

Real-World Treatment Patterns Among Patients With Scalp Psoriasis in Canada

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INTRODUCTION

- Plaque psoriasis is an immune-mediated, chronic, systemic, inflammatory condition impacting the skin that affects roughly 2.5% of Canadians¹
- The scalp is one of the most affected areas in patients with plaque psoriasis, with literature estimates showing that up to 80% of patients have disease present on the scalp at some point during their lifetime²
- Effective therapeutic treatment of the scalp is difficult because of the delivery of therapy to hair-bearing areas, which complicates the application and effectiveness of certain topical products³
- Treatment recommendations for scalp psoriasis range from topical therapies to systemic agents, including oral PDE4 inhibitors, and numerous biologic agents with several mechanisms of action³
- The objective of this research was to estimate the prevalence of plaque psoriasis with scalp involvement, and the associated prescription patterns of advanced systemic treatments in the real-world dermatology setting in Canada

METHODS

- This retrospective chart review of patients diagnosed with plaque psoriasis from June 30, 2019, to September 30, 2024, was conducted using the nationally representative DERMAID database, with 13 clinics with 41 clinicians
- Data were extracted using DARWEN™, a validated artificial intelligence platform that extracts written clinical data from patients’ electronic medical records and imports into DERMAID
- Extracted data included the diagnosis of plaque psoriasis, the presence of scalp involvement, and the use of advanced systemic treatments specific to plaque psoriasis (oral PDE4 inhibitors, oral JAK inhibitors, or biologic therapies)
- BSA was also extracted to understand its effect on treatment patterns for patients with scalp involvement

RESULTS

- Analysis of the DERMAID database identified 21,822 patients with plaque psoriasis during the search timeframe
- Overall, 34% of patients with plaque psoriasis in the DERMAID database had disease present on their scalp
- More than half (53%) of patients with plaque psoriasis present on their scalp were prescribed an advanced systemic therapy
 - The three most common were risankizumab (26%; biologic), guselkumab (18%; biologic), and apremilast (10%; oral PDE4 inhibitor)
- The DERMAID database found that 22% of patients with plaque psoriasis had a value for BSA recorded in their patient record
- 20% of patients with psoriasis of the scalp and baseline BSA <10% were treated with an advanced systemic therapy
 - The three most common were risankizumab (30%), guselkumab (16%), and apremilast (12%)

ABBREVIATIONS

BSA, body surface area affected; JAK, janus kinase; mAb, monoclonal antibody; PDE4, phosphodiesterase 4; TNF, tumor necrosis factor.

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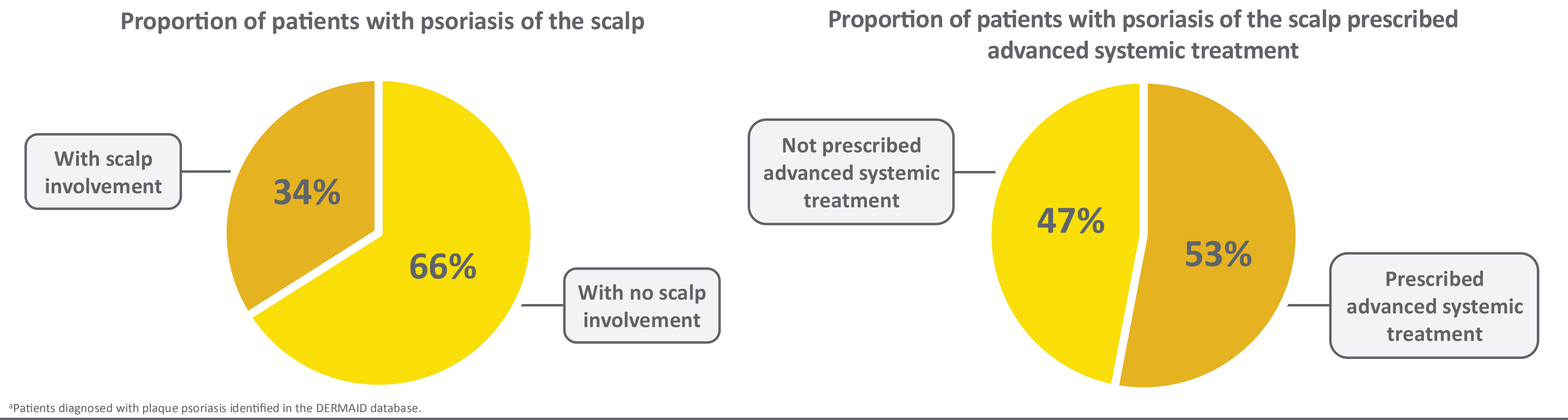
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DISCLOSURES

