Bimekizumab impact on concomitant rescue interventions in patients with moderate to severe hidradenitis suppurativa in BE HEARD I & II

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Presentation Number: 52726

OBJECTIVE:

- Report the incidence and time to first concomitant rescue interventions (procedural and medical) in patients with hidradenitis suppurativa (HS) through 16 weeks.

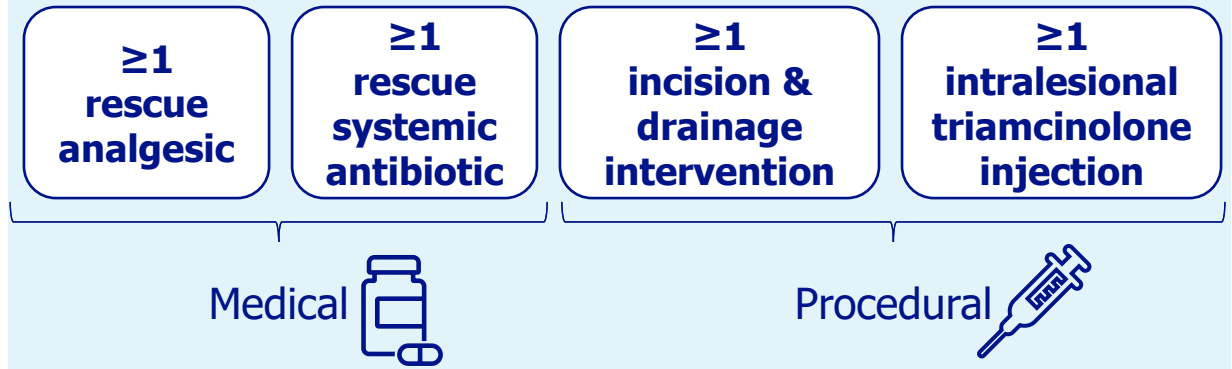
Background:

- HS, a chronic, systemic, inflammatory skin disease characterized by deep, painful, and difficult-to-treat lesions, often requires **rescue interventions** alongside conventional treatment.[1]
- **Bimekizumab (BKZ)** is a monoclonal immunoglobulin G1 antibody that inhibits interleukin (IL)-17F in addition to IL-17A.[2]
- Here, we investigate the impact of BKZ on the need for concomitant rescue interventions in patients with moderate to severe HS.

Methods:

- We report pooled, post-hoc analysis from the initial (Weeks 0–16) treatment period of the BE HEARD I & II trials.[3,4]
- The **incidence** of and **time to first concomitant rescue interventions** for HS, including any medical and procedural interventions are reported.

Concomitant Rescue Interventions



1. Zouboulis C et al. J Eur Acad Dermatol Venereol 2015;619–44; **2.** Adams R et al. Front Immunol 2020;11:1894; **3.** BE HEARD I: www.clinicaltrials.gov/study/NCT04242446; **4.** BE HEARD II: www.clinicaltrials.gov/study/NCT04242498. BKZ: bimekizumab; HS: hidradenitis suppurativa; IL: interleukin.

