#### Bimekizumab efficacy across subgroups of patients with moderate to severe plaque psoriasis: Pooled analysis from up to 3 years of treatment in 5 phase 3/3b clinical trials

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#### **OBJECTIVES:**

- To evaluate efficacy outcomes in patients with moderate to severe plaque psoriasis treated with bimekizumab (BKZ), using the largest pool of phase 3/3b data over 3 years.
- To assess **efficacy outcomes** across **subgroups** of age, weight, and baseline disease characteristics in patients with psoriasis.

#### **Background:**

- Patient characteristics can impact psoriasis treatment response.<sup>1</sup>
- BKZ is a monoclonal IgG1 antibody which selectively inhibits IL-17F in addition to IL-17A.<sup>2</sup>
- Here, we report efficacy outcomes across patients receiving BKZ through 3 years.

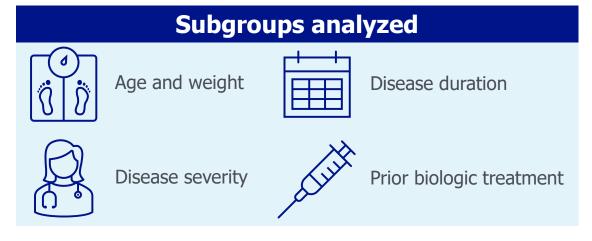
## [a] Patients discontinuing treatment due to lack of efficacy or treatment-related adverse events were considered non-responders at subsequent timepoints; multiple imputation was used for all other missing data. Patients who entered the BE READY escape arm were considered as non-responders from the date of escape until the end of BE READY, after which they were considered in the same way as all other non-escape patients during the BE BRIGHT OLE.<sup>5</sup> 1. Edson-Heredia E et al. J Invest Dermatol 2014;134:18–23; 2. Adams R et al. Front Immunol 2020;11:1894. 3. Warren B et al. N Engl J Med 2021;385:130–41, NCT03412747; 4. Reich K et al. Lancet 2021;397:487–98, NCT03370133; 5. Gordon KB et al. Lancet 2021;397:475–86, NCT03410992; 6. Strober B et al. Br J Dermatol 2023;188:749–59, NCT03598790; 7. Reich K et al. N Engl J Med 2021;385:142–52, NCT03536884. BKZ: bimekizumab; IL interleukin; mNRI: modified non-responder imputation; OLE: open-label extension; PASI 90/100: ≥90/100% improvement from baseline in Psoriasis Area and Severity Index.

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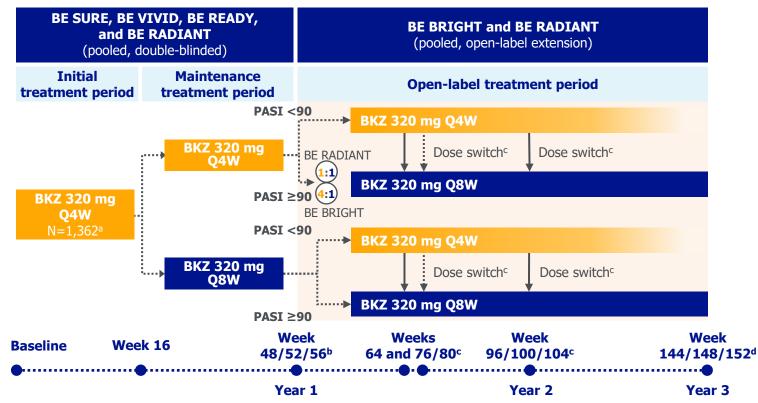
### **Methods:**

 Data were pooled from BE SURE, BE VIVID, BE READY, the first 96 weeks of their open-label extension (OLE) BE BRIGHT, and BE RADIANT (48-week double-blinded period, plus 96-week OLE).<sup>3–7</sup>



• Achievement of **PASI 90** and **PASI 100** at **Year 3** are reported using modified non-responder imputation (mNRI).<sup>a</sup>

