Introduction

Investigating the safety and efficacy of psoriasis therapies in diverse populations is important, given the potential for pharmacogenomic differences that may influence treatment outcomes. Skin type, racial/ethnic, genetic and socioeconomic factors, are potential considerations when making treatment choices.

CAL-BDP (CAL 0.005%/BDP 0.064% w/w) is an effective medication for psoriasis and is now available in an aqueous cream made possible by PAD™ Technology. Here we describe the efficacy and convenience of CAL-BDP cream in skin of color patients with plaque psoriasis.

Methods

Patients with mild to moderate plaque psoriasis were enrolled in a Phase 3, randomized, multicenter, investigator-blind, parallel-group trial (NCT03308799) comparing CAL-BDP cream to CAL-BDP topical suspension (TS) and cream vehicle. Patients were instructed to apply the trial medication topically to affected areas of the body once daily for up to 8 weeks. Physician Global Assessment (PGA) treatment success (2-grade improvement and clear or almost clear) was the primary endpoint.

In this post-hoc subgroup analysis, we describe the efficacy and convenience of CAL-BDP cream in skin of color patients (Fitzpatrick skin type classification IV-VI and “Black or African American”) compared to the total study population. Statistical analyses were based on a modified intent-to-treat (MIT) population (including all patients with at least one assessment of PGA after starting treatment).

Results

Of the 784 participants in the study, 280 were categorized as Fitzpatrick skin type IV-VI and 64 patients were “Black or African American”. The patient populations included in this subgroup analysis are presented in Table 1. The number of participants who self-identified as “Black or African American” was limited and the distribution was not balanced between the treatment groups; therefore, the results from this subgroup are not presented in the graphs.

Table 1

Patient Populations in Subgroup Analysis

<table>
<thead>
<tr>
<th>Group</th>
<th>CAL/BDP Cream</th>
<th>CAL/BDP TS</th>
<th>Cream Vehicle</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Population (MITT)</td>
<td>339 (43.1%)</td>
<td>337 (42.6%)</td>
<td>112 (44.3%)</td>
<td>784</td>
</tr>
<tr>
<td>Total Population, Safety Set</td>
<td>342 (45.1%)</td>
<td>337 (42.6%)</td>
<td>115 (44.5%)</td>
<td>794</td>
</tr>
<tr>
<td>Fitzpatrick skin type IV-VI</td>
<td>129 (16.5%)</td>
<td>114 (14.5%)</td>
<td>37 (4.7%)</td>
<td>280 (35.7%)</td>
</tr>
<tr>
<td>Fitzpatrick skin type IV-VI, Safety Set</td>
<td>131 (16.5%)</td>
<td>116 (14.6%)</td>
<td>39 (4.9%)</td>
<td>286 (35.6%)</td>
</tr>
<tr>
<td>Black or African American (MITT)</td>
<td>34 (4.3%)</td>
<td>10 (1.3%)</td>
<td>16 (2.2%)</td>
<td>60 (7.3%)</td>
</tr>
</tbody>
</table>

Figure 1. (a) Type IV-VI group achieved more PGA success after 8 weeks of treatment with CAL/BDP cream than CAL/BDP TS group or cream vehicle group (b) Change from baseline in mPASI after 8 weeks of treatment with CAL/BDP cream was 61.8% in the Type IV-VI group similar to the total population.

Conclusion

This post-hoc subgroup analysis shows that skin of color patients treated with CAL-BDP cream have similar efficacy to the total trial population. Patient convenience and satisfaction for CAL-BDP cream were scored similarly or higher in patients with skin of color than in the total trial population and compared to CAL-BDP TS. A limitation of the study is the number of African American patients is too small for statistical or descriptive comparison.

References


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