

Efficacy of spesolimab for the treatment of GPP flares across prespecified patient subgroups in the Effisayil 1 study

A. David Burden¹, Yukari Okubo², Min Zheng³, Diamant Thaçi⁴, Peter van de Kerkhof⁵, Na Hu⁶, Mogana Sivalingam⁷, Christian Thoma⁸, Siew Eng Choon⁹

¹Institute of Infection, Immunity and Inflammation, University of Glasgow, Glasgow, UK; ²Department of Dermatology, Tokyo Medical University, Tokyo, Japan; ³Department of Dermatology, Second Affiliated Hospital, Zhejiang University, School of Medicine, Hangzhou, Zhejiang, China; ⁴Universität Zu Luebeck, Lubeck, Germany; ⁵Department of Dermatology, Radboud University, Nijmegen, the Netherlands; ⁶Boehringer Ingelheim (China) Investment Co., Ltd, Shanghai, China; ⁷Boehringer Ingelheim International GmbH, Ingelheim, Germany; ⁸Boehringer Ingelheim International GmbH, Biberach, Germany; ⁹Department of Dermatology, Hospital Sultanah Aminah, Clinical School Johor Bahru, Monash University Malaysia, Subang Jaya, Malaysia

Subgroup analyses from the Effisayil 1 study showed that the efficacy of spesolimab (pustular and skin lesion clearance) was consistent across all prespecified patient populations, including those with or without *IL36RN* mutations

PURPOSE

To investigate the consistency of the spesolimab treatment effect by conducting a subgroup analysis of the primary and key secondary endpoints from the Effisayil 1 study, according to patient demographics and clinical characteristics at baseline.

INTRODUCTION

- GPP is a rare and potentially life-threatening autoimmune disease characterized by recurrent flares of widespread sterile pustules, with or without systemic inflammation^{1,2}
- Effisayil 1 (NCT03782792) was a multicenter, randomized, double-blind, placebo-controlled study of spesolimab, an anti-IL-36 receptor antibody, in patients presenting with a GPP flare. Within 1 week of a single dose of spesolimab, rapid pustular and skin clearance was observed compared with placebo³
 - Primary endpoint (GPPGA pustulation subscore of 0; no visible pustules): 54% vs 6% (one-sided $p < 0.001$)
 - Key secondary endpoint (GPPGA total score of 0 or 1; clear or almost clear skin): 43% vs 11% (one-sided $p = 0.0118$)

CONCLUSIONS

- Estimates of spesolimab treatment effect in each patient subgroup were generally similar to those of the overall population for both the primary and key secondary endpoints
- The efficacy of spesolimab (pustular and skin clearance) compared with placebo was consistent across all prespecified subgroups
- However, it should be noted that several subgroups had very few patients
- These data provide further evidence supporting the use of spesolimab to treat all patients presenting with a GPP flare

METHODS

- The efficacy of spesolimab was evaluated in prespecified patient subgroups from Effisayil 1, if at least 2 categories of the subgroup included ≥ 5 patients: sex, age, race, BMI, GPPGA pustulation subscore at baseline, GPPGA total score at baseline, JDA GPP severity score at baseline, presence of plaque psoriasis at baseline, and *IL36RN* status
- Scan the QR code at the bottom of this poster to see full details of the Effisayil 1 study design^{3,4}