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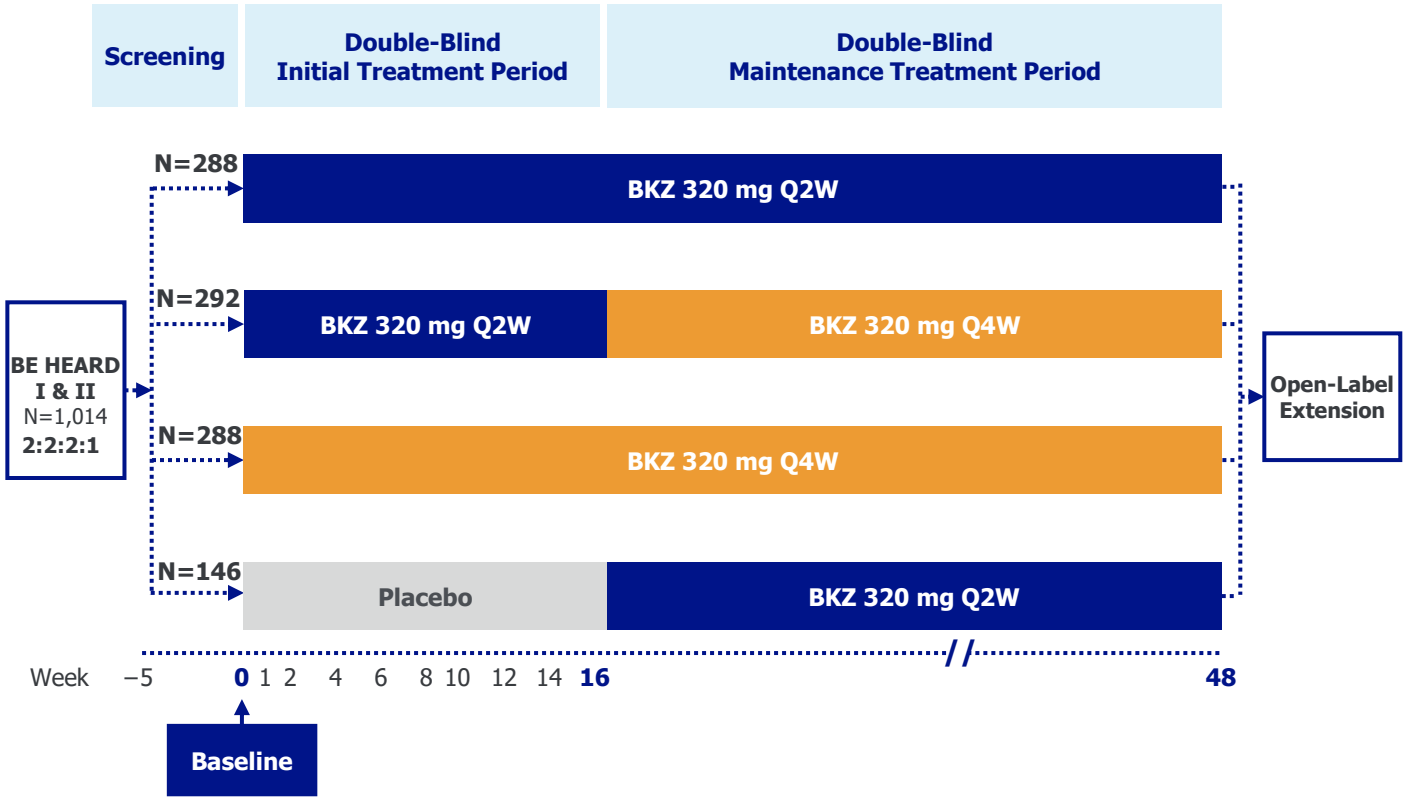
BE HEARD Study Design



- Data from patients initially randomized to receive BKZ are pooled in the **BKZ Total** group.
- Data from patients initially randomized to receive BKZ Q2W are pooled in the **BKZ Q2W Total** group.

