Deucravacitinib in plaque psoriasis: maintenance of response over 3 years in the phase 3 POETYK PSO-1 and PSO-2 trials

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Introduction
- "Tie in loss-2 (TYK2) is an intracellular receptor that mediates signaling of cytokines like interleukin-23. Few targets (if any) that are involved in these pathways are currently available. Deucravacitinib, as an oral, selective, ATP-competitive TYK2 inhibitor, is approved in the US, EU, and other countries for the treatment of adults with moderate-to-severe plaque psoriasis who are candidates for systemic therapy."
- "Deucravacitinib uniquely binds to the regulatory domain of TYK2 (other than the catalytic domain) where it prevents downstream signaling and hence acts as an "off switch" for TYK2 signaling thus acting as an effective treatment for patients with moderate to severe plaque psoriasis as an effective treatment for patients with moderate to severe plaque psoriasis."

Study design
- Patients entering the POETYK LTE trial were those who entered the POETYK PSO-1 and PSO-2 trials with PASI 75 response rates maintained. Deucravacitinib in plaque psoriasis: maintenance of response over 3 years in the phase 3 POETYK PSO-1 and PSO-2 trials

Results
- PASI 90 response rates were maintained from the start of the POETYK LTE trial in Week 0 up to and including Week 148 in Week 148 (Figure 3, Figure 4).
- PASI 90 response rates were maintained from the start of the POETYK LTE trial in Week 0 up to and including Week 148 (Figure 3, Figure 4).
- Deucravacitinib demonstrated a consistent safety profile through 3 years with no increases in adverse events (AEs) or serious AEs (SAEs) over time and no emergence of any new safety signals

Conclusions
- Clinical efficacy was maintained for up to 148 weeks with continuous deucravacitinib treatment in the majority of patients who achieved PASI 75 at Week 0 and at Week 148 and had evaluable in the POETYK LTE trial at Week 112.
- These findings further support the use of oral selective TYK2 inhibitor deucravacitinib as an effective treatment for patients with moderate to severe plaque psoriasis.

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References