Real life experience with Ixekizumab in PsA

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IXEVOLUTION
un passo avanti nella gestione delle spondiloartriti

Disclosures

AbbVie

Amgen

Bristol-Myers-Squibb

Celgene

Eli-Lilly

Janssen

Merck-Sharp & Dohme

Novartis

Pfizer

UCB Pharma

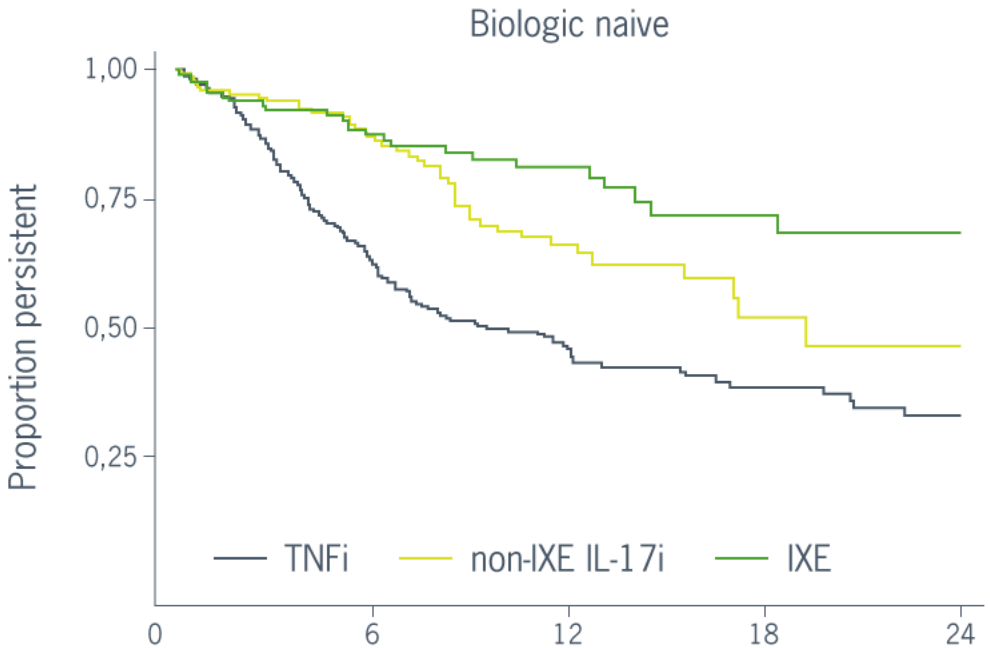
Drug survival of Ixekizumab, TNF inhibitors, and other IL-17 inhibitors in Real-World patients with psoriasis: The Corrona Psoriasis Registry

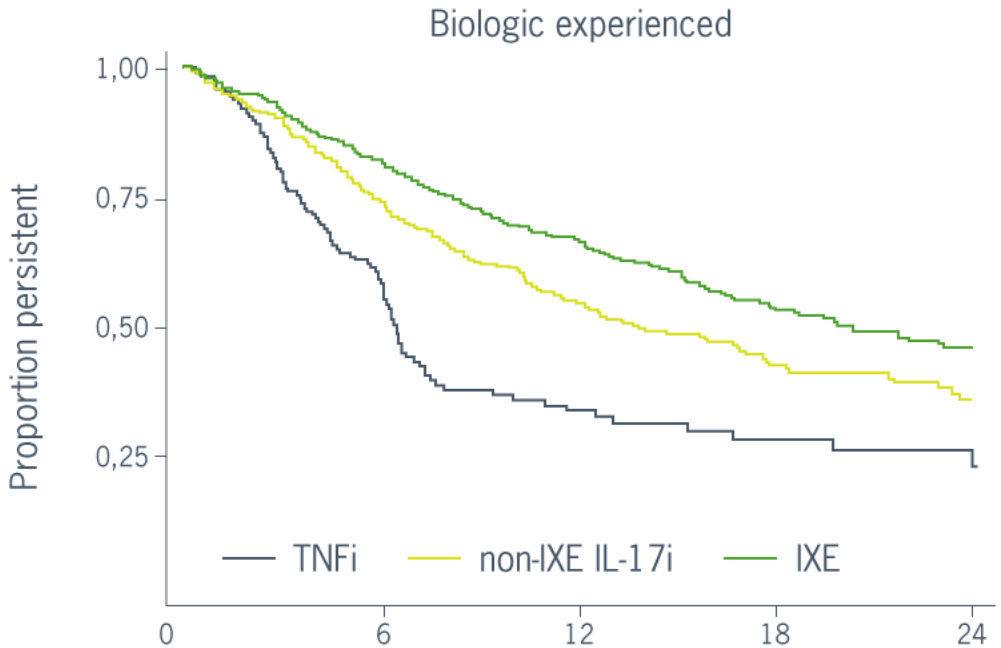
- Participants included adult PsO patients enrolled in the Corrona Psoriasis Registry who initiated IXE, TNFi, or other IL-17i
- Among the 1,604 drug initiations, 552 initiated IXE, 450 initiated TNFi, and 602 initiated other IL-17i

