Psoriatic Arthritis Response Criteria scores: results of a placebo-adjusted network meta-analysis with secukinumab

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INTRODUCTION

• Psoriatic arthritis (PsA) can be a debilitating disease characterized by symptoms, enthesitis, skin lesions, joint pain and swelling, and spindly fingers.11

Study design

• Key inclusion criteria

- Study design
- Placebo response varied across trials (secukinumab 150 mg and 300 mg had a significantly higher response rate than placebo 40 mg (Figure 2).)

RESULTS

• In the mixed population of biologic-naïve and biologic-experienced patients, secukinumab 150 mg and 300 mg were significantly (p < 0.05) more effective than apremilast 20 mg and 30 mg based on the modeled probability of achieving a response as assessed using PsARC. Secukinumab 150 mg had a significantly higher (p < 0.05) higher response rate than apremilast 40 mg (Figure 2).

CONCLUSIONS

• Secukinumab showed evidence of superiority (p < 0.05) over placebo and has at least equivalent efficacy to all advanced therapies evaluated in the primary endpoint of PsARC outcome, relative to other advanced therapies for PsA and an inadequate response to previous DMARD treatment, showing the included PsARC outcomes in different trials at weeks 12, 14, and 16. As can be seen, more trials had their primary endpoint at weeks 12–16. The table included PsARC outcomes assessed using PsARC. Secukinumab 150 mg had a significantly higher (p < 0.05) higher response rate than apremilast 40 mg (Figure 2).

REFERENCES