«Η εμπειρία από την διπλή αναστολή των Il-17A και IL-17F στην ψωριασική νόσο. »

Μαρίνα Παπουτσάκη MD, PhD
Δερματολόγος-Αφροδισιολόγος

Διευθύντρια ΕΣΥ
Α΄ Κλινική Αφροδισίων και Δερματικών Νόσων Ε.Κ.Π.Α.,
Νοσοκομείο Αφροδισίων και Δερματικών Νόσων, «Ανδρέας Συγγρός»

Σύγκρουση Συμφερόντων

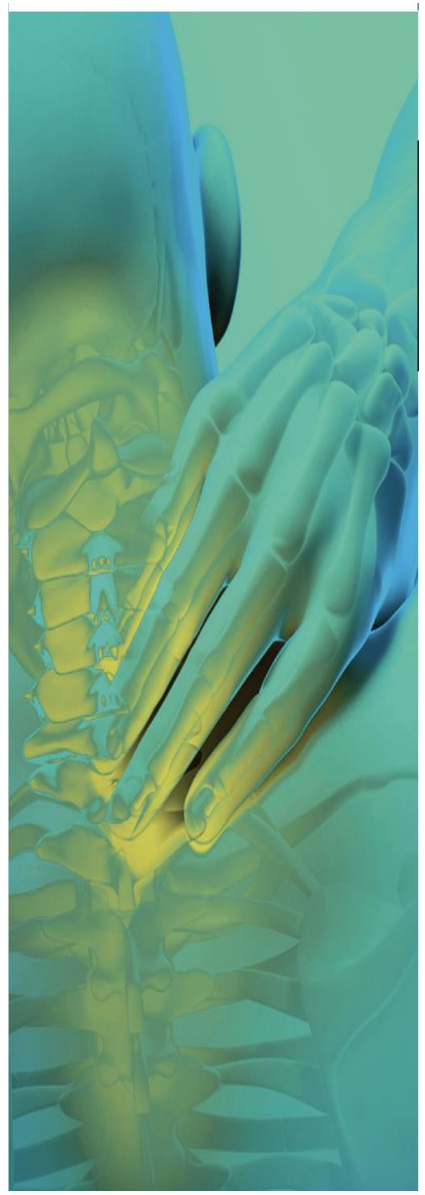
- **Έχω λάβει αμοιβή για ομιλίες και συμβουλευτικές δραστηριότητες από :**

Janssen, LEO, MSD, Genesis pharma, Pfizer, Novartis, Abbvie, UCB, Lilly

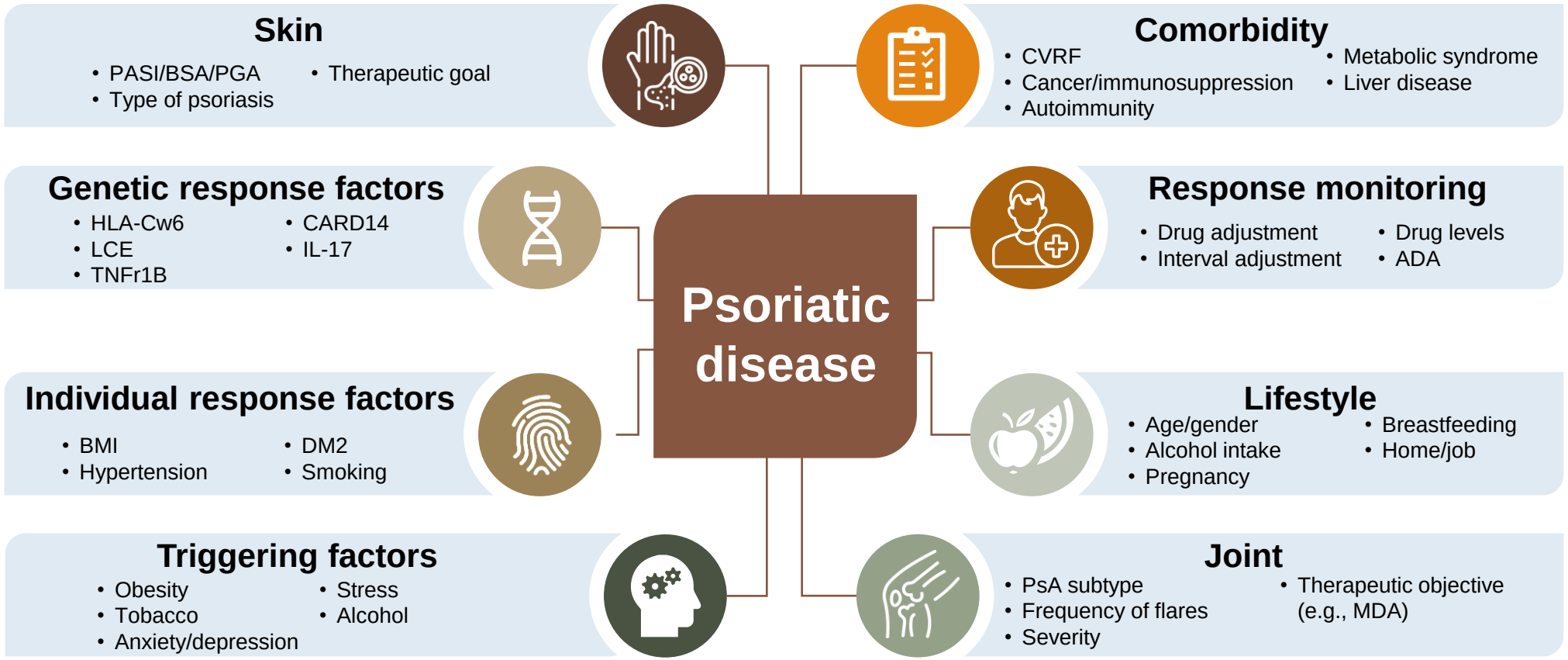
- **Ερευνήτρια σε κλινικές μελέτες για:**

Janssen, Pfizer, Novartis, Abbvie, LEO

- ‘Εχω λάβει αμοιβή για την συγκεκριμένη ομιλία



Η σύγχρονη θεώρηση της παθοφυσιολογίας της Ψωρίασης καθιστά τη διαχείριση της πολυεπίπεδη



- ADA, anti-drug antibodies; BMI, body mass index; BSA, body surface area; CARD14, CAspase Recruitment Domain family member 14; CVRF, cardiovascular risk factor; DM2, diabetes mellitus 2; IL, interleukin; LCE, late cornified envelope gene cluster; MDA, minimal disease activity; PASI, Psoriasis Area and Severity Index; PGA, physician global assessment; PsA, psoriatic arthritis; TNFr1B, tumor necrosis factor receptor 1B

Queiro R & Coto P. Rheumatology 2017;56:1829–1831

Bimekizumab: Μελέτες φάσης 3 στην Ψωρίαση

PHASE 3

3 HEAD TO HEAD ΜΕΛΕΤΕΣ

Έναντι:
Adalimumab
Ustekinumab
Secukinumab

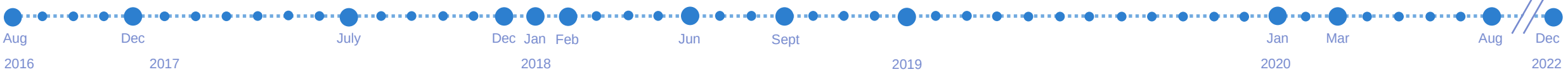
BE VIVID
PS0009: versus placebo and active comparator (ustekinumab)
Co-primary endpoints: PASI90 and IGA 0/1 response at Week 16[3]
570 patients randomised

BE SURE
PS0008: versus active comparator
Co-primary endpoint: PASI90 and IGA 0/1 response at Week 16[4]
480 patients randomised

BE READY
Randomised withdrawal
Co-primary endpoint: PASI90 and IGA 0/1 response at Week 16[5]
435 patients randomised

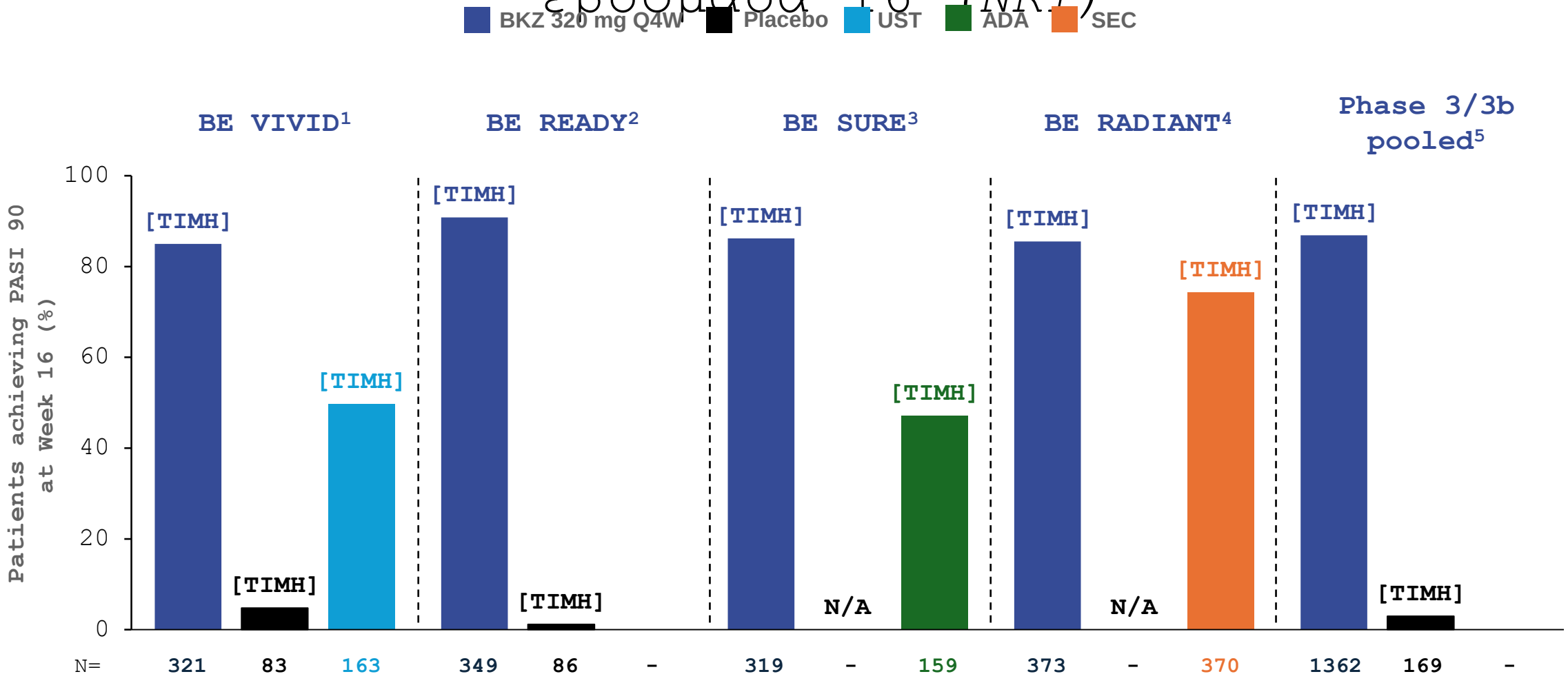
BE BRIGHT
PS0014: OLE of BE VIVID, BE SURE and BE READY
Primary endpoint: incidence of TEAEs (adjusted by duration of patient exposure to treatment)[6]
1120 eligible patients

BE RADIANT
PS0015: versus secukinumab
Primary endpoint: PASI100 at Week 16[7]
743 patients randomised



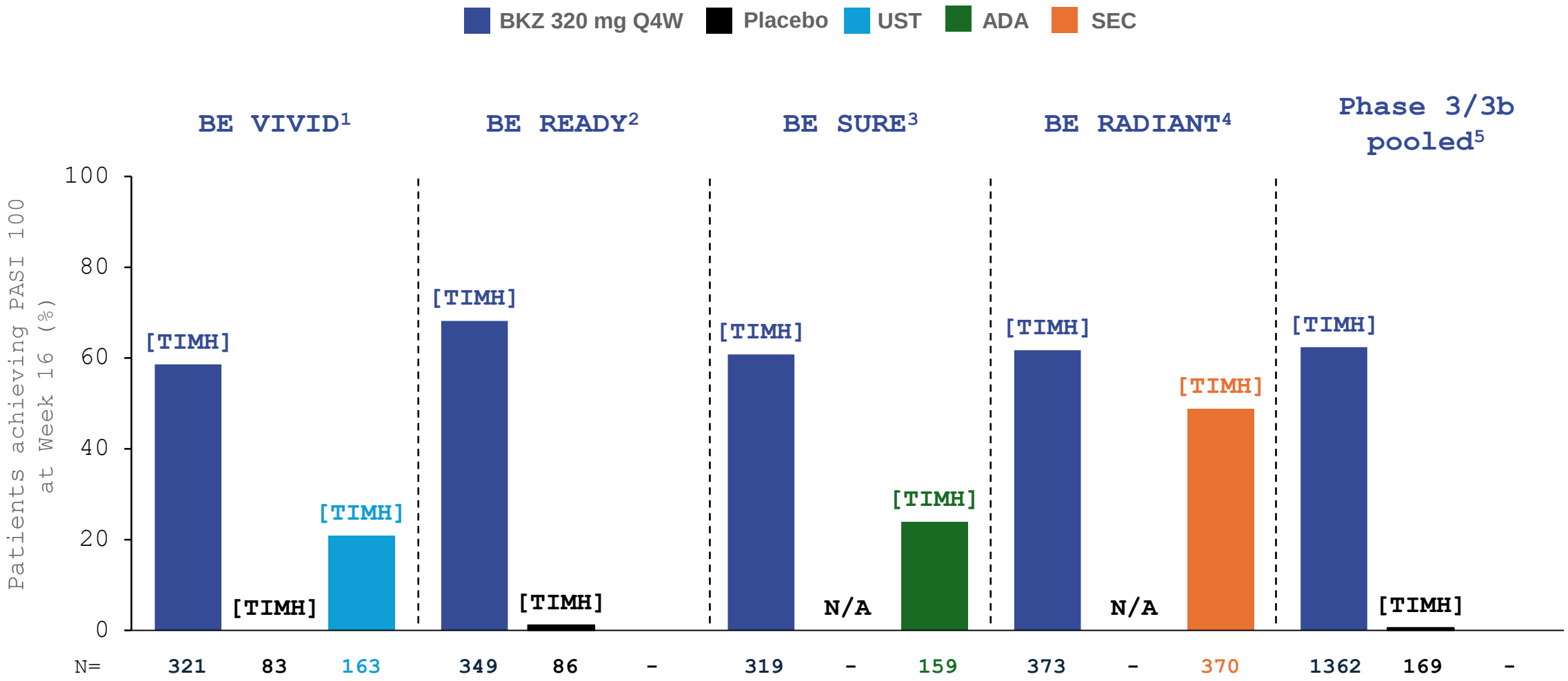
1. Papp et al, *J Am Acad Dermatol* 2018; 79:277–86; 2. PS0011, https://clinicaltrials.gov/ct2/show/NCT03010527,[accessed: Nov 19]; 3.PS0009, https://clinicaltrials.gov/ct2/show/NCT03370133, [accessed: Nov 19];
4. PS0008, https://clinicaltrials.gov/ct2/show/record/NCT03412747, [accessed: Nov 19]; 5. PS0013, https://clinicaltrials.gov/ct2/show/record/NCT03410992, [accessed: Nov 19];
6. PS0014, https://clinicaltrials.gov/ct2/show/record/NCT03598790, [accessed: Nov 19]; 7. PS0015, https://clinicaltrials.gov/ct2/show/record/NCT03536884, [accessed: Nov 19]

Bimekizumab (μελέτες Φάσης 3): PASI 90, εβδομάδα 16 *(NRI)*



*PASI90 at Week 16 was the co-primary endpoint against PBO in BE VIVID and BE READY and against ADA in BE SURE. It was also the ranked secondary endpoint against UST in BE VIVID. # PASI 100 response with bimekizumab versus secukinumab at Week 16 was the primary endpoint in BE RADIANT. NRI: non-responder imputation. All figures adapted from the cited reference. 1. Reich et al. Lancet 2021;397:487–98. 2. Gordon et al. Lancet 2021;397:475–86. 3. Warren et

Bimekizumab (Μελέτες Φάσης 3): PASI 100, εβδομάδα 16 *(NRI)*



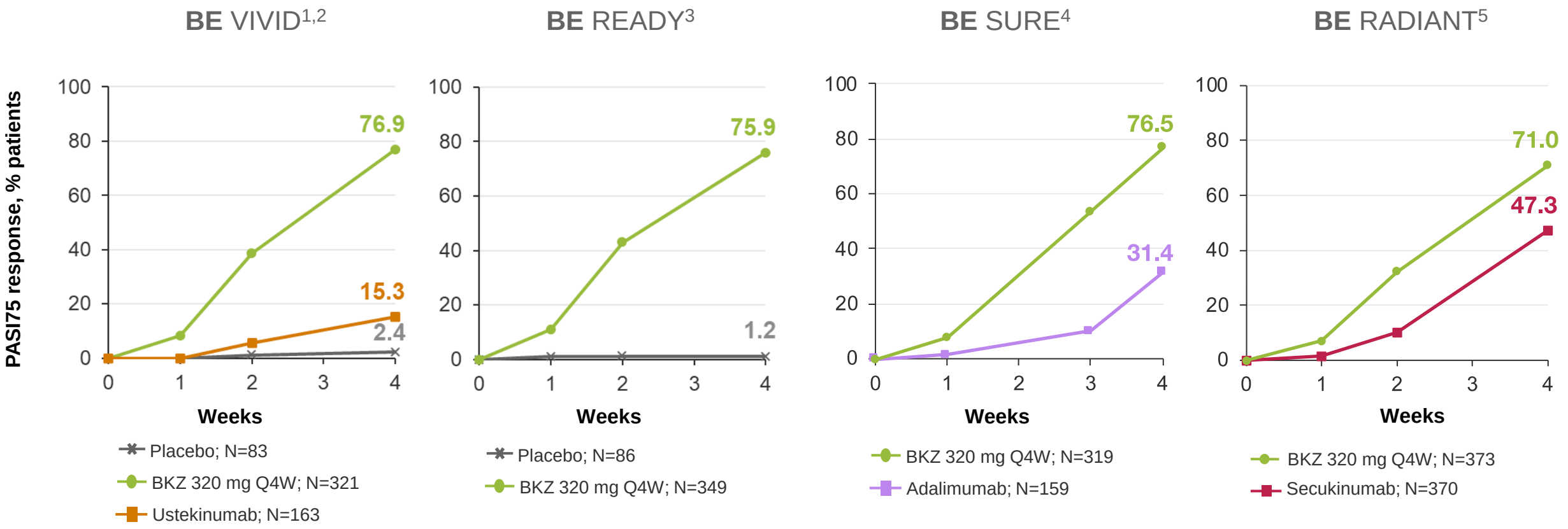
All comparisons (in all trials) *P*<0.001 (BE VIVID: *P*<0.0001 BE READY: *P*<0.0001; *P* value for ustekinumab comparison is nominal)

- PASI100 through Week 16 was a ranked secondary endpoint in BE VIVID, BE READY, BE SURE. PASI100 through Week 16 was the primary endpoint in BE RADIANT. All figures adapted from the cited reference.
- 1. Reich et al. Lancet 2021;397:487–98. 2. Gordon et al. Lancet 2021;397:475–86. 3. Warren et al. N Engl J Med 2021;385:130–41. 4. Reich et al. N Engl J Med 2021;385:142–52

PASI75, Εβδομάδα 4: BKZ επέδειξε ταχύτερη έναρξη απόκρισης έναντι των συγκριτικών παραγόντων (NRI)

PASI75 at Week 4* shows superior efficacy after one dose of BKZ

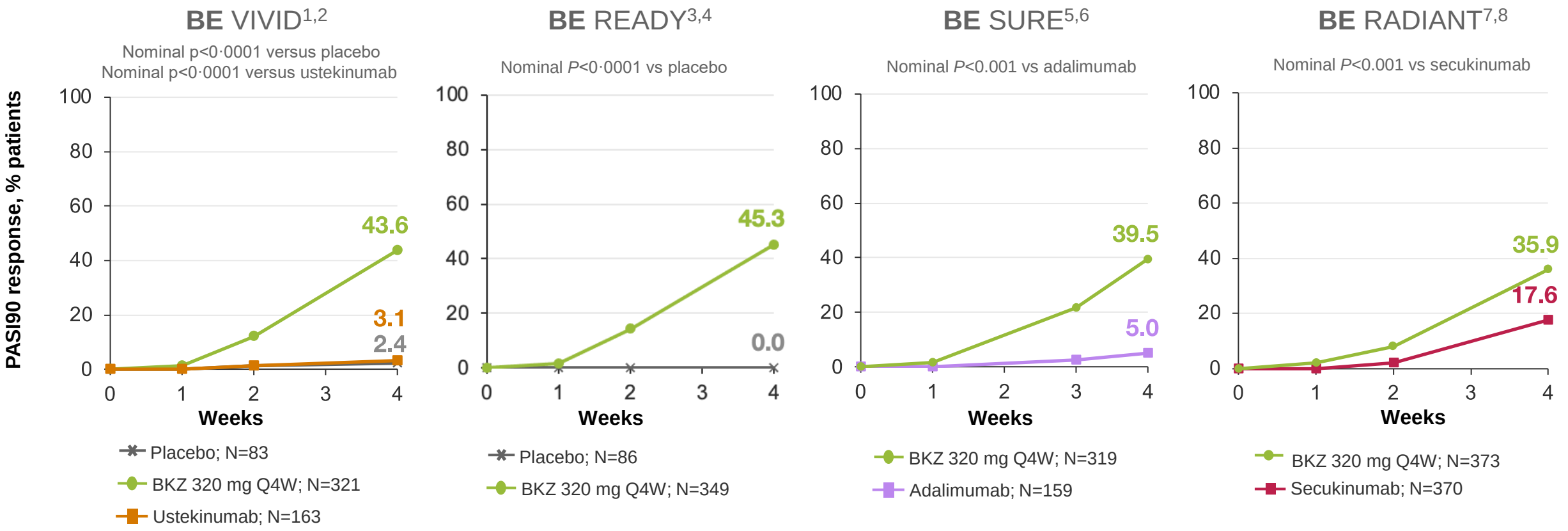
BKZ superiority: all comparisons (in all trials) *P*<0.001



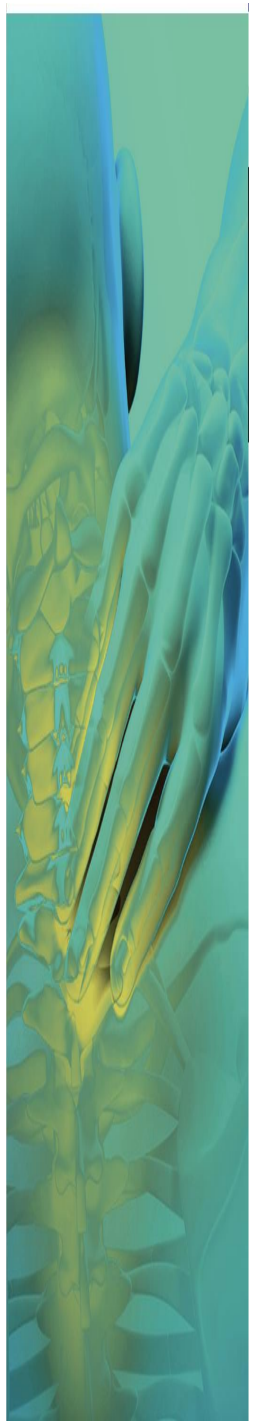
- *PASI75 through Week 4 was a ranked secondary endpoint in BE VIVID, BE READY, BE SURE and BE RADIANT. All figures adapted from the cited reference. 1. Reich et al. Lancet 2021;397:487–98. 2. PS0009 Table 6.3.1.6.1 NRI RS. 3. Gordon et al. Lancet 2021;397:475–86. 4. Warren et al. N Engl J Med 2021;385:130–41. 5. Reich et al. N Engl J Med 2021;385:142–52

PASI90, Εβδομάδα 4: BKZ επέδειξε γρήγορη έναρξη ανταπόκρισης (NRI)

PASI90 at Week 4* shows the proportion of patients who are ‘clear’ or ‘almost clear’ after one dose of BKZ



- *PASI90 through week 4 was a non-ranked secondary endpoint in these studies. All figures adapted from the cited reference. 1. Reich et al. Lancet 2021;397:487–98. 2. PS0009. Table 6.3.1.1.1. 3. Gordon et al. Lancet 2021;397:475–86. 4. PS0013. Table 6.3.1.1. 5. Warren et al. N Engl J Med 2021;385:130–41. 6. Warren et al. presented at EADV 2020. 7. Reich et al. N Engl J Med 2021;385:142–52. 8. Reich et al. presented at AAD 2021.