	Main analysis		Sensitivity analysis (subgroup with BSA>3 ,PASI>3 and IGA>1 at index)	
	12 month drug survival (95% CI)	24 month drug survival (95% CI)	12 month drug survival (95% CI)	24 month drug survival (95% CI)
Biologic-naïve				
ixekizumab	81% (72%-88%)	68% (54%-79%)	83% (72%-90%)	71% (56%-82%)
TNFi	46% (39%-52%)	33% (25%-41%)	50% (42%-57%)	33% (24%-43%)
non ixekizumab IL-17i	66% (56%-74%)	46% (30%-61%)	66% (54%-76%)	43% (25%-59%)
Biologic-experienced				
ixekizumab	65% (60%-70%)	46% (40%-42%)	67% (61%-73%)	45% (38%-53%)
TNFi	34% (26%-42%)	23% (15%-33%)	33% (23%-44%)	24% (14%-35%)
non ixekizumab IL-17i	54% (48%-59%)	36% (29%-43%)	55% (49%-61%)	38% (30%-45%)

Lockshin B, et al. Dermatol Ther. 2021

Drug survival of Ixekizumab, TNF inhibitors, and other IL-17 inhibitors in Real-World patients with psoriasis: The Corrona Psoriasis Registry





Real-world patients with PsO, initiators of ixekizumab had more prolonged drug survival than both initiators of TNFi and other IL-17i up to two years of follow-up

IXE patients: biologic-experienced, obese, had a higher prevalence of nail morphology, worked full-time, severe disease