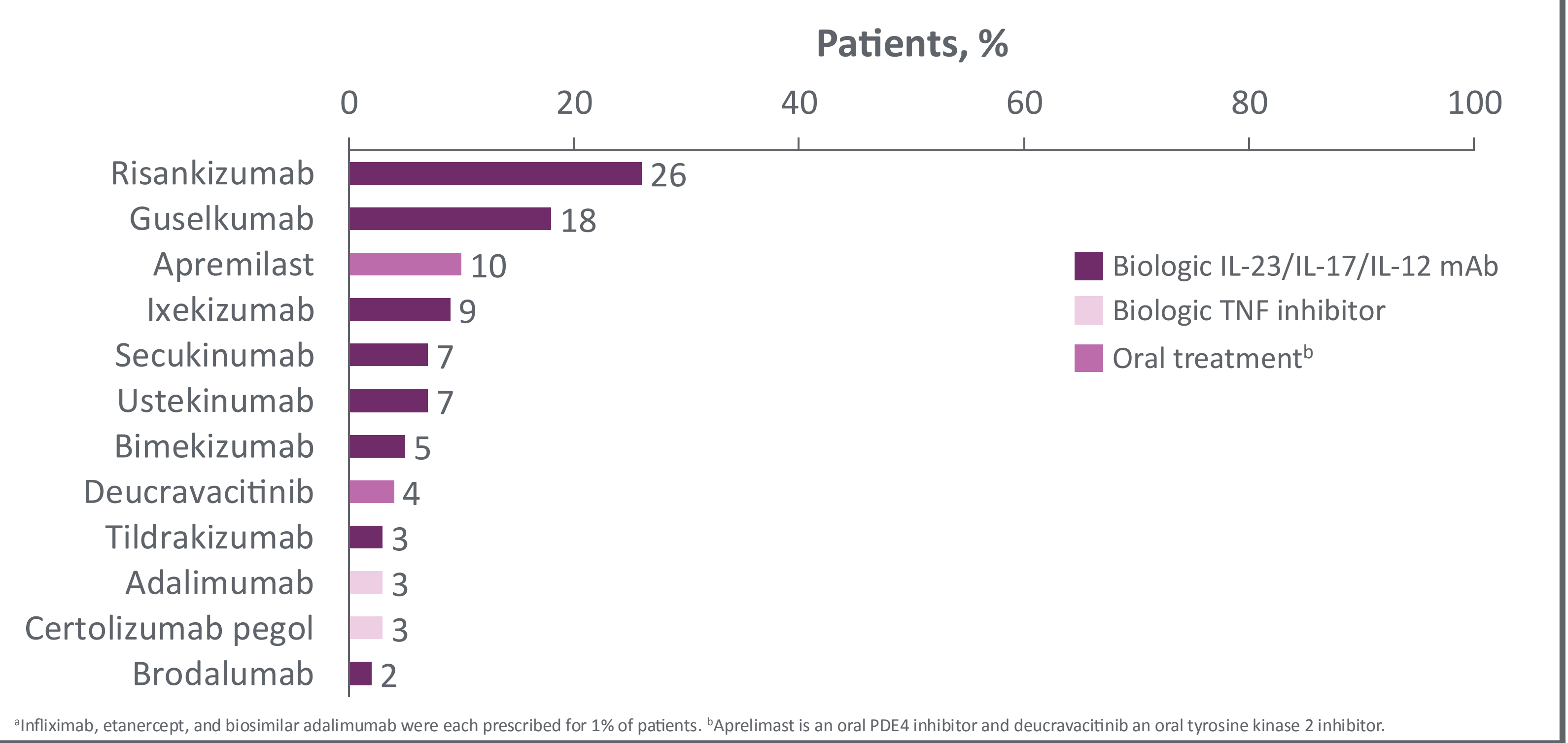
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