#### **Study Design**



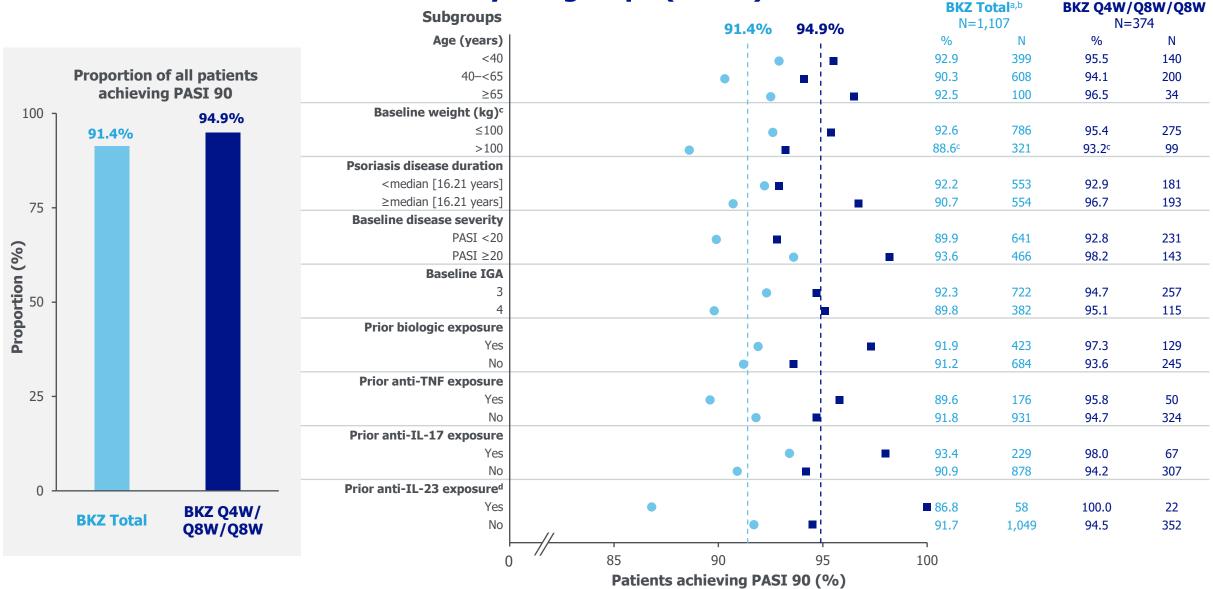
- Of the patients randomized to BKZ Q4W at baseline, 1,107 continued to receive BKZ throughout the maintenance treatment period and into the OLE, regardless of dosing regimen (**BKZ Total**).
- The subset of patients who received **BKZ Q4W/Q8W/Q8W** (initial/maintenance/OLE) were also analyzed (N=374).

# **[a]** Only BKZ-randomized patients are included in this study design; BKZ-randomized patients who were re-randomized to placebo at Week 16 in BE READY (n=105) are not included in these analyses. **[b]** Different week numbers are presented due to different feeder study lengths; Week 48/52/56 refers to OLE Week 0 and corresponds to BE RADIANT/BE VIVID/BE SURE and BE READY, respectively. Patients receiving BKZ 320 mg Q4W who achieved PASI 90 at the end of the feeder studies were randomized 1:1 in BE RADIANT and 4:1 in BE BRIGHT to BKZ 320 mg Q4W or Q8W; patients receiving BKZ 320 mg Q8W who achieved PASI 90 at the end of the feeder studies remained on Q8W dosing; **[c]** In BE RADIANT, at Week 64 or the next scheduled clinic visit, all patients switched to BKZ Q8W via protocol amendment; in BE BRIGHT at Week 76/80, patients achieving PASI 90 could switch to Q8W at the investigator's discretion; all patients were re-assigned to BKZ Q8W at Week 100/104 (OLE Week 48) or the next scheduled visit via protocol amendment; **[d]** For the Week 144/148/152 timepoint: Week 144 corresponds to BE RADIANT OLE Week 96; Week 148 corresponds to BE SURE/BE BRIGHT and BE READY/BE BRIGHT OLE Week 96. BKZ: bimekizumab; BSA: body surface area; DLQI: Dermatology Life Quality Index; IGA: Investigator's Global Assessment; OLE: open-label extension; PASI: Psoriasis Area and Severity Index; Q4W: every 4 weeks; Q8W: every 8 weeks; SD: standard deviation.

### **Baseline Characteristics**

	<b>BKZ</b> <b>Total</b> N=1,107	<b>BKZ</b> <b>Q4W/Q8W/Q8W</b> N=374				
Age (years), mean ± SD	45.5 ± 13.7	45.0 ± 14.1				
<b>Male</b> , n (%)	777 (70.2)	266 (71.1)				
<b>White</b> , n (%)	968 (87.4)	354 (94.7)				
Weight (kg), mean ± SD	89.8 ± 21.2	89.2 ± 20.8				
Duration of psoriasis (years), mean ± SD	$18.5 \pm 12.8$	$18.7 \pm 12.4$ $20.4 \pm 7.4$				
<b>PASI</b> , mean ± SD	$20.9 \pm 7.6$					
BSA (%), mean ± SD	26.5 ± 15.7	$24.5 \pm 13.5$				
<b>IGA</b> , n (%) 3: moderate 4: severe	722 (65.2) 382 (34.5)	257 (68.7) 115 (30.7)				
<b>DLQI total score</b> , mean ± SD	$10.6 \pm 6.4$	$10.7 \pm 6.3$				
<b>Any prior systemic therapy</b> , n (%)	859 (77.6)	285 (76.2)				
<b>Any prior biologic therapy</b> , n (%)	423 (38.2)	129 (34.5)				

