Bimekizumab Efficacy Across Subgroups Of Patients With Moderate To Severe Plaque Psoriasis: Pooled Results From Three Multicentre, Randomised, Double-blinded Phase 3 Trials

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Patient characteristics can impact maintenance of response to treatment. We assess 52-week (wk) treatment efficacy across subgroups of patients with moderate to severe plaque psoriasis who achieved absolute Psoriasis Area and Severity Index (PASI)=0 and PASI≤2 after 16 wks' bimekizumab treatment.

Data were pooled from the phase 3 trials: BE VIVID (NCT03370133), BE READY (NCT03410992), and BE SURE (NCT03412747). Included patients achieved PASI=0 or PASI≤2 at Wk16 after randomisation to bimekizumab 320mg every 4 wks (Q4W), receiving either bimekizumab 320mg Q4W or every 8 wks (Q8W) from Wk16. Maintenance of Wk16 response at Wk52 is reported. Missing data were imputed as non-response (NRI).

989 patients were randomised to bimekizumab; these analyses include 749 patients who achieved PASI≤2 at Wk16 (511 and 238 then received bimekizumab Q4W and Q8W), of whom 537 achieved PASI=0 (355 and 182 then received bimekizumab Q4W and Q8W). Maintenance of PASI=0 at Wk52 was achieved by 92.2% (Q4W) and 82.9% (Q8W) patients with baseline PASI≤15, and 81.1% (Q4W) and 90.1% (Q8W) with baseline PASI>15. Maintenance was also achieved by 81.0% (Q4W) and 86.8% (Q8W) patients weighing ≤100kg, and 89.7% (Q4W) and 93.5% (Q8W) weighing >100kg. 87.1% (Q4W) and 84.5% (Q8W) patients with prior biologic exposure, and 80.3% (Q4W) and 91.0% (Q8W) without, maintained PASI=0. Similar proportions of patients maintained PASI≤2 at Wk52 across patient subgroups including baseline PASI, baseline weight and prior biologic exposure; 89.5% (Q4W) and 90.9% (Q8W) patients with baseline PASI≤15 and 90.4% (Q4W) and 90.2% (Q8W) patients with baseline PASI>15 maintained PASI≤2 at Wk52. Bimekizumab dosed Q4W or Q8W provided robust, durable clear/almost clear skin through 52 wks, as demonstrated by high absolute PASI responses, regardless of patient subgroups including baseline PASI, baseline weight and prior biologic exposure.

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