

Bimekizumab efficacy by patient subgroups in moderate to severe hidradenitis suppurativa: 2-year phase 3 results from BE HEARD EXT

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OBJECTIVE

- To report bimekizumab (BKZ) efficacy outcomes across different subgroups of patients with moderate to severe hidradenitis suppurativa (HS) over 2 years.

Background

- BKZ** is a humanized monoclonal IgG1 antibody which selectively inhibits interleukin (IL)-17F in addition to IL-17A.¹
- HS **disease characteristics vary** between individuals based on age, disease duration, Hurley Stage, and sex.²
- Biological therapies which provide **consistent efficacy**, regardless of patient characteristics, are needed.

Methods

- Data were pooled from **phase 3 BE HEARD I&II** and their open-label extension, BE HEARD EXT.^{3,4}
- We report the proportions of patients achieving **≥50%/75% HS Clinical Response** (HiSCR50/75) for patient subgroups at Week 48 and Week 96.
- Data are reported for patients randomized to BKZ 320 mg from baseline in BE HEARD I&II who entered BE HEARD EXT and continued to receive BKZ (**BKZ Total**).
- Data are reported as observed case (OC).

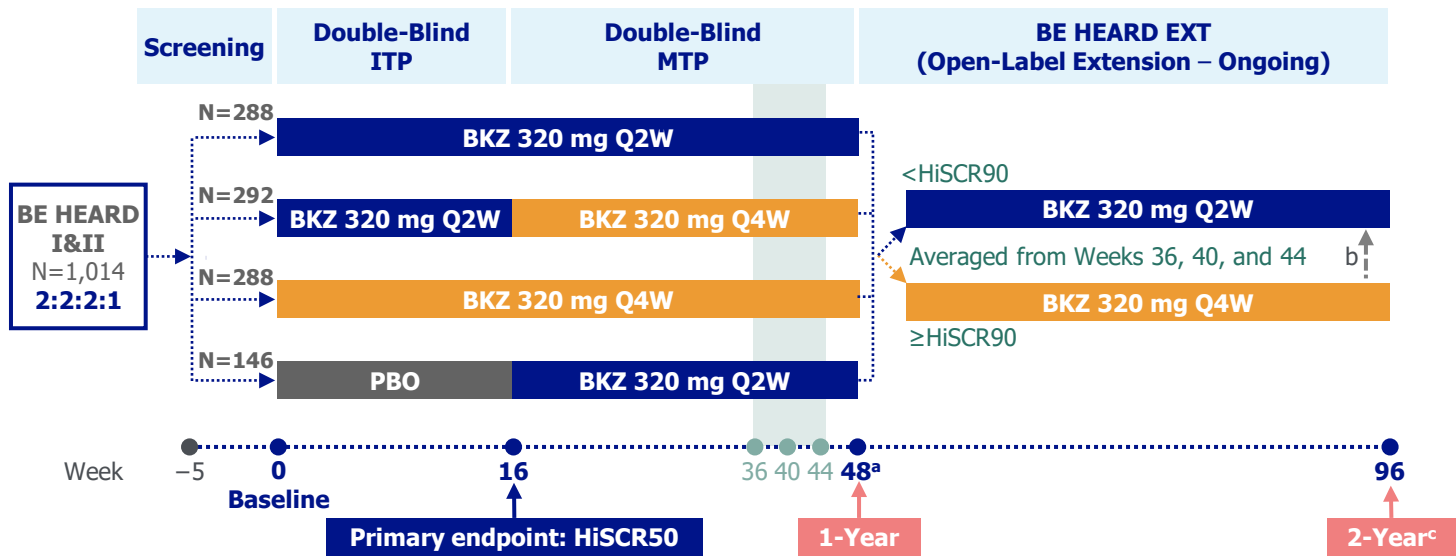
Patient subgroups	
Age: ^a </≥ median	Duration of HS: ^a </≥ median
Sex: Male or Female	Hurley Stage: II or III
Weight: ^b ≤/>100 kg	Prior biologic use: Yes or No
BMI: ^b <30/30–<35/≥35 kg/m ²	IHS4: Moderate or Severe

[a] Median years calculated based on all subjects who entered BE HEARD I&II at baseline (N=657); [b] Baseline value for BKZ Total. **1.** Adams R. et al. Front Immunol 2020;11:1894; **2.** Schrader AMR. et al. J Am Acad Dermatol 2014;71:460–7; **3.** Kimball AB. et al. Lancet 2024;403:2504–19 (NCT04242446, NCT04242498); **4.** BE HEARD EXT: www.clinicaltrials.gov/study/NCT04901195. BKZ: bimekizumab; BMI: body mass index; HS: hidradenitis suppurativa; IHS4: International Hidradenitis Suppurativa Severity Score System; IL: interleukin; OC: observed case.

