Adalimumab for Nail Psoriasis: Efficacy and Safety from the Open-Label Extension of a Phase-3, Randomized, Placebo-Controlled Trial

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INTRODUCTION

- Treatments that are simultaneously effective in nail and skin psoriasis are needed as affected patients have worse quality of life and pain than patients with skin psoriasis alone
- Management of nail psoriasis is challenging; the disease etiology and pathology are not fully understood and treatment guidelines are limited.^{1,2} Topical agents have been minimally effective, but improvement in nail psoriasis has been reported following treatment of skin psoriasis with biologic therapies.³
- We evaluated the safety and efficacy of originator adalimumab (AbbVie) for fingernail psoriasis in the open-label-extension period (Period B) of a phase-3 trial of adalimumab (ADA) in patients with moderate-to-severe psoriasis who also had substantial, clinically impactful, moderate-to-severe fingernail psoriasis (clinicaltrials.gov NCT 02016482)

- Patients with chronic, moderate-to-severe plaque psoriasis and fingernail psoriasis were enrolled. In 26-week Period A, patients were randomized 1:1 to 40 mg ADA every-other-week (ADAeow) after initial 80 mg dose, or matching placebo (PBO).
- From week 16, if the affected body surface area increased by ≥25% from baseline, patients were required to roll over to the 26-week Period B (early escape). Patients completing Period A at week 26 or who escaped early, entered Period B at week 26.
- At Period B entry (week 26), patients receiving PBO in Period A received an initial blinded dose of 80 mg ADA; patients receiving ADA in Period A received matching PBO. All received 40 mg ADAeov weeks 27 through 51 (Figure 1)

Figure 1. Study Design



dose of ADA was 80 m

Starting at week 16, if psorias fected BSA increased 225% over baseline, patients were rolled over to Period B ing PBO; Period-A PBO arm received blinded ADA 80 mg. eow=every-other-week dosing: PBO=placebo; BSA=body surface area. mab: eow

KEY INCLUSION CRITERIA

- Adults diagnosed with both chronic, moderate-to-severe plaque psoriasis (with disease duration of at least 6 months) and moderate-to-severe psoriasis in at least one fingernail (any disease duration).
- BSA ≥10% and baseline target fingernail modified Nail Psoriasis Severity Index (mNAPSI)⁴ ≥8; or BSA ≥5% with baseline target fingernail mNAPSI >8 and baseline total mNAPSI >20 (scale of total score 0 [no nail findings] to 130 [nail findings present in each nail]).
- · Physician's Global Assessment of Fingernail (PGA-F) of at least moderate severity for fingernail psoriasis (scale 0 [clear] to 4 [severe])
- Nail Psoriasis Physical Functioning Severity (NPPFS) score >3 (scale (NRS) score >3 (scale 0 [no pain] to 10 [severe pain]).

ENDPOINTS

- · All efficacy variables assessed in Period A were also assessed in Period B (see list in Table 3). Period A primary and ranked secondary
- endpoints that were evaluated in Period B are reported here. · Two intent-to-treat (ITT) patient populations were evaluated in
- Period B: Overall ITT_B Population: all patients who received ≥1 study drug
- injection in Period B. Early Escape Population: all patients who rolled over to Period B
- after experiencing worsening of disease from baseline in Period A.
- Period B treatment groups are identified by treatment received in Period A/Period B, ie, PBO/ADA and ADA/ADA.
- Missing data were handled in Period A by multiple imputation (MI), and in Period B by non-responder imputation (NRI) and by last observation carried forward (LOCF).

SAFETY

· Treatment-emergent adverse events (AEs) in Period B were analyzed for the ITT_B Population.

217 patients were randomized in Period A (108 to PBO; 109 to ADA).

- 94/108 (87.0%) PBO/ADA and 94/109 (86.2%) ADA/ADA entered - 81/94 (86.2%) PBO/ADA and 87/94 (92.6%) ADA/ADA patients
- completed Period B

Table 1, Patient Disposition, Period B

Period B (Table 1).

Disposition, n (%)	PBO/ADA, N=94		ADA/ADA, N=94	
	n	%	n	%
Entered Period B	94	100	94	100
Completed Period B	81	86.2	87	92.6
Discontinued Period B; primary reason:	13	13.8	7	7.4
Adverse events	0	0	0	0
Withdrew consent	1	1.1	1	1.1
Lost to follow-up	2	2.1	0	
Lack of efficacy	6	6.4	4	4.3
All other reasons*	4	4.3	2	2.1

 Demographic and baseline characteristics were generally comparable across the 2 treatment groups (Table 2). Patients showed substantial nail disease and pain at baseline

Table 2. Key Demographics and Baseline Characteristics of Patients Entering Period B

