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Real-world effectiveness of deucravacitinib in patients with plaque psoriasis: a 6-month analysis of quality of life and symptom burden from the Registry of Psoriasis Health Outcomes: A Longitudinal Real-World Collaboration Study (RePhlect)

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Introduction

- Deucravacitinib, an oral, selective, allosteric tyrosine kinase 2 (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[1-4]
- This study aimed to assess HRQoL outcomes, symptom burden, and effectiveness in the RePhlect North American cohort of patients with psoriasis after 6 months of continuous treatment with deucravacitinib

Study design

- The RePhlect North American cohort includes patients enrolled in the CorEvitas Psoriasis Registry (US and Canada)

Outcomes

- HRQoL and symptom burden were measured among all included patients
  - VAS joint pain was assessed only in patients with dermatologist-diagnosed PsA

Inclusion criteria

Physician-reported (dermatologist) diagnosis of plaque psoriasis

Patient ≥18 years of age who provided written informed consent for registry participation

Oral initiation of deucravacitinib for the treatment of plaque psoriasis on or after September 2022

Persisted with deucravacitinib until their 6-month follow-up visit (data cut-off: December 2024)

Outcome	Measure	
HRQoL	DLQI	
Symptom burden	VAS- Itch	VAS- Skin pain
	VAS- Fatigue	VAS- Joint pain

DLQI, Dermatology Life Quality Index; HRQoL, health-related quality of life; PsA, psoriatic arthritis; VAS, visual analog scale.

1. Sotyktu [package insert]. Princeton, NJ: Bristol Myers Squibb; September 2022. **2.** Sotyktu [European summary of product characteristics]. Dublin, Ireland: Bristol Myers Squibb EEIG; December 2023. **3.** Sotyktu [package insert]. Tokyo, Japan: Bristol Myers Squibb K.K.; September 2022. **4.** Sotyktu [European summary of product characteristics]. Munich, Germany: Bristol Myers Squibb GmbH & Co; March 2023.

Demographic and clinical characteristics

- This interim analysis included 144 patients
- At baseline, 55.2% and 64.3% of patients had moderate disease based on BSA and IGA; 53.5% reported at least moderate impact on quality of life (DLQI >5)

Skin clearance

- After 6 months of persistent treatment with deucravacitinib, 69.2%, 50.3%, and 73.6% maintained or achieved BSA ≤3%, IGA 0/1, and PASI ≤3, respectively
  - More information can be found in the AAD 2025 poster entitled, *"Real-world effectiveness of deucravacitinib in patients with plaque psoriasis: a 6-month analysis of skin clearance from the RePhlect Registry"*

Characteristics	Overall cohort (n = 144)
Age, years, mean (SD)	53.6 (14.5)
Female, n (%)	78 (54.2)
White, n (%)	122 (85.3)
BMI category, n (%)	
Underweight/normal	24 (17.9)
Overweight	56 (41.8)
Obesity	54 (40.3)
PsO duration, years, mean (SD)	15.3 (12.9)
Biologic-naive, n (%)	92 (63.9)
PsA (dermatologist identified), n %	44 (31.7)
BSA, mean (SD)	9.8 (9.2)
BSA category, n (%)	
Clear or mild [0-3]	30 (21.0)
Moderate [>3-10]	79 (55.2)
Severe [>10]	34 (23.8)
IGA, n (%)	
0/1 (clear/almost clear)	9 (6.3)
2 (mild)	26 (18.2)
3 (moderate)	92 (64.3)
4 (severe)	16 (11.2)
PASI, mean (SD)	6.5 (5.3)
DLQI, mean (SD)	7.1 (5.5)

BSA, body surface area; DLQI, Dermatology Life Quality Index; IGA, Investigator's Global Assessment; PASI, Psoriasis Area and Severity Index; PsO, psoriasis; SD, standard deviation.