Lockshin B, et al. Dermatol Ther. 2021

Clinical case 1

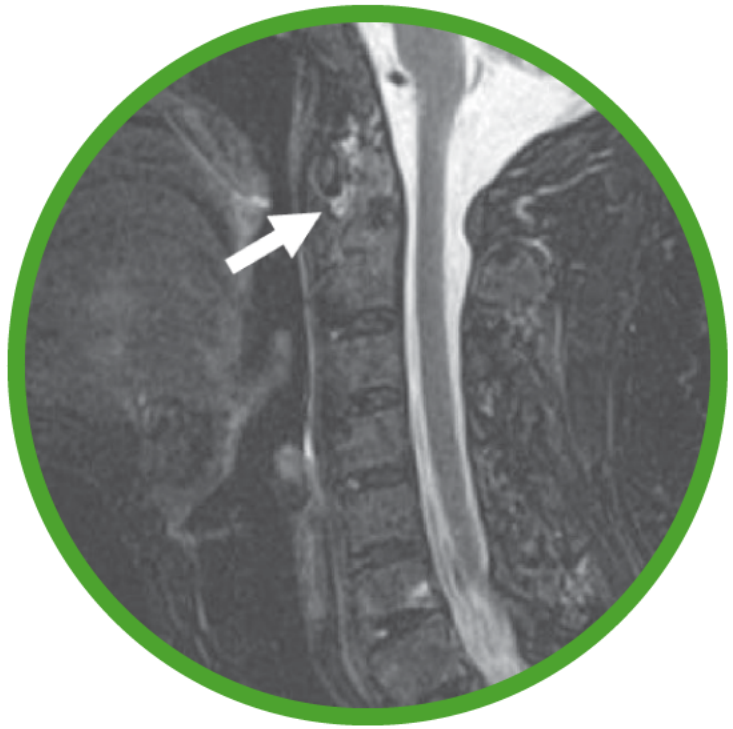
PsA 47 year-old men

At age 46: posterior cervical pain,

PASI, 39.4; SDAI, 12.0; BASDAI, 3.8

(VAS score for neck pain: 10), and BASMI 3.0

MRI of the cervical spine revealed **atlantoaxial arthritis**



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Clinical case 1

12 weeks after administration of IXE:

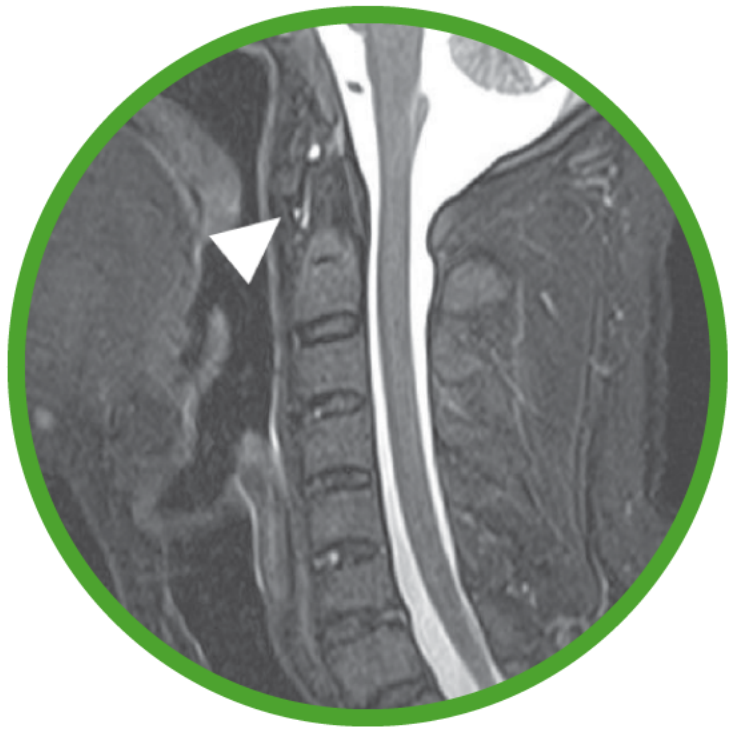
PASI, 4.0; SDAI, 5.0; and BASDAI 2.0

(VAS score for neck pain: 7.0),

BASMI scores remained unchanged

MRI of the cervical spine:

