

DRUG SURVIVAL AND EFFECTIVENESS OF SECUKINUMAB THROUGH FIVE YEARS IN FRENCH PATIENTS WITH MODERATE TO SEVERE PLAQUE PSORIASIS IN REAL-LIFE SETTING: LONG-TERM RESULTS FROM THE LOGIC STUDY

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INTRODUCTION

- Psoriasis (Pso) is a chronic systemic disease that requires long-term therapeutic outcomes.
- Secukinumab (SEC) is an approved biological therapy for moderate-to-severe plaque Pso and PsA. It showed safety and efficacy in numerous real-world experiences.
- However, long-term real-world data of SEC in French Pso patients remains limited.
- We analysed 5-year follow-up data of SEC from the LOGIC study, a non-interventional, retrospective, French, multicentre study, conducted using historical data.

METHODS

- The LOGIC study is a non-interventional, retrospective, French, multicentre study, conducted using historical data.
- The aim of the LOGIC study was to describe a cohort of patients with Pso who initiated SEC treatment, and to assess the long-term drug survival, effectiveness and safety of SEC, during a follow-up period up to 5 years under real-world conditions in French patients with moderate to severe Pso.

STUDY ENDPOINTS AND ASSESSMENTS

- The primary objective of this study conducted on historical data is to describe a cohort of patients treated with secukinumab for moderate to severe Pso and its long-term evolution in routine clinical practice.
- The secondary objectives are among others:
 - To assess the long-term retention of secukinumab in routine clinical practice for the treatment of moderate to severe plaque Pso
 - To evaluate secukinumab treatment modifications,

- To evaluate the factors interfering with the retention rate
- To describe secukinumab short and long-term cutaneous efficacy
- To describe secukinumab safety profile.

STATISTICAL ANALYSES

- The efficacy was measured by improvement in IGA score through the follow-up period and the drug survival rate was assessed with Kaplan-Meier analysis.
- Analyses in the sub-group bio-naïve patients were performed.

RESULTS

STUDY POPULATION

- The study enrolled 422 moderate-to-severe plaque Pso patients in France (from May 2022 to October 2022).
- The mean follow-up period was of 2.9 years (8.0 months - 7 years).

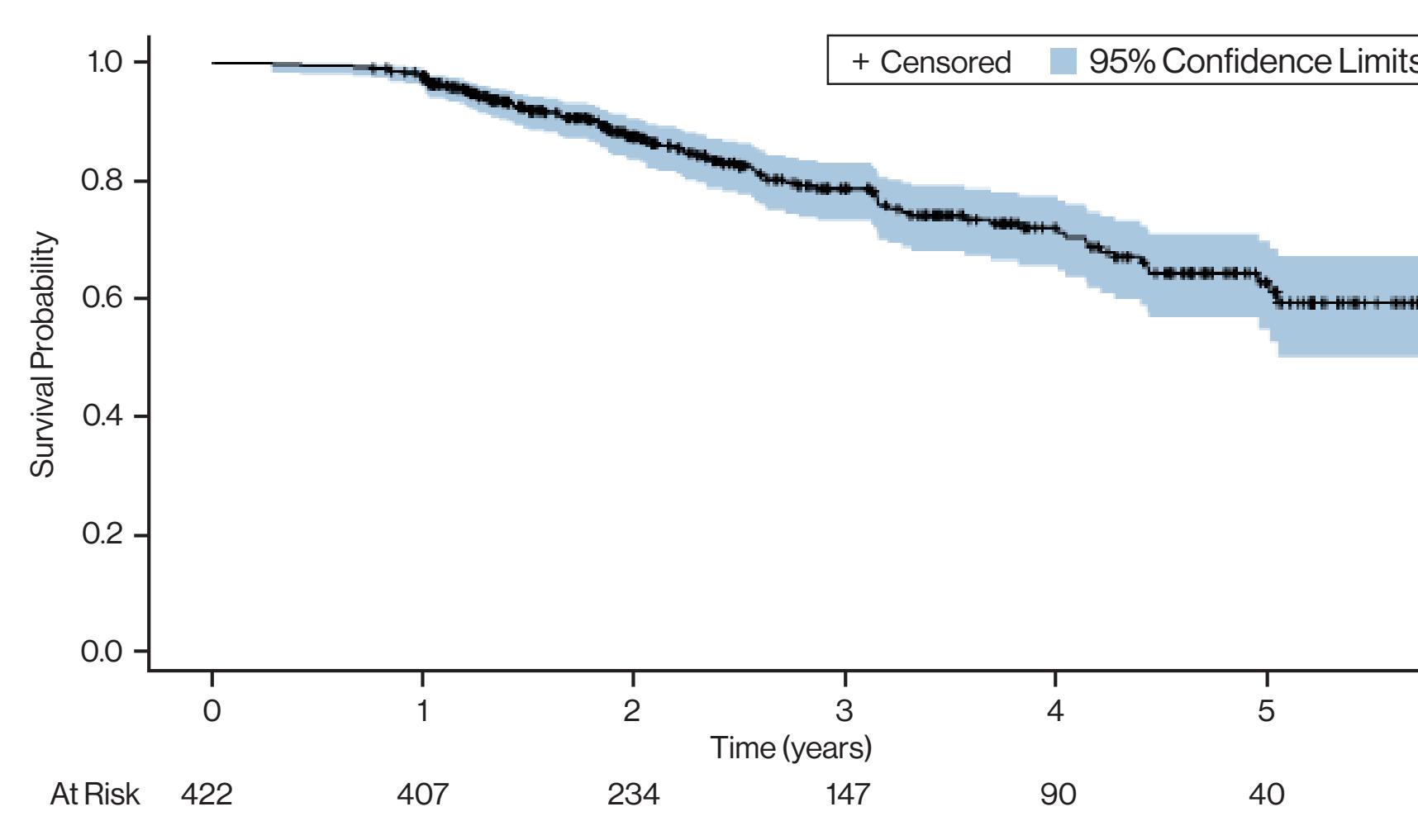
Table 1: Baseline characteristics of patients