RESULTS

Baseline demographics and clinical characteristics

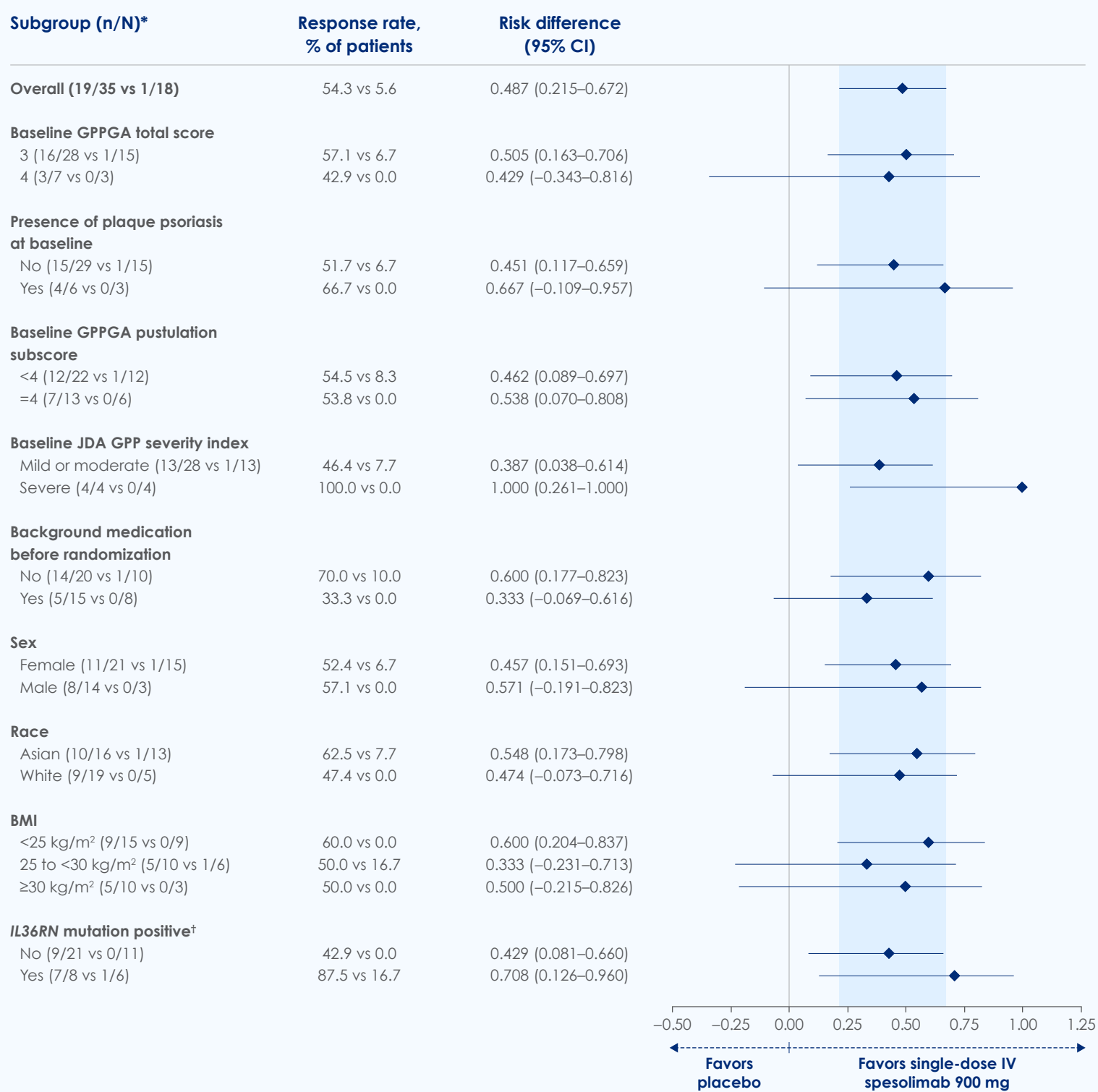
Characteristic	Spesolimab (n=35)	Placebo (n=18)
Age, years, mean (SD)	43.2 (12.1)	42.6 (8.4)
Female, n (%)	21 (60.0)	15 (83.3)
Race, n (%)		
Asian	16 (45.7)	13 (72.2)
White	19 (54.3)	5 (27.8)
BMI, kg/m ² , mean (SD)	27 (8)	26 (10)
<i>IL36RN</i> mutation positive*, n (%)	8 (22.9)	6 (33.3)
GPPGA total score, n (%)		
3 (moderate)	28 (80.0)	15 (83.3)
4 (severe)	7 (20.0)	3 (16.7)
GPPGA pustulation subscore, n (%)		
2 (mild)	6 (17.1)	5 (27.8)
3 (moderate)	16 (45.7)	7 (38.9)
4 (severe)	13 (37.1)	6 (33.3)
Pain VAS, median (IQR)	79.8 (70.5–87.8)	70.0 (50.0–89.4)
JDA GPP severity index, n (%)		
Mild	9 (25.7)	5 (27.8)
Moderate	19 (54.3)	8 (44.4)
Severe	4 (11.4)	4 (22.2)
Missing	3 (8.6)	1 (5.6)
Mean (SD)	7.9 (3.0)	8.4 (2.8)
Median (min, max)	8.0 (2, 14)	8.0 (4, 14)
Medication for GPP prior to randomization, n (%)†		
Clobetasol propionate	18 (51.4)	9 (50.0)
Acitretin	5 (14.3)	1 (5.6)
Cyclosporin	4 (11.4)	1 (5.6)
Betamethasone valerate	2 (5.7)	3 (16.7)
Methotrexate	2 (5.7)	2 (11.1)
Betamethasone dipropionate	1 (2.9)	3 (16.7)
Betamethasone; calcipotriol	1 (2.9)	2 (11.1)
Emulsifying wax; paraffin, liquid, white soft paraffin	2 (5.7)	1 (5.6)
Emulsifying wax; paraffin, liquid, white soft paraffin	1 (2.9)	2 (11.1)

