

# CLINICAL CHARACTERISTICS AND QUALITY OF LIFE OF THAI MODERATE TO SEVERE PSORIASIS PATIENTS BEFORE INITIATING SECUKINUMAB: AN INTERIM ANALYSIS FROM PROMPT STUDY

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## BACKGROUND

- Psoriasis is a chronic inflammatory disease characterized by key clinical symptoms such as skin itching, pain, scaling, comorbidities, and decreased quality of life (QoL).
- Secukinumab, a fully human monoclonal antibody that directly inhibits IL-17A, was approved in Thailand in 2017 for the treatment of moderate to severe psoriasis<sup>2</sup>.
- It demonstrated a rapid onset of action and sustained responses, as well as a favorable safety profile.
- While RCTs provide evidence of efficacy, real-world studies produce evidence that represents real life practice.
- However, there remains limited real-world data characterizing Thai psoriasis patients who initiate secukinumab in routine clinical practice.

## METHOD

Here we report the baseline characteristics including, disease severity, comorbidities, prior medication, and QoL of PsO patients who are participating in the PROMPT study in Thailand.

### Study Design and Objective

- An observational, prospective primary data collection study was conducted at 13 dermatology centers in Thailand.
- The observation period is two years after the study's enrollment date. At enrolment, the disease and treatment history will be examined retrospectively from the medical record.
- After baseline visit, patient data will be collected prospectively every 6 months for up to 2 years. Effectiveness, QoL, and treatment pattern will be recorded at each visit (Figure 1).
- In this interim analysis, clinical characteristics and QoL as measured by the Dermatology Life Quality Index (DLQI) and EQ-5D at baseline were analyzed.