amelioration of atlantoaxial arthritis



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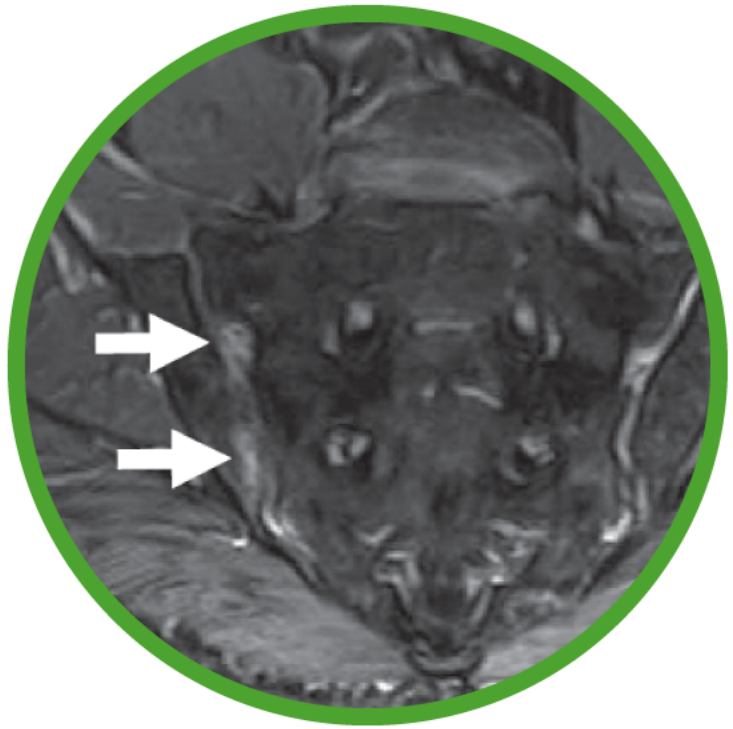
Clinical case 2

PsA 82-year-old men

Articular **ultrasonography** revealed **enthesitis** of the Achilles tendon

MRI of the sacroiliac joints revealed **sacroiliitis**



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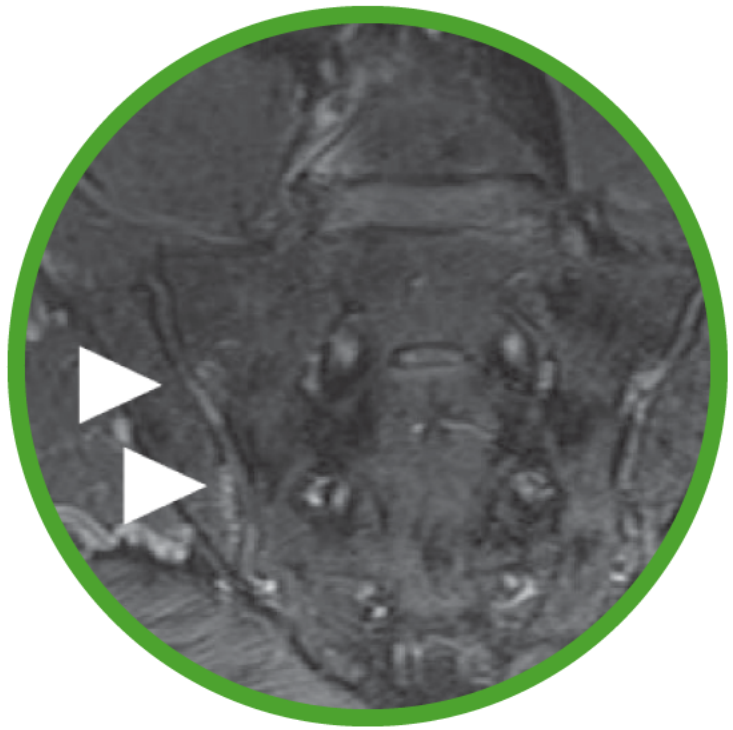
Clinical case 2

12 weeks of IXE Bio-naive

	0 w	12 w
PASI	6,7	1,0
SDAI	13,7	0,2
BASDAI	5,9	1,0
BASMI	3,0	3,0
VAS of neck pain	10,0	7,0



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Clinical cases conclusions

- Treatment recommendations

- There is lack of sufficient studies on the efficacy of IL-17i on spine lesions arising during PsA.