Genotyping data were available for 46 patients. DNA sequencing was not performed in 7 patients. *Patients who were homozygous or heterozygous for an *IL36RN* mutation were considered positive; †Background medication for GPP in at least 3 patients of the overall population.

The placebo arm included a higher proportion of female and Asian patients than the spesolimab arm; clinical characteristics were generally balanced between study arms

Subgroup analysis of GPPGA pustulation subscore of 0 at Week 1

Forest plot of risk difference for GPPGA pustulation score of 0 at Week 1

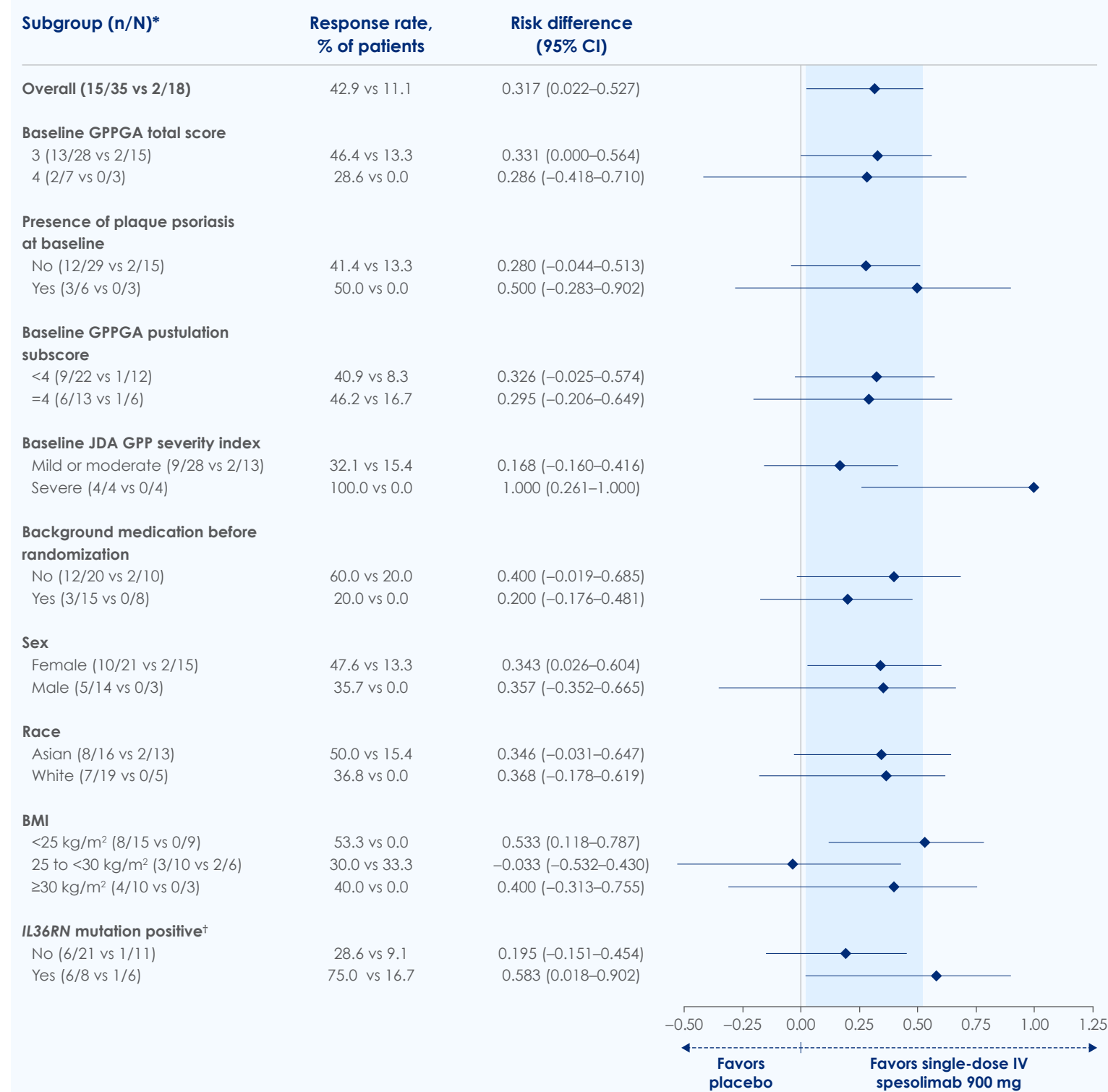


Missing values or any use of other medication for GPP within the first week of the trial were regarded as non-response for the analysis of these endpoints. *Single-dose IV spesolimab 900 mg vs placebo; subgroup analysis by age was not performed as only 2 patients were aged ≥ 65 years; †Patients who were homozygous or heterozygous for an *IL36RN* mutation were considered positive.

The efficacy of spesolimab (GPPGA pustulation subscore of 0) was consistent across patient subgroups

Subgroup analysis of GPPGA total score of 0 or 1 at Week 1

Forest plot of risk difference for GPPGA total score of 0 or 1 at Week 1



Missing values or any use of other medication for GPP within the first week of the trial were regarded as non-response for the analysis of these endpoints. *Single-dose IV spesolimab 900 mg vs placebo; subgroup analysis by age was not performed as only 2 patients were aged ≥ 65 years; †Patients who were homozygous or heterozygous for an *IL36RN* mutation were considered positive.

The efficacy of spesolimab (GPPGA total score of 0 or 1) was consistent across patient subgroups

Abbreviations
BMI, body mass index; CI, confidence interval; FDA, US Food and Drug Administration; GPP, generalized pustular psoriasis; GPPGA, Generalized Pustular Psoriasis Physician Global Assessment; IL-36, interleukin-36; IQR, interquartile range; IV, intravenous; JDA, Japanese Dermatological Association; pain VAS, pain visual analog scale; SD, standard deviation.

References
1. Novartis AA, et al. *J Eur Acad Dermatol Venereol* 2017;31:1792–1799; 2. Fujita H, et al. *J Dermatol* 2018;45:1235–1270; 3. Bachelez H, et al. *N Engl J Med* 2021;385:2431–2440; 4. Choon SE, et al. *BMJ Open* 2021;11:e043666.

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