SYNOPSIS

- Topical psoriasis treatments may be used as monotherapy for mild disease or as adjunct therapy for more severe disease.
- Fixed-combination halobetasol propionate (0.01%) and tazarotene (0.045%) lotion (HP/TAZ) is approved for treatment of plaque psoriasis in adults.
- Given that patients’ experiences with psoriasis differ greatly, further consideration and assessment of the utility of HP/TAZ in patients with varying symptom severity is warranted.

METHODS

- All participants received once-daily HP/TAZ for 8 weeks (Figure 1).
- At week 8, participants who achieved the primary endpoint of treatment success (defined as investigator’s global assessment [IGA] of clear [0] or almost clear [1]) stopped HP/TAZ and were reevaluated every 4 weeks and retreated as needed through week 52. Those who did not achieve treatment success at week 8 continued HP/TAZ.
- Participants were allowed 24 continuous weeks of HP/TAZ treatment if they achieved 21-grade improvement in IGA from baseline at week 12, with monthly reevaluation for achievement of IGA 0/1.
- In this post hoc analysis, 550 participants were stratified by baseline severity of itch, dryness, and stinging/burning (none to mild vs moderate to severe).
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RESULTS

- Participant population
  - Baseline characteristics are shown in Table 1.
  - Table 1. Participants Stratified by Baseline Severity of Signs/Symptoms

<table>
<thead>
<tr>
<th>Sign/Symptom</th>
<th>None to mild</th>
<th>Moderate to severe</th>
<th>Participants, n (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Itch</td>
<td>278 (45.1)</td>
<td>272 (45.1)</td>
<td>550</td>
</tr>
<tr>
<td>Dryness</td>
<td>289 (52.5)</td>
<td>261 (47.5)</td>
<td>550</td>
</tr>
<tr>
<td>Stinging/Burning</td>
<td>466 (84.7)</td>
<td>84 (15.3)</td>
<td>550</td>
</tr>
</tbody>
</table>

- Efficacy
  - At week 52, a greater proportion of participants with none-to-mild baseline signs/symptoms had treatment success (IGA 0 or 1) compared with participants with moderate-to-severe baseline signs/symptoms (Figure 2).
  - Figure 2. Treatment success at week 52 among participants treated with HP/TAZ stratified by baseline severity of itch, dryness, and stinging/burning.

- Safety
  - Rates of adverse events (AEs) were similar across groups and discontinuations due to AEs were low (range, 5.6%-8.3% across baseline subgroups) similar to what was seen in the overall population.
  - Application site dermatitis was the most common treatment-emergent AE across groups.

CONCLUSIONS

- Long-term use of HP/TAZ was generally associated with treatment success regardless of baseline symptom severity, and no safety signals emerged over 52 weeks.
- Participants with mild baseline symptoms were less likely to experience local skin reactions postbaseline compared with participants with more severe baseline symptoms.
- Evaluation of patients’ baseline itch, dryness, and stinging/burning may help predict outcomes of HP/TAZ treatment.
- Clinicians can use this information to counsel patients regarding treatment expectations when initiating HP/TAZ.

Presented at the Fall Clinical Dermatology Conference • October 21-24, 2021 • Las Vegas, NV, and Virtual

Sponsored by Ortho Dermatologics, a division of Bausch Health US LLC.

Acknowledgments: This study was sponsored by Ortho Dermatologics. Medical writing support was provided by MedThera SC&Co and funded by Ortho Dermatologics. Ortho Dermatologics is a division of Bausch Health US LLC.