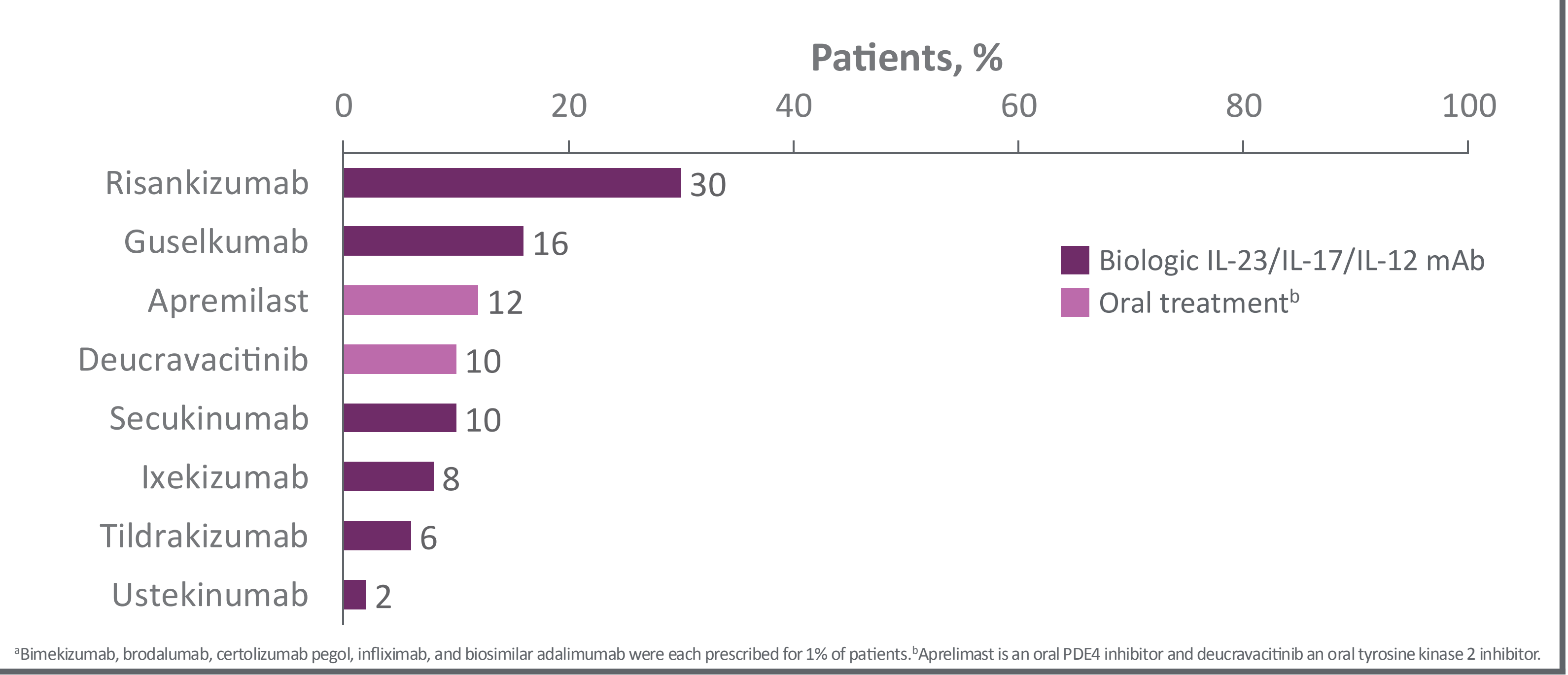
Patient Population^a



