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ABSTRACT NUMBER: 1826

Secukinumab Achievement of Psoriatic Arthritis Disease Activity Score (PASDAS) Related Remission: 2-Year Results from a Phase 3 Study

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Background/Purpose: Psoriatic arthritis (PsA) disease activity score (PASDAS) assessing multiple facets of PsA was demonstrated to distinguish treatment effect, perform better in statistical terms than traditional joint-only indices[1] and could be used as a treatment target in clinical trials in PsA. Secukinumab significantly improved the signs and symptoms of PsA over 104 weeks (wks) in the FUTURE 2 study.[2] This *post-hoc* analysis assessed the ability of secukinumab to achieve low disease activity (LDA) or remission (REM) using PASDAS through 104 wks in the FUTURE 2 study.

Methods: FUTURE 2 study design has been previously published.[2] PASDAS index is derived from physician's global VAS, patient's global VAS, SF-36 PCS, tender and swollen joint counts, Leeds enthesitis count, dactylitis count and CRP level with validated cut-points for high disease activity (HDA ≥5.4), moderate disease activity (3.2< MoDA <5.4), 1.9< LDA ≤3.2 and REM ≤1.9.[3] PASDAS was assessed in the overall population and in patients (pts) stratified by prior anti-TNF use (naïve vs inadequate response [IR]) and disease duration (≤2 years vs >2 years since first PsA diagnosis) and reported using mutually exclusive categories at group level and as observed analysis.

Results: PASDAS score at baseline was similar across the three treatment groups. In the overall population at Wk 16, PASDAS REM, LDA, and MoDA were achieved in: 15.6%, 22.9%, and 49.0% of pts, respectively, treated with secukinumab 300 mg; 15.2%, 19.2%, and 42.4%, respectively, with secukinumab 150 mg group vs. 2.3%, 13.8%, and 44.8%, respectively with placebo (PBO). At Wk 104, REM was achieved in 22.9% and 14.3% pts treated with secukinumab 300 and 150 mg, respectively. The proportion of pts achieving PASDAS derived criteria at Wks 16 and 104 by anti-TNF status is reported in the figure. The proportion of pts achieving PASDAS REM/LDA at Wks 16 and 104 was similar, irrespective of time since first diagnosis, for both secukinumab doses.[4] Secukinumab treated pts achieving PASDAS REM had significantly greater improvements in function, physical and mental health quality of life, and fatigue compared to HDA through Wk 104.[5]

Conclusion: PASDAS REM and LDA were achieved in 38.5% and 34.4% pts treated with secukinumab 300 and 150 mg, respectively, vs 16.1% in placebo group at Wk 16, with approximately 50% pts achieving PASDAS REM and LDA in both secukinumab groups at Wk 104. A higher proportion of anti–TNF-naïve pts treated with secukinumab achieved PASDAS REM or LDA than anti–TNF-IR through Wk 104. Secukinumab treated pts achieving PASDAS REM had significantly greater improvements in function, quality of life, and fatigue.

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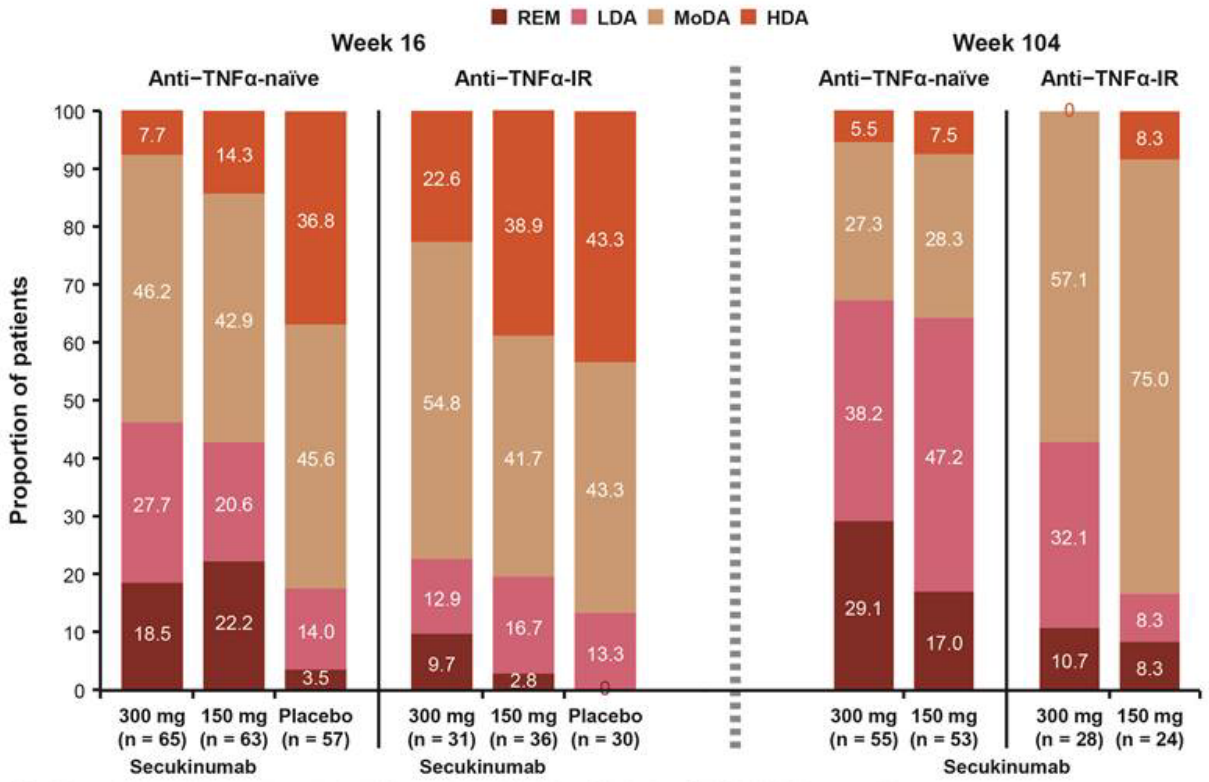
Figure: Proportion of Patients Achieving PASDAS Derived Criteria at Weeks 16 and 104 by Anti-TNFα Status[T]



[T]Secukinumab 75 mg data are not reported as this was not considered an effective dose.[2] HDA, high disease activity; MoDA, moderate disease activity; LDA, low disease activity; REM, remission. n, number of patients in the treatment group with evaluation

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