	n (%) or mean (SD)
Number of patients	422
Gender, male	266 (63.0)
Age (years)	53.4 (15.4)
Duration from diagnosis to SEC initiation (years)	17.13 (13.26)
Duration category	
≤ 10 years	155 (37.3)
> 10 years	260 (62.7)
Family history of psoriasis or inflammatory rheumatism	69 (16.4)
BMI (kg/m ²)	26.24 (4.82)
BMI category	
Underweight (< 18.5)	4 (1.0)
Normal (18.5-24.99)	165 (41.4)
Overweight (25-29.99)	155 (38.8)
Obese (≥ 30)	75 (18.8)
IGA at SEC initiation	
3 (moderate)	269 (63.7)
4 (severe)	131 (31.0)
Prior biologic treatment	
No prior biologic treatment (bio-naïve)	325 (77.0)
1 line	66 (15.6)
> 2 lines	31 (7.4)
Anti-TNF-alpha	63 (14.9)
Anti-IL-12/IL-23	44 (10.4)
Anti-IL-17	9 (2.1)
Anti-IL-23	1 (0.2)
SEC 300mg, dose at initiation	421 (99.8)

PERSISTENCE OF SECUKINUMAB TREATMENT

- The persistence rates (temporary or permanently discontinuation) of SEC by Kaplan-Meier method were 97.9%, 87.5%, 78.7%, 72.1% and 62.9% at 1, 2, 3, 4, 5 years respectively.