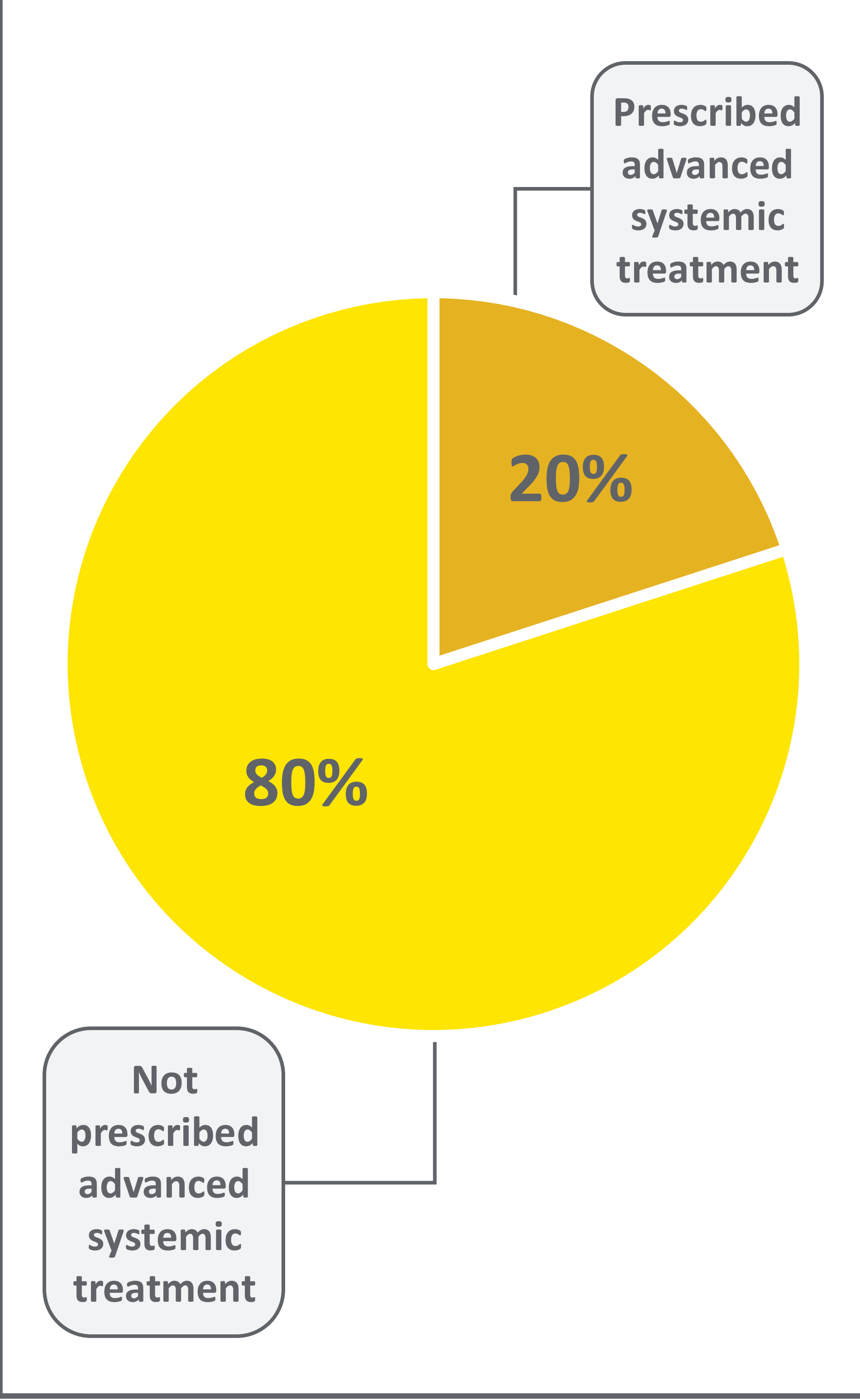
Advanced Systemic Treatments Prescribed for >1% of Patients With Psoriasis of the Scalp^a



Advanced Systemic Treatments Prescribed for >1% of Patients With Psoriasis of the Scalp and Baseline BSA <10%^a



Proportion of Patients With Psoriasis of the Scalp and Baseline BSA <10% Prescribed Advanced Systemic Treatment



CONCLUSIONS

- Psoriasis of the scalp was present in a substantial proportion of patients (34%) with plaque psoriasis in Canada
- Patients with psoriasis of the scalp were likely to receive advanced systemic therapy, with more than half of patients being prescribed one of these treatments
- Despite having low BSA (<10%), indicative of mild-to-moderate psoriasis that is typically manageable with topical treatments, 20% of patients in this analysis were prescribed an advanced systemic treatment
 - This highlights that, currently, scalp involvement is a key factor in treatment choice; however, as newer targeted topical treatments become available, many of these patients could be managed topically
- Currently, there is a large unmet need among patients with psoriasis of the scalp for innovative topical treatments, which can be used prior to advanced systemic therapy
- When making treatment decisions, scalp psoriasis severity can outweigh BSA—treatment should reflect functional impact, not just surface area affected