ΚΛΙΝΙΚΟ ΠΕΡΙΣΤΑΤΙΚΟ 1

ΔΗΜΟΓΡΑΦΙΚΑ

- Άρρεν
- 54 ετών
- Αγρότης

ΣΩΜΑΤΟΜΕΤΡΙΚΑ ΣΤΟΙΧΕΙΑ-ΣΥΝΗΘΕΙΕΣ

- Ύψος: 165 εκ.
- Βάρος: 65 Kg
- BMI: 23,9
- Κάπνισμα: όχι
- Αλκοόλ: κοινωνικός πότης

ΣΥΝΝΟΣΗΡΟΤΗΤΕΣ

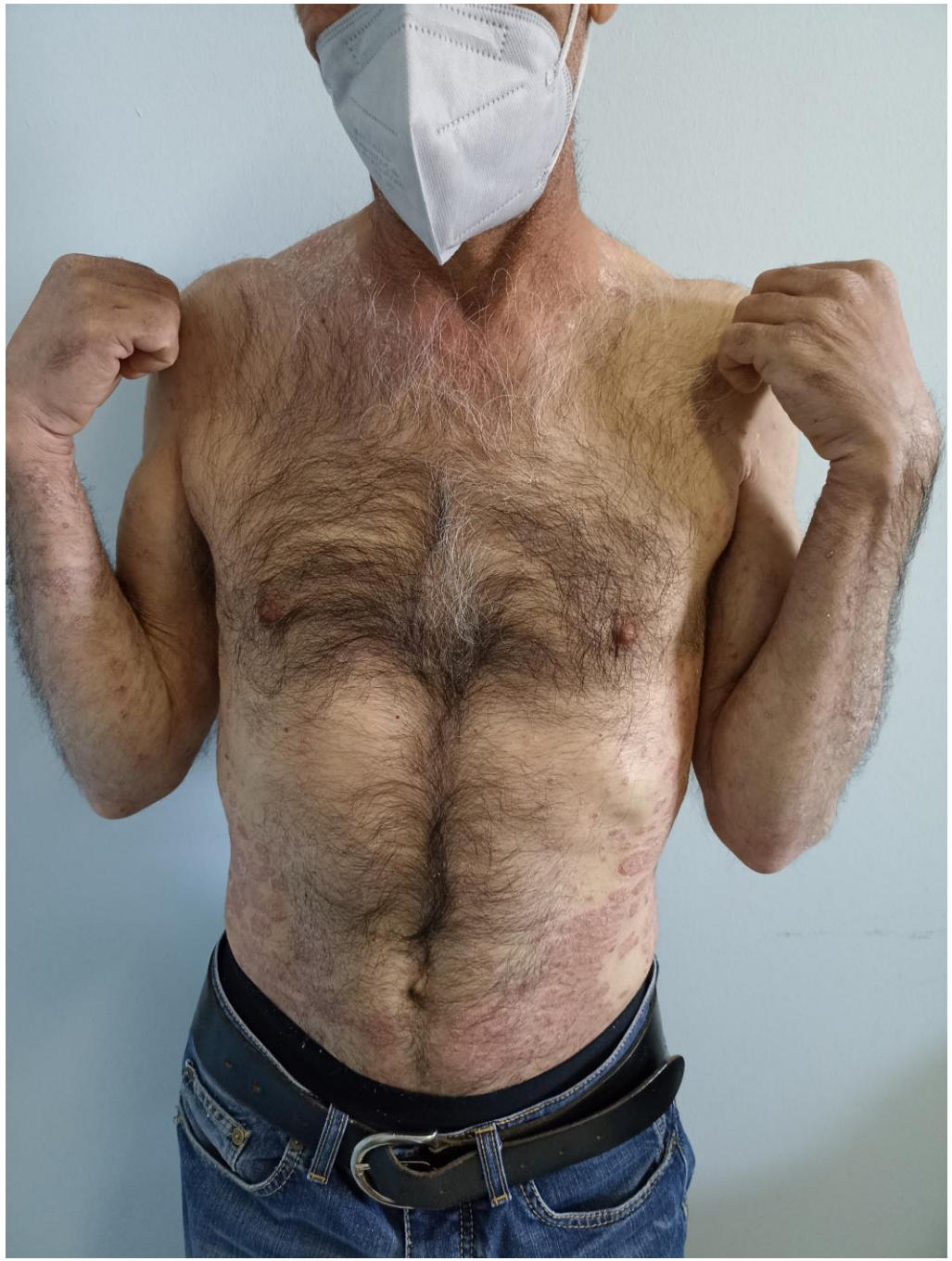
- Αρτηριακή Υπέρταση
- Υπερχοληστερολαιμία
- Σακχαρώδη διαβήτη
- Ψωριασική ονυχία
- Ψωριασική αρθρίτιδα

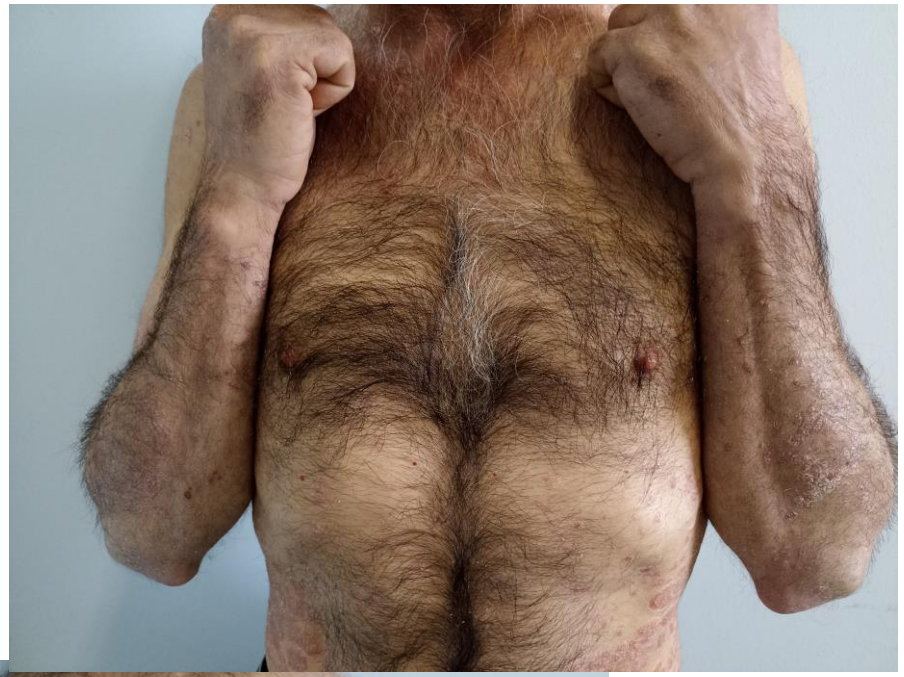
ΙΣΤΟΡΙΚΟ ΨΩΡΙΑΣΙΚΗΣ- ΘΕΡΑΠΕΙΕΣ

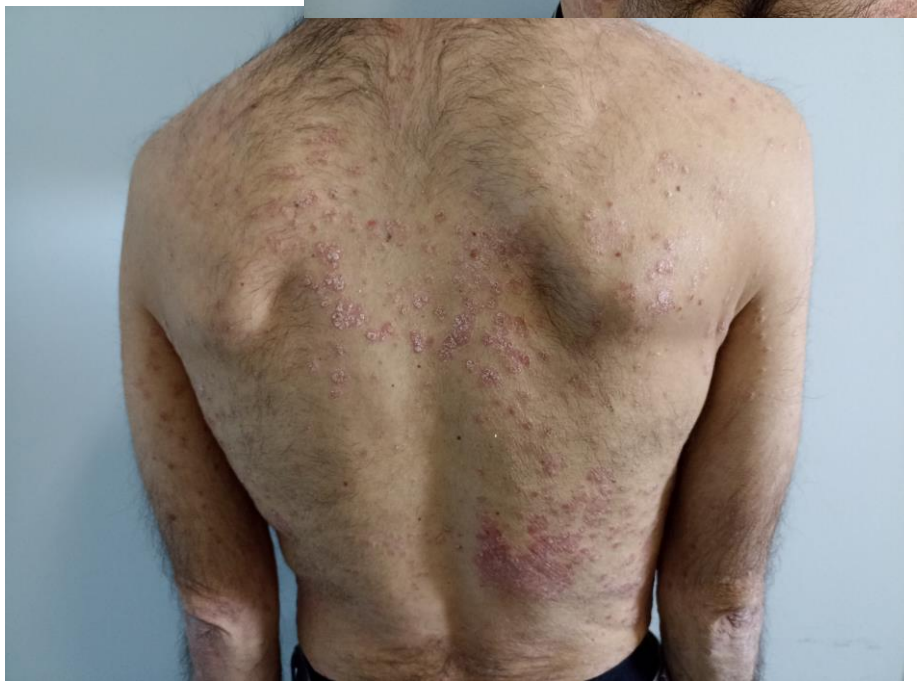
- 2010: Ψωρίαση κατά πλάκας
- 2018 : Ψωριασική αρθρίτιδα
- Μέχρι το 2018 μόνο τοπικές αγωγές
- 2018-2023: apremilast
- Μάρτιο 2023 : έναρξη αγωγής με bimekizumab

BMI: Body Mass Index

To

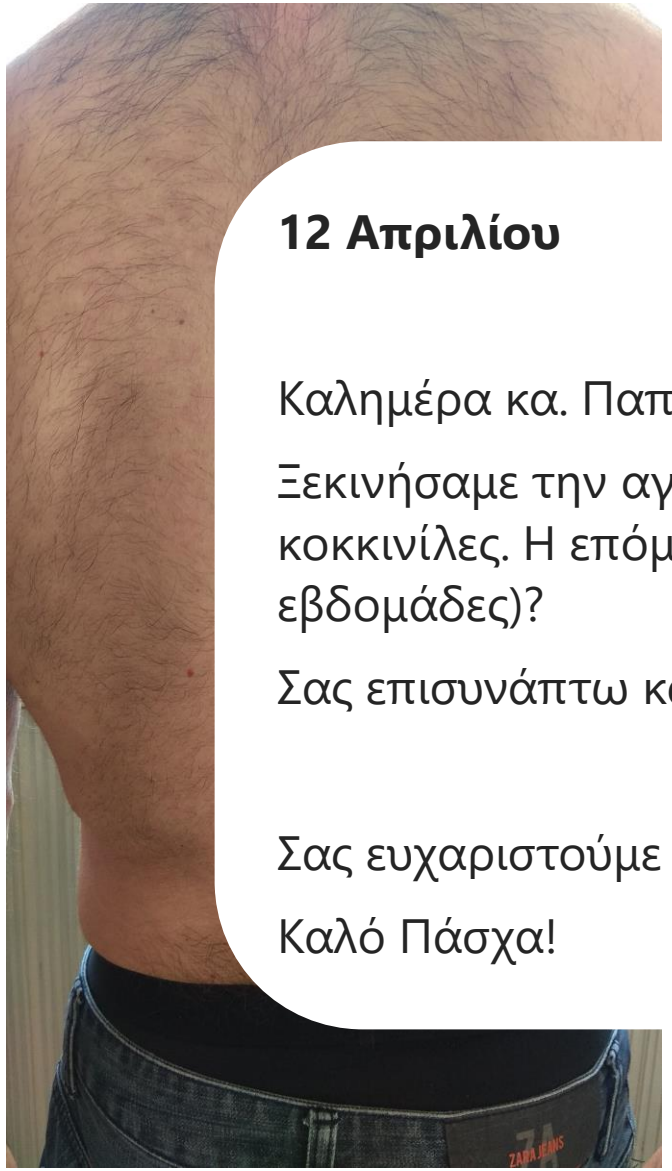






To

T4



12 Απριλίου

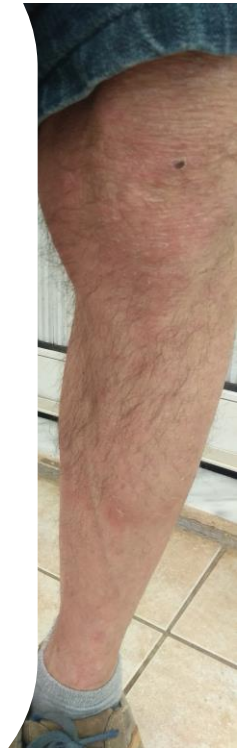
Καλημέρα κα. Παπουτσάκη

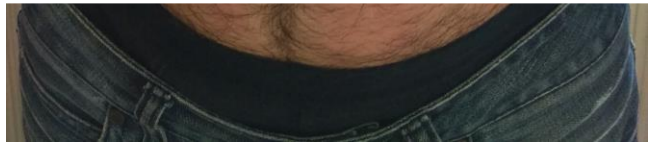
Ξεκινήσαμε την αγωγή στις 28 Μαρτίου. Έχει καθαρίσει το σώμα, μένουν μόνο οι κοκκινίλες. Η επόμενη δόση θα γίνει στις 25 Απριλίου? σωστά μετράω (μετά από 4 εβδομάδες)?

Σας επισυνάπτω και μερικές φωτογραφίες.

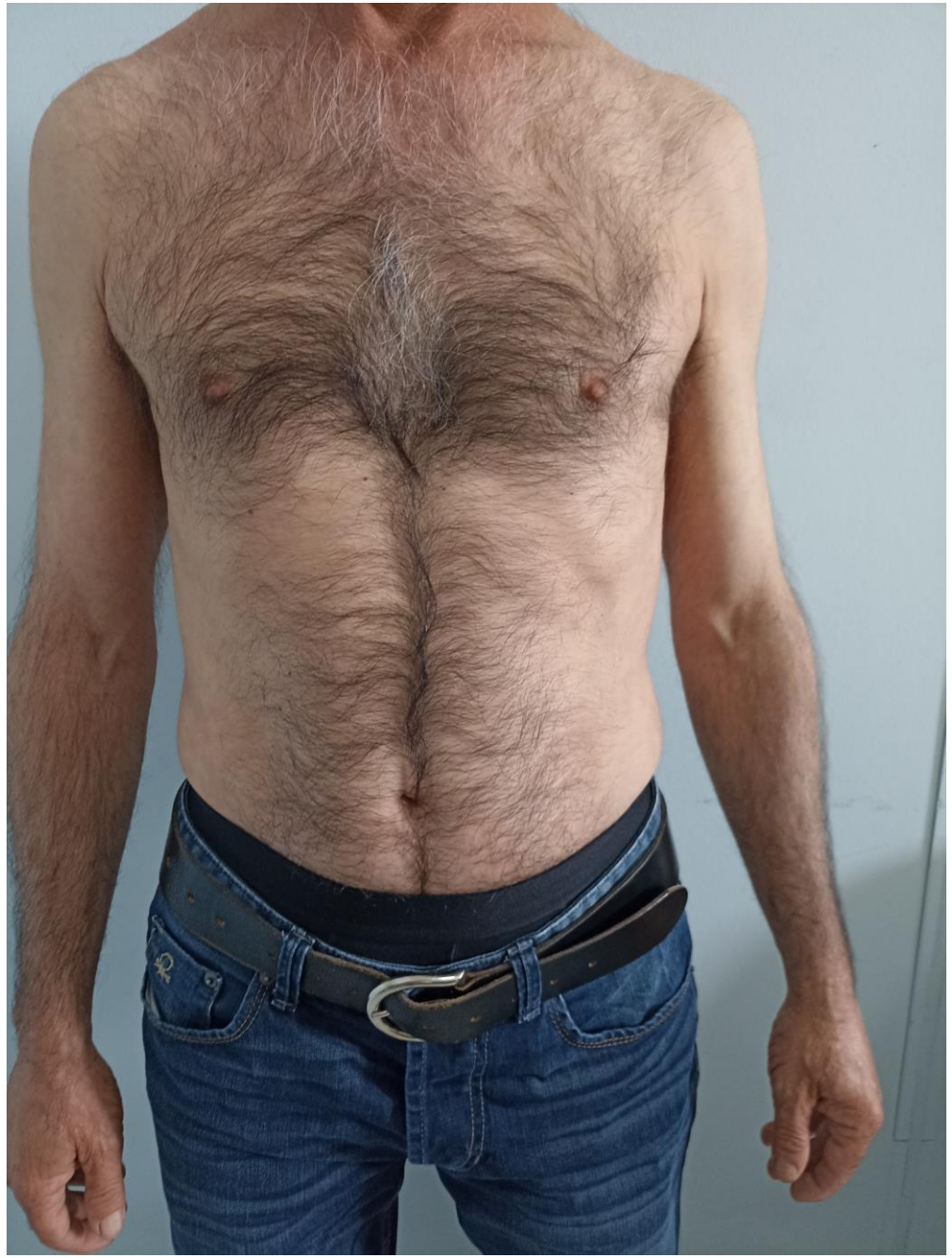
Σας ευχαριστούμε πολύ!

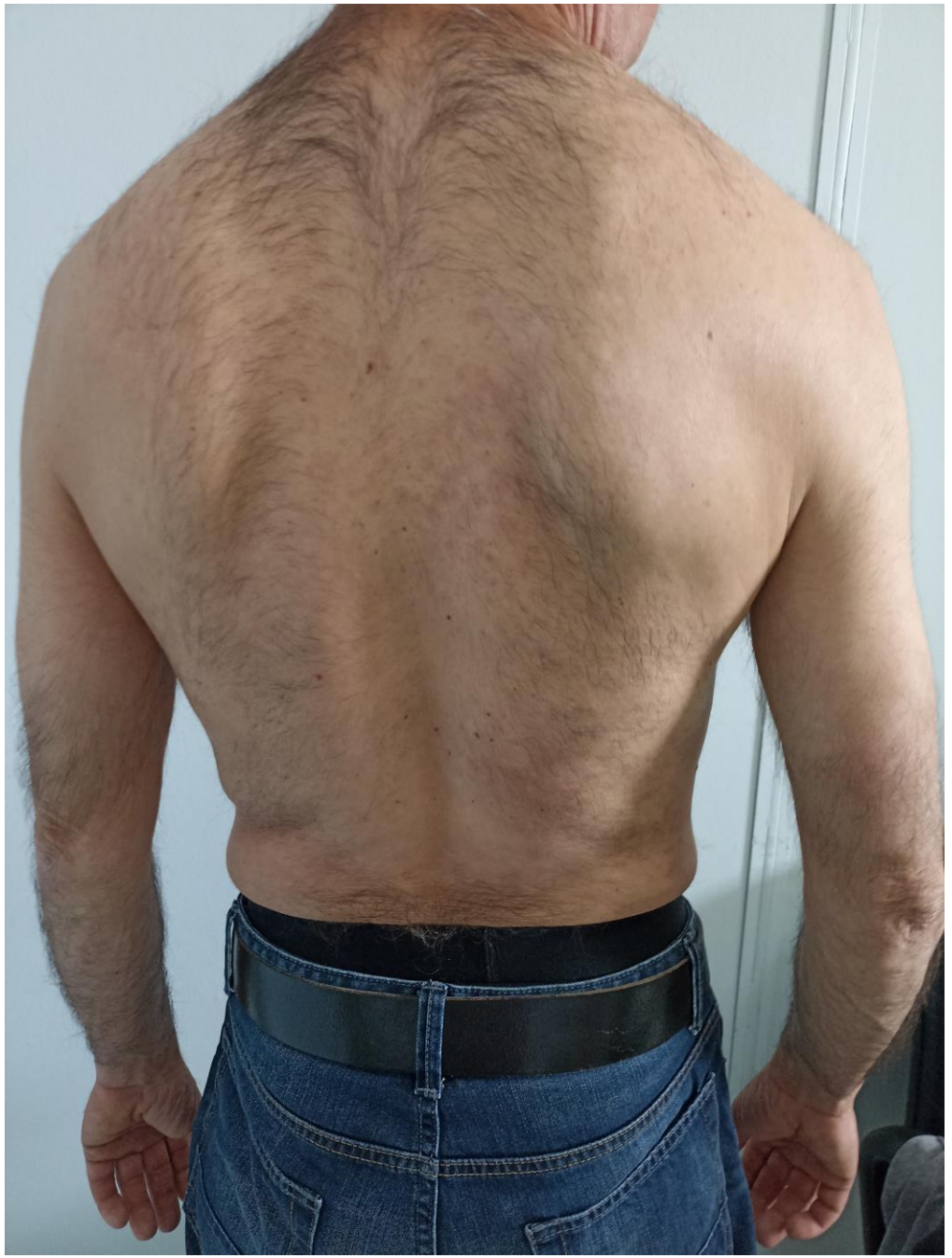
Καλό Πάσχα!