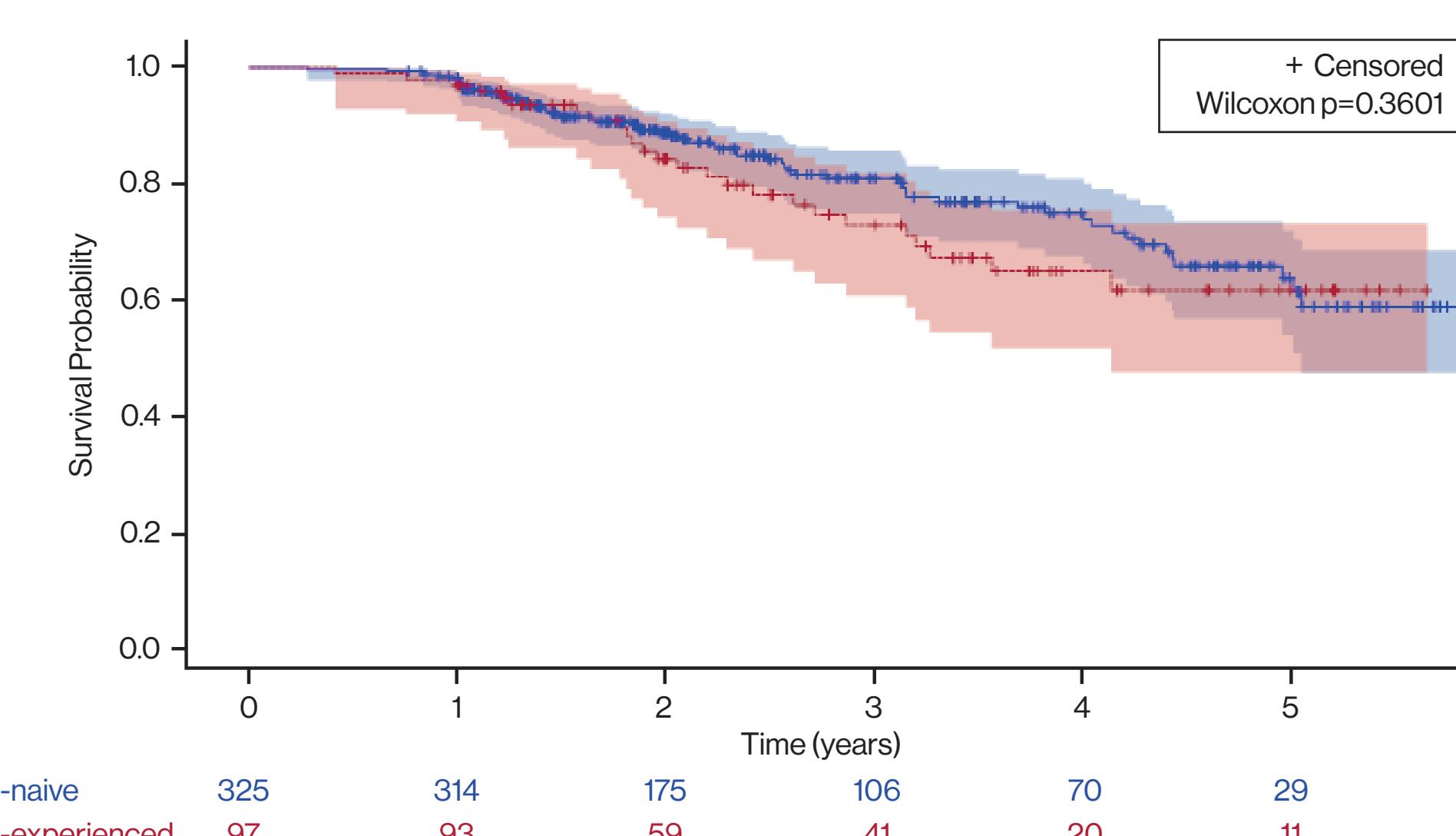
Figure 1: Survival curve (retention rate) by Kaplan-Meier method



PERSISTENCE OF SECUKINUMAB TREATMENT BY BIOLOGICS STATUS

- The persistence rates (temporary or permanently discontinuation) of SEC by Kaplan-Meier method were 98.1%, 88.7%, 80.9%, 74.8% and 63.6% at 1, 2, 3, 4, 5 years for bio-naïve patients respectively (n=325).
- For the bio-experienced population, the persistent rates of SEC were 96.9%, 84.2%, 72.8%, 64.9% and 61.6% at 1, 2, 3, 4, 5 years respectively (n=97).

