC DERMATITIS & PSORIASIS)

COMPLETE RESPONSE IN MODERATE-SEVERE PSORIASIS WITH APREMILAST, CASE REPORT

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Background: Psoriasis is a chronic inflammatory skin disease with a great impact on the patient quality of life. Due to advances in the understanding of psoriasis pathogenesis, several targeted medications against specific components of the immune system, have been currently developed. These therapies have revolutionized the treatment of psoriasis. Apremilast (APR), an oral phosphodiesterase 4 (PDE4) inhibitor, has been shown to be efficacious in the treatment of moderate to severe plaque psoriasis (ESTEEM 1 and 2) in randomized, placebo-controlled, phase 3 trials. Safety of APR was assessed over 3 years in these studies. Through inhibition of PDE4, apremilast causes an elevation of cyclic adenosine monophosphate, a natural intracellular secondary messenger that functions as a modulator of inflammatory responses, thereby decreasing production of proinflammatory mediators, such as tumor necrosis factor (TNF), interleukin (IL)-23, and interferon gamma, and increasing production of antiinflammatory mediators, such as IL-10. Apremilast has been shown to decrease proinflammatory cytokine production.

Observation: case report: We present a 74-year-old woman with hypertension, hypercholesterolemia and intensely pruritic, moderate to severe plaque psoriasis, with no associated psoriatic arthritis or family history of psoriasis. He had received systemic treatment with methotrexate, without effect and with poor tolerance. Apremilast was started at the recommended doses administered orally. The treatment with apremilast in our patient, with moderate to severe psoriasis, was very effective, with slow clearance, a sustained effect and a favorable safety profile. He reached PASI 100 (psoriasis area and severity index), or complete clearing at week 12. He remains free of any symptoms of the disease at 24 weeks time, and no side effects were observed.

Key message: apremilast is an effective and safe treatment that achieves high clearance rates and pruritic control as monotherapy, in some patients with moderate to severe psoriasis.