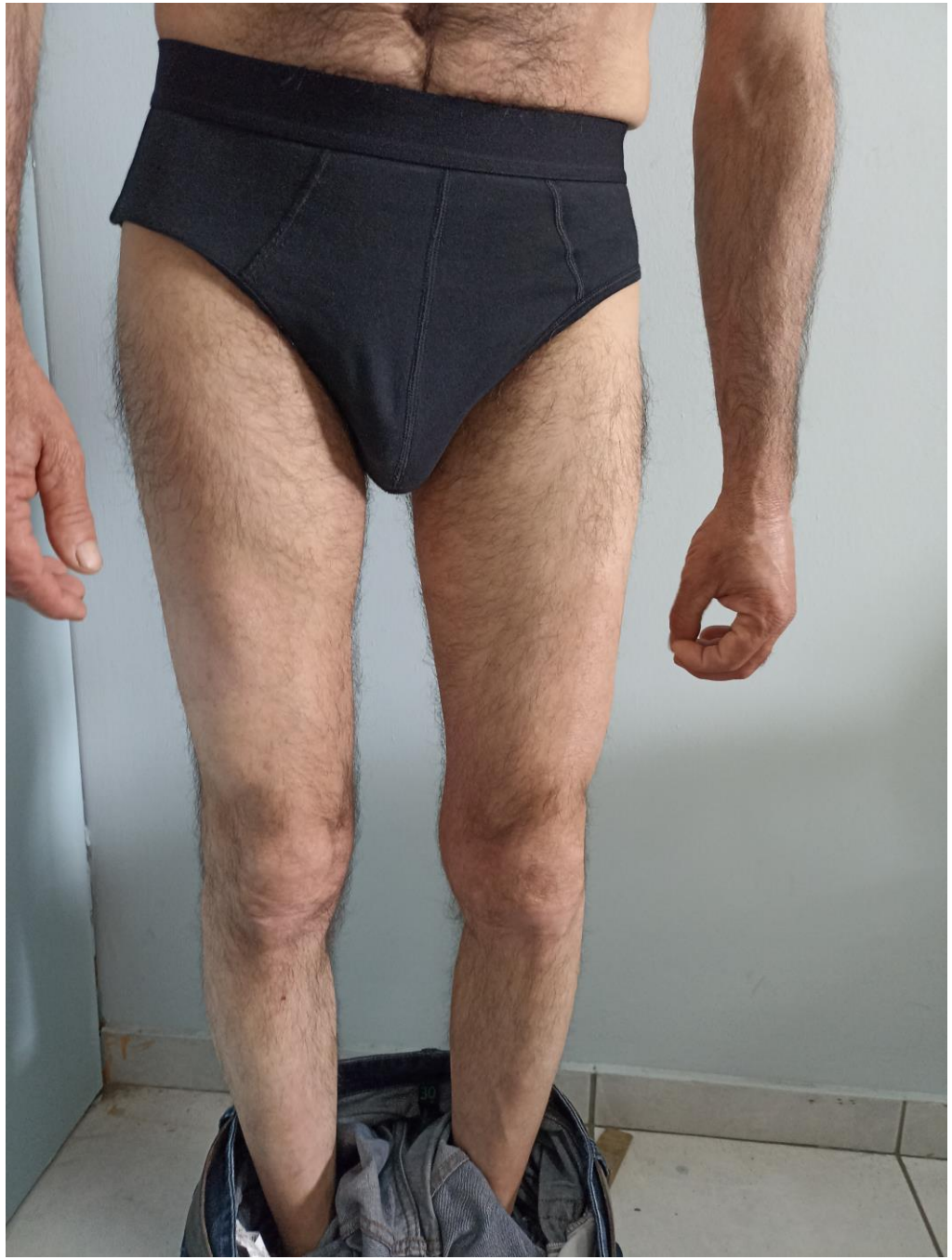


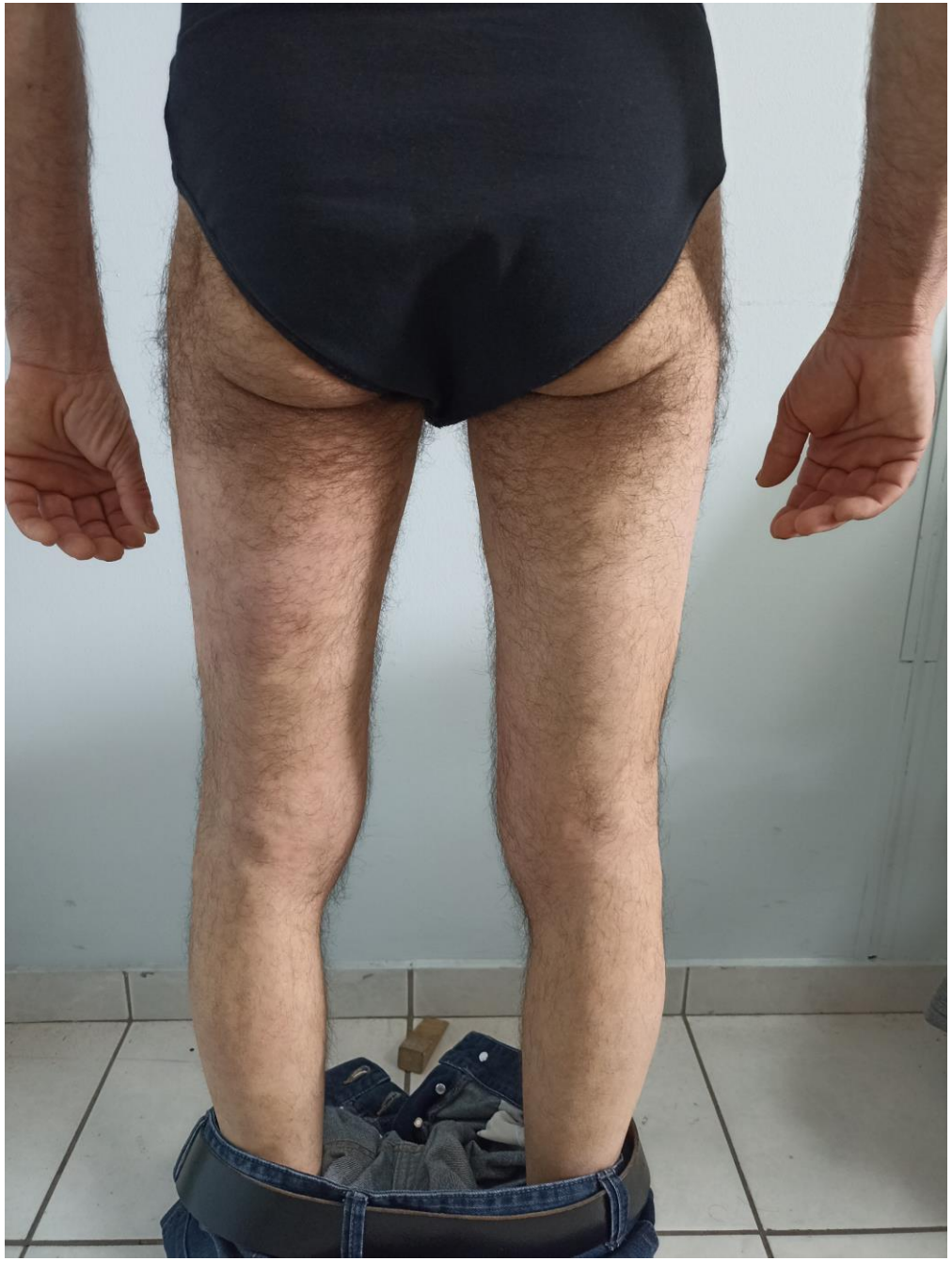
T16



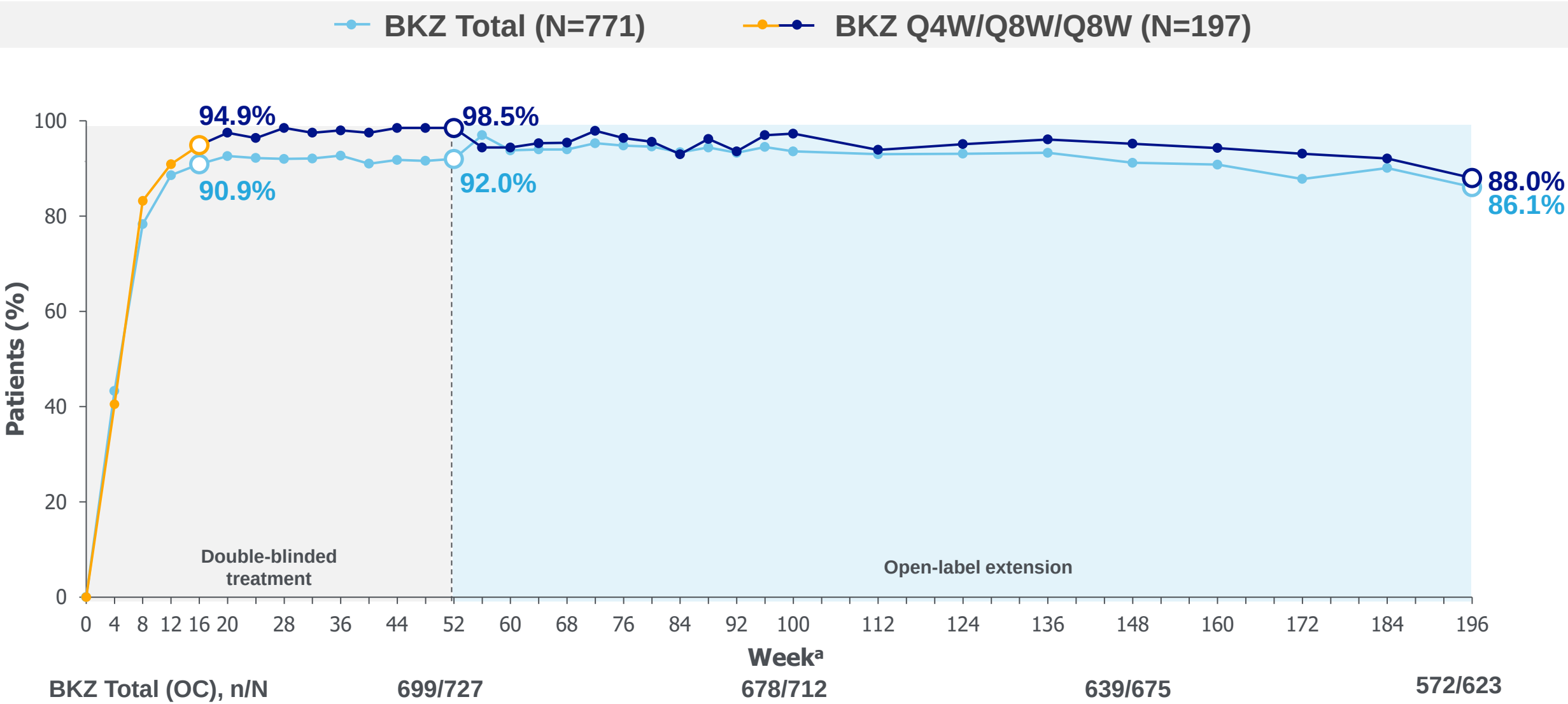


T16



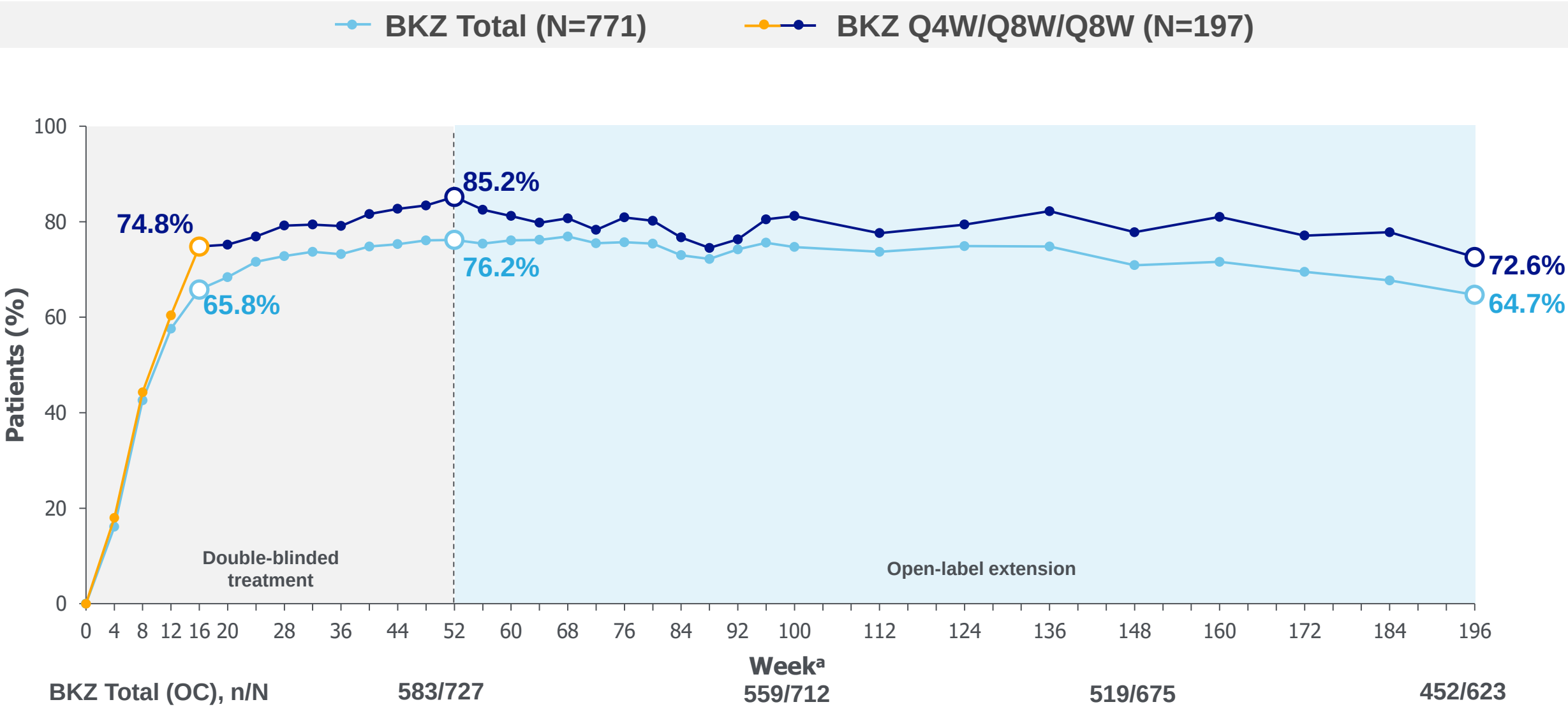


PASI 90, 4 έτη θεραπείας (mNRI)



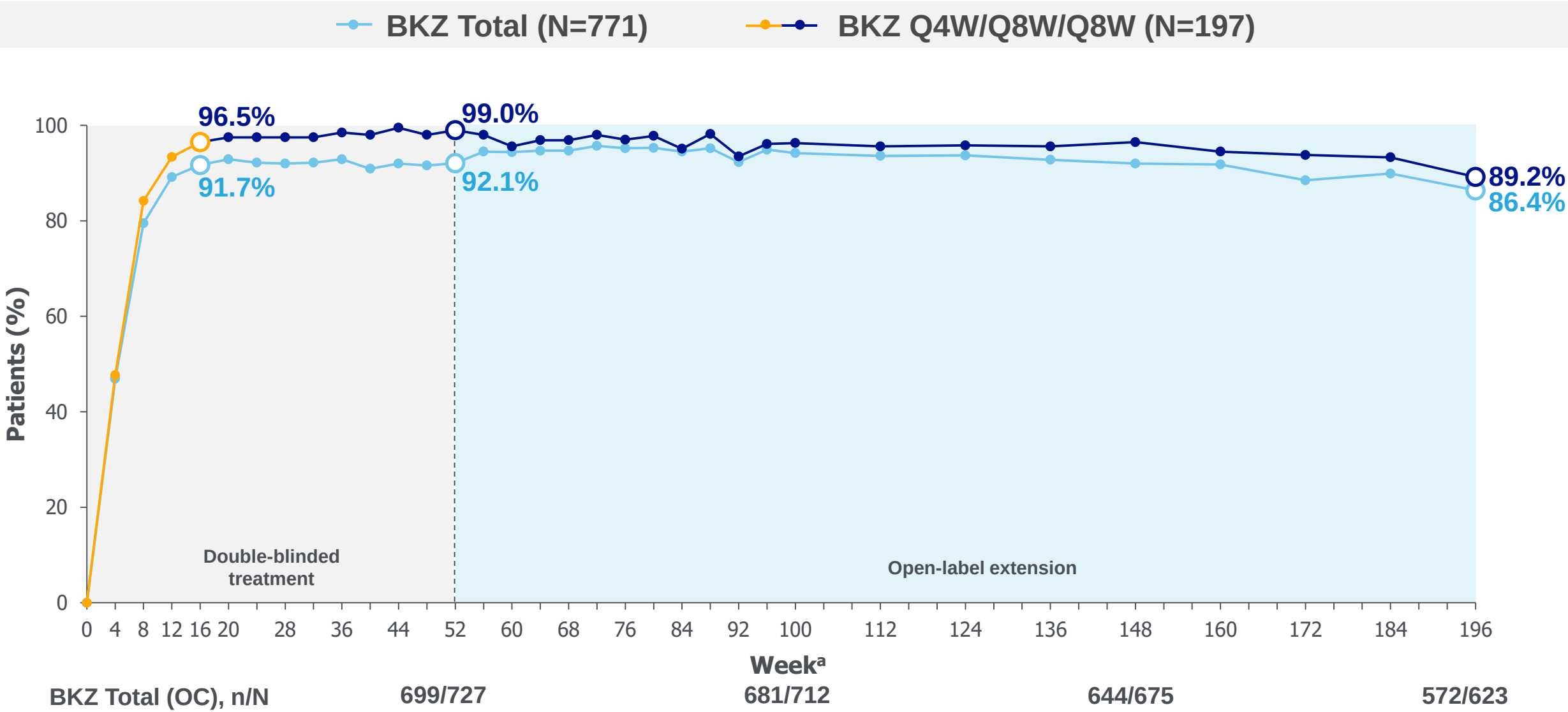
Gold line coloring signifies BKZ Q4W dosing. Missing data were imputed using modified non-responder imputation (mNRI): patients who discontinued due to lack of efficacy/treatment-related adverse events were considered non-responders at subsequent timepoints; multiple imputation was used for other missing data. For OC, data from the point of escape and through Week 56 of BE READY for these subjects are considered as missing, and from the point of entry into BE BRIGHT their data are presented as observed. **[a]** BE VIVID lasted 52 weeks and BE SURE and BE READY lasted 56 weeks; to pool data across studies, Week 56 data were not included. In this figure, the period after Week 52 corresponds to the BE BRIGHT OLE. BKZ: bimekizumab; mNRI: modified non-responder imputation; OC: observed cases; OLE: open-label extension; PASI 90: ≥90% improvement from baseline in Psoriasis Area and Severity Index; Q4W: every 4 weeks; Q8W: every 8 weeks. All content on this slide is from Strober B, et al. AAD 2024. Presentation 061013.

PASI 100 responses over 4 years (mNRI)

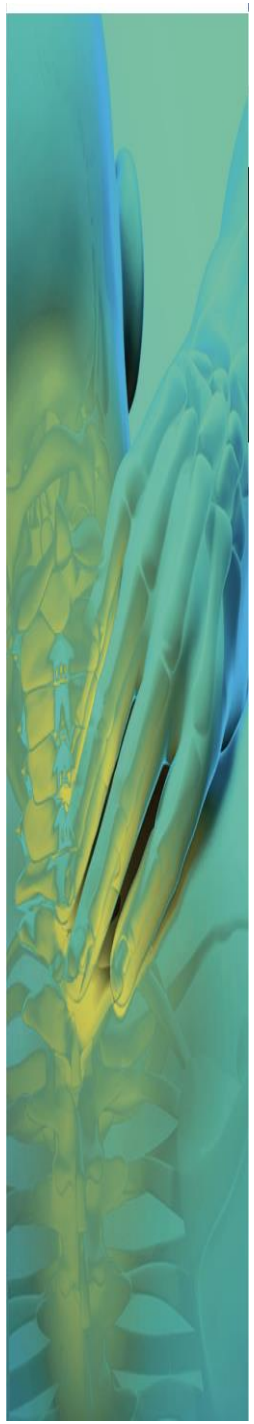


Gold line coloring signifies BKZ Q4W dosing. Missing data were imputed using modified non-responder imputation (mNRI): patients who discontinued due to lack of efficacy/treatment-related adverse events were considered non-responders at subsequent timepoints; multiple imputation was used for other missing data. For OC, data from the point of escape and through Week 56 of BE READY for these subjects are considered as missing, and from the point of entry into BE BRIGHT their data are presented as observed. **[a]** BE VIVID lasted 52 weeks and BE SURE and BE READY lasted 56 weeks; to pool data across studies, Week 56 data were not included. In this figure, the period after Week 52 corresponds to the BE BRIGHT OLE. BKZ: bimekizumab; mNRI: modified non-responder imputation; OC: observed cases; OLE: open-label extension; PASI 100: 100% improvement from baseline in Psoriasis Area and Severity Index; Q4W: every 4 weeks; Q8W: every 8 weeks. All content on this slide is from Strober B, et al. AAD 2024. Presentation 061013.

PASI ≤2, 4 έτη θεραπείας (mNRI)



Gold line coloring signifies BKZ Q4W dosing. Missing data were imputed using modified non-responder imputation (mNRI): patients who discontinued due to lack of efficacy/treatment-related adverse events were considered non-responders at subsequent timepoints; multiple imputation was used for other missing data. For OC, data from the point of escape and through Week 56 of BE READY for these subjects are considered as missing, and from the point of entry into BE BRIGHT their data are presented as observed. **[a]** BE VIVID lasted 52 weeks and BE SURE and BE READY lasted 56 weeks; to pool data across studies, Week 56 data were not included. In this figure, the period after Week 52 corresponds to the BE BRIGHT OLE. BKZ: bimekizumab; mNRI: modified non-responder imputation; OC: observed cases; OLE: open-label extension; PASI: Psoriasis Area and Severity Assessment Index; Q4W: every 4 weeks; Q8W: every 8 weeks. All content on this slide is from Strober B, et al. AAD 2024. Presentation 061013.



ΚΛΙΝΙΚΟ ΠΕΡΙΣΤΑΤΙΚΟ 2

ΔΗΜΟΓΡΑΦΙΚΑ

- Άρρεν
- 52 ετών
- Ελεύθερος επαγγελματίας

ΣΥΝΝΟΣΗΡΟΤΗΤΕΣ

- Αρτηριακή Υπέρταση
- Υπερχοληστερολαιμία
- Παχυσαρκία
- Ψωριασική αρθρίτιδα

ΣΩΜΑΤΟΜΕΤΡΙΚΑ ΣΤΟΙΧΕΙΑ-ΣΥΝΗΘΕΙΕΣ

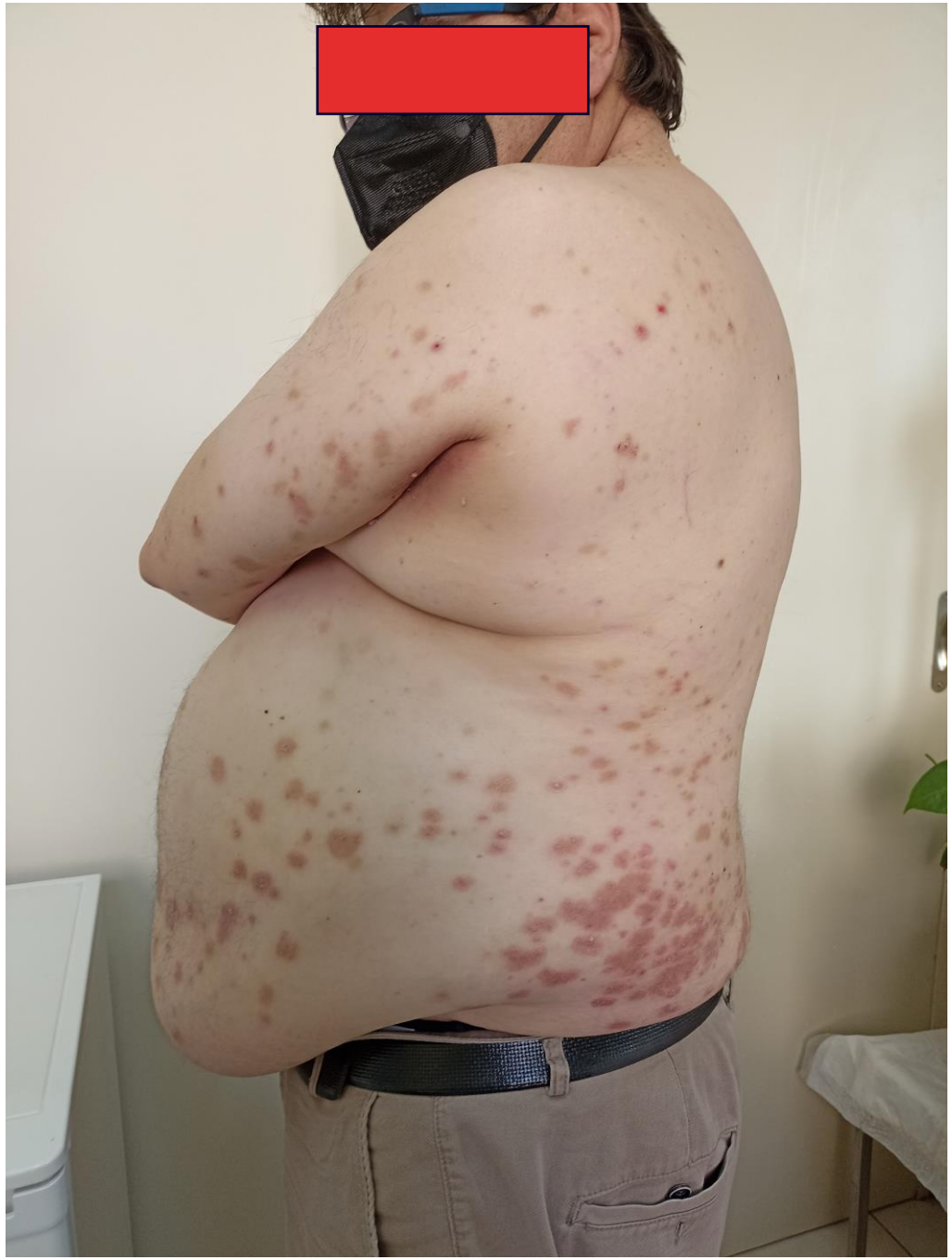
- Ύψος: 165 εκ.
- Βάρος: 120 Kg
- BMI: 44,1
- Κάπνισμα: Ναι
- Αλκοόλ: κοινωνικός πότης

