Real-world effectiveness of persistent tralokinumab use on clinician and patient-reported outcomes in patients with atopic dermatitis in the CorEvitas Atopic Dermatitis Registry

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Objectives

- To assess the change from baseline in clinician-assessed and patient-reported outcomes among US adults with AD following 6 months of persistent tralokinumab use after treatment initiation in the CorEvitas AD registry

Results

- Improvement in clinician-assessed outcomes at 6-months follow-up
  - The proportion of patients meeting clear/almost clear skin (EASI<7) notably increased from baseline to 6 months: 6.7% (4/59) to 60.0% (36/60) for vIGA-1 (Table 3)
  - Among patients with moderate-to-severe AD (EASI<7 at baseline), 85.0% (51/60) for EASI ≤7 were persistent on tralokinumab at 6 months follow-up (Table 3)

- Improvement in PROs at 6-months persistent tralokinumab
  - Among patients with baseline DLQI 47, 71.4% achieved n4-point improvement in PROs at follow-up.
  - The proportion of patients meeting n4-point improvement at baseline decreased from 38.3% (23/60) to 6.8% (4/60) at 6 months follow-up.
  - Of patients with baseline average pruritus NRS 3, approximately 70% of both AST-native and AST-experienced patients achieved n3-point improvement at follow-up (Figure 2)

Conclusions

- In this real-world study, patients with AD experienced notable improvements in both clinician-assessed and patient-reported outcomes after 6-months of persistent tralokinumab treatment, regardless of prior AST therapy use
  - All AST-experienced patients had prior use of dupilumab and still showed improvements in AD signs and symptoms
  - Limitations include the limited number of patients with 6-month registry visits and that only persistent patients are included in the current analysis
  - These findings support the therapeutic potential of tralokinumab for AD patients, and highlight the need for future real-world studies with longer follow-up periods and larger sample size

Baseline and Disease Characteristics

- Among the 60 patients in this analysis, the mean age was 49.1 years and mean AD duration was 15.0 years (Table 2)
  - The majority of patients were female (68.3%), White (88.3%), worked full-time (63.3%), and AST-naive (73.3%) (Table 2)
  - At 16 AST-experienced patients had prior use of dupilumab
  - At baseline, the majority of patients had moderate-to-severe AD (ie, vIGA-AD ≥3 or 4) (Table 2)
  - Disease severity was lower in AST-experienced patients

Table 2. Baseline characteristics of patients persistent on tralokinumab at 6-months follow-up as assessed by AST experience

<table>
<thead>
<tr>
<th>AST Experienced</th>
<th>Naïve</th>
<th>Total Excluded: N=178</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age, mean (SD)</td>
<td>45.2</td>
<td>61.7±3.5</td>
</tr>
<tr>
<td>Sex, n (%):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>82.2</td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>17.8</td>
<td></td>
</tr>
<tr>
<td>Prior use of dupilumab, n (%):</td>
<td>56.6</td>
<td></td>
</tr>
<tr>
<td>n4-point improvement in PROs at follow-up (defined as a visit occurring 5 to 9 months from datacut)</td>
<td>6.8</td>
<td>4/60</td>
</tr>
</tbody>
</table>

References

3. PuriCore: PuriCore Interim Analysis of Real-World Data from the CorEvitas Atopic Dermatitis Registry. DOI: 10.2147/JS-149449.12.02.13.61912