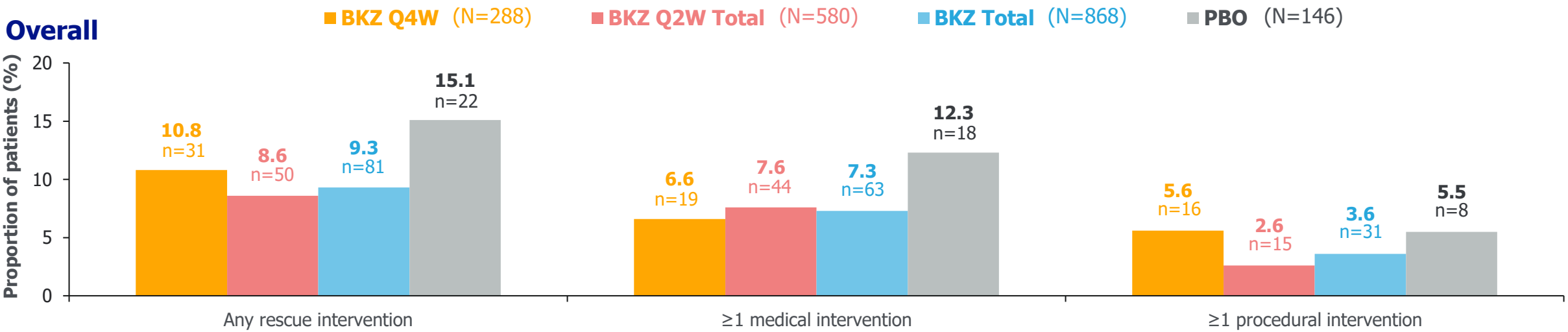
Baseline Characteristics

	BKZ 320 mg Q4W		BKZ 320 mg Q2W Total		BKZ Total		PBO	
Rescue intervention during initial treatment period	Yes n=31 (10.8)	No n=257 (89.2)	Yes n=50 (8.6)	No n=530 (91.4)	Yes n=81 (9.3)	No n=787 (90.7)	Yes n=22 (15.1)	No n=124 (84.9)
Age, years, mean ± SD	33.7 ± 10.5	36.0 ± 11.7	33.3 ± 12.7	37.3 ± 12.3	33.4 ± 11.8	36.8 ± 12.1	35.5 ± 14.0	37.6 ± 12.6
Female, n (%)	18 (58.1)	157 (61.1)	27 (54.0)	299 (56.4)	45 (55.6)	456 (57.9)	11 (50.0)	64 (51.6)
White, n (%)	16 (51.6)	208 (80.9)	37 (74.0)	428 (80.8)	53 (65.4)	636 (80.8)	14 (63.6)	105 (84.7)
BMI, kg/m^2, mean ± SD	35.1 ± 7.3	33.6 ± 8.0	32.9 ± 8.4	32.7 ± 8.2	33.7 ± 8.0	33.0 ± 8.1	34.2 ± 7.5	32.9 ± 8.4
Duration of HS, years, mean ± SD	8.3 ± 7.0	7.1 ± 7.3	7.4 ± 7.3	8.0 ± 7.5	7.8 ± 7.2	7.7 ± 7.5	9.2 ± 10.5	9.9 ± 9.2
Hurley Stage, n (%)								
II	15 (48.4)	145 (56.4)	24 (48.0)	302 (57.0)	39 (48.1)	447 (56.8)	11 (50.0)	68 (54.8)
III	16 (51.6)	112 (43.6)	26 (52.0)	228 (43.0)	42 (51.9)	340 (43.2)	11 (50.0)	56 (45.2)
Baseline antibiotic use, n (%)	0	18 (7.0)	4 (8.0)	53 (10.0)	4 (4.9)	71 (9.1)	4 (18.2)	7 (5.6)
Prior biologic use, n (%)	5 (16.1)	42 (16.3)	16 (32.0)	99 (18.7)	21 (25.9)	141 (17.9)	6 (27.3)	23 (18.5)

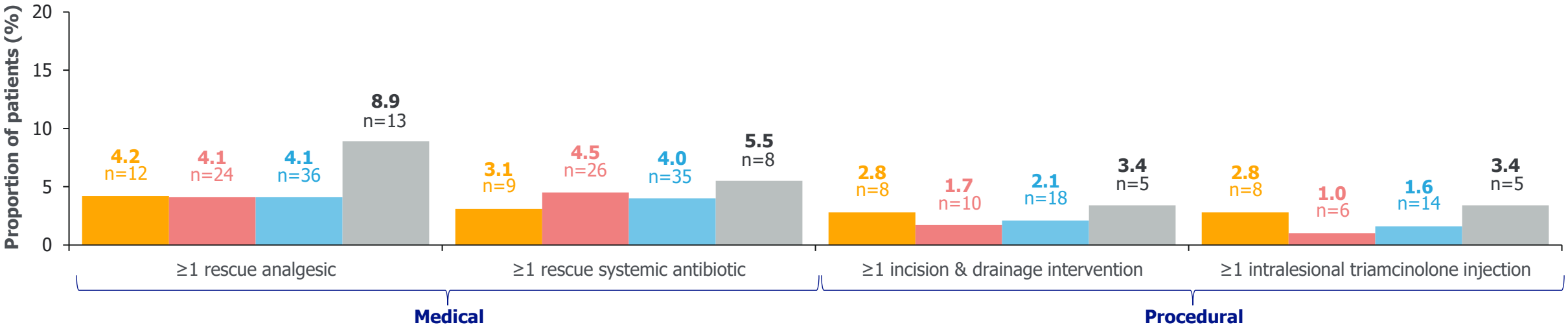
BKZ: bimekizumab; BMI: body mass index; HS: hidradenitis suppurativa; PBO: placebo; Q2W: every 2 weeks; Q4W: every 4 weeks; SD: standard deviation.