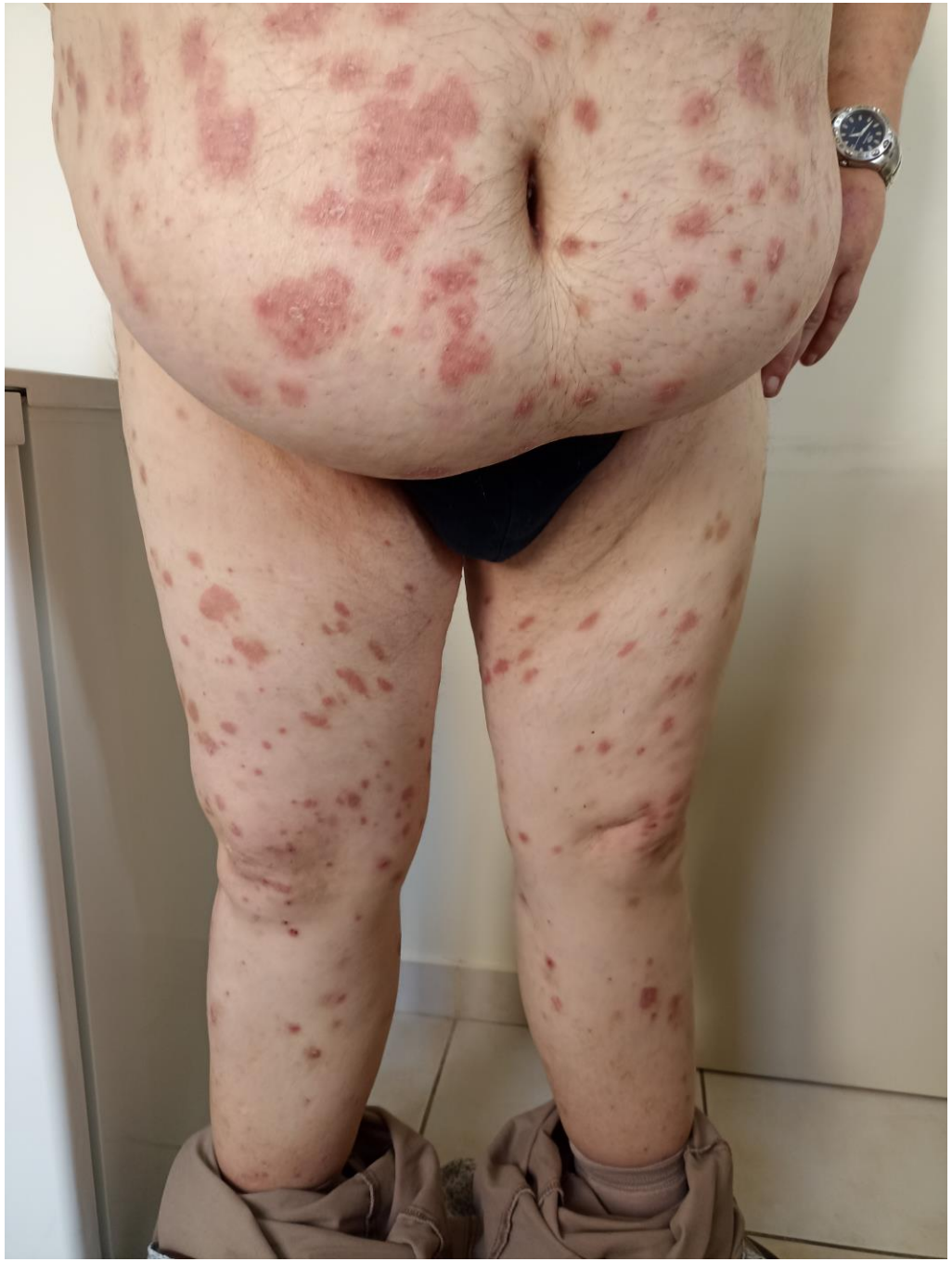
ΙΣΤΟΡΙΚΟ ΨΩΡΙΑΣΙΚΗΣ ΝΟΣΟΥ-ΕΙΔΙΚΕΣ ΕΝΤΟΠΙΣΕΙΣ

- 2000: Ψωρίαση κατά πλάκας
- 2022: Ψωριασική αρθρίτιδα
- Μέχρι το 2022 μόνο τοπικές αγωγές
- 2022 MTX, διακοπή λόγω AE
- Απρίλιο 2023 έναρξη αγωγής με bimekizumab

BMI: Body Mass Index

To





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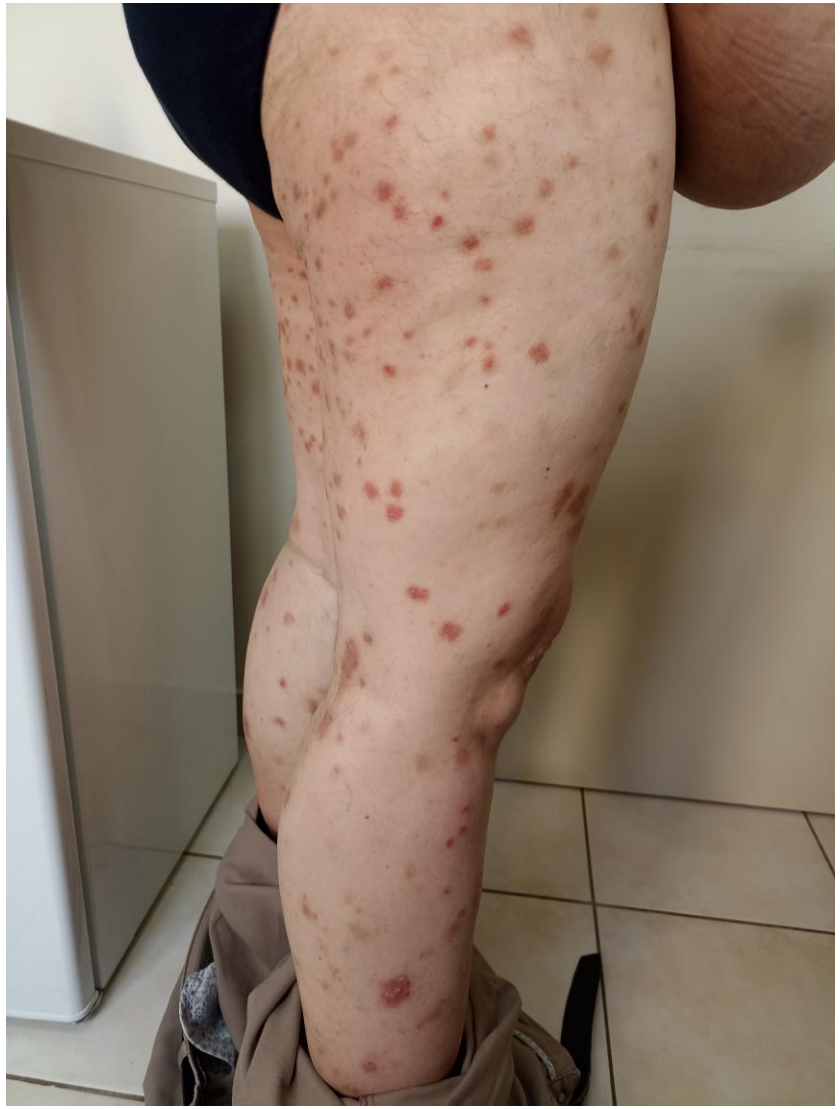
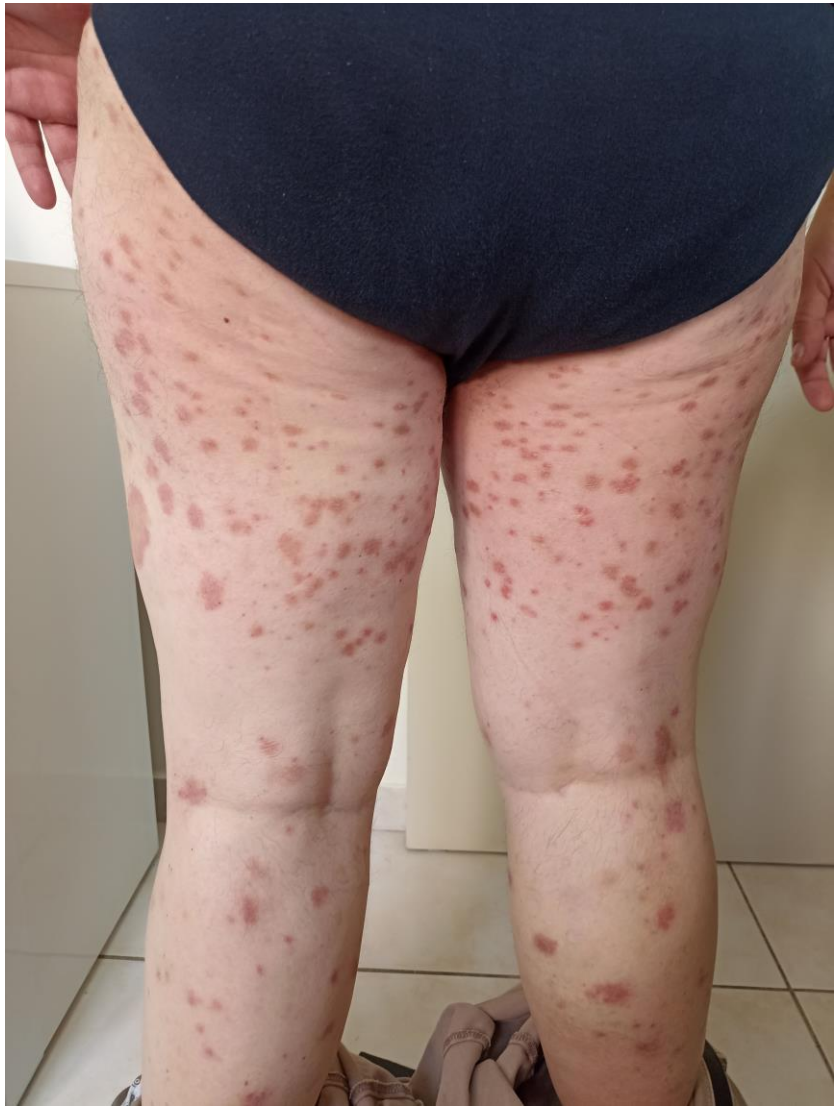
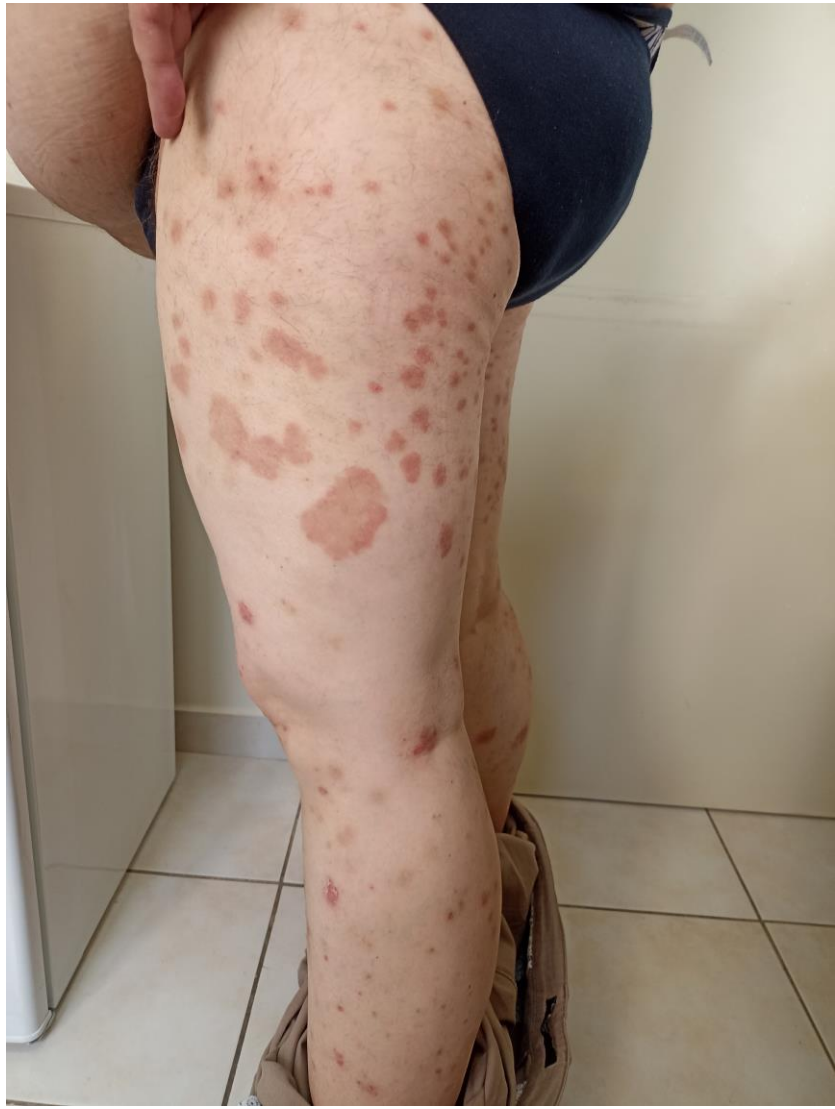
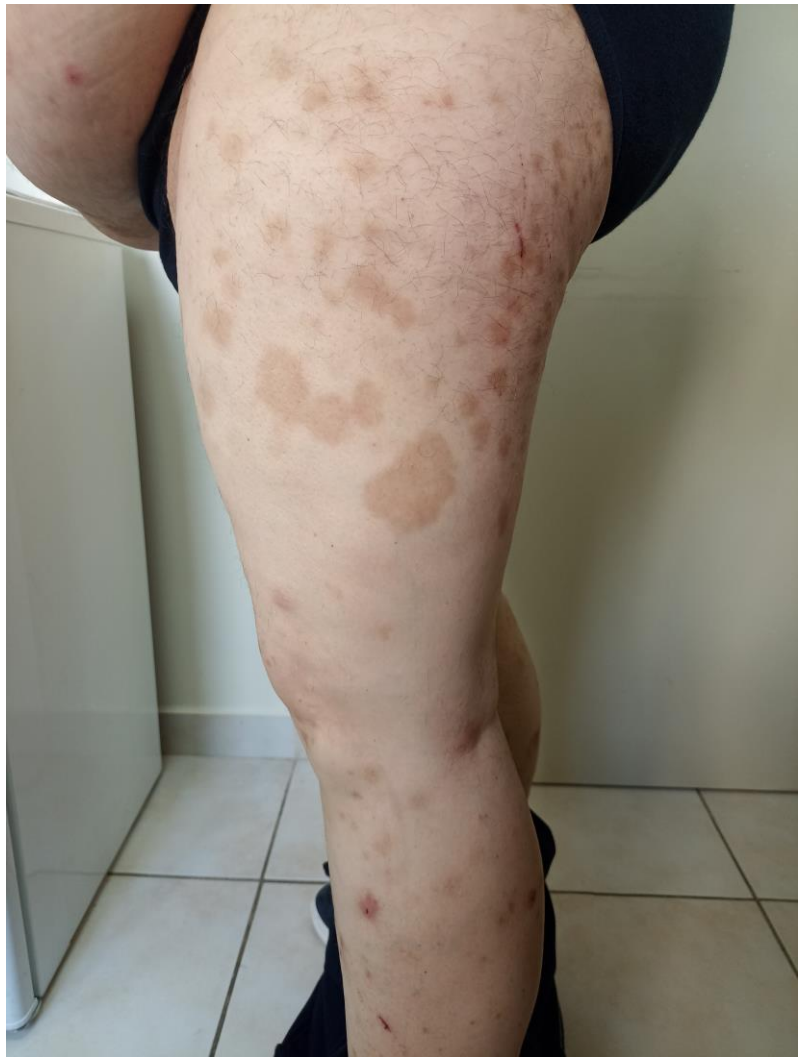
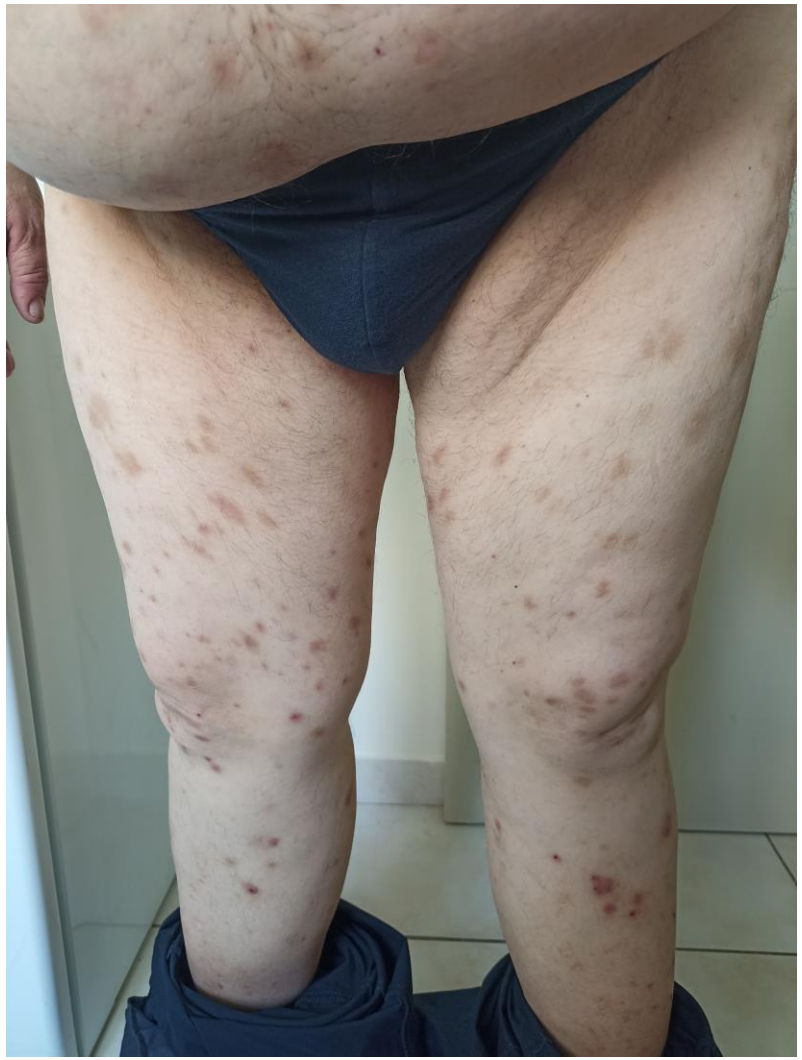


