PSORIASIS

SNA-120, A NOVEL TOPICAL NON-STEROIDAL THERAPY FOR PSORIASIS AND ASSOCIATED PRURITUS THAT TARGETS THE NGF/TRKA PATHWAY: RESULTS FROM A MULTICENTER PHASE 2B STUDY

Kristina Callis Duffin [(1)] - Sonja Ständer [(2)] - Zoe Draelos [(3)] - Gurpreet Ahluwalia [(4)] - Paul Lizzul [(5)]

University Of Utah, Dermatology, Salt Lake City, United States [(1)] - University Hospital, Dermatology/ Interdisciplinary Center For Chronic Pruritus (kcp), Münster, Germany [(2)] - Dermatology Consulting Services, President And Principal Investigator, High Point, United States [(3)] - Sienna Biopharmaceuticals, Executive Director, Westlake Village, United States [(4)] - Sienna Biopharmaceuticals, Chief Medical Officer, Westlake Village, United States [(5)]

Background: Psoriasis is a chronic relapsing inflammatory dermatosis lacking novel topical non-steroidal chronic treatment options. The NGF/TrkA axis, important for neurogenic inflammation, keratinocyte proliferation, and pruritus in psoriasis, is targeted by SNA-120 (pegcantratinib), a topical TrkA inhibitor designed using proprietary Topical by Design™ technology to achieve high local drug concentration in the skin, but with low systemic exposure.

Objective: To evaluate SNA-120 for treatment of psoriasis and associated itch.

Materials and Methods: This multicenter, randomized, double-blind, vehicle-controlled phase 2b study enrolled 208 subjects (≥18 years) with mild-to-moderate psoriasis and at least moderate itch (worst itch ≥5 on I-NRS). Subjects were randomized to BID application of SNA-120 (0.05% or 0.5%) or vehicle for 12 weeks. The primary endpoint was change on the I-NRS from baseline to Week 8. Prespecified key secondary endpoints included the IGA ≥2-grade composite and PASI-75 at Week 12. Additional psoriasis measures and adverse events (AEs) were evaluated.

Results: Mean reduction on the I-NRS was 4.2 (57%) with SNA-120 (0.05%) vs 3.9 (55%) with vehicle (p=0.362). SNA-120 (0.5%) showed similar results. SNA-120 (0.05%) demonstrated statistically significant and clinically meaningful improvements in psoriasis at Week 12: 29% vs 13% of vehicle-treated subjects achieved the IGA ≥2-grade composite response (p=0.036) and 27% vs 13% achieved PASI-75 (p=0.045). Both the IGA and

PASI-75 results remained statistically significant at Week 14. Results for SNA-120 (0.5%) on the IGA and PASI-75 were not statistically significant. SNA-120 was well tolerated. Few treatment-related AEs were reported; no serious AEs occurred.

Conclusions: Adults treated with SNA-120 (0.05%) achieved statistically significant and clinically meaningful improvements on prespecified psoriasis regulatory endpoints. Itch was substantially reduced from baseline in both groups; however, the primary endpoint was not met. Targeting the NGF/TrkA pathway with SNA-120 may represent a novel topical non-steroidal treatment option for the majority of patients with psoriasis.