

High Body Mass Index (BMI) Psoriasis is Associated With Higher Prevalence of Cardiometabolic Disease, Psoriatic Arthritis, and Systemic Inflammation

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OBJECTIVE

- To evaluate whether higher baseline BMI was associated with higher prevalence of baseline comorbidities in patients with moderate-to-severe psoriasis

CONCLUSIONS

- This integrated analysis of a population with moderate-to-severe psoriasis enrolled in ixekizumab clinical trials showed that overweight or obesity were highly prevalent at baseline
- Compared with normal BMI, obesity and overweight were associated with higher proportions of people with cardiometabolic disease (hypertension, hyperlipidemia, cardiovascular disease), asthma, metabolic dysfunction-associated liver disease, and PsA
- Obesity and overweight were also associated with higher levels of CRP at baseline, suggestive of higher baseline levels of systemic inflammation
- Greater number of comorbidities with obesity and overweight suggests a higher health burden and underscores broader health implications in this population
- Obesity was associated with higher psoriasis severity, but the magnitude of difference may have been blunted by clinical trial inclusion requirements for all participants to have moderate-to-severe skin disease
 - Greater magnitudes of psoriasis disease burden across BMI categories have been previously reported in the literature¹⁻⁴
- With new options to manage both moderate-to-severe psoriasis and overweight or obesity, there may be an opportunity for dermatologists to intervene to modify overall disease and health among people with both conditions



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BACKGROUND

- Psoriasis and obesity share inflammatory pathways with overlapping comorbid complications^{5,6}
- Both conditions are chronic inflammatory processes that can have significant negative impacts on health, including increased risk of cardiovascular disease and components of metabolic syndrome⁶
- Although guidelines recommend addressing obesity and its associated comorbidities in the management of psoriasis, it remains under-managed in clinical practice. Further research is needed to clarify the impact of elevated BMI on comorbidities in people with psoriasis⁷
- Ixekizumab has been studied extensively in patients with moderate-to-severe psoriasis across 18 randomized clinical trials^{8,a}
 - Comprehensive baseline data from these psoriasis trials offer the opportunity to study the relationship between baseline BMI and comorbidities among patients with moderate-to-severe disease

^a18 trials comprised of 17 studies from Lebwohl et al. 2025 and another in patients with moderate to severe plaque or active PsA in India (NCT05855967).

METHODS

Patient Population and Assessments

- This integrated data set (N=7029) included 18 randomized clinical trials of ixekizumab in psoriasis^{8,a}
- Participants were adults with moderate-to-severe psoriasis^{8,9,b}
- Patient population agnostic of treatment arm was stratified by the following BMI groups¹⁰
 - Normal BMI ≥ 18.5 to < 25 kg/m² (n=1710)
 - Overweight ≥ 25 to < 30 kg/m² (n=2291)
 - Obesity ≥ 30 kg/m² (n=3028)
- The following baseline measures were compared across BMI subgroups
 - Disease severity: severity (Static Physician's Global Assessment [sPGA] score and Psoriasis Area and Severity Index [PASI])
 - Prevalence of psoriasis and obesity comorbidities^c: psoriatic arthritis (PsA), hypertension, hyperlipidemia, diabetes, cardiovascular disease, asthma, metabolic dysfunction-associated liver disease
 - Inflammatory marker: CRP levels
- The non-parametric Mann-Whitney U test was used to statistically compare differences between the Obesity or Overweight groups vs. the Normal BMI group (p-value ≤ 0.05 indicated statistical significance)

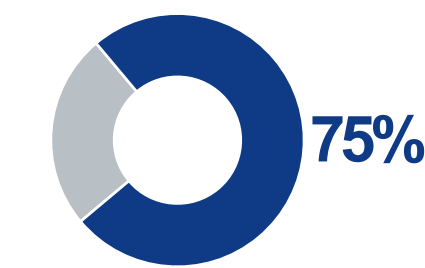
^a18 trials comprised of 17 studies from Lebwohl et al. 2025 and another in patients with moderate to severe plaque or active PsA in India (NCT05855967); ^bDefined as people with $\geq 10\%$ of their body-surface area affected by psoriasis, an sPGA score of ≥ 3 or higher (on a scale of 0 to 5, with higher scores indicating more severe disease), and a PASI of ≥ 12 or higher (on a scale from 0 to 72, with higher scores indicating more severe disease) at both the screening and baseline visits; ^cBaseline comorbidities were determined from unsolicited, medical history.