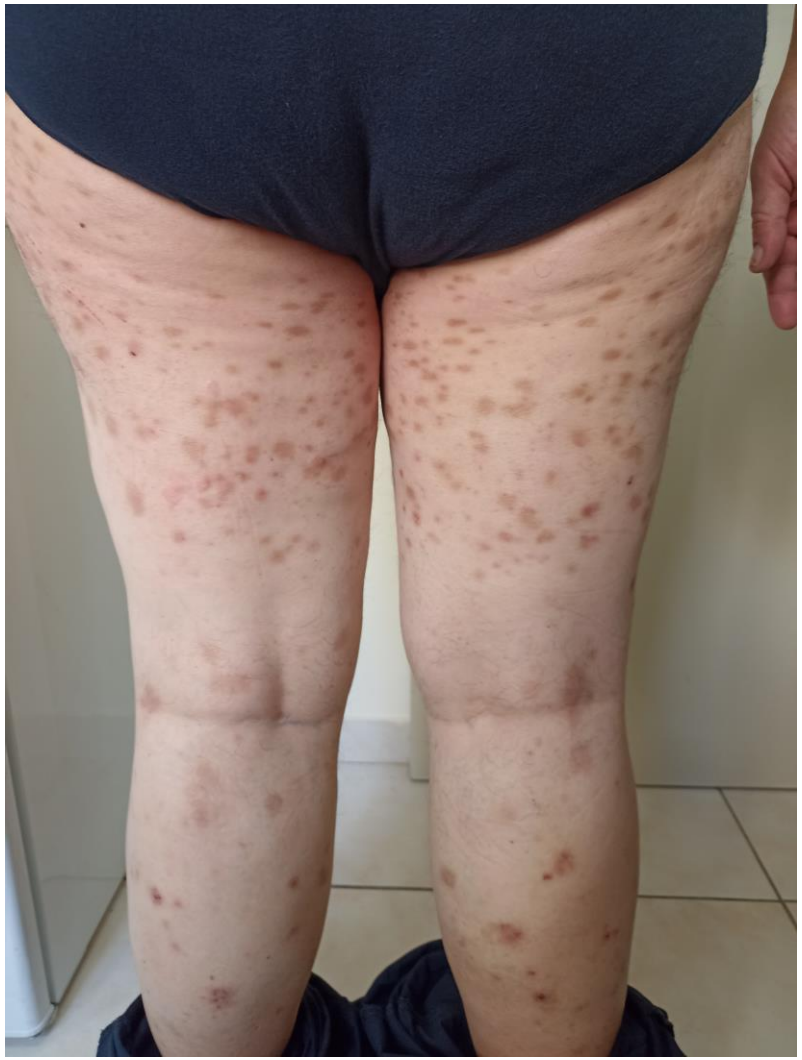




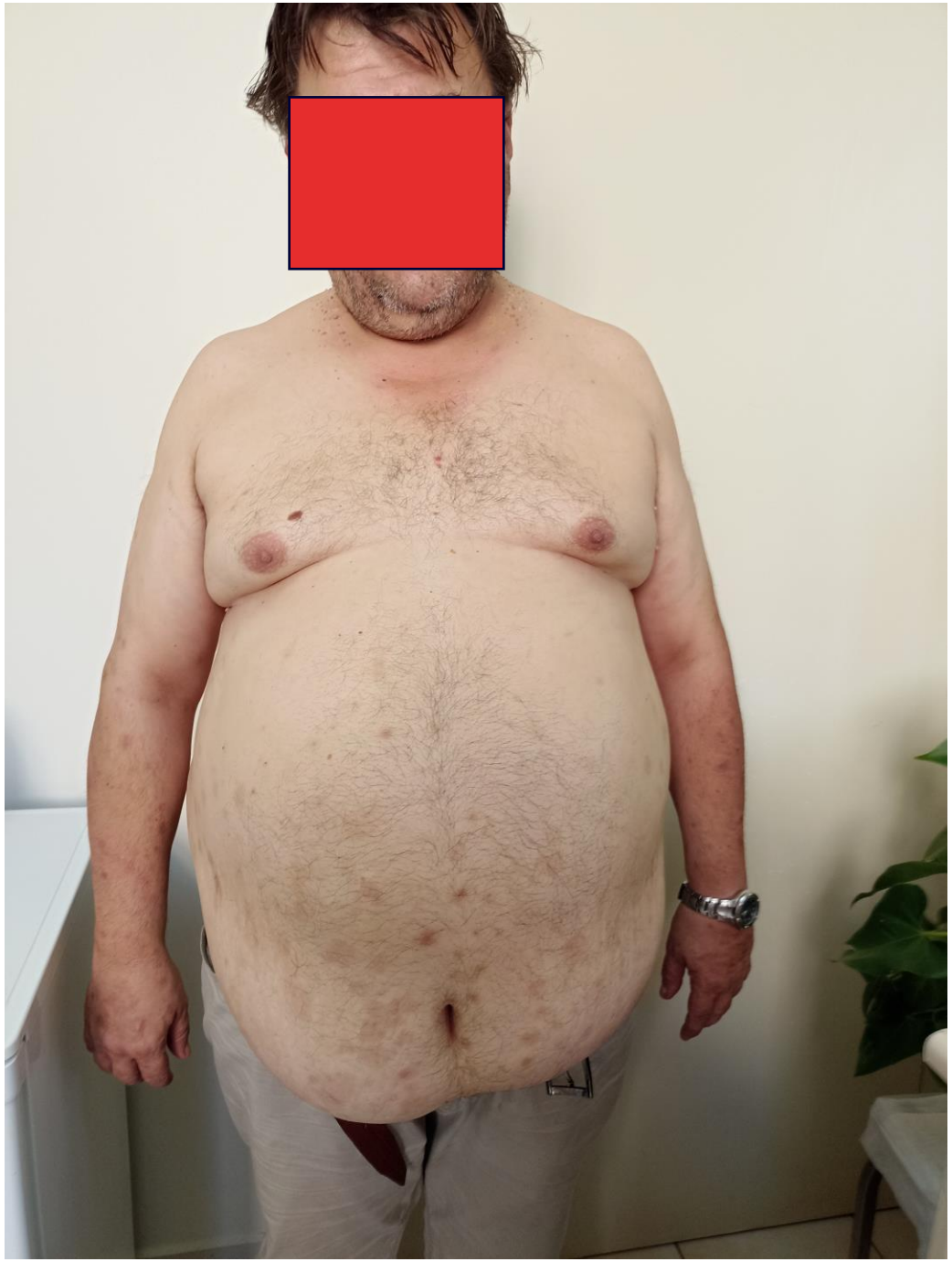
T4

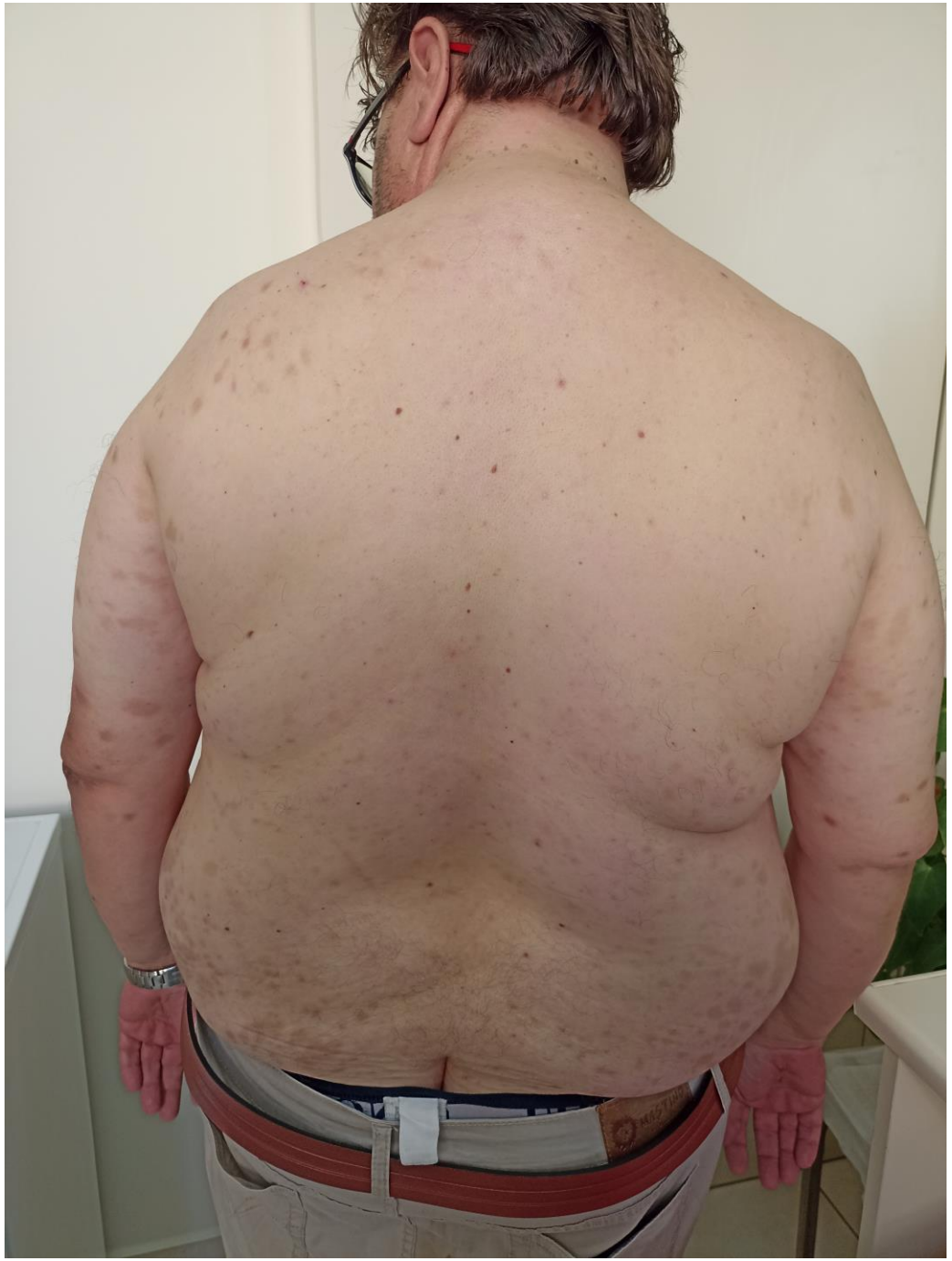




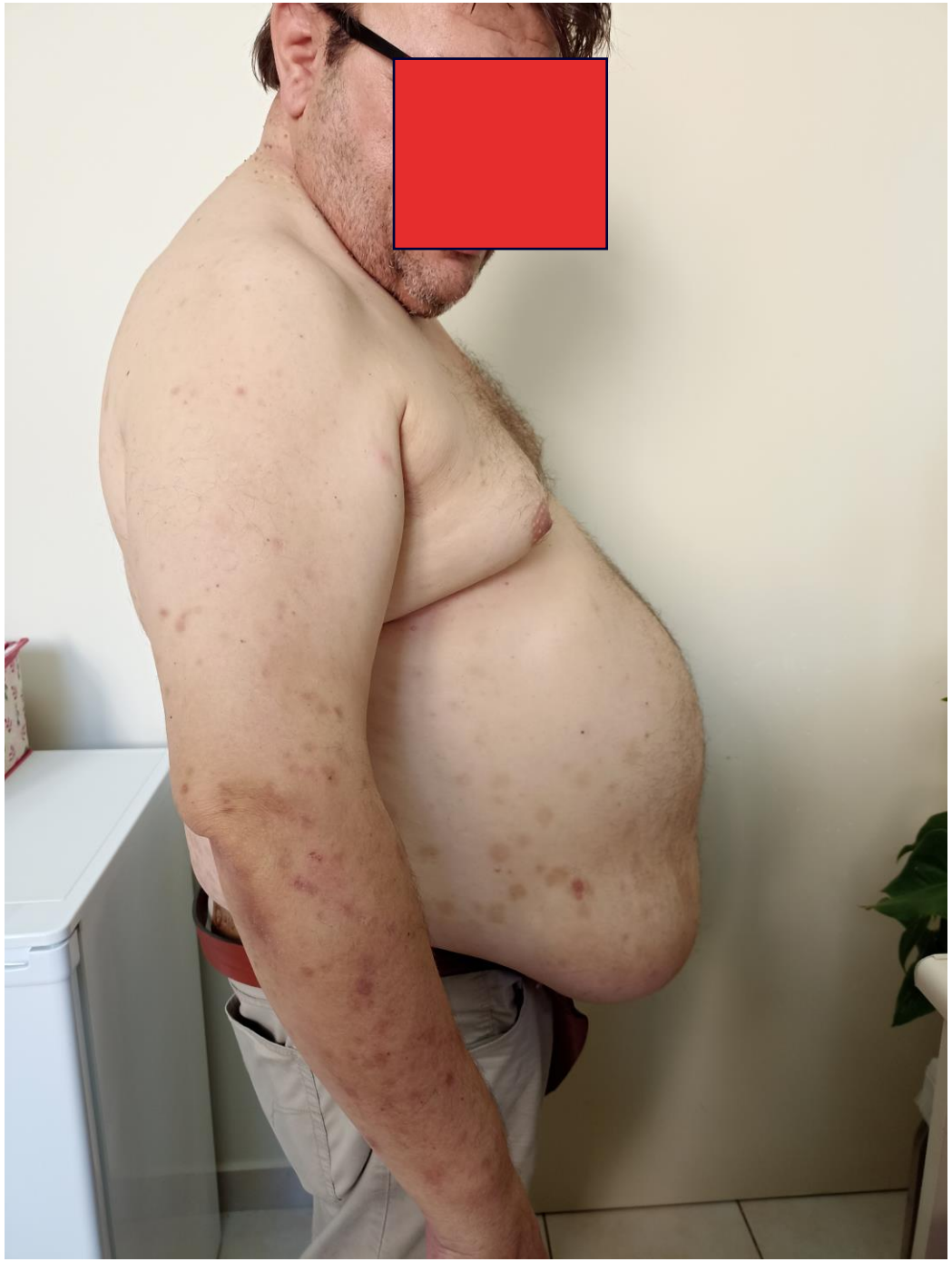


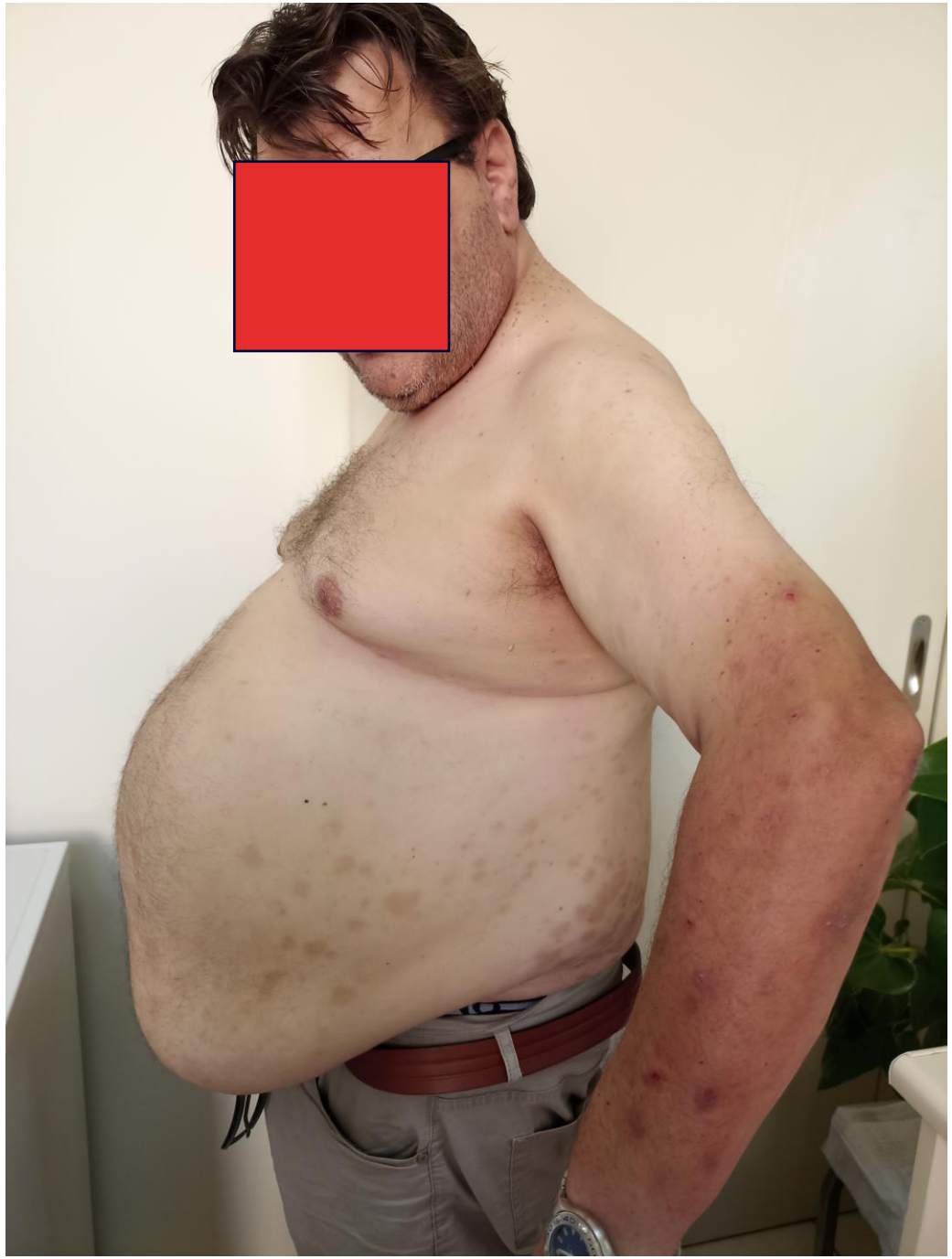
T16



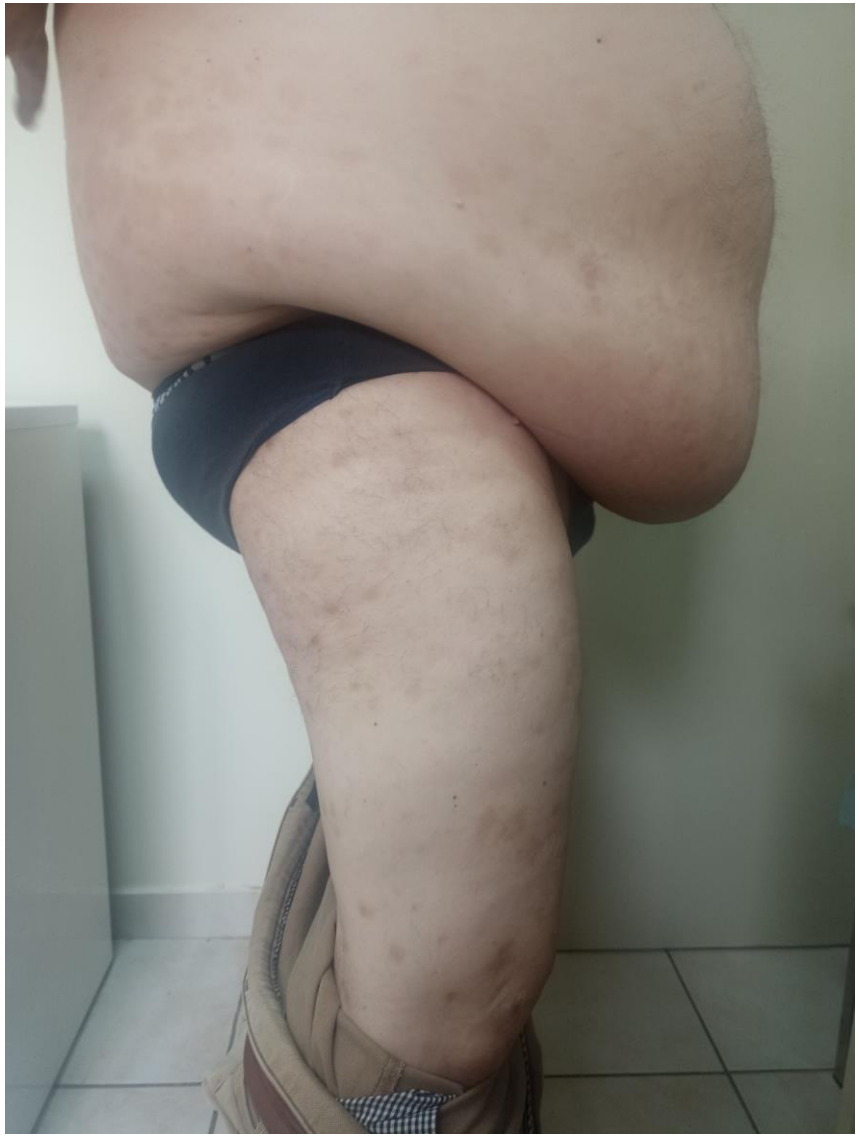


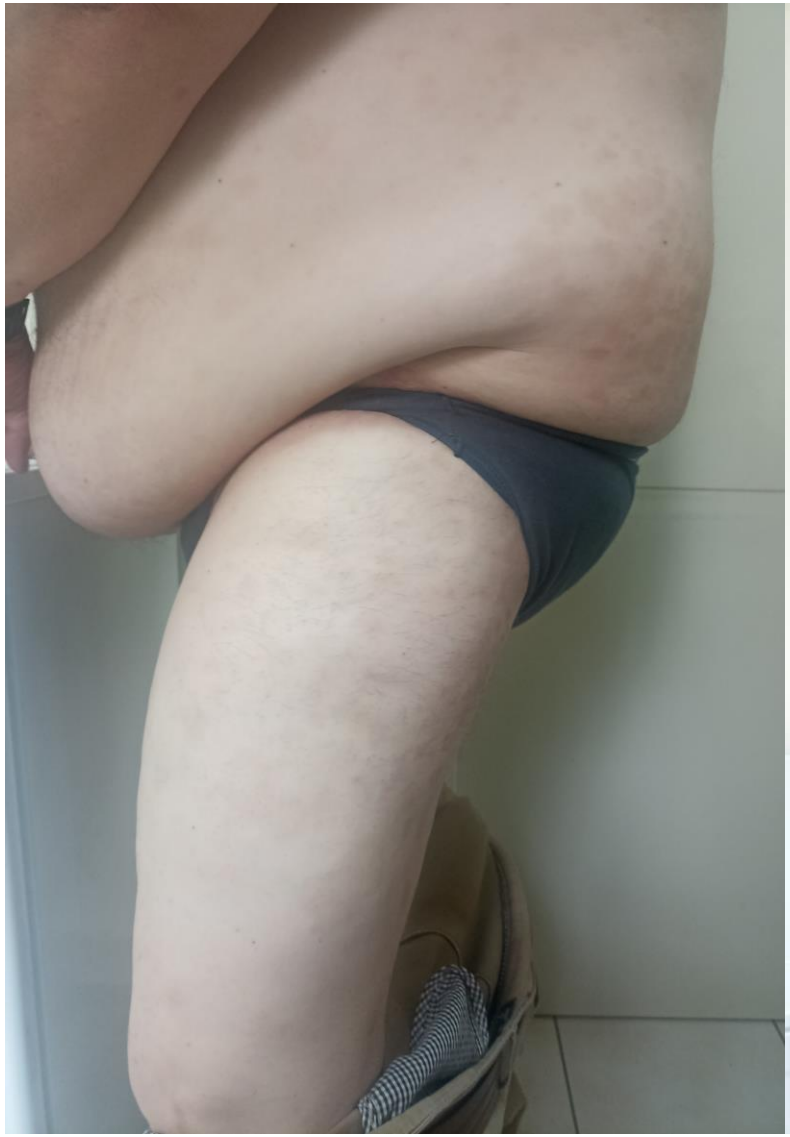
T16

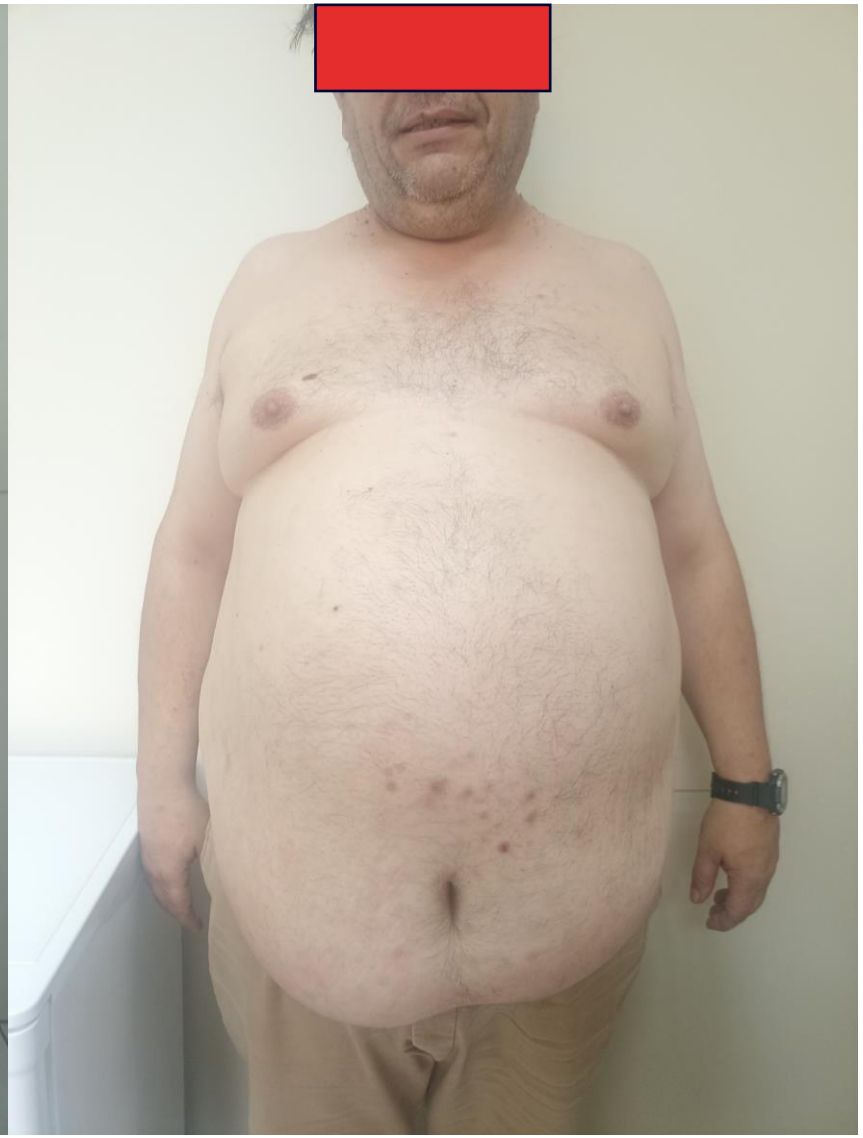




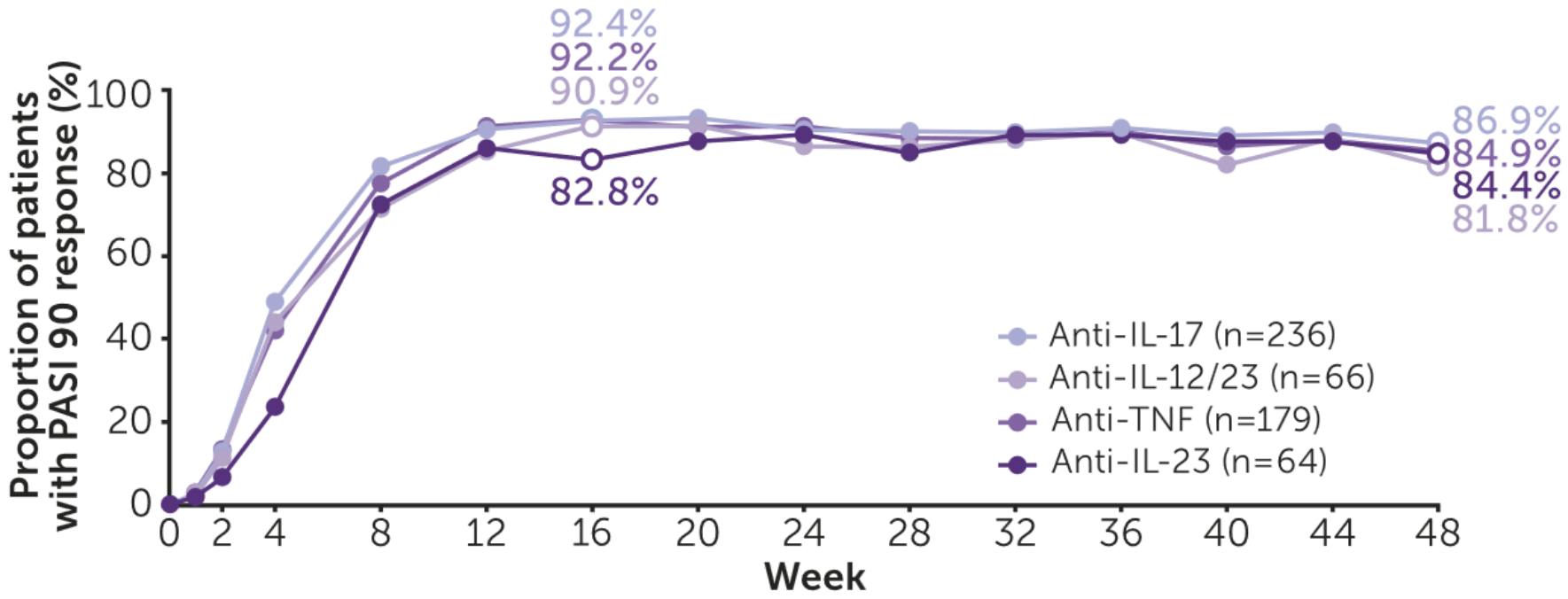
18 μήνες





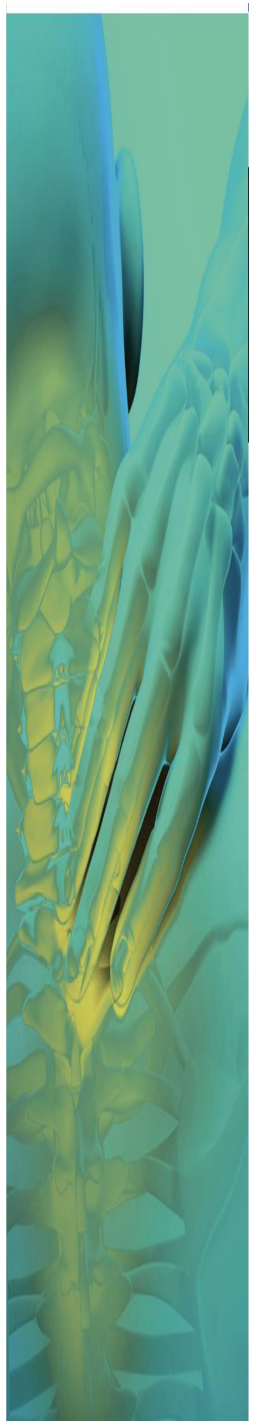


PASI 90, Εβδομάδα 48, *με βάση την κατηγορία* προηγουμένων βιολογικών θεραπειών (NRI)



- In biologic-experienced patients, high levels of PASI 90 responses were observed across all subgroups by type of prior biologic

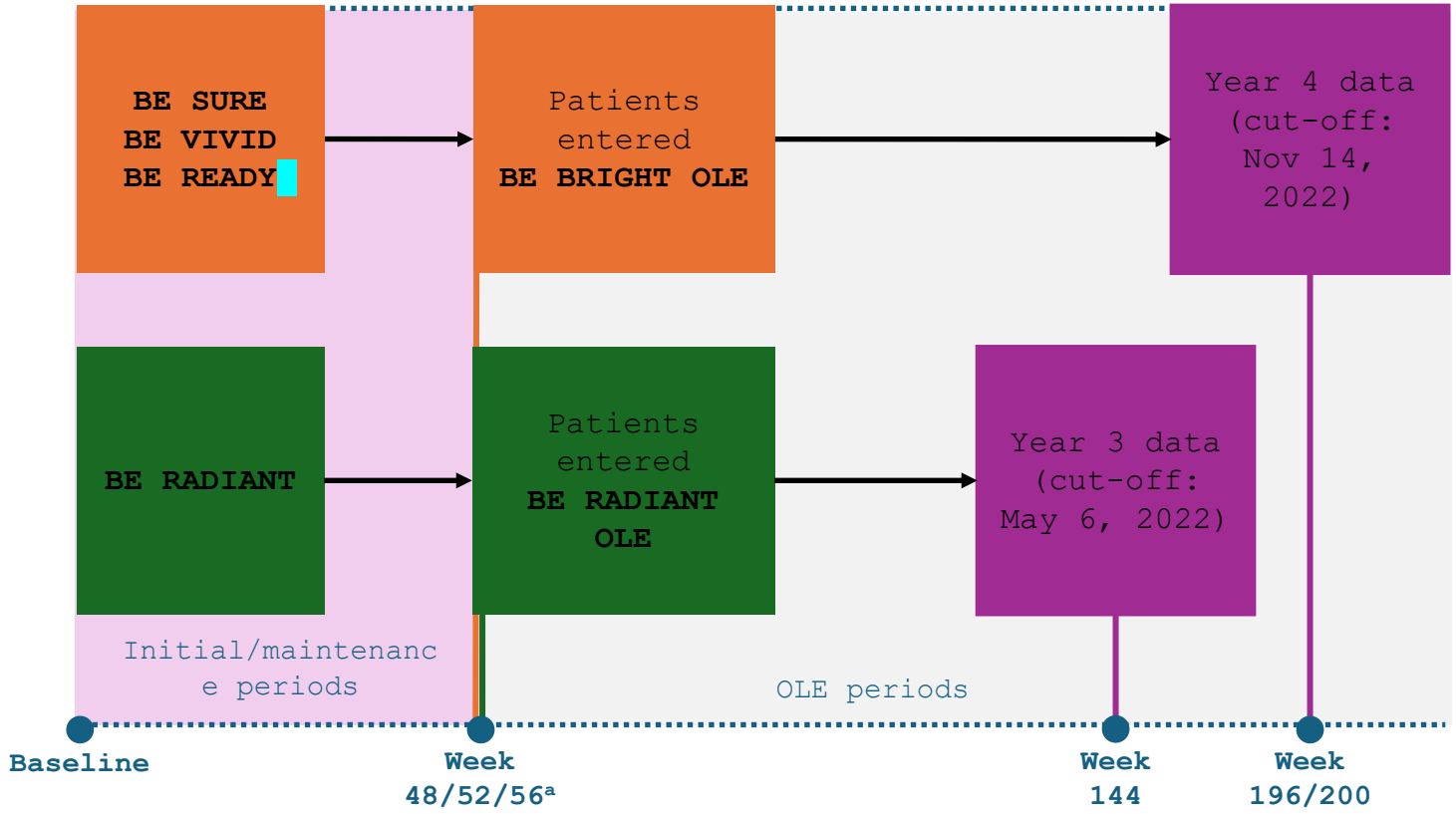
- Week 48 was the last common timepoint across the included studies; BE SURE and BE READY ran for 56 weeks, BE VIVID ran for 52 weeks, and BE RADIANT ran for 48 weeks; to pool data across all four studies, data from Weeks 52–56 were not included.
- IL, interleukin; NRI, non-responder imputation; PASI, psoriasis area and severity index; TNF, tumour necrosis factor. All content on this slide is from Lebwohl et al. Fall Clinical 2022.