- IXE has high potency in different pattern in PsA

First-line

Elderly

Axial disease

Characteristics of the 2 cases

	Case 1	Case 2
Age (years), Sex	46, male	82, male
Weight (kg)	77,6	78,3
Body mass index (kg/m2)	26,9	28,1
Visceral fat area (cm2)	381	253
Disease duration of psoriasis (years)	20	20
Disease duration of PsA (years)	8	<1
Inadequate response to NSAID	yes	yes
Previous use of csDMARD		
Methotrexate	no	no
Salazosulfapyridine	no	no
Leflunomide	no	no
Cyclosporin A	yes	no
Previous use of PDE4i	no	no
Previous use of biological agent		
TNFi	yes	no
IL-17i	no	no
IL-12/23i	no	no
Previous use of traditional therapies (e.g. phototerapy, topical therapy)	yes	yes
Specific disease characteristics		
Axial spondyloarthritis	yes	yes
Peripheral arthritis	no	no
Dactylitis	no	no
Enthesitis	no	yes
Fingernail psoriasis	yes	no
Baseline disease activity and quality of life		
PASI	39,4	6,7
SDAI	12,0	13,7
BASDAI	3,8	5,9
BASMI	3,0	3,0
HAQ-DI	0,125	0,75

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Efficacy and safety of IXE in PsA: a retrospective, single-centre, observational study in a real-life clinical setting

- Assess **IXE efficacy and safety** on patients affected by **moderate-to-severe psoriasis** and **PsA** in clinical practice

- Retrospective, single-centre, real-life study

- **26 outpatients (GROUP A)** diagnosed with PsA and treated with IXE for a moderate-to-severe PsO that were placed in therapy at least **24 weeks before analysis**.
Among these patients, **17 (GROUP B) completed 48 weeks of treatment**.

V. Manfreda, MS Chimenti et al. Clin Exp Rheumatol 2020

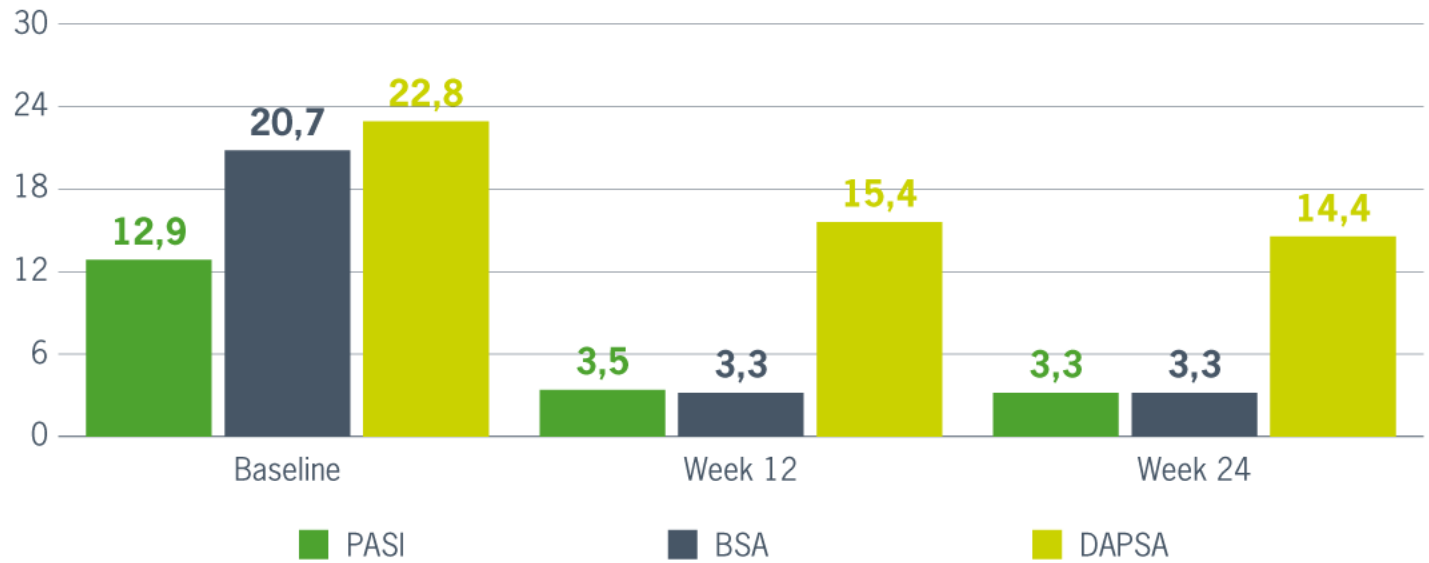
Efficacy and safety of IXE in PsA: a retrospective, single-centre, observational study in a real-life clinical setting