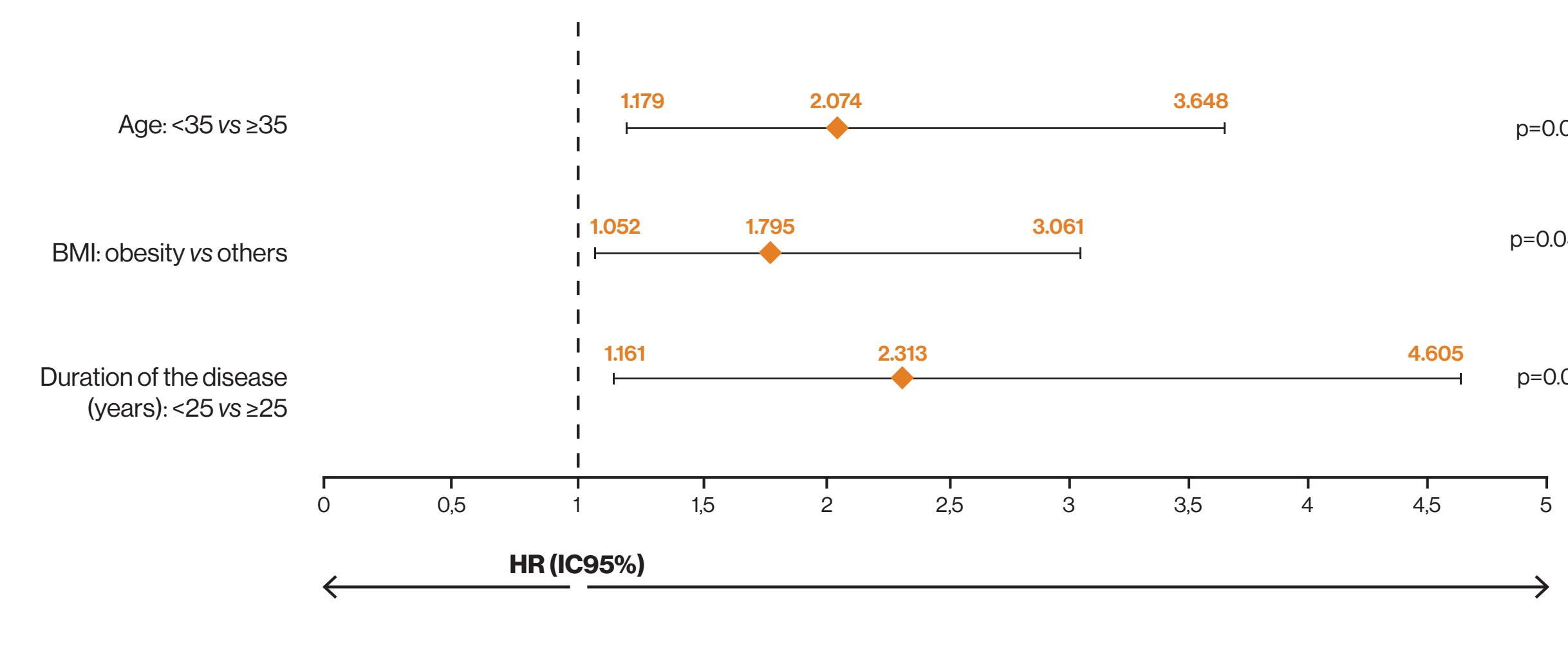
Figure 2: Survival curve (retention rate) by Kaplan-Meier method in sub-groups of patients bio-experienced and bio-naïve



PREDICTIVE FACTORS OF TREATMENT SURVIVAL

- A multivariate Cox proportional hazards model was developed with binary modalities.
- The age >35 years (p=0.01), BMI <30 (p=0.03) and disease duration >25 years (p=0.02) were found to modify the drug survival (predictive factors of drug survival)
- Patients more than 35 years old, or with a BMI <30 or a disease duration > 25 years are more likely to maintain the secukinumab treatment.

Figure 3: Forest plot by Cox model of predictive factors of treatment discontinuation



TREATMENT INTERRUPTION

- Out of 422 patients, 14.5% permanently discontinued the treatment, two-third of them for inefficacy.

