

Comparison of patient's profile initiating anticytokines and JAK inhibitors for atopic dermatitis in the OMCCI cohort

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Disclosures

- Anne-Claire Fougerousse: speaker, consultant or investigator for Abbvie, Sanofi, Leo-Pharma, Lilly, Pfizer
- Institutionnal support of Novartis, Sanofi, Lilly, Leo Pharma, Janssen, UCB Pharma, Almirall



OMCCI Cohort

- French prospective real-world multicenter study of chronic inflammatory skin diseases (atopic dermatitis (AD), psoriasis, hidradenitis suppurativa and chronic spontaneous urticaria)
- Objective: to determine and compare the impacts of these conditions on sufferer's lives and therapeutic decisions (follow up 4 years)
- Inclusions started on December 2020 and are ongoing (1810 patients on 8th of June 2022)



OMCCI Cohort- AD collected data

PHYSICIANS' DATA		Inclusion	6 months	12 month	s 18 months	24 months	30 months	36 months	42 months	48 months
Verification of inclusion criteria		Х								
EASI if atopic dermatitis		Х		х		х		Х		Х
Treatment, associated with dermatosis, prescribed over the last 6 months; sub collection as part of usual practice and follow-up (including dosage)	ject to data	Х		X		Х		Х		X
Information if treatment is continued/discontinued/switch with motivation				Х		Х		Х		Х
PATIENT'S DATA	Inclusion	6	months	12 months	18 months	24 months	30 months	36 months	42 months	48 months
Socio-demographic profile	х									
Age at diagnosis	х									
Hospitalizations within the last 6 months	х	Х		х	х	х	х	х	х	х
Consultations over the last 6 months	х	х		х	х	х	х	х	Х	х
Body areas with AD lesions/ severity	х	х		х	х	х	х	х	х	Х
DLQI	х	х		х	х	х	х	х	х	х
SF-12	х	Х		х	х	х	х	х	Х	Х
Absence from work over the last 6 months	х	х		х	х	х	х	х	х	х
Assessment of discomfort	х	х		х	х	х	х	х	х	х
Compliance	х	х		х	х	х	х	х	х	х



Introduction/ Material and Methods

- Therapeutics options for moderate to severe AD in France on June 2022 included dupilumab, baracitinib; tralokinumab and upadacitinib only with early access
- Objective of this preliminary analysis: to compare the profile of patients initiating anticytokines or JAK inhibitors for AD
- Exclusion criteria: prescription of JAKi or anticytokine the 6 months before inclusion in the OMCCI



Results

- 358 patients with moderate to severe AD
- → 206 fullfiled the inclusion criteria
 - Dupilumab n= 151
 - Baricitinib n= 52
 - Upadacitinib n=2
 - Tralokinumab n=1

	Anticytokine (n=152)	JAKi (n=54)	P value
Mean age (years)	43.0 ± 18.6	32.0 ± 13.7	<0.001
Sex female (n,%)	77 (50.7%)	32 (59.3%)	0.277
Marital status: single	45 (29.6%)	30 (55.6%)	0.005
(n,%)			
Mean EASI	21.4 ± 13.7	23.4 ± 13.6	0.279
Mean DLQI	13.3 ± 6.5	11.4 ± 5.6	0.054
Hospitalisation for AD the	12 (7.9%)	2 (3.7%)	0.364
last 6 months (n,%)			
Mean disease duration	27.6 ± 19.1	20.9 ± 14.1	0.026
(years)			
Mean impact on daily	7.4 ± 1.9	7.3 ± 1.6	0.381
life*			
Mean impact on family	6.0 ± 2.8	5.3 ± 2.7	0.049
life*			
Mean impact on	6.0 ± 3.3	7.0 ± 2.4	0.171
professional life*			
Mean score of physical	47.21 ± 9.32	51.80 ± 5.95	0.002
dimension of SF12			
Mean score of mental	35.58 ± 10.64	35.58 ± 10.64	0.123
dimensions of SF12			

* Visual analogic scale from 0 to 10



Results

- Patients initiating anticytokine
 - greater number of body areas with extensive AD (3.5 횻2.7 vs 2.3 횻1.6, p=0.007)
 - extensive AD lesions more frequent for thorax and abdomen, back, buttocks and thighs, legs and feet
- Isolated head and neck involvement numerically more common in patients initiating JAKi (7.5% versus 2.6%)
- Sick leaves due to AD the last 6 months were comparable in the 2 groups
- JAKi initiation declined from February 2022

Discussion

- Dupilumab was initiated in older patients
 - More favorable safety profile
 - More experience with this treatment
 - More data in this age group
- Revision process of JAKi's safety by health authorities had an impact on JAKi's initiation kinetics

• Portuguese recommandations:

Biologic therapy	JAK inhibitors
presence of type 2 comorbidities	need of rapid action on pruritus
hepatic or renal insufficiency	history of eye inflammation
high risk of infection or thrombo- embolic event	concurrent disease in which JAKi are indicated



Conclusion

- 2 profiles of AD patients according to the treatment choice
- Decision seeming mostly guided by the controversial safety profile of JAKi
- When the PRAC recommendations will be available, the validity of these choices might be questioned