
PTs in NRS one of 365

Figure throughout please

ECZTEND Baseline

Our objective was to evaluate the safety and efficacy of tralokinumab for 3 years in patients with moderate-to-severe atopic dermatitis who were not adequately controlled with topical corticosteroids (TCS) or other therapies.

Materials and methods

Patients and treatment

- Of 554 patients who completed the PT and received tralokinumab, 244 patients were randomized 1:1 to open-label treatment with tralokinumab 150 mg every 2 weeks (Q2W) and 244 patients received placebo every 2 weeks (Q2W).
- The trial comprised 2 periods: a parent trial (ECZTEND) that enrolled 400 patients with moderate-to-severe AD and a follow-up trial (ECZTRA) that enrolled 24 patients (12 patients receiving tralokinumab, 12 patients receiving placebo).
- Patients were required to have a Disease-Activity Score in AD (DLQI) score of ≥30 at visit 1 and ≥14 at the initial visit.
- Patients were enrolled in the parent trial over a 1-year period from April 30, 2020, to April 29, 2021.
- Patients who met entry criteria and were randomized to the Q2W tralokinumab group were eligible to enter the follow-up trial, where they continued to receive Q2W tralokinumab or placebo for an additional 2 years (1 year of treatment and 1 year of follow-up).
- The trial was sponsored by LEO Pharma A/S.

Results

Sustained improvement in lesion extent and severity with continued tralokinumab

- Among patients who completed 3 years of tralokinumab treatment, improvement was observed in the skin clearance and severity of AD

Conclusion

- Tralokinumab, a fully human anti-interleukin-4 receptor alpha-chain monoclonal antibody, is efficacious and safe for 3 years in patients with moderate-to-severe AD.

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References


Disclosures

The authors have declared no conflict of interest.