Ασφάλεια

Included Studies

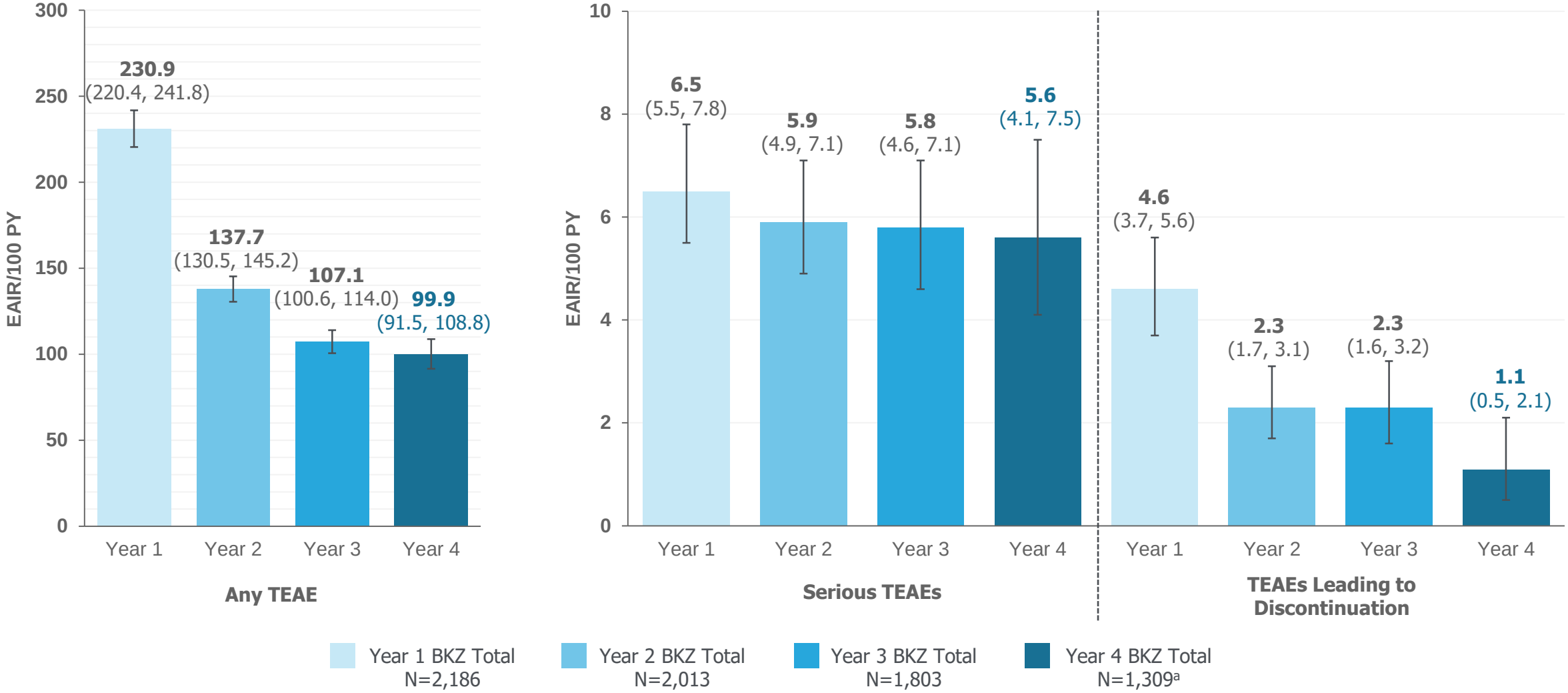
- Data were pooled for all patients who received ≥1 BKZ dose in the studies below (**BKZ Total**).



- The BE RADIANT trial ran for 3 years; therefore, the overall total pooled exposure only includes BE RADIANT data to Year 3, in addition to BE BRIGHT data to Year 4.

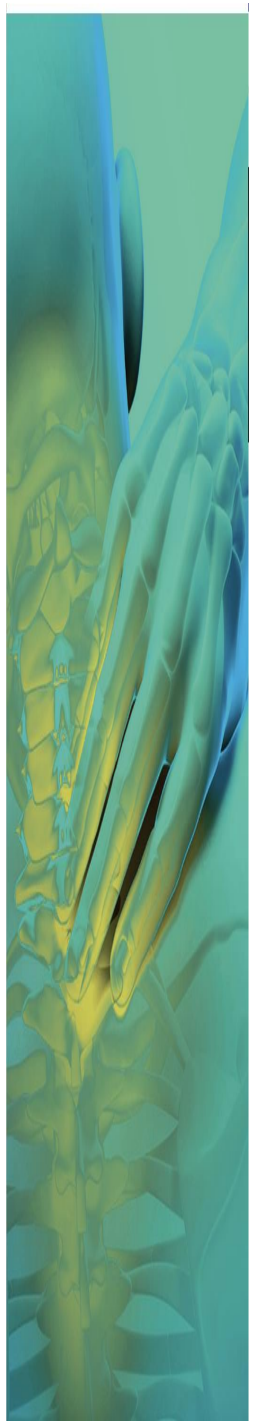
Data and any adjudication are shown as of the data cut-offs (BE RADIANT: May 6, 2022; BE BRIGHT: Nov 14, 2022). **[a]** Patients entered the BE BRIGHT OLE at Week 52 if they were enrolled in BE VIVID and Week 56 if they were enrolled in BE SURE or BE READY; patients in BE RADIANT entered the BE RADIANT OLE period at Week 48. BKZ: bimekizumab; OLE, open-label extension. All content on this slide is from Gordon KB et al. AAD 2024. Presentation 52671.

Ποσοστά επίπτωσης TEAE: Οποιεσδήποτε, Σοβαρές και Διακοπές με την πάροδο του χρόνου (Total BKZ)



Overall, the EAIR of TEAEs **decreased with longer BKZ exposure** over 4 years

Data are reported as EAIRs; error bars represent 95% CI. Data are presented for the BKZ Total for the full pooled trial period, and separately for Years 1 (Weeks 0–52), 2 (Weeks 52–104), 3 (Weeks 104–156), and 4 (Weeks 156–208). Data were pooled for all patients who received ≥1 BKZ dose in each of the periods examined (BKZ Total). **[a]** BE RADIANT patients are not included after Year 3. BKZ: bimekizumab; CI: confidence intervals; EAIR: exposure-adjusted incidence rate; PY: patient-years; TEAE: treatment-emergent adverse event. All content on this slide is from Gordon KB et al. AAD 2024. Presentation 52671.

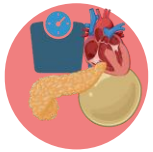


ΚΛΙΝΙΚΟ ΠΕΡΙΣΤΑΤΙΚΟ 3

ΔΗΜΟΓΡΑΦΙΚΑ

- Θήλυ
- 56 ετών
- Άνεργη

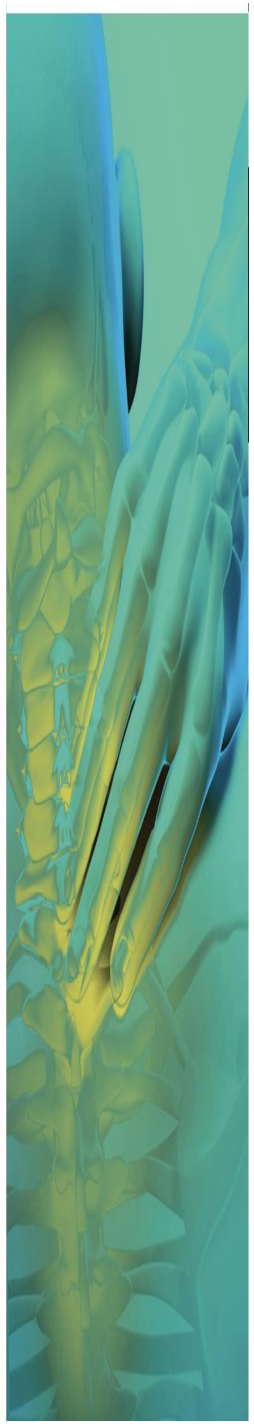
ΣΥΝΝΟΣΗΡΟΤΗΤΕΣ



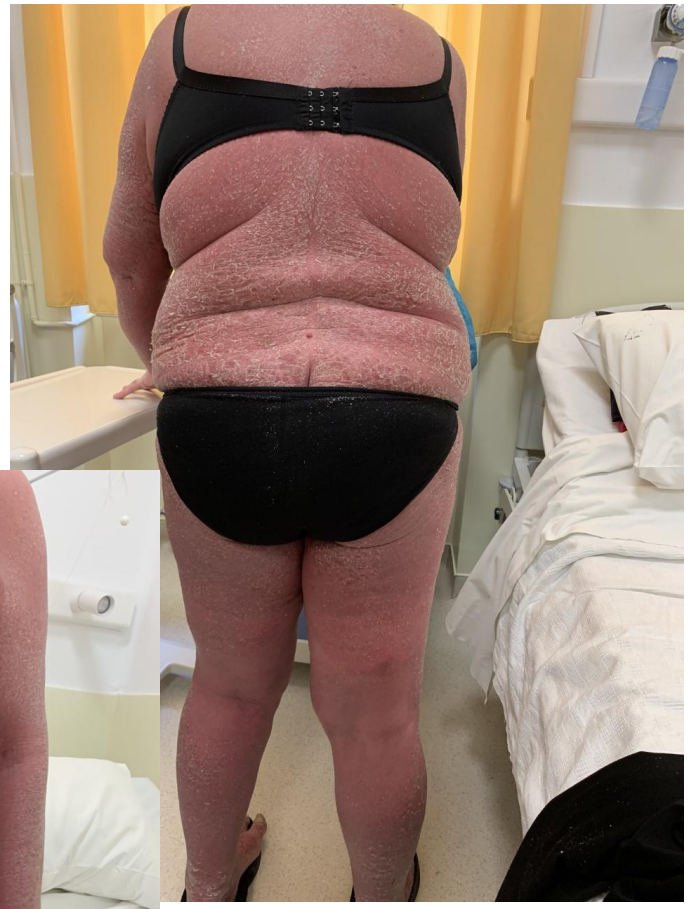
- Υπερχοληστερολαιμία
- Κατάθλιψη
- Παχυσαρκία
- Ψωριασική αρθρίτιδα

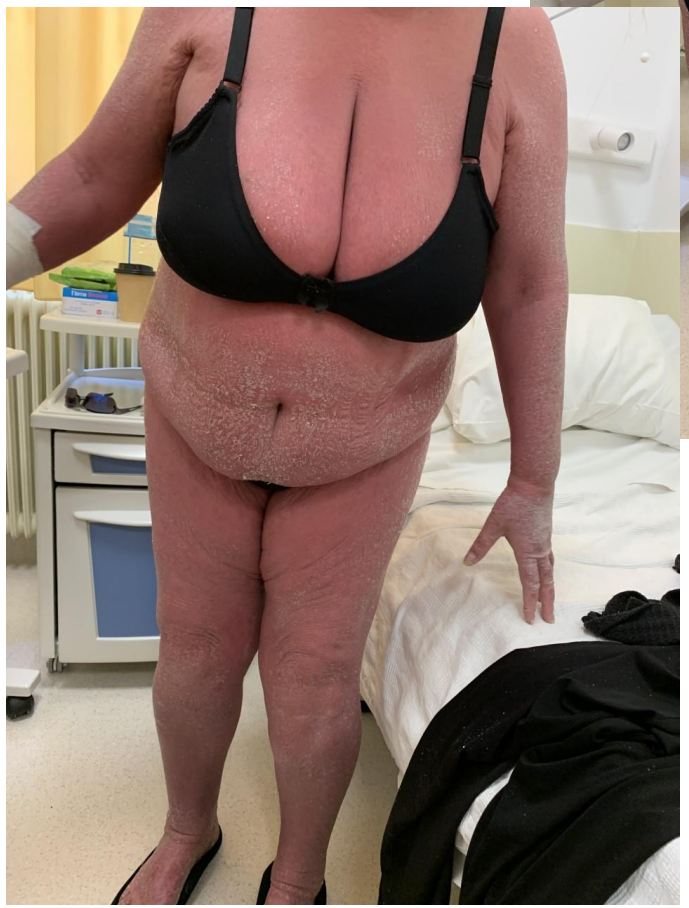
ΣΩΜΑΤΟΜΕΤΡΙΚΑ ΣΤΟΙΧΕΙΑ-ΣΥΝΗΘΕΙΕΣ

- Ύψος: 162 εκ.
- Βάρος: 120 Kg
- BMI: 44
- Κάπνισμα: Όχι
- Αλκοόλ: κοινωνικός πότης



ΚΛΙΝΙΚΟ ΠΕΡΙΣΤΑΤΙΚΟ 3





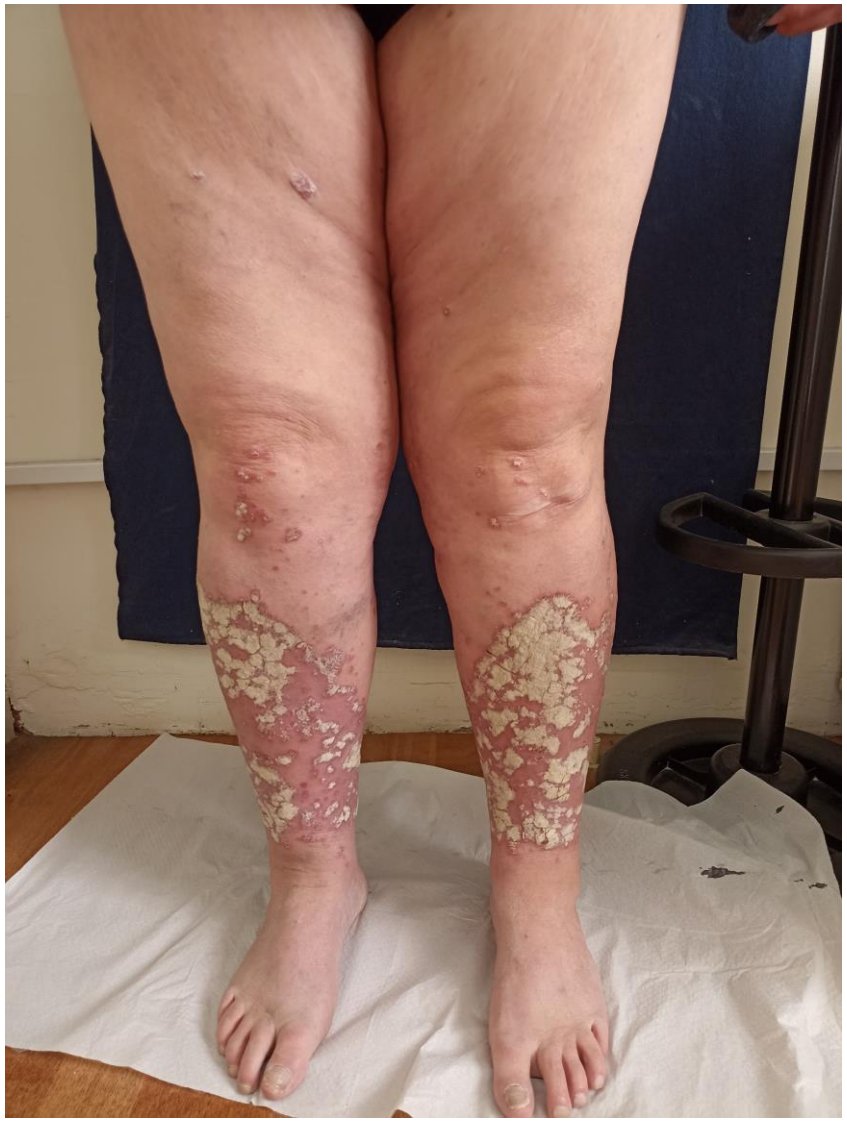
ΙΣΤΟΡΙΚΟ ΨΩΡΙΑΣΙΚΗΣ ΝΟΣΟΥ- ΕΙΔΙΚΕΣ ΕΝΤΟΠΙΣΕΙΣ

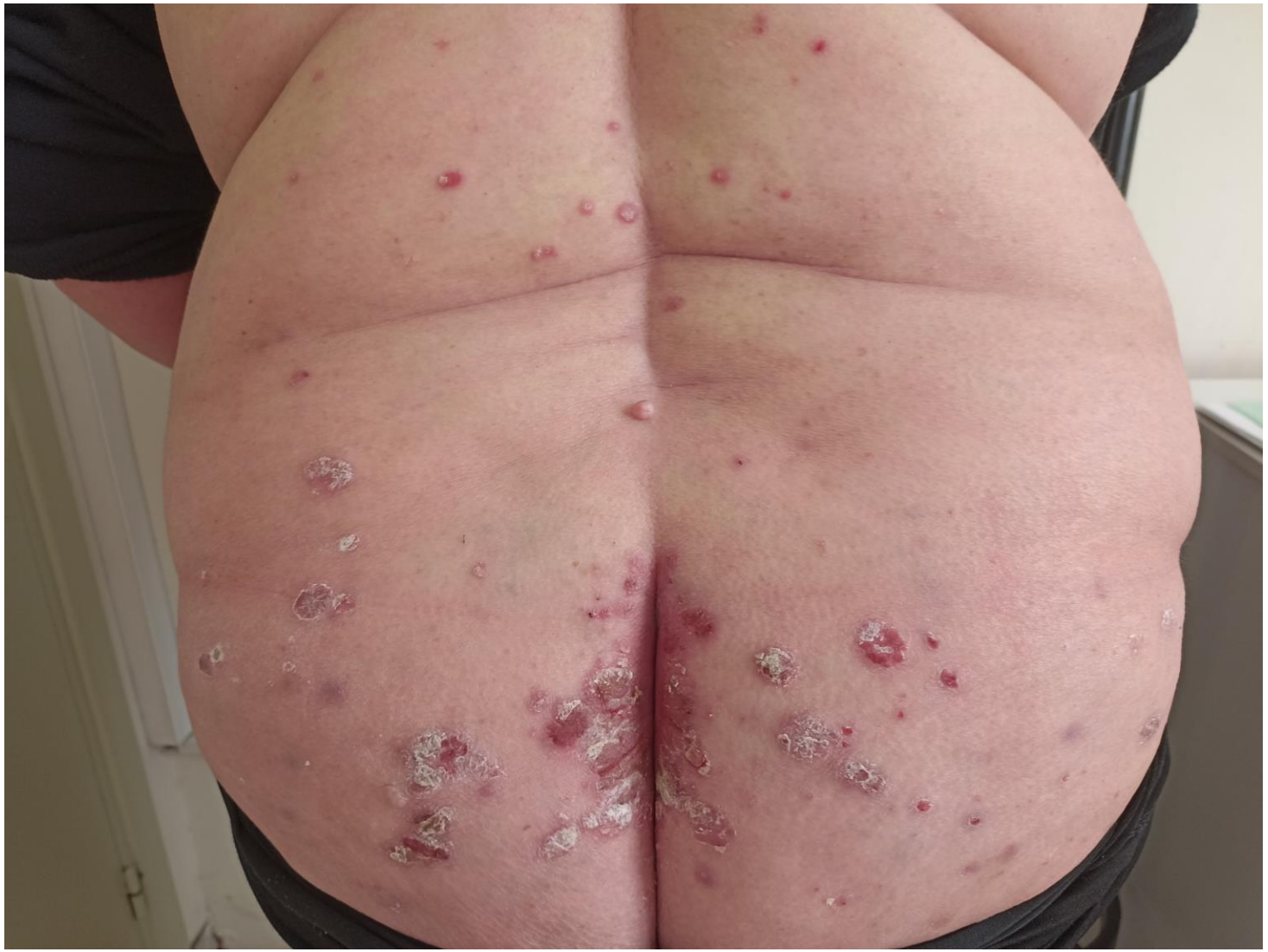
- 2000: Ψωρίαση κατά πλάκας
- 2015: Ψωριασική αρθρίτιδα
- Πολλαπλές συστηματικές αγωγές και νοσηλείες για εξάρσεις ερυθροδερμικής ψωρίασης (κυκλοσπορίνη, MTX, ασιτρετίνη, ανταλιμουμάμπη, ινφλιξιμάμπη, μπρονταλουμάμπη, σεκουκινουμάμπη)