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Study Design



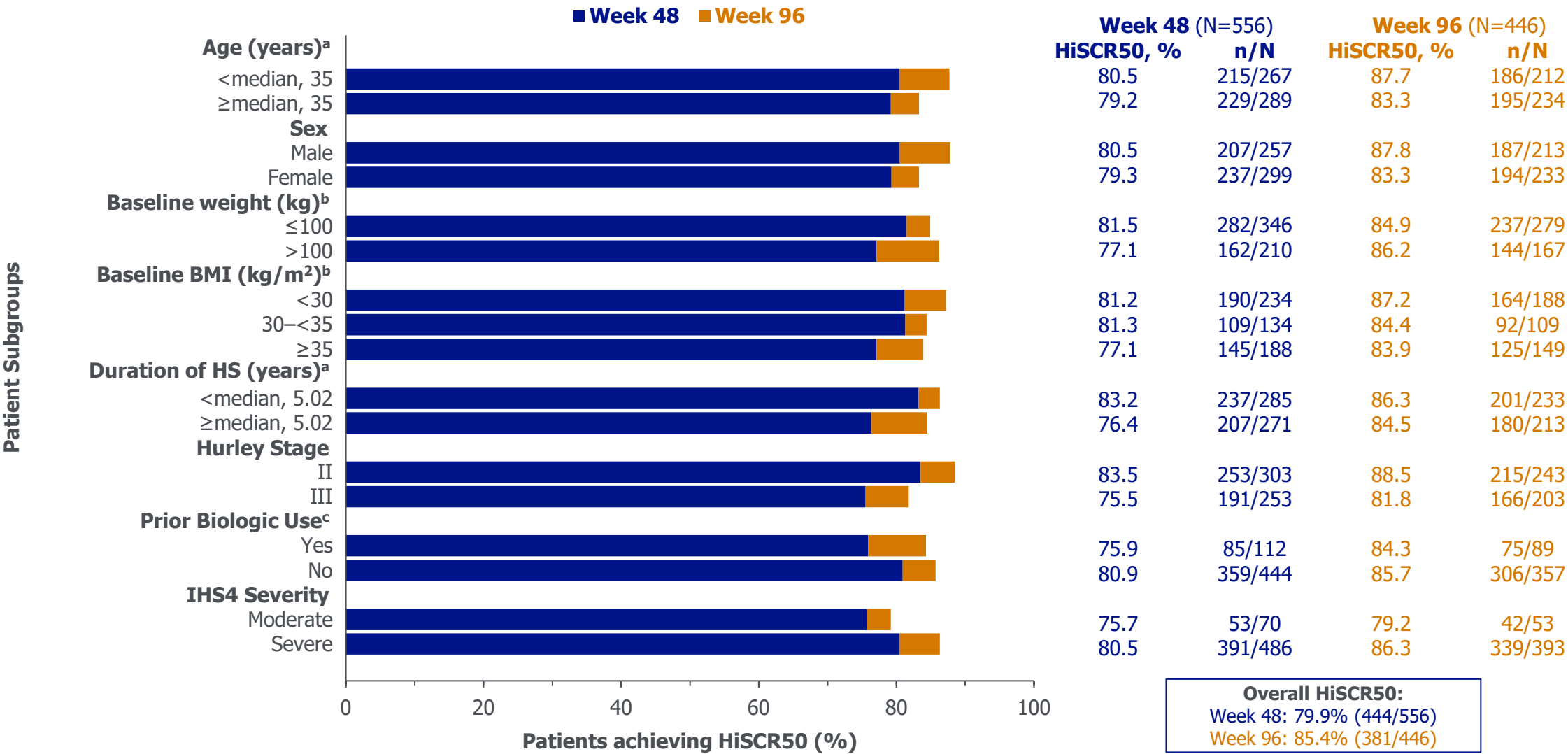
- Patients completing the 48-week BE HEARD I&II studies could enroll in BE HEARD EXT and receive open-label BKZ 320 mg every 2 weeks (Q2W) or every 4 weeks (Q4W) based on HiSCR90 response, averaged from Weeks 36, 40, and 44.^{1,2}

Baseline Characteristics

	BKZ 320 mg Total N=556
Age (years), mean ± SD	36.3 ± 12.2
Sex, female, n (%)	299 (53.8)
Racial group, n (%)	
White	448 (80.6)
Black	55 (9.9)
Weight (kg), mean ± SD	96.2 ± 23.5
BMI (kg/m ²), mean ± SD	32.5 ± 7.8
Duration of HS (years), mean ± SD	7.4 ± 7.1
Hurley Stage, n (%)	
II	303 (54.5)
III	253 (45.5)
Prior biologic use, ^d n (%)	112 (20.1)
IHS4 severity, n (%)	
Mild, ≤3	0
Moderate, 4–10	70 (12.6)
Severe, ≥11	486 (87.4)