#### Achievement of PASI 90 at Year 3 by Subgroups (mNRI)



Results differ slightly from the accepted abstract due to updated mNRI methodology. **[a]** BKZ Total includes all patients randomized to BKZ who received BKZ throughout the maintenance period and into the OLE, regardless of the dosing regimen they received; **[b]** All patients were re-assigned to BKZ Q8W by Year 2/next scheduled visit via protocol amendment; **[c]** For some patients with a body weight  $\geq 120 \text{ kg}$  (who did not achieve complete skin clearance at Week 16), BKZ 320 mg Q4W after Week 16 may further improve treatment response; <sup>1</sup> **[d]** Anti-IL-23 category does not include anti-IL-12/23 therapies. **1.** Food and Drug Administration, Bimekizumab Prescribing Information, 2023. BKZ: bimekizumab; IGA: Investigator's Global Assessment; IL: interleukin; mNRI: modified non-responder imputation; OLE: open-label extension; PASI: Psoriasis Area and Severity Index; PASI 90:  $\geq 90\%$  improvement from baseline in PASI; Q4W: every 4 weeks; Q8W: every 8 weeks; TNF: tumor necrosis factor.

#### Achievement of PASI 100 at Year 3 by Subgroups (mNRI)

			Subgroups	70.49		% 74.3%		<b>BKZ Total</b> <sup>a,b</sup> N=1,107		<b>BKZ Q4W/Q8W/Q8W</b> N=374	
			Age (years)	70.4		1.570		%	Ν	%	Ν
	Proportion of all patients		<40					71.4	399	75.9	140
			40-<65	•		 		69.1	608	72.3	200
	achieving PASI 100	<b>PASI 100</b>	≥65					73.8	100	79.4	34
ר 100			Baseline weight (kg) <sup>c</sup>								
			≤100					72.9	786	78.9	275
			>100					64.1 <sup>c</sup>	321	61.4 <sup>c</sup>	99
			<b>Psoriasis disease duration</b>								
		74.00/	<median [16.21="" td="" years]<=""><td>•</td><td></td><td></td><td></td><td>69.1</td><td>553</td><td>70.8</td><td>181</td></median>	•				69.1	553	70.8	181
75 -	70.4%	74.3%	≥median [16.21 years]					71.7	554	77.5	193
	70.4%		<b>Baseline disease severity</b>			1					
			PASI <20			<b>•</b>		69.6	641	74.4	231
%			PASI ≥20					71.4	466	74.0	143
u U			Baseline IGA			 					
<b>3</b> 50			3					71.7	722	76.1	257
			4	•				67.7	382	69.8	115
<b>Proportion (%)</b>			Prior biologic exposure			1					
P			Yes					72.0	423	79.6	129
			No			 		69.4	684	71.5	245
			Prior anti-TNF exposure								
25 -			Yes	•				68.0	176	73.2	50
			No					70.8	931	74.4	324
			Prior anti-IL-17 exposure								
			Yes					73.5	229	81.4	67
			No					69.5	878	72.7	307
0 1			Prior anti-IL-23 exposure <sup>d</sup>								
	DI/7 Tetal	BKZ Q4W/	Yes					70.4	58	90.9	22
	<b>BKZ Total</b>	Q8W/Q8W	No	//		1		70.4	1,049	73.2	352
						· · · · ·	1				
			C			80	90	100			
				Patients a	chie	ving PASI 100 (	%)				

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#### **CONCLUSIONS:**

- High and durable levels of complete and near-complete skin clearance were achieved through 3 years of bimekizumab treatment, regardless of baseline demographics, disease characteristics, or prior exposure to biologic therapies.
- These results support bimekizumab as a treatment suitable for a wide variety of patients with psoriasis.
- Weight was the subgroup most associated with skin clearance rate, with patients ≤100 kg more likely to achieve PASI 90 and PASI 100 than patients >100 kg.<sup>a</sup>