Figure 4: Secukinumab treatment interruption

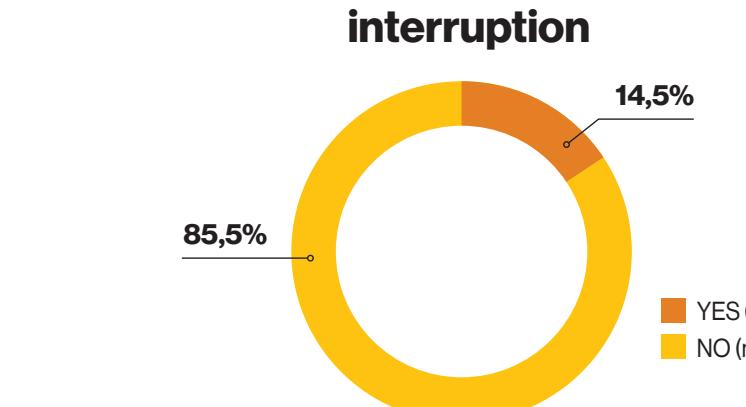
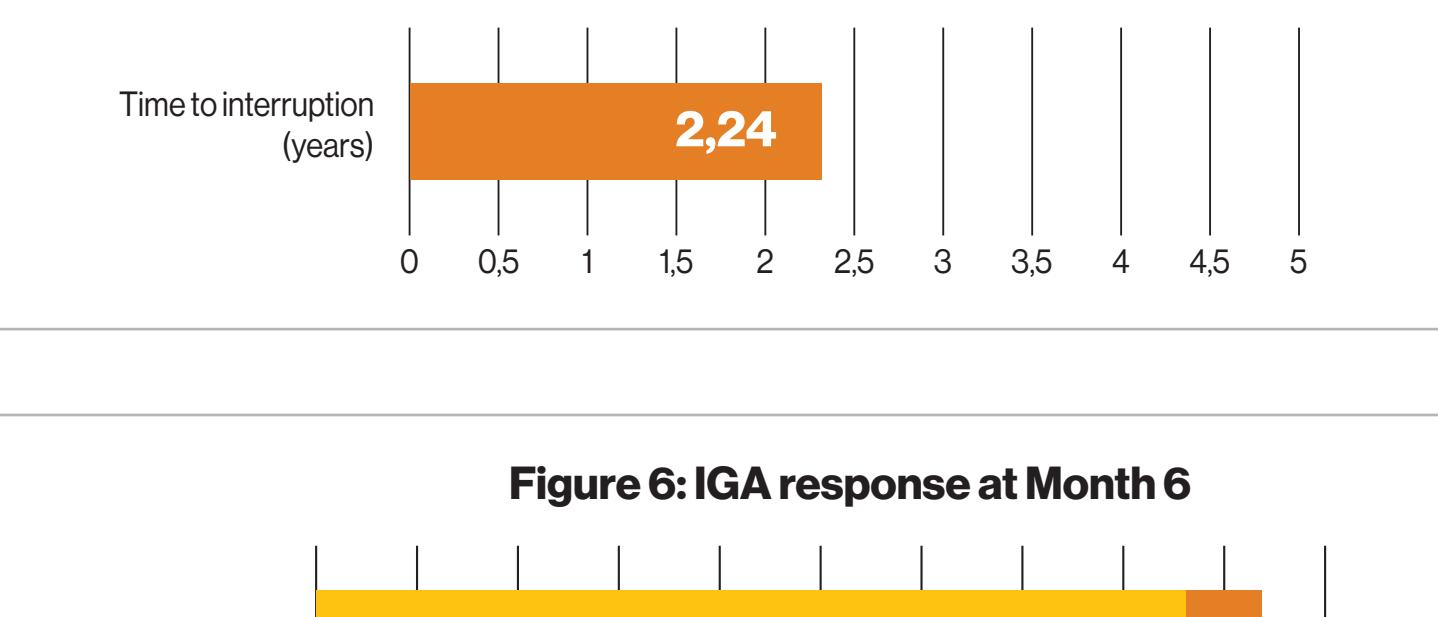
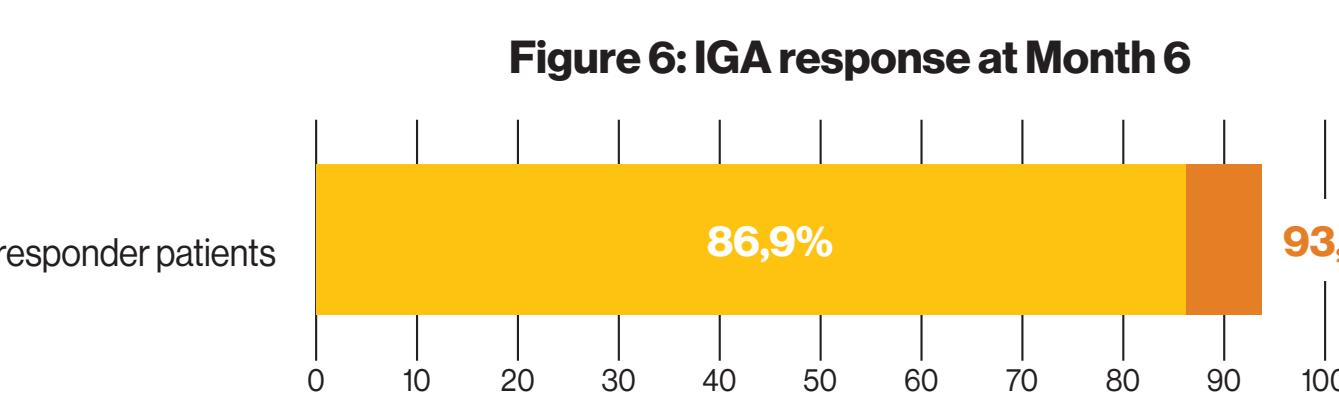


