Long-term Dupilumab Efficacy is Sustained in Adults with Moderate-to-Severe Atopic Dermatitis Transitioning From Weekly to Every Other Week Dosing: Results From an Open-Label Extension Trial

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Background: Atopic dermatitis (AD) is a chronic systemic inflammatory disease often requiring long-term management. This analysis assesses the long-term maintenance of dupilumab efficacy in adult patients with moderate-to-severe AD who transitioned from dosing once weekly (qw) to once every two weeks (q2w) in an open-label extension (OLE) trial (NCT01949311).

Methods: Adults with moderate-to-severe AD who had participated in any dupilumab parent study (phase 1 to 3) were enrolled into the long-term, multicentre, OLE trial with a maximum treatment duration of 5 years. In 2019, patients transitioned from 300 mg dupilumab qw to 300 mg q2w to align with the approved dosage. Concomitant treatments for AD, including topical corticosteroid (TCSs) and topical calcineurin inhibitors (TCIs), were permitted. Data shown here are for the full population switching from dupilumab 300 mg qw to 300 mg q2w.

Results: The cohort of patients that transitioned from 300 mg qw to q2w (n = 226) had an initial exposure duration of at least 3 years to 300 mg qw. 222 (98%) patients subsequently received the q2w dosing for at least 24 weeks and up to 75 weeks (at the time of data cutoff; mean [standard deviation] q2w exposure: 46.7 [7.4] weeks; median q2w exposure: [48.5]). Mean (standard deviation) Eczema Area and Severity Index (EASI) and Pruritus Numerical Rating Scale (NRS) score in transitioning patients remained stable from the time of transition (EASI: 1.92 [3.5], NRS score: 2.15 [1.8]) to 48 weeks post transition (EASI: 1.93 [4.5], NRS score: 2.24 [1.9]). More than 80% of patients who achieved EASI ≤ 7 or NRS score ≤ 4 at the time of transition continuously maintained their response for 24 weeks after transition to the q2w regimen. Dupilumab was generally well tolerated, with an acceptable safety profile.

Conclusions: In this long-term OLE study, efficacy of dupilumab was sustained following the dose regimen transition from 300 mg qw to the approved adult dose regimen of 300 mg q2w, with stable signs and symptoms 48 weeks post-change.

Acknowledgements

Research sponsored by Sanofi and Regeneron Pharmaceuticals, Inc. ClinicalTrials.gov Identifier: NCT01949311. Medical writing/editorial assistance was provided by Nigel De Melo, PhD, of Excerpta Medica, and was funded by Sanofi Genzyme and Regeneron Pharmaceuticals, Inc., according to the Good Publication Practice guideline.

Disclosures

Deleuran M: AbbVie, Eli Lilly, Incyte, LEO Pharma, Pfizer, La Roche Posay, Arena Pharmaceuticals, ASLAN Pharmaceuticals, Pierre Fabre, Regeneron Pharmaceuticals, Inc., Sanofi Genzyme – research support, Investigator, consulting/advisory board agreements, and/or honoraria for lectures. **Hong CH**: Centocor, Cutanea, Incyte, GSK, MedImmune – investigator; sanofi-aventis – consultant; Boehringer Ingelheim, Dermavant, GSK – investigator, consultant; AbbVie, Amgen, BMS, Eli Lilly, Galderma, Janssen, LEO Pharma, Novartis, Regeneron Pharmaceuticals Inc., UCB – speaker, investigator, consultant. **Adam DN:** AbbVie, Amgen, Bausch Health, BMS, Eli Lilly, Galderma, Janssen, Merck, Novartis, Pfizer, Sanofi Genzyme, Sun Pharma – advisory board/honoraria; AbbVie, Actelion, Bausch Health, BMS, Galderma, Janssen, LEO Pharma, Novartis, Pfizer, Sanofi Genzyme – speaker/honoraria; AbbVie, Bausch Health, Eli Lilly, Janssen, LEO Pharma, Novartis, Sanofi Genzyme – consultant fees; AbbVie, Amgen, Arcutis Biotherapeutics, BMS, Boehringer Ingelheim, Coherus BioSciences, Dermira, Dermavant, Eli Lilly, Incyte, Janssen, LEO Pharma, Pfizer, Regeneron Pharmaceuticals, Inc., UCB – clinical trials/investigator fees. **Hussain I:** CSL Behring, Genentech, Optinose, Pfizer – advisory board member; AbbVie, AnaptysBio, Asana BioSciences, AstraZeneca, CSL Behring, Genentech, Gossamer Bio, GSK, HAL Allergy, Kiniksa Pharmaceuticals, LEO Pharma, Menlo Therapeutics, Merck, Novartis, Optinose, Pfizer, Regeneron Pharmaceuticals, Inc., Roche, Shire, Vanda Pharmaceuticals – Principal Investigator. **Zhang H, Shabbir A, Levit NA:** Regeneron Pharmaceuticals, Inc. – employees and shareholders. **Rodríguez Marco A:** Sanofi Genzyme – employee, may hold stock and/or stock options in the company.