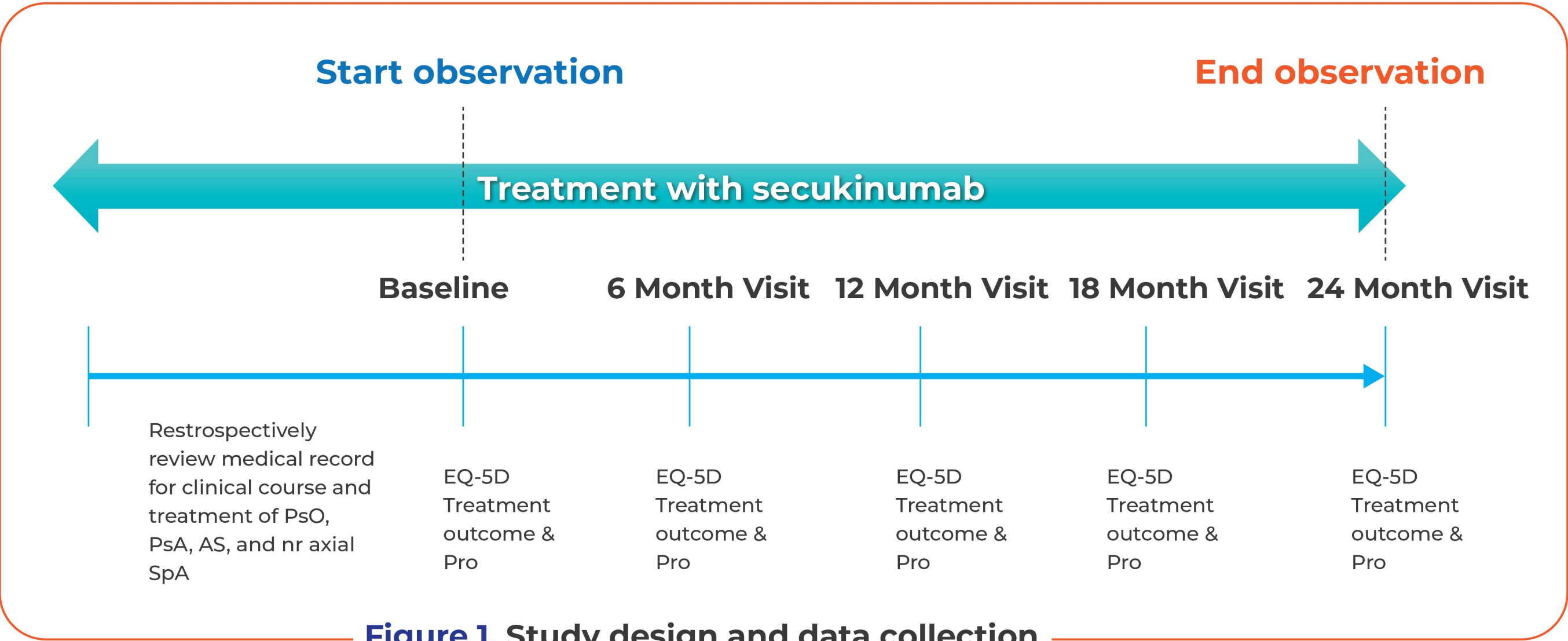


Figure 1. Study design and data collection

## RESULTS

- A total of 42 patients were included in this interim analysis.
- Patient demographics and baseline characteristics were summarized in Table 1.
- Most patients were covered by the Civil Servant Medical Benefits Scheme (54.8%) or self-pay (35.7%).
- Their means (SDs) of disease duration (years) and PASI score were 15.1 (12.3) and 13.1 (8.7), respectively.
- The most affected area was scalp, followed by nails, palmoplantar, and genital.
- Almost 62% of patients had at least one comorbidity, with metabolic diseases being the most common, and 5 patients had psoriatic arthritis (Table 2).
- Patients were previously treated with topical (83.3%) and systemic therapies (66.7%) and naïve to biologics (92.9%). At baseline, 81% of patients received a standard dose of secukinumab.
- The mean (SD) DLQI score was 14.4 (8.0), range 2-29. The most affected QoL domains were symptoms and feelings, leisure, and daily activities.
- The means (SDs) EQ-5D utility and visual analog scale scores were 0.8 (0.3) and 68.9 (19.9), with more problems in pain/discomfort and anxiety/depression (Figure 2).
- No adverse events were reported at the baseline visit.

## DISCUSSION

This interim analysis demonstrated demographics and clinical characteristics of patients with psoriasis prior to secukinumab therapy.

- Their mean age of onset, disease duration of first diagnosis, and PASI score were comparable to the previous retrospective real-world study report among psoriasis patients receiving secukinumab in Thailand<sup>3</sup>.
- However, they were slightly lower than the report from pivotal studies of secukinumab (ERASURE and FIXTURE)<sup>4</sup>.
- The higher proportion of patients covered by CSMBS compared to our previous real-world study findings may be due to the accessibility to biologics among government officers after the Dermatology Disease Prior Authorization (DDPA) program approval in April 2021.
- However, the high proportions of patients who were biologics naïve and those with a long disease duration prior to secukinumab therapy still indicate the limited access to biologics therapy among psoriasis patients in Thailand.
- Both DLQI and EQ-5D-5L scores demonstrated the impact of psoriasis on the patients' QoL, and they were possibly related to the finding that psoriasis status was still active in most patients although they were previously treated with several topical and systemic therapies for many years.

Table 1. Patient demographics and baseline characteristics

Characteristics	All Psoriasis Participants (N = 42)
Sex, n (%)	
Male	20 (47.6%)
Female	22 (52.4%)
Age (years)	
Mean (SD)	45.7 (14.9)
Health Insurance Scheme, n (%)	
Civil Servant Medical Benefits Scheme (CSMBS)	23 (54.8%)
Private Insurance or Self-Pay	15 (35.7%)
Universal Coverage Scheme (UCS)	3 (7.1%)
Social Security Scheme (SSS)	0 (0.0%)
Duration of first diagnosis to index date (years)	
Mean (SD)	15.1 (12.3)
Family history of PsO, arthritis and other inflammatory, n (%)	
Yes	10 (23.8%)
No	31 (73.8%)
Missing data	1 (2.4%)
PASI score	
Mean (SD)	13.1 (8.7)
DLQI score	
Mean (SD)	13.95 (8.19)
Body-surface area involved (%)	
Mean (SD)	26.7 (24.1)
Nail involvement, n (%)	
Yes	29 (69.0%)
No	13 (31.0%)
Other manifestation (multiple answer), n (%)	
Scalp psoriasis	35 (83.3%)
Nail psoriasis	27 (64.3%)
Palmoplantar psoriasis	16 (38.1%)
Genital psoriasis	9 (21.4%)

Table 2. Patients' comorbidities at baseline

Diagnosis / Condition	All psoriasis patients (N = 42)
With one or more relevant medical history, n (%)	26 (62.0%)
With no relevant medical history, n (%)	16 (38.1%)
Dyslipidemia, n (%)	17 (40.5%)
Hypertension, n (%)	16 (38.1%)
Diabetes mellitus, n (%)	6 (14.3%)
PsA, n (%)	5 (11.9%)
Latent tuberculosis, n (%)	4 (9.5%)
Others, n (%)	33 (78.6%)

Note: Percentages of patients with ongoing and currently on medication were calculated from the number of each condition itself.