		PBO/ADA, N=94		ADA/ADA, N=94	
Characteristic		N	%	N	%
Sex	Male	76	80.9	83	88.3
	Female	18	19.1	11	11.7
Race	White	90	95.7	89	94.7
	Asian	3	3.2	4	4.3
	Other ^a	1	1.1	1	1.1
BSA	5% to <10%	34	36.2	37	39.4
	≥10%	60	63.8	57	60.6
Scalp psoriasis		80	85.1	80	85.1
PsA		26	27.7	28	29.8
PGA-F	Moderate	53	56.4	44	46.8
	>Moderate	41	43.6	50	53.2
PGA-S ^b	Moderate	55	58.5	56	59.6
	>Moderate	39	41.5	37	39.4
		Mean	SD	Mean	SD
Age, years		47.1	11.44	47.3	11.82
BMI, kg/m ²		(n=93) 29.2	6.88	(n=93) 29.6	5.09
Duration of psoria	asis, years	18.7	13.73	20.7	12.34
Duration of nail psoriasis, years		12.0	11.12	12.4	9.65
PASI score		13.3	9.87	12.8	9.00
Total for some sil or	NAPSI score (range 0-130)	58.6	20.78	57.0	18.34
iotai ningemaii m	runi ol acolo (raligo o-100)				
	APSI score (range 0-80)	46.6	15.40	48.0	15.67
Total fingernail N		46.6 5.7		48.0 5.0	15.67
Total fingernail N. Nail Psoriasis Pai	APSI score (range 0-80)		15.40		2.48
Total fingernail N. Nail Psoriasis Pai	APSI score (range 0-80) n (NRS) score (range 0-10) mponent (range 0-20)	5.7	15.40 2.25	5.0	2.48
Total fingernail N Nail Psoriasis Pai B-SNIPI, scalp co	APSI score (range 0-80) n (NRS) score (range 0-10) mponent (range 0-20) ige 0-10)	5.7 (n=16) 7.9	15.40 2.25 5.82	5.0 (n=23) 9.7	10.07

EFFICACY IN PERIOD A

 Results at week 26 are shown in Table 3. All results were statistically significant (P<0.001 for all but B-SNIPI 50 scalp and mNAPSI=0; P<0.01)

Table 3. Efficacy Outcomes in Period A

	PBON=108	ADA, N=109
Primary Endpoint		
Percent of patients who achieved at least a 75% reduction in total fingernail mNAPSI (mNAPSI 75) relative to baseline	3.4%	46.6%
Ranked Secondary Endpoints		
Mean percent improvement from baseline in total fingernail NAPSI	11.5%	56.2%
Percent of patients who achieved total fingernail mNAPSI=0	0%	6.6%
Mean improvement from baseline in nail psoriasis pain (NRS; used to capture a patient's self-report of worst fingernail pain)	1.1	3.7
Mean improvement from baseline in NPPFS	0.8	3.7
Percent of patients who achieved B-SNIPI 50 scalp (at least 50% improvement in the scalp component of the Brigham Scalp Nail Inverse Palmo-Plantar Psoriasis Composite Index, among patients with a baseline scalp score of 6 or greater)*	0.4%	58.3%
Percent of patients who achieved PGA-F 0 (clear) or 1 (minimal), with ≥ 2 grades improvement from baseline ^b	6.9%	48.9%
Measured only at US and Puerto Rico sites. Primary endpoint in US only, for U: Abbreviations: PBO-placebo; ADA=adalimumab; NAPSI=NaII Psoriasis Severity I NBS=numerical rating score; NPPS=NaII Psoriasis Physical Functioning Severity; Assessment of fingernali.	ndex (m=modifie	nd);

EFFICACY IN PERIOD B (FIGURE 2A-G)

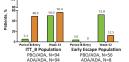
• Overall ITT_B Population: At week 52, response rates for the variou efficacy endpoints were maintained for patients who continued ADA in Period B, and improved for patients who switched from PBO in Period A to ADA in Period B.

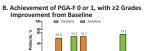
Early Escape Population:

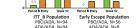
- 188 patients were in the Early Escape Population (94 PBO/ADA; 94 ADA/ADA).
- Patients who experienced worsening of disease from baseline in Period A and continued ADA in Period B had less improvement
- group, experienced worsening of disease from baseline in Period A and needed to escape early to Period B.

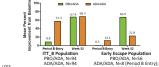
Figure 2. Efficacy Outcomes in Period B for Two Populations >



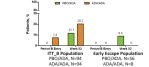




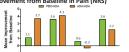




D. Achievement of Total Fingernail mNAPSI=0

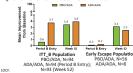


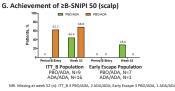
k 52 (n): ITT B 14 PBO E. Improvement from Baseline in Pain (NRS)





F. Improvement from Baseline in NPPFS

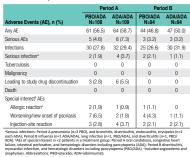




SAFETY

• Approximately half of the patients experienced a treatment-emergent AE in Period B (Table 4). The rates of serious AEs and serious infections were low. There were no AEs of tuberculosis, malignancy, or AEs leading to study-drug discont uation; and no deaths





· For psoriasis patients with concomitant nail disease who received 40 mg ADA every-other-week treatment for 26 weeks in Period A, treatment response was maintained from entry to Period B through week 52.

every-other-week treatment in Period B, eventually reached a similar response at week 52, to those receiving continuous ADA

 No new safety risks were identified with 40 mg ADA every-other week treatment for 52 weeks

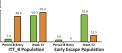
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- than those who switched from PBO in Period A to ADA in Period B. - Only 8 patients in the ADA/ADA group, vs. 56 in the PBO/ADA

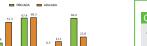


52 (n): ITT B 14 PBO/ADA, 8

NRI Missing at week 52 (n): ITT_B 14 PRO/ADA_8 ADA/ADA: Farly Escane 7 PRI

C. Impr ment from Baseline in Total Fingernail NAPSI





N=6 (Week 52)

Patients receiving PBO in Period A, who switched to 40 mg ADA

treatment

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