Impact of Biologic-Naïve Status on Clinical Severity and Patient Experience in Psoriasis: A Multicenter Real-World Cohort Study



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INTRODUCTION

Biologic therapies have significantly changed the management of moderate-to-severe psoriasis since their introduction in 2004. Current guidelines recommend biologics for patients who have failed at least one conventional systemic therapy. However, little is known about the impact of being biologic-naïve on disease severity and patient experience in real-life settings. Objective was to evaluate the clinical severity and quality of life of biologic-naïve versus biologic-experienced patients with moderate-to-severe psoriasis in a real-world context.

MATERIALS and METHODES

This was a prospective, multicenter, observational cohort study conducted in France. Between December 2020 and January 2023, 1,244 adult patients with moderate-to-severe psoriasis requiring initiation or modification of systemic therapy were enrolled. Patients were stratified based on biologic treatment history. Clinical severity (e.g., PASI), quality of life (DLQI), and general health status (SF-12) were assessed at baseline. Statistical comparisons between groups were performed using Wilcoxon rank-sum and Chi-square tests.

RESULTS and DISCUSSION

Despite comparable disease duration, biologic-naïve patients exhibited more severe clinical symptoms and greater quality-of-life impairment (Table 1). These differences, while significant, should be interpreted considering the absence of a therapeutic washout period prior to inclusion—a contrast to randomized clinical trials—which may account for borderline severity scores in naïve patients. Conversely, non-naïve patients maintained low DLQI and SF-12 scores at baseline. Prior biologic exposure may foster improved disease perception and greater confidence in therapeutic outcomes, even in the context of treatment failure.

CONCLUSION

Patients previously treated with biologics seem to experience a better overall disease perception and confidence in care, even when prior therapies were suboptimal. These results could help inform the ongoing debate on early versus delayed initiation of biologic therapy in psoriasis management.

	biologic-experienced patients (n=169)	biologic-naïve patients (n=1075)	p-value
Age at diagnosis (median)	25	24	0.439 (a)
Disease duration (median)	19	17	0.101 (a)
PASI (median)	4	11	<0.001 (a)
PASI > 10 (%)	21.9	51.6	<0.001 (b)
SF12 Physical (median)	53.3	51.1	0.055 (a)
SF12 Mental (median)	43.9	39.8	<0.001 (a)
DLQI (median)	3	10	<0.001 (a)
DLQI 11-30 (%)	26	50	<0.001 (b)

Table 1: Comparison of psoriatic disease characteristics in biologic-naive and biologic-experienced patients (a) Wilcoxon rank-sum test (b) Chi-square test