Author Contributions: Substantial contributions to study conception/design, or acquisition/analysis/interpretation of data: BS, JGK, NM, RV, WHB, CHH, NT, FS, BH, SW, CP; Drafting of the publication, or revising it critically for important intellectual content: BS, JGK, NM, RV, WHB, CHH, NT, FS, BH, SW, CP; Final approval of the publication: BS, JGK, NM, RV, WHB, CHH, NT, FS, BH, SW, CP. Disclosures: BS: Consultant (honoraria) for AbbVie, Almirall, Alumis, Amgen, Arcutis, Arena, Aristea, Asana, Boehringer Ingelheim, Bristol Myers Squibb, Connect Biopharma, Dermavant, Eli Lilly and Company, Evelo Biosciences, Immunic Therapeutics, Janssen, LEO Pharma, Maruho, Meiji Seika Pharma, Mindera Health, Novartis, Pfizer, Regeneron, Sanofi-Genzyme, Sun Pharma, UCB Pharma, Union Therapeutics, Ventyxbio, and vTv Therapeutics; stock options from Connect Biopharma and Mindera Health; speaker for AbbVie, Arcutis, Dermavant, Eli Lilly and Company, Incyte, Janssen, Regeneron, and Sanofi-Genzyme; scientific co-director (consulting fee) for CorEvitas (formerly Corrona) Psoriasis Registry; investigator for AbbVie, Cara, CorEvitas Psoriasis Registry, Dermavant, Dermira, and Novartis; editor-in-chief (honorarium) for Journal of Psoriasis and Psoriatic Arthritis. JGK: Grants paid to institution from AbbVie, Akros, Allergan, Amgen, Avillion, Biogen MA, Boehringer Ingelheim, Botanix, Bristol Myers Squibb, Celgene, Eli Lilly and Company, Exicure, Incyte, Innovaderm, Janssen, LEO Pharma, Novan, Novartis, Paraxel, Pfizer, Regeneron, Sienna, UCB Pharma, and Vitae; personal fees from AbbVie, Aclaris, Allergan, Almirall, Amgen, Arena, Aristea, Asana, Aurigne, BiogenIdec, Boehringer Ingelheim, Bristol Myers Squibb, Celgene, Eli Lilly and Company, Escalier, Galapagos, LEO Pharma, Menlo, Nimbus, Novartis, Pfizer, Sanofi, Sienna, Sun Pharma, UCB Pharma, Valeant, and Ventyx. NM: Honoraria for participation on advisory boards, as a speaker and for consultancy from AbbVie, Almirall, Boehringer Ingelheim, Bristol Myers Squibb, Celgene, Dr. Wolff, Eli Lilly and Company, Janssen, La Roche Posay, LEO Pharma, Novartis, Pfizer, and UCB Pharma. RV: Grants/research support: AbbVie, Amgen, Centocor, Dermavant, Dermira, Eli Lilly and Company, Galderma, GSK, LEO Pharma, Merck, Novartis, Pfizer, Regeneron, Takeda, and UCB Pharma; speakers bureau/honoraria: AbbVie, Actelion, Amgen, Bausch Health, Celgene, Cipher, Eli Lilly and Company, Galderma, GSK, Janssen, LEO Pharma, Merck, Novartis, Pfizer, and UCB Pharma; consulting fees: AbbVie, Actelion, Amgen, Bausch Health, Celgene, Cipher, Eli Lilly and Company, Galderma, GSK, Janssen, LEO Pharma, Merck, Novartis, Paladin, Pfizer, and UCB Pharma. WHB: Received honoraria as a speaker and/or advisor from AbbVie, Almirall, Bristol Myers Squibb, Eli Lilly and Company, Janssen, LEO Pharma, Novartis, and UCB Pharma. CHH: Consultant and/or speaker and/or grants/research support from AbbVie, Amgen, Arcutis, Bausch Health, Boehringer Ingelheim, Bristol Myers Squibb, Celgene, Cutanea, Dermavant, Dermira, DS Biopharma, Eli Lilly and Company, Galderma, GSK, Incyte, Janssen, LEO Pharma, Medimmune, Merck, Mirimar, Novartis, Pfizer, Regeneron, Roche, Sanofi-Genzyme, and UCB Pharma. NT, FS, BH, SW: Employees and shareholders of UCB Pharma. CP: Consulting fees and/or grants from AbbVie, Almirall, Amgen, Boehringer Ingelheim, Celgene, Eli Lilly and Company, GSK, Janssen Cilag, LEO Pharma, Novartis, Pfizer, Pierre Fabre, Sanofi Regeneron, and UCB Pharma. This study was funded by UCB Pharma. We would like to thank the patients and their caregivers in addition to all the investigators and their teams who contributed to this study. The authors acknowledge Joe Dixon, PhD, UCB Pharma, Slough, UK, for publication coordination, and Jack Wardle, MSc, Costello Medical, Cambridge, UK, for medical writing support and editorial assistance. All costs associated with development of this presentation were funded by UCB Pharma.

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