Incidence of Concomitant Interventions from Weeks 0–16

Overall



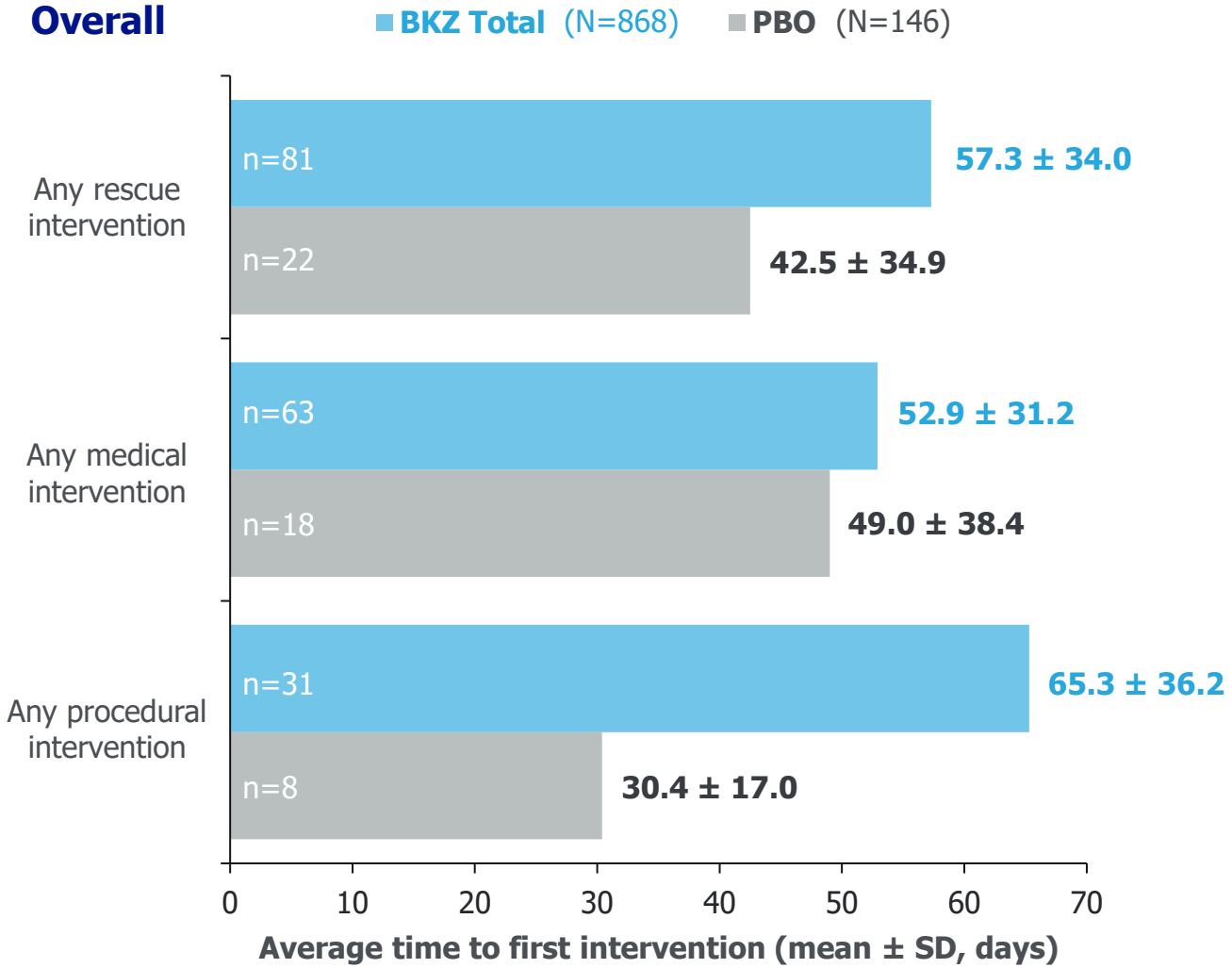
Medical and Procedural Intervention Types



Randomized set. All patients randomized to receive BKZ at baseline are pooled in the BKZ Total group. All patients randomized to receive BKZ Q2W at baseline are pooled in the BKZ Q2W Total group. Any rescue intervention includes all patients who had ≥1 rescue intervention during the initial (Weeks 0–16) treatment period. Rescue analgesics and systemic antibiotics refer to the initiation of rescue analgesics or systemic antibiotics as determined by the principal investigator. BKZ: bimekizumab; PBO: placebo; Q2W: every 2 weeks; Q4W: every 4 weeks.

Time to First Concomitant Rescue Intervention Through Week 16

Overall



Medical and Procedural Intervention Types

Average time to first intervention (mean ± SD, days)		
Rescue intervention type	**BKZ Total** N=868	**PBO** N=146
Medical		
Rescue analgesic	46.8 ± 30.7 n=36	47.5 ± 38.9 n=13
Rescue systemic antibiotic	60.0 ± 30.0 n=35	48.0 ± 38.7 n=8
Procedural		
Incision & drainage intervention	54.2 ± 33.9 n=18	25.2 ± 14.4 n=5
Intralesional triamcinolone injection	80.2 ± 33.3 n=14	45.2 ± 18.6 n=5

Time to first procedural intervention was numerically **longer with BKZ** compared with PBO.