Figure 5: Treatment duration in patients who interrupted definitively the treatment during the 5 years



SECUKINUMAB CUTANEOUS EFFICACY

- At month 6, 93.5% and 86.9% of patients achieved IGA 0/1 and IGA 0, respectively.



SAFETY

- The safety profile was in line with data from clinical trials. No new or unexpected safety signals were reported.

Table 2: Adverse events

MedDRA SOC/PT Term	El (1)	n (2)	% (3)
Total		64	14.7
Skin and subcutaneous tissue disorders		35	8.3
Infections and infestations		10	2.4
General disorders and administration site reactions		7	1.7
Musculoskeletal and connective tissue disorders		6	1.4
Neoplasms benign, malignant and unspecified (incl cysts and polyps)		2	0.5
Immune system disorders		1	0.2
Gastrointestinal disorders		1	0.2
Psychiatric disorders		1	0.2
Injury, poisoning and procedural complications		1	0.2

(1) Number of AEs, (2) Number of patients with at least one AE, (3) % of patients with at least one AE

CONCLUSION

- The LOGIC study presents a cohort of patients with a high rate of persistence over 5 years for SEC despite a late initiation of the treatment during the course of the disease (97.9% and 78.7% at 1 and 3 years respectively).
- In this experience, drug survival of SEC is higher than some recent real-life studies. These findings are likely affected by the high rate of patients naïve to biologic therapy (77.0%).
- Drug survival rates were numerically lower for biologic-experienced than biologic-naïve patients.
- The age >35 years, the disease duration >25 years and IMC <30 were found to be predictive factors of drug survival.
- These findings remind on the possibility of on-label dosing optimization for patients >90 kgs and the French need of educational tool to increase treatment adherence.
- The study presents the first long-term data of a French cohort of patients initiating SEC as first-line biologics, as recently recommended by the 2022 French Expert Consensus.

Disclosures

Abdallah Khemis has been investigator, consultant or speaker for Abbvie, ACM Pharma, Almirall, Astellas, Boehringer, Bristol Myers Squibb, Celgene, Galderma, GSK, Janssen, Leo Pharma, Lilly, Novartis, Pfizer, Shine. Mireille Ruer-Mulard has been investigator, consultant or speaker for Abbvie, Almirall, Amgen, Avene, Boehringer-Ingelheim, BMS, Celgene, GSK, Janssen Cilag, Leo-Pharma, Lilly, Novartis, Pfizer, Sanofi, UCB. Ziad Reguiai has been investigator, consultant or speaker for Abbvie, Actelion, Almirall, Amgen, Avene, Basilea, Bayer, Boehringer-Ingelheim, BMS, Celgene, Celltrion, Cerave, Forward Pharma, GSK, Galderma, Genentec, Janssen Cilag, La Roche Posay, Leo-Pharma, Lilly, Medac, MSD, Novartis, Pierre Fabre Dermatologie, Pfizer, Roche, Regeneron, Sanofi, UCB. Coraline Bellagarde is Novartis employee.

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