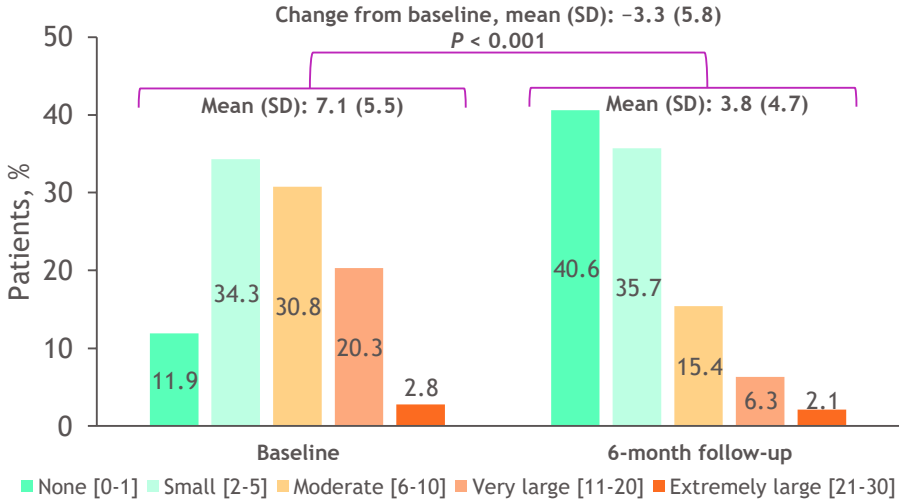
HRQoL

- No effect of disease on HRQoL (DLQI 0/1) was reported by 40.6% of patients after 6 months of continuous deucravacitinib compared to 11.9% at baseline
- Mean (95% CI) change from baseline in DLQI was −3.3 (−4.3, −2.4); *P* < 0.001

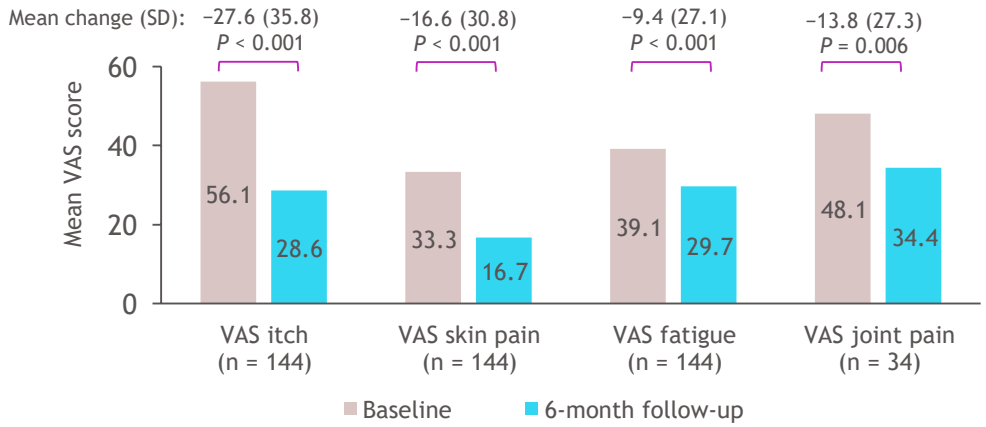
Symptom burden

- Patients who persisted with deucravacitinib until their 6-month follow-up reported significant reductions from baseline in symptom burden
- Patients experienced decreases of 49.2%, 49.8%, 24.0%, and 28.7% in VAS itch, skin pain, fatigue, and joint pain, respectively
- Additionally, 61.1%, 85.4%, 68.1%, and 61.8% maintained or achieved no/mild itch, skin pain, fatigue, and joint pain, respectively

Patients reporting psoriasis symptom impact on HRQoL (DLQI)



Change in VAS scores from baseline to 6-month follow-up



DLQI, Dermatology Life Quality Index; HRQoL, health-related quality of life; SD, standard deviation; VAS, visual analog scale.

Authors' Conclusions

- In addition to improvements in skin clearance, study findings demonstrate that persistent treatment with deucravacitinib was effective in improving HRQoL and symptom burden in a real-world population of patients with psoriasis
  - At 6 months, 40.6%, 61.1%, 85.4%, 68.1%, and 61.8% maintained or achieved DLQI 0/1 and no/mild itch, skin pain, fatigue, and joint pain, respectively
- These results confirm the efficacy outcomes observed in clinical studies[1-3]

1. Armstrong AW, et al. *J Am Acad Dermatol*. 2023;88:29-39. **2**. Strober B, et al. *J Am Acad Dermatol*. 2023;88:40-51. **3**. ClinicalTrials.gov (https://clinicaltrials.gov/study/NCT05701995).