Efficacy of Abrocitinib and Dupilumab in Patients With Moderate-to-Severe Atopic Dermatitis With Severe Itch at Baseline and in Subgroups by Baseline Thresholds of Severe Itch: A Post Hoc Analysis of the JADE COMPARE and JADE DARE Clinical Trials

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INTRODUCTION

- Itch associated with atopic dermatitis (AD) has a substantial impact on the patient’s quality of life
- Abrocitinib may be an appropriate treatment option for patients who have severe itch and are expecting to achieve an itch-free state
- The difference between abrocitinib and dupilumab treatment groups largely diminished by week 16 for PP-NRS scores of 7, 8, 9, and 10

METHODS

- Study Design: This post hoc analysis included data from patients with moderate-to-severe AD who received abrocitinib 200 mg QD or dupilumab 300 mg Q2W in combination with background topical therapy in the JADE COMPARE (NCT03720470) and JADE DARE (NCT04345367) phase 3 trials
- Statistical Analysis: Baseline demographics were summarized using descriptive statistics

RESULTS

- Baseline Disease Characteristics: Table 1 shows baseline demographic and disease characteristics for the overall pooled population and individual subgroups by baseline PP-NRS scores
- Itch Response: Figure 1 presents itch response at week 2 and week 16 by baseline PP-NRS severity

OBJECTIVE

- To evaluate the efficacy of abrocitinib and dupilumab in patients with moderate-to-severe AD and severe itch using various baseline thresholds of severe itch

CONCLUSIONS

- Patients with moderate-to-severe AD who had a higher burden of itch at baseline reported a greater improvement in patient-reported measures of quality of life and disease severity
- Across various thresholds of severe itch, abrocitinib provided more rapid achievement of an itch-free state (defined as PP-NRS4) and substantial quality of life improvements that were greater than dupilumab at early as the first postbaseline assessment

REFERENCES


CONTACT INFORMATION

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Table 1. Baseline Disease Characteristics in the Overall Pooled Population and Individual Subgroups of Severe Itch

<table>
<thead>
<tr>
<th>Parameter</th>
<th>Overall Pooled Population</th>
<th>Baseline PP-NRS 7</th>
<th>Baseline PP-NRS 8</th>
<th>Baseline PP-NRS 9</th>
<th>Baseline PP-NRS 10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patients, % (95% CI)</td>
<td>100 (100)</td>
<td>49 (44)</td>
<td>44 (38)</td>
<td>38 (33)</td>
<td>32 (27)</td>
</tr>
<tr>
<td>Sex, n (%)</td>
<td>56 (52-60)</td>
<td>27 (24-30)</td>
<td>22 (19-26)</td>
<td>19 (16-22)</td>
<td>17 (15-19)</td>
</tr>
<tr>
<td>Race, n (%)</td>
<td>453 (42-49)</td>
<td>223 (20-25)</td>
<td>160 (14-18)</td>
<td>127 (11-14)</td>
<td>117 (10-13)</td>
</tr>
<tr>
<td>Country, n (%)</td>
<td>2017 (19-21)</td>
<td>1087 (99-120)</td>
<td>878 (81-95)</td>
<td>708 (64-76)</td>
<td>598 (54-64)</td>
</tr>
<tr>
<td>Region, n (%)</td>
<td>12 (10-13)</td>
<td>62 (55-68)</td>
<td>42 (37-47)</td>
<td>35 (30-40)</td>
<td>28 (23-32)</td>
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<tr>
<td>Relocation, n (%)</td>
<td>10 (9-11)</td>
<td>5 (4-6)</td>
<td>4 (3-5)</td>
<td>3 (2-4)</td>
<td>2 (1-2)</td>
</tr>
<tr>
<td>Diagnosis, n (%)</td>
<td>100 (100)</td>
<td>49 (44)</td>
<td>44 (38)</td>
<td>38 (33)</td>
<td>32 (27)</td>
</tr>
<tr>
<td>Age, n (%)</td>
<td>100 (100)</td>
<td>49 (44)</td>
<td>44 (38)</td>
<td>38 (33)</td>
<td>32 (27)</td>
</tr>
</tbody>
</table>

Figure 1. Itch Response at Week 2 and Week 16 by Baseline PP-NRS Severity

Figure 2. Patients-Reported Outcomes at Week 2 and Week 16 by Baseline PP-NRS Severity

Figure 3. POEM, DLQI, and EASI Scores at Baseline and Week 16 for Achievement of ≥4-point Improvement in PP-NRS (PP-NRS4), PP-NRS Score of 0 or 1 (itch-free state), and Dermatology Life Quality Impairment (median DLQI: 16 [abrocitinib] and 16 [dupilumab]) at baseline.