- Φεβρουάριο 2023 έναρξη αγωγής με bimekizumab

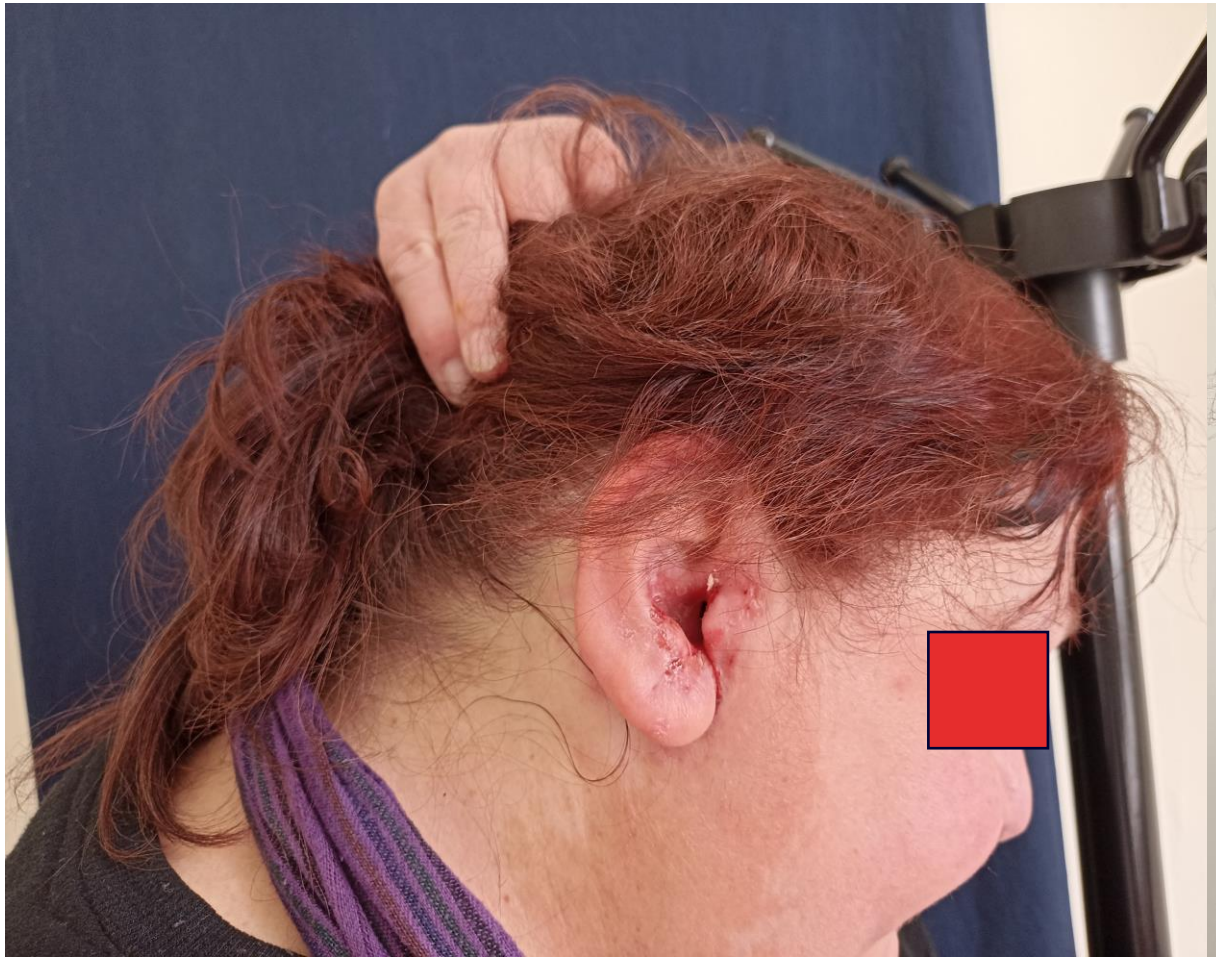
BMI: Body Mass Index

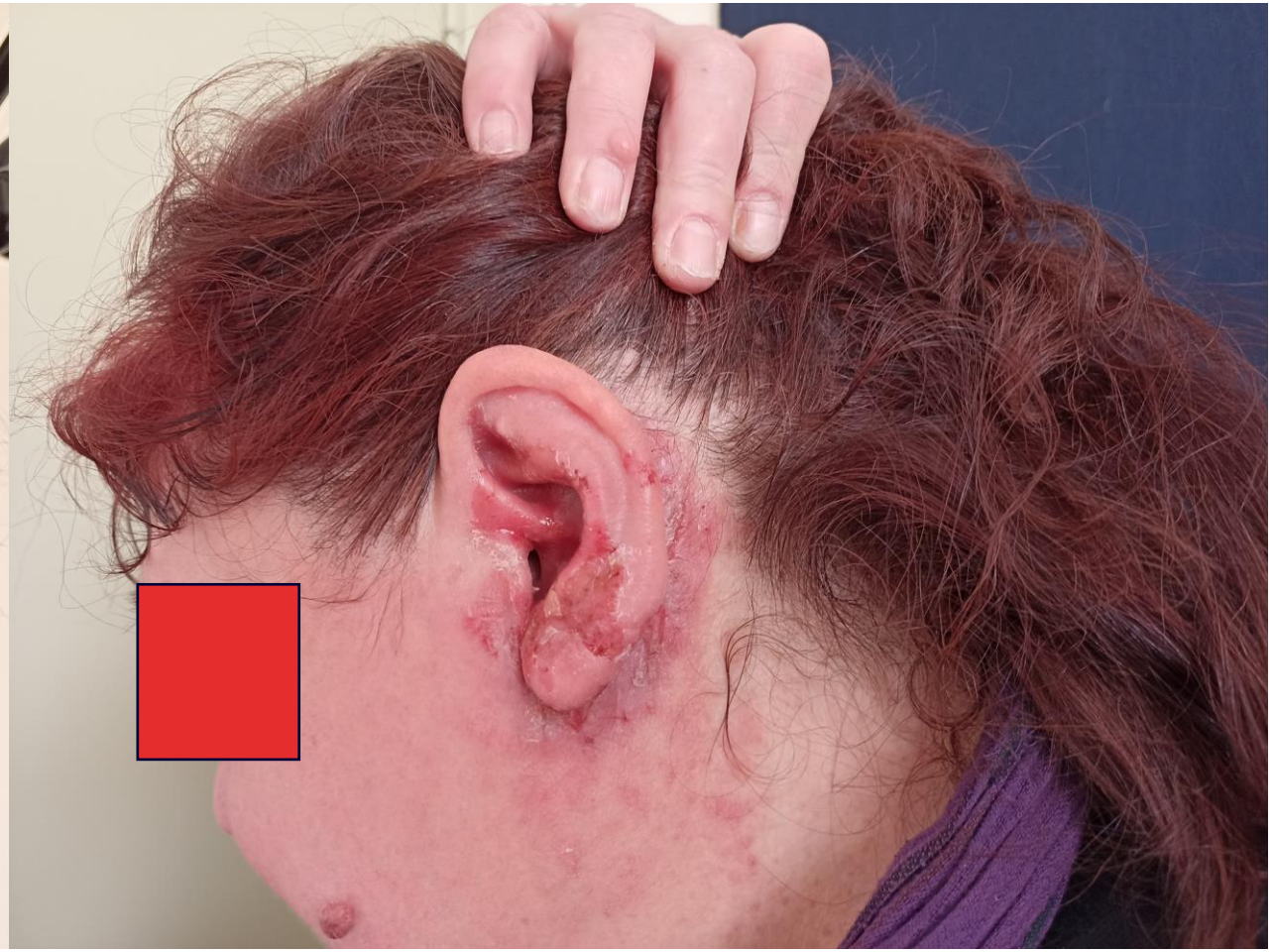
To



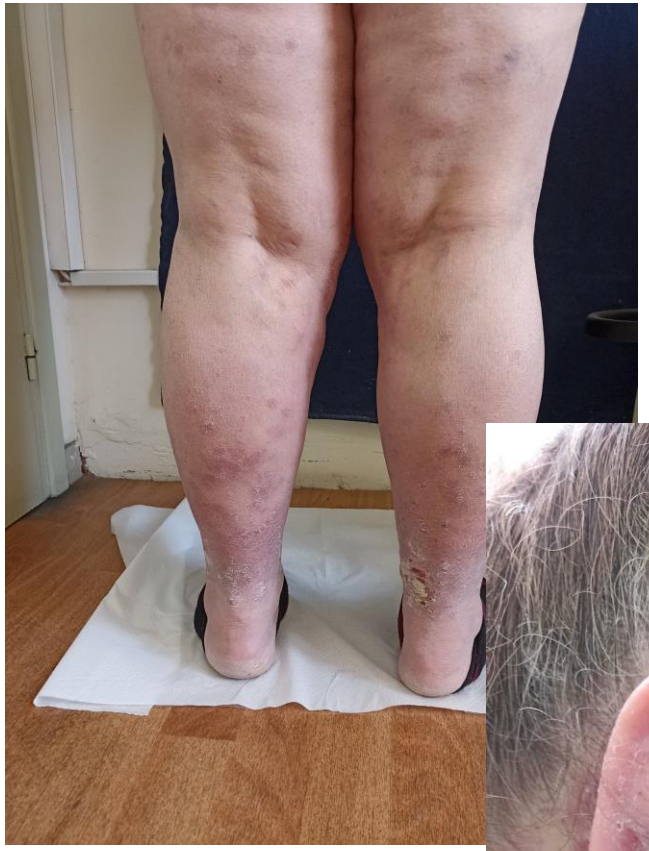


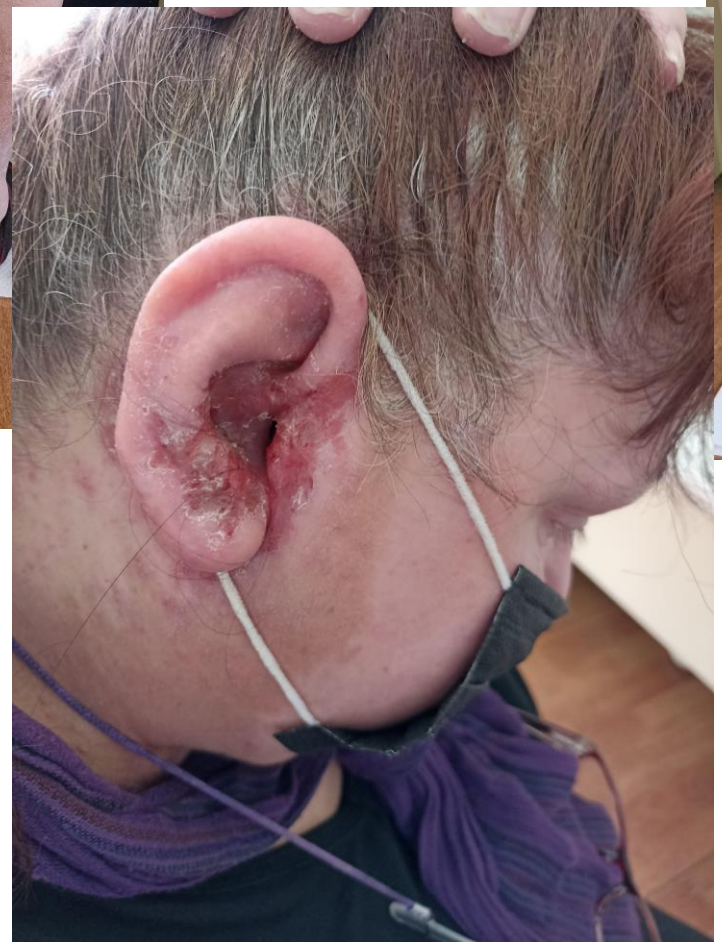
To

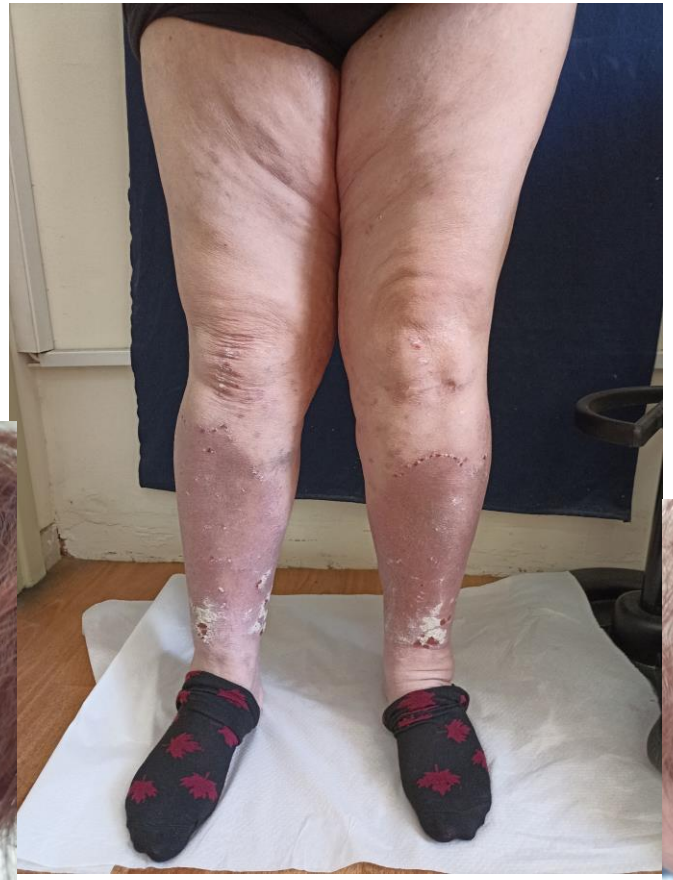


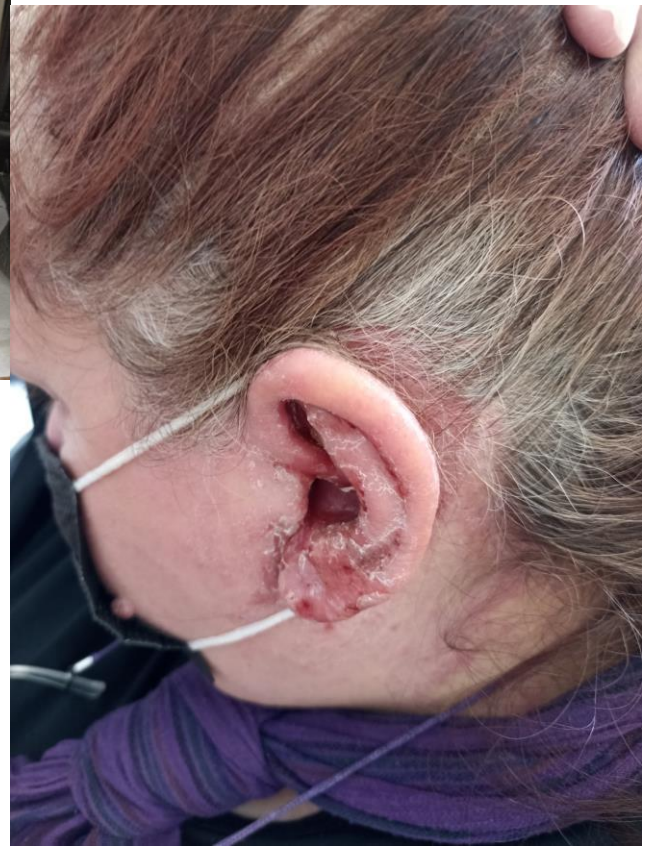


T4









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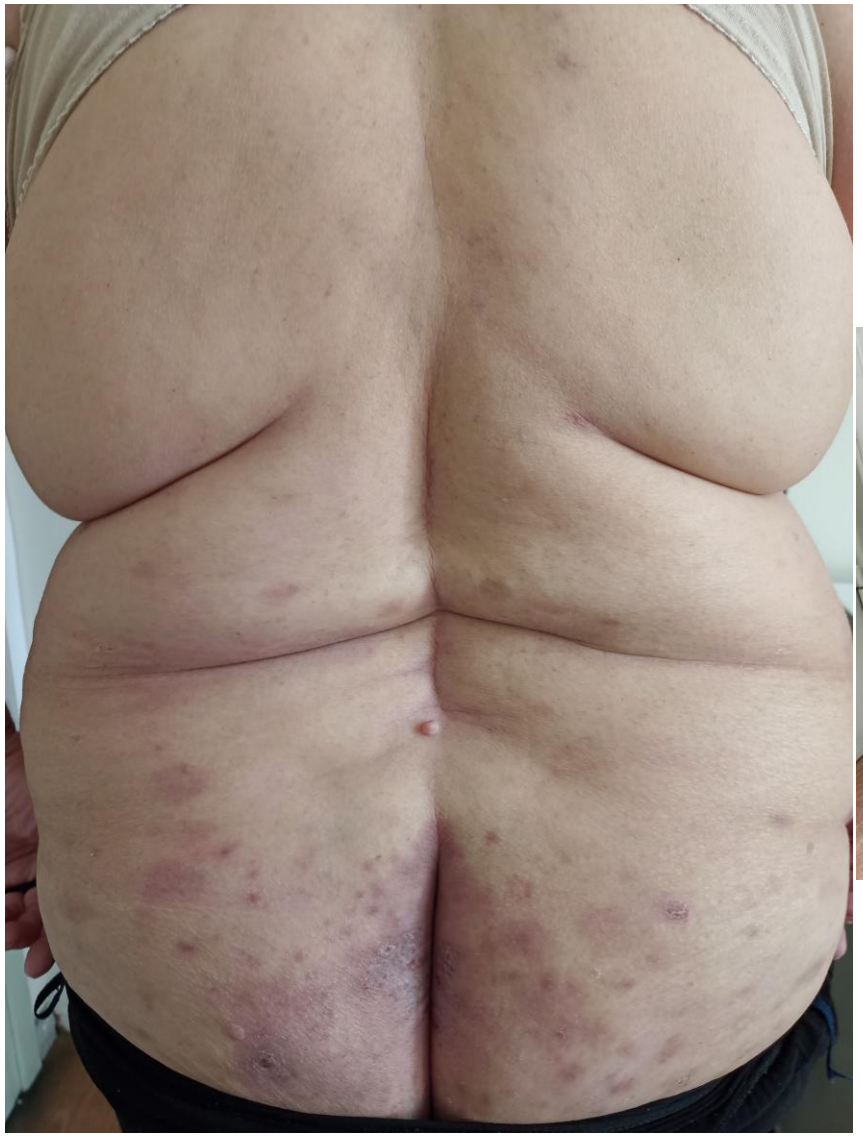

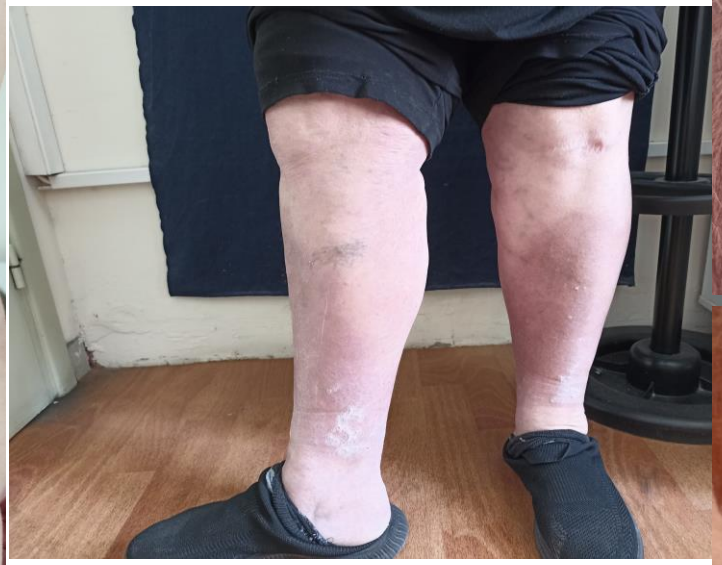

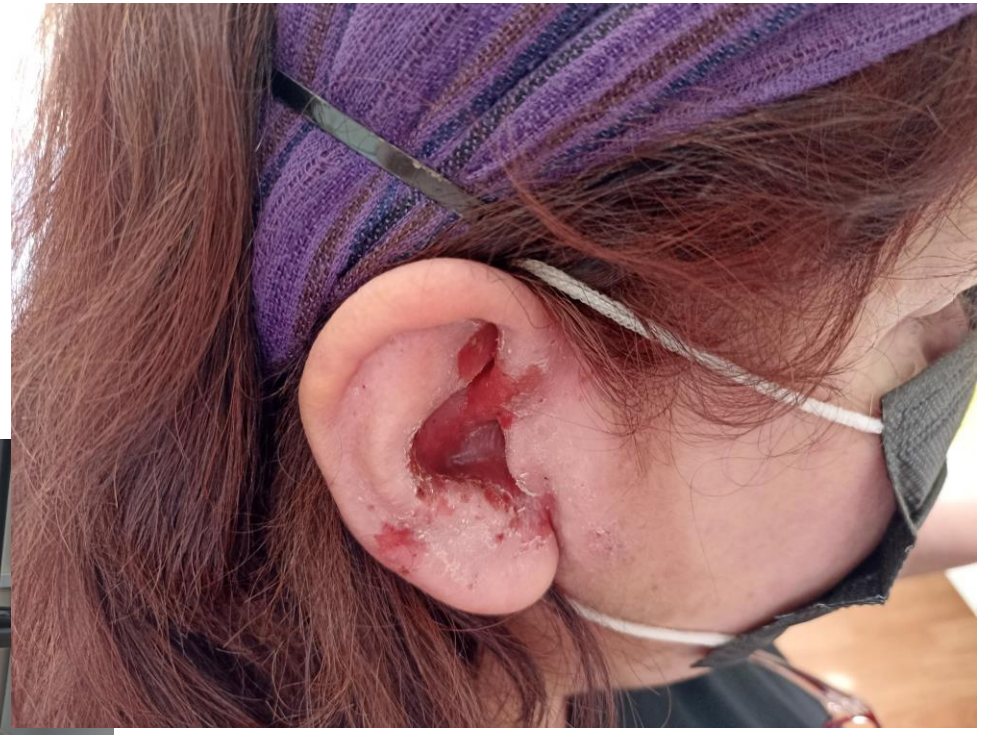

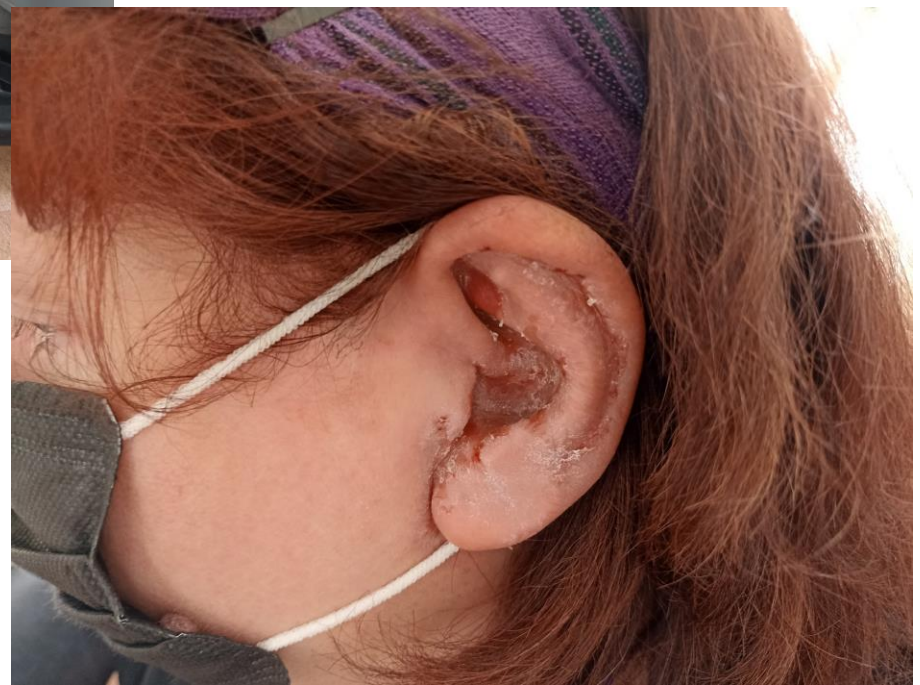

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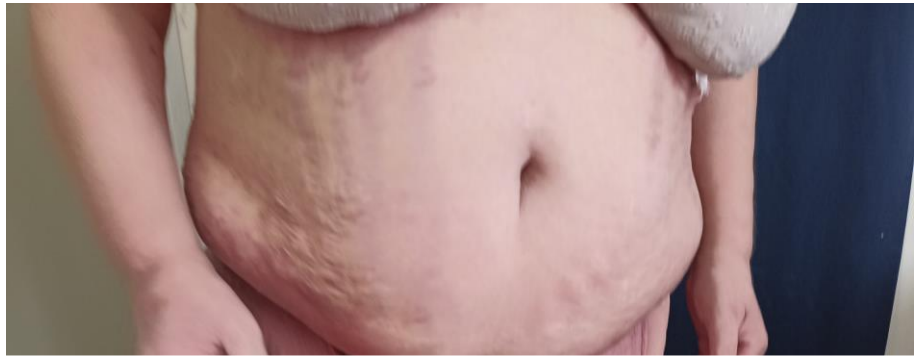
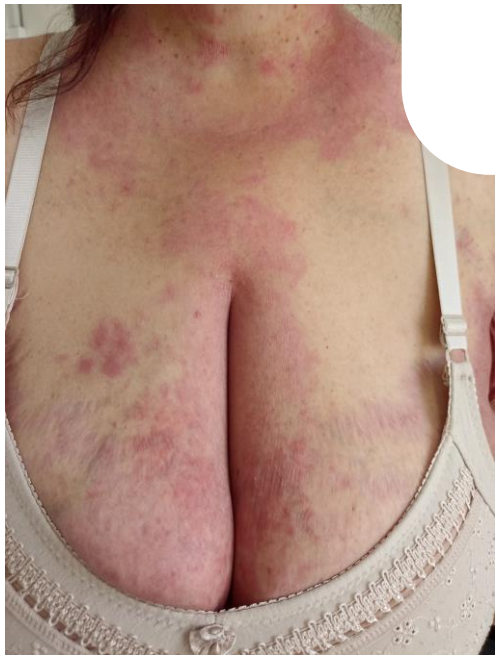
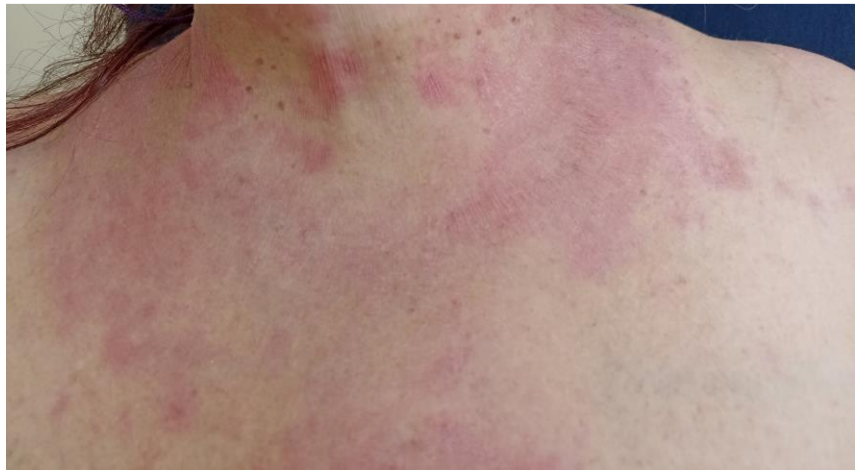


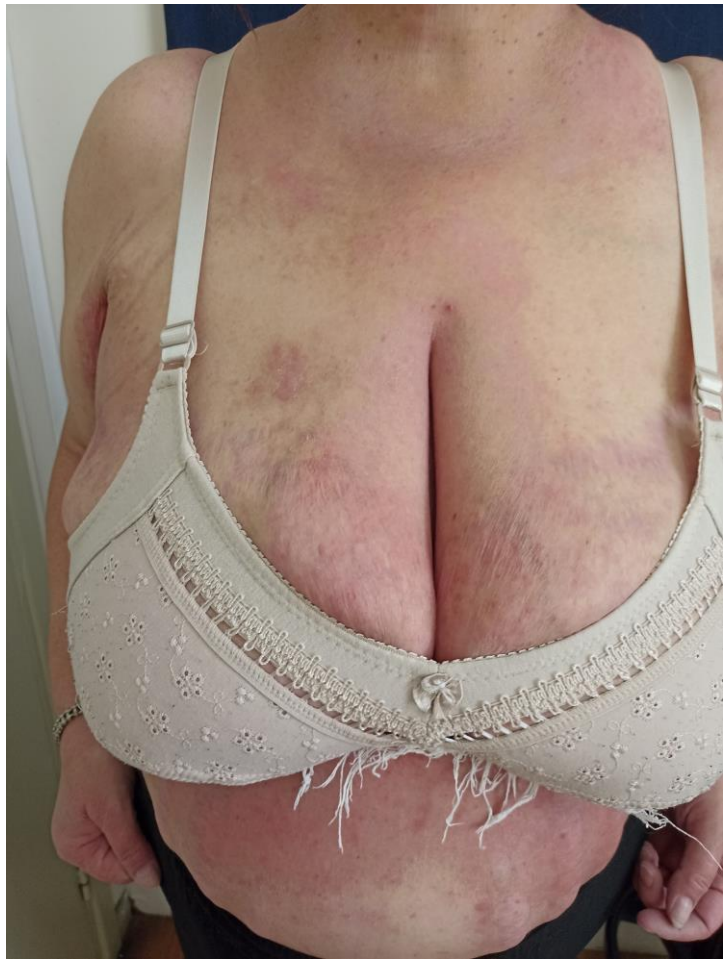
Άμεση αναζήτηση για μύκητες + για δερματόφυτο!