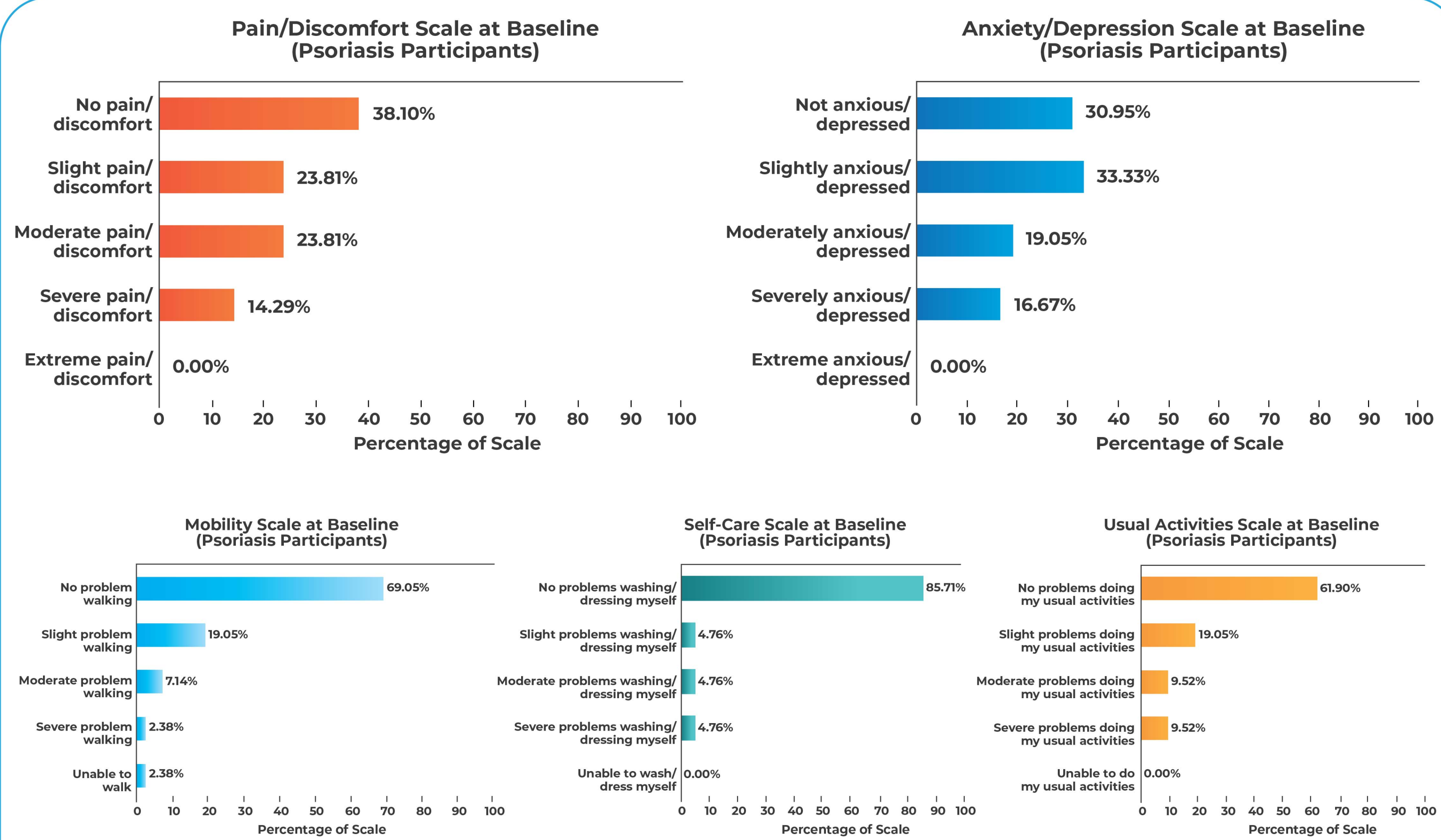


Figure 2. EQ-5D-5L at Baseline

## CONCLUSION

Most patients had a long disease duration and were previously treated with several topical and systemic therapies, but psoriasis was still active and impacted their QoL. The distribution of patients in each health insurance scheme also highlighted the limited access to biologics treatment in Thailand.

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