Randomized set. All patients randomized to receive BKZ at baseline are pooled in the BKZ Total group. Any rescue intervention includes all patients who had ≥1 rescue intervention during the initial (Weeks 0–16) treatment period. Rescue analgesics and systemic antibiotics refer to the initiation of rescue analgesics or systemic antibiotics as determined by the principal investigator. BKZ: bimekizumab; PBO: placebo; Q2W: every 2 weeks; Q4W: every 4 weeks; SD: standard deviation.

CONCLUSIONS:

- Over 16 weeks, the proportion of patients requiring concomitant rescue interventions for hidradenitis suppurativa was numerically lower in bimekizumab- vs placebo-treated patients.
- Time to first procedural intervention was numerically longer for patients treated with bimekizumab vs those treated with placebo, with no difference in time to first medical intervention.
- The low levels of rescue analgesic use in patients treated with bimekizumab may indicate reduced pain burden in these patients.
- Overall, these data suggest treatment with bimekizumab may reduce the need for concomitant rescue interventions in patients with hidradenitis suppurativa; longer-term data are needed to fully understand the impact of bimekizumab on reduction of concomitant rescue interventions.

Author Contributions: Substantial contributions to study conception/design, or acquisition/analysis/interpretation of data: **FGB, CS, SG, JCS, PG, IH, PD, PJ, RR, LD and HHZ**; Drafting of the publication, or revising it critically for important intellectual content: **FGB, CS, SG, JCS, PG, IH, PD, PJ, RR, LD and HHZ**; Final approval of the publication: **FGB, CS, SG, JCS, PG, IH, PD, PJ, RR, LD and HHZ**.

Disclosures: FGB: Received honoraria for consulting and/or presentations and/or sponsoring for scientific projects and/or clinical studies from AbbVie Inc., AbbVie Deutschland GmbH & Co. KG, Beiersdorf, Boehringer Ingelheim, Dr. Wolff, Incyte, Janssen-Cilag, Mölnlycke, MoonLake Immunotherapeutics, Novartis, and UCB Pharma. **CJS:** Investigator for AbbVie, Chemocentryx, GSK, Incyte, InflaRx, Novartis, and UCB Pharma; consultancy fees from AbbVie Alumis, Incyte, InflaRx, Logical Images, Sonoma Biotherapeutics, and UCB Pharma; speaker for AbbVie and Novartis. **SG:** Consultant for Novartis and UCB Pharma; Board Member of HS Foundation; member of HS Coalition. **JCS:** Consultant and advisory board member of AbbVie, LEO Pharma, Novartis, Pierre Fabre, Sanofi-Genzyme, and Trevi Therapeutics; speaker for AbbVie, Almirall, Eli Lilly and Company, Novartis, LEO Pharma, Pierre-Fabre, Pfizer, Sanofi-Genzyme, and UCB Pharma; investigator for AbbVie, Amgen, Bristol Myers Squibb, Galapagos, Galderma, Incyte, InflaRx, Janssen, Kliniksa, Kymab Limited, Menlo Therapeutics, Merck, Novartis, Pfizer, Regeneron, Trevi Therapeutics, and UCB Pharma. **PG:** Received honoraria for consulting from AbbVie, Novartis Pharma GmbH, and UCB Pharma. **IH:** Consultant for AbbVie, Avita, Boehringer Ingelheim, Galderma, Incyte, Janssen, Novartis, Pfizer, Sonoma, UCB Pharma, and Union Therapeutics; investigator for Avita, Incyte, Lenicura, L'Oréal/La Roche-Posay, and Pfizer; board member and past-president of the HS Foundation and Global Vitiligo Foundation. **PD, PJ, RR, LD:** Employees and shareholders of UCB Pharma. **HHZ:** Consultant for AbbVie, Incyte, InflaRx, Insmed, Novartis, and UCB Pharma.

These studies were 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 these studies. The authors acknowledge Susanne Wiegratz, MSc, UCB Pharma, Monheim, Germany for publication coordination, and Sana Yaar, PhD, Costello Medical, Manchester, UK, for medical writing support and editorial assistance. All costs associated with development of this presentation were funded by UCB Pharma.