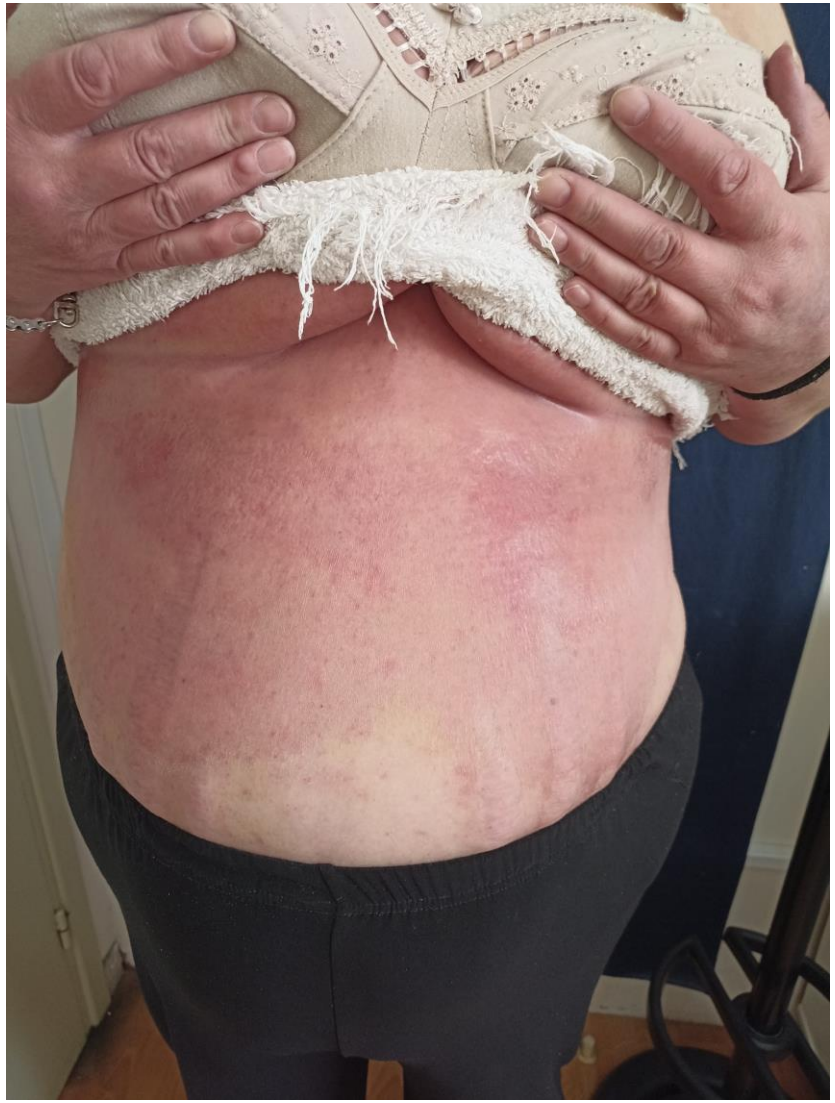
Έναρξη συστηματικής αγωγής με ιτρακοναζόλη και τοπική αγωγή

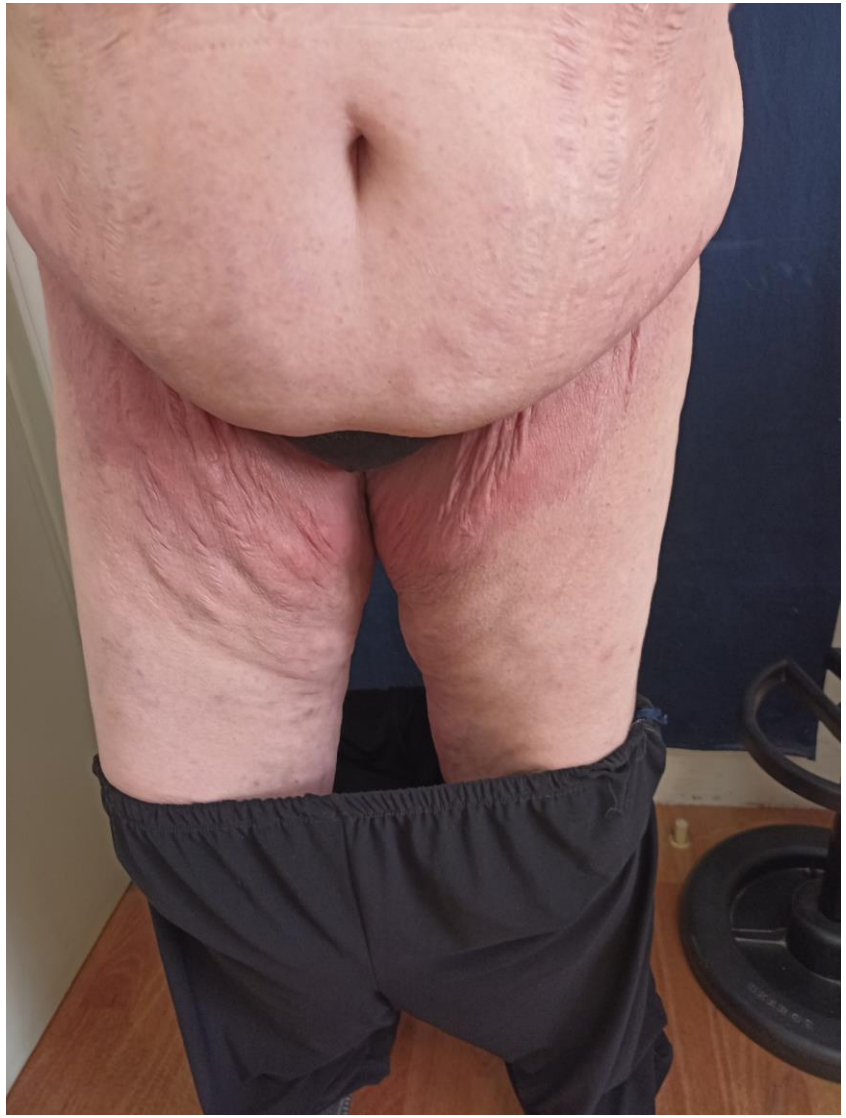




T14





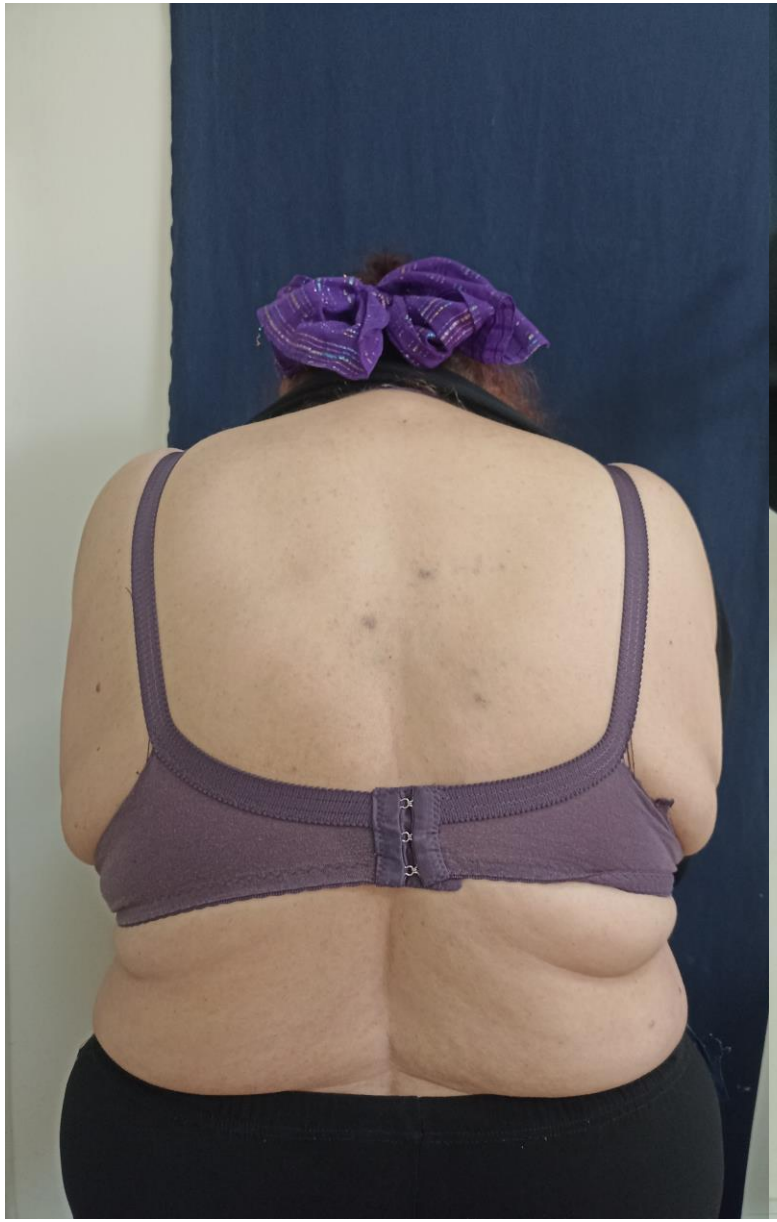


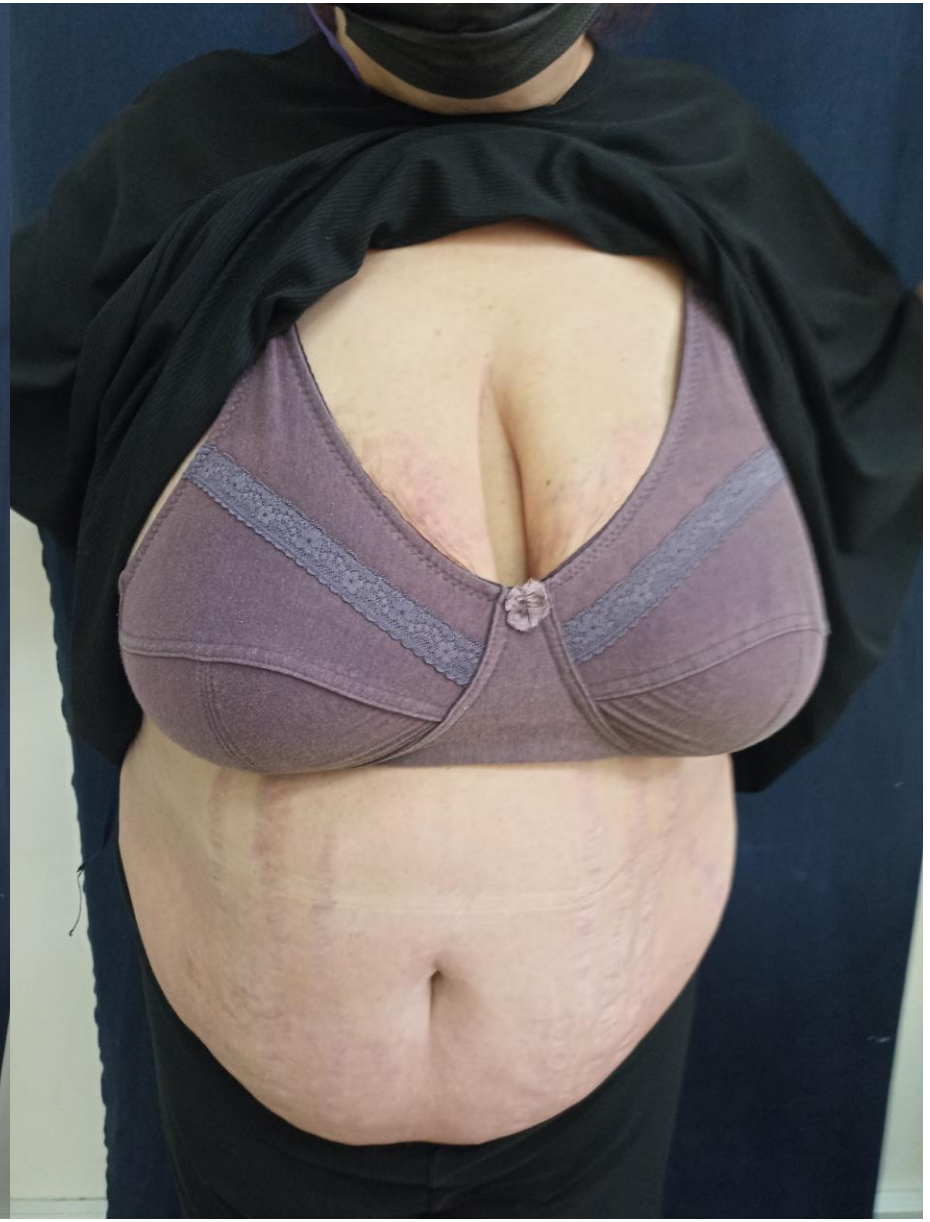
1 έτος

Άμεση αναζήτηση για μύκητες - !

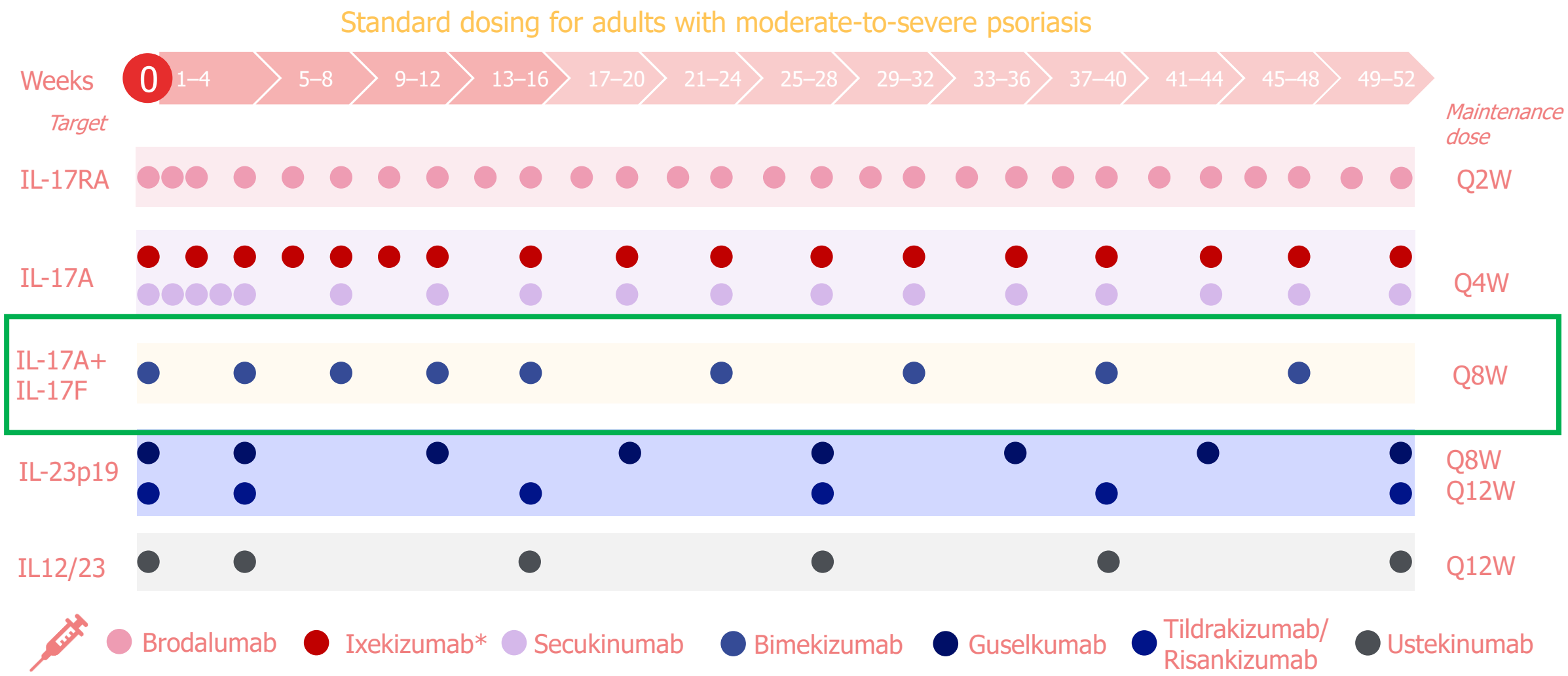
Εντατικοποίηση της δόσης του bimekizumab σε κάθε 4 εβδομάδες

19 μήνες

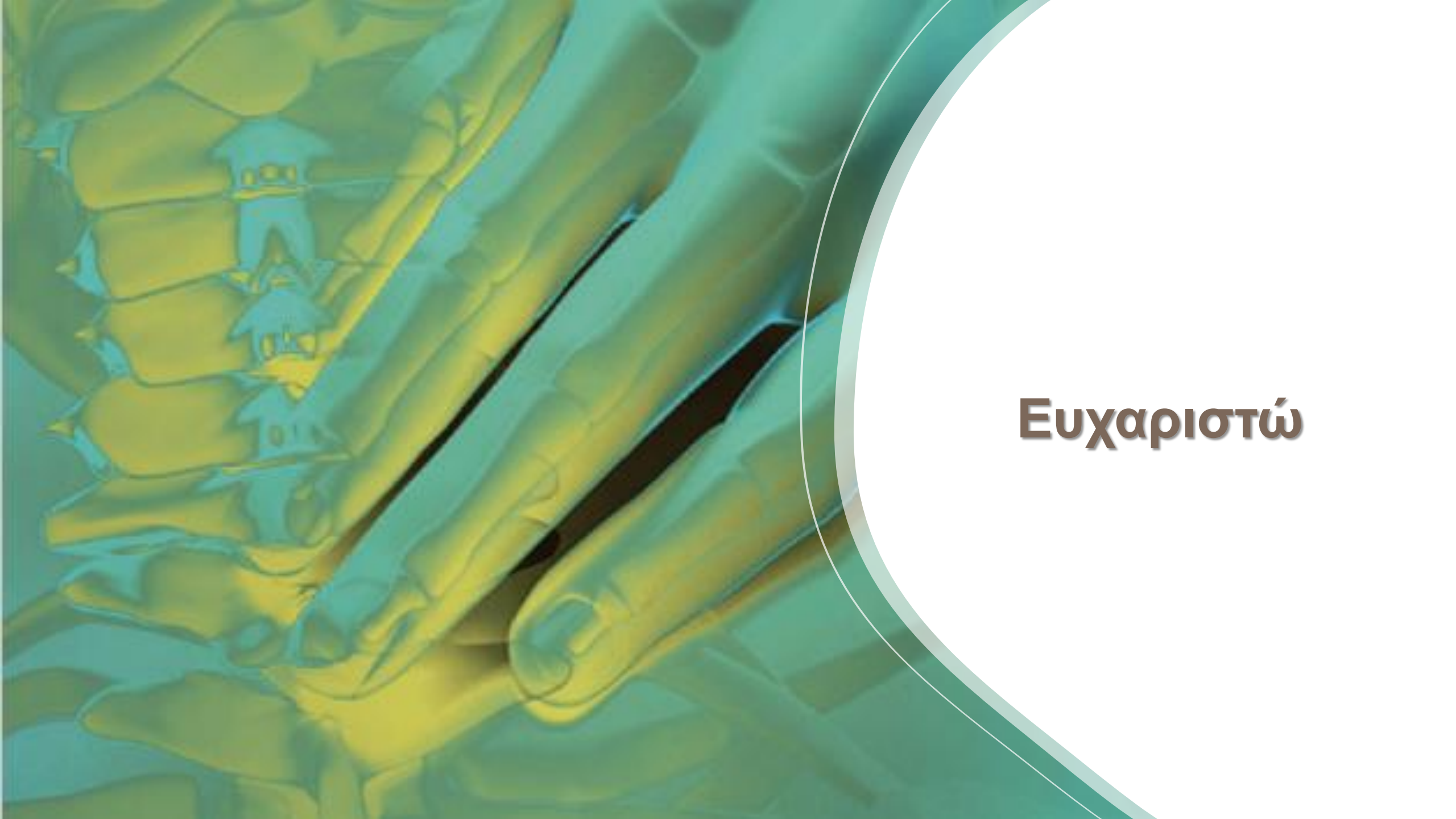




Δοσολογικά σχήματα των νεότερων βιολογικών παραγόντων[1–8]



- *Double dose at Week 0. 1. Bimzelx ® EU SmPC. https://www.ema.europa.eu/en/documents/product-information/bimzelx-epar-product-information_en.pdf [Accessed on May 2022]. 2. Kyntheum ® EU SmPC. https://www.ema.europa.eu/en/documents/product-information/kyntheum-epar-product-information_en.pdf [Accessed on May 2022]. 3. Taltz ® EU SmPC. https://www.ema.europa.eu/en/documents/product-information/taltz-epar-product-information_en.pdf [Accessed on May 2022]. 4. Cosentyx ® EU SmPC. https://www.ema.europa.eu/en/documents/product-information/cosentyx-epar-product-information_en.pdf [Accessed on May 2022]. 5. Tremfya ® SmPC. https://www.ema.europa.eu/en/documents/product-information/tremfya-epar-product-information_en.pdf [Accessed on May 2022]. 6. Ilumetri ® SmPC. https://www.ema.europa.eu/en/documents/product-information/ilumetri-epar-product-information_en.pdf [accessed May 2022]. 7. Skyrizi ® SmPC. https://www.ema.europa.eu/en/documents/product-information/skyrizi-epar-product-information_en.pdf [Accessed on May 2022]. 8. Stelara ® SmPC. https://www.medicines.org.uk/emc/product/7639 [Accessed on May 2022].



Ευχαριστώ