	Patients characteristics
Sex, N(%)	M 15 (57.7)
Mean age, years	57.92
Mean BMI	28.6
Peripheral arthritis, N(%)	26 (100)
Axial Disease, N(%)	3 (11.5)
Enthesitis, N(%)	9 (33)
Hypertention, N(%)	15 (57.7)
Cardiovascular disease, N(%)	6 (23.1)
Diabetes, N(%)	7 (26.9)
NAFLD, N(%)	3 (11.5)
Bio-naïve, N(%)	6 (23.1)
Bio-failure, N(%)	20 (76.9)

V. Manfreda, MS Chimenti et al. Clin Exp Rheumatol 2020

Efficacy and safety of IXE in PsA: a retrospective, single-centre, observational study in a real-life clinical setting

- PASI score and BSA significantly improved
- DAPSA reduced from 22.81 at baseline to 15.51 and 14.38 at W12 and W24
- Our patients at BL showed a moderate disease activity and achieved a low disease activity after 24 weeks of therapy.



*p<0,001 **p<0,05
V. Manfreda, MS Chimenti et al. Clin Exp Rheumatol 2020

Efficacy and safety of IXE in PsA: a retrospective, single-centre, observational study in a real-life clinical setting

- Data were confirmed for both GROUP A (treated with IXE for at least 24 weeks) and for patients in GROUP B (completed 48 weeks of treatment)

Improvement of psoriatic arthritis severity scores from baseline to week 24 (group A) and from baseline to week 48 (group B) with relative statistical significance

	Group A (26 patients)			Group B (17 patients)		
	Baseline	week 24	p-value	Baseline	week 24	p-value
Mean PASI	13,94	2,43	<0,00001	14,07	3,86	<0,00001
Mean BSA	27,74	2,01	<0,00001	24,57	2,23	0,00046
Mean PAIN VAS	53,70	24,35	0,0001	55,71	27,14	0,0114
Mean TJC	3,74	1,39	0,00328	5,43	2,64	ns
Mean SJC	1,43	0,78	ns	2,21	0,07	0,00672
Mean ESR	25,70	19,35	0,02088	22,14	24,29	ns
Mean CRP	1,73	1,27	ns	1,93	5,21	ns
Mean DAPSA	16,99	8,78	0,0001	19,83	9,71	0,00288

V. Manfreda, MS Chimenti et al. Clin Exp Rheumatol 2020

Efficacy and safety of IXE in PsA: a retrospective, single-centre, observational study in a real-life clinical setting

- Our study demonstrates that IXE was effective with a favourable safety profile both on skin lesions and on articular symptoms, in patients affected by moderate to severe PsA
- IXE was found to be safe and well tolerated. Injection site reactions appear to be the only adverse event (2 patients) experienced and didn't require discontinuation of therapy.
- One patient interrupted treatment after 3 months because of skin primary failure, one patient after 6 months because of skin secondary inefficacy

IXE to be effective, either in plaque-type PsO or in PsA, being all considered parameters significantly improved over treatment

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Product information

Classe H - Medicinale soggetto a prescrizione medica limitativa, vendibile al pubblico su prescrizione di centri ospedalieri o di specialisti - internista, reumatologo, dermatologo (RRL).

TALTZ 80 mg soluzione iniettabile in penna preriempita – 2 penne preriempite - AIC n° 044863025/E
Prezzo al pubblico: € 3.518,73 Prezzo ex-factory: € 2.132,00

TALTZ 80 mg soluzione iniettabile in siringa preriempita – 2 siringhe preriempite - AIC n° 044863052/E
Prezzo al pubblico: € 3.518,73 Prezzo ex-factory: € 2.132,00

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