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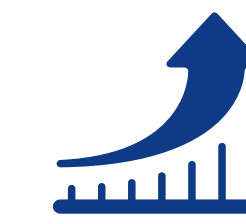
Abbreviations: BMI=body mass index; CI=confidence interval; CRP=C-reactive protein; N=number of patients in each BMI category; n=participants in each BMI category with non-missing baseline CRP; PASI=Psoriasis Area and Severity Index; PsA=psoriatic arthritis; SD=standard deviation; sPGA=Static Physician's Global Assessment

KEY RESULT

- In a clinical trial population with moderate-to-severe psoriasis^a:



~75% of patients had obesity or overweight



Prevalence of comorbidities was higher in people with obesity and overweight vs. normal BMI group

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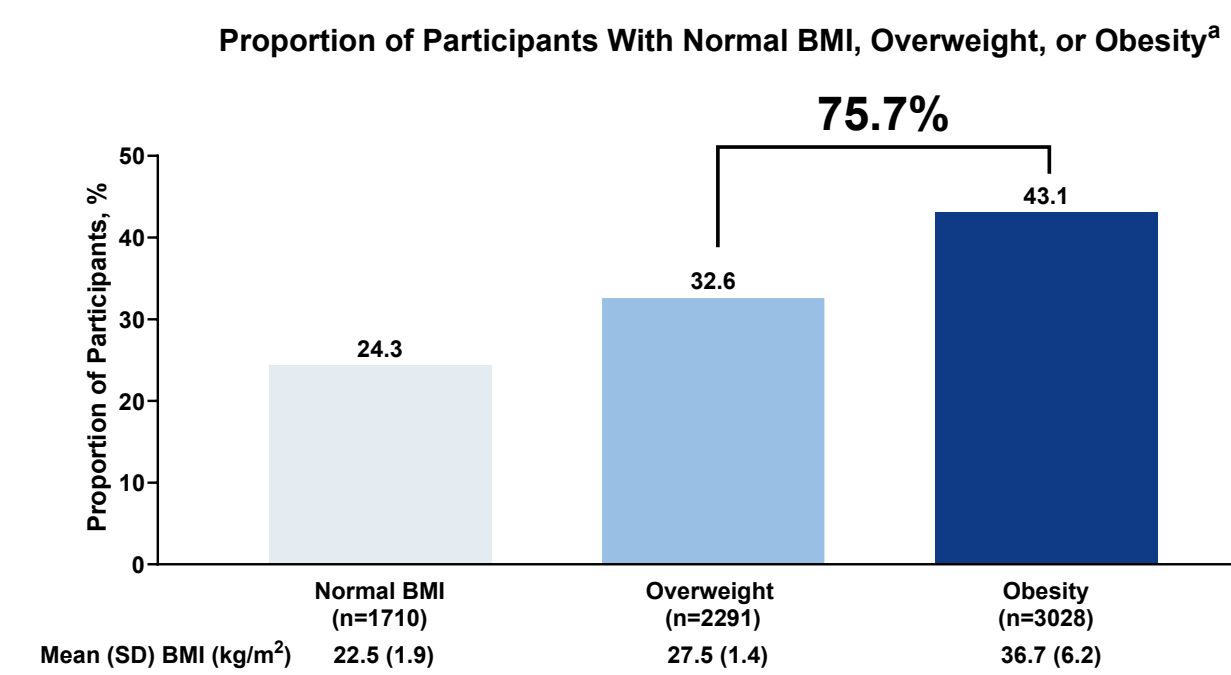
The proportion of people with ≥ 3 comorbidities was 11 times higher in obesity (72.2%) vs. normal BMI (6.5%) group

- Since all clinical trial participants had baseline moderate-to-severe psoriasis, the magnitudes of difference in comorbidity prevalence across BMI groups reported here may be smaller than what has been previously reported for a general psoriasis population (i.e. across mild to severe disease presentations)

^aDefined as people with $\geq 10\%$ of their body-surface area affected by psoriasis, an sPGA score of ≥ 3 or higher (on a scale of 0 to 5, with higher scores indicating more severe disease), and a PASI of ≥ 12 or higher (on a scale from 0 to 72, with higher scores indicating more severe disease) at both the screening and baseline visits.

RESULTS

Over 75% of Participants Had Obesity or Overweight



Disease Severity at Baseline

- Obesity was significantly associated with greater psoriasis severity at baseline vs. Normal BMI subgroup^b

Endpoint, mean (SD)	Normal BMI n=796	Overweight n=1241	Obesity n=1711
PASI	19.8 (7.9)	20.0 (7.7)	20.6 (7.8)
sPGA score	3.5 (0.6)	3.5 (0.6)	3.6 (0.6)

- Obesity was significantly associated with greater psoriasis severity at baseline vs. Normal BMI subgroup^b

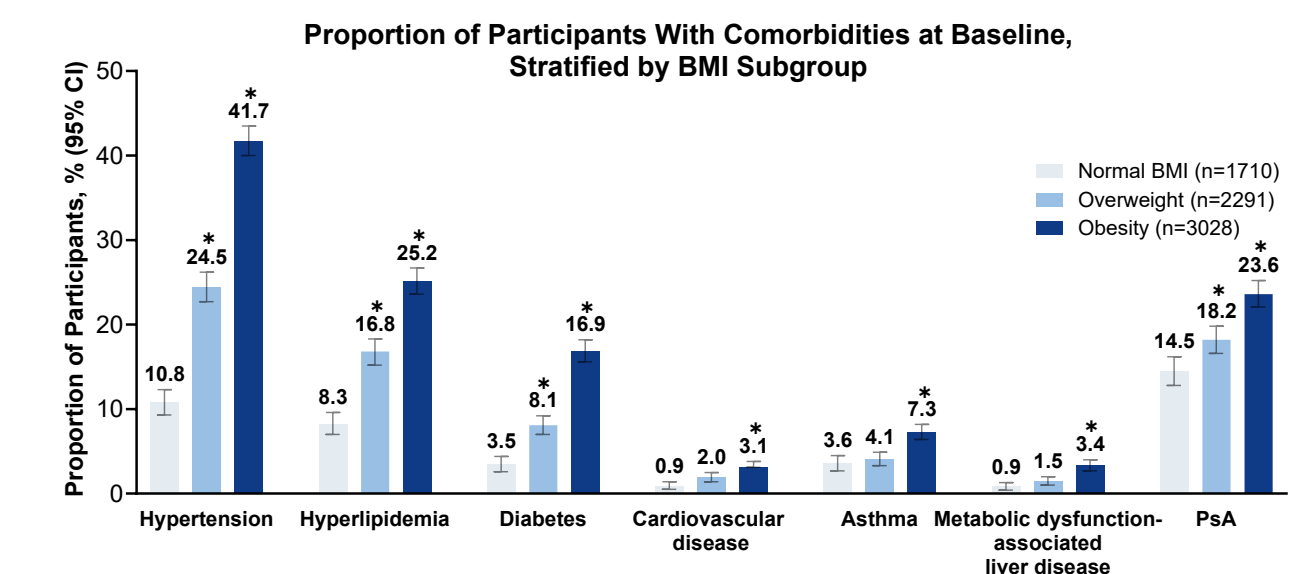
^aBMI categories defined as: Normal BMI ≥ 18.5 to < 25 kg/m²; Overweight ≥ 25 to < 30 kg/m²; Obesity ≥ 30 kg/m²; ^bp<0.001 vs. Normal subgroup based on the Mann-Whitney U test;

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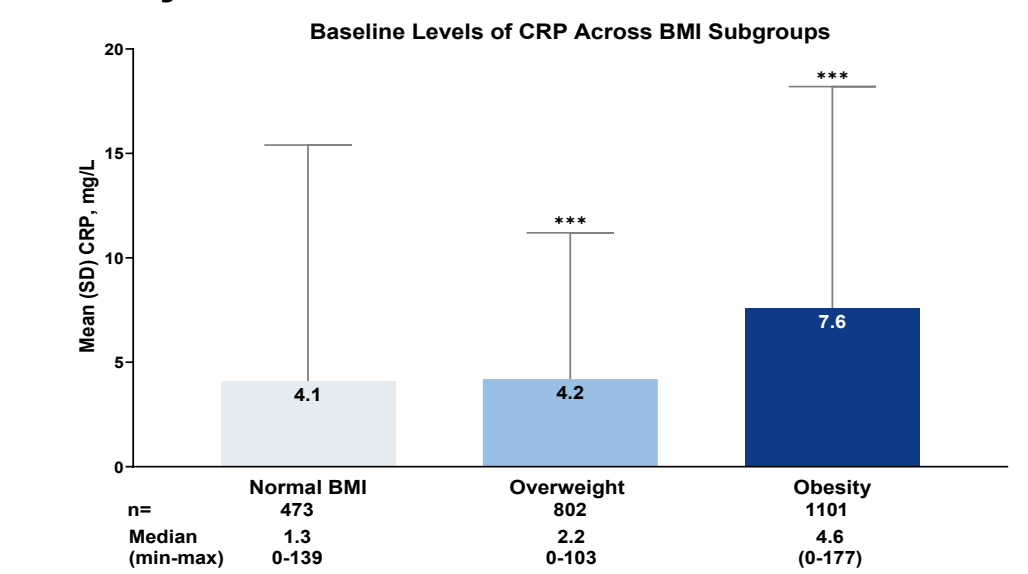
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Obesity and Overweight Were Associated With Higher Prevalence of Comorbidities at Baseline



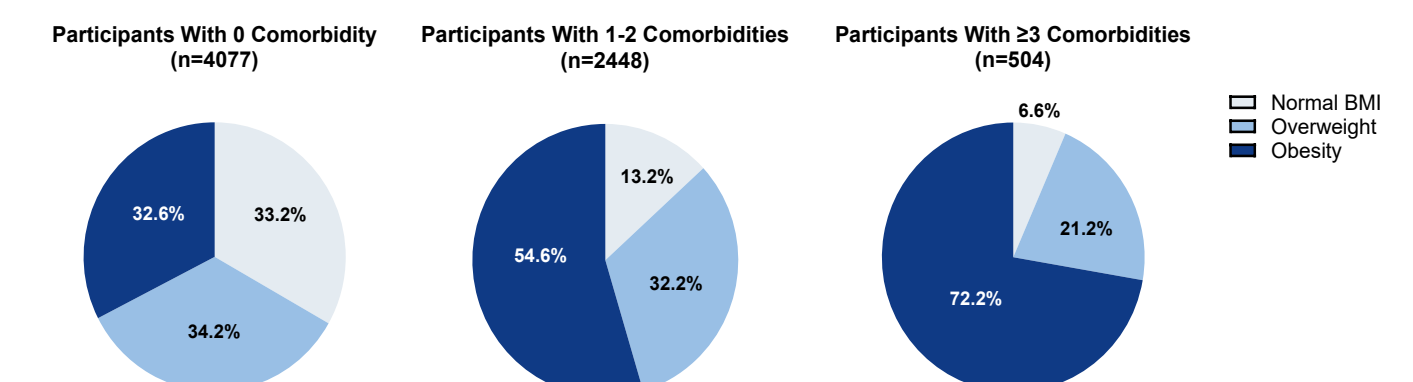
*p<0.05 vs. Normal subgroup based on non-overlapping 95% CI.

Obesity and Overweight Were Associated With Greater Levels of the Inflammatory Marker CRP at Baseline



***p<0.001 vs. Normal subgroup based on the Mann-Whitney U test.

Higher Baseline BMI Was Associated With a Greater Number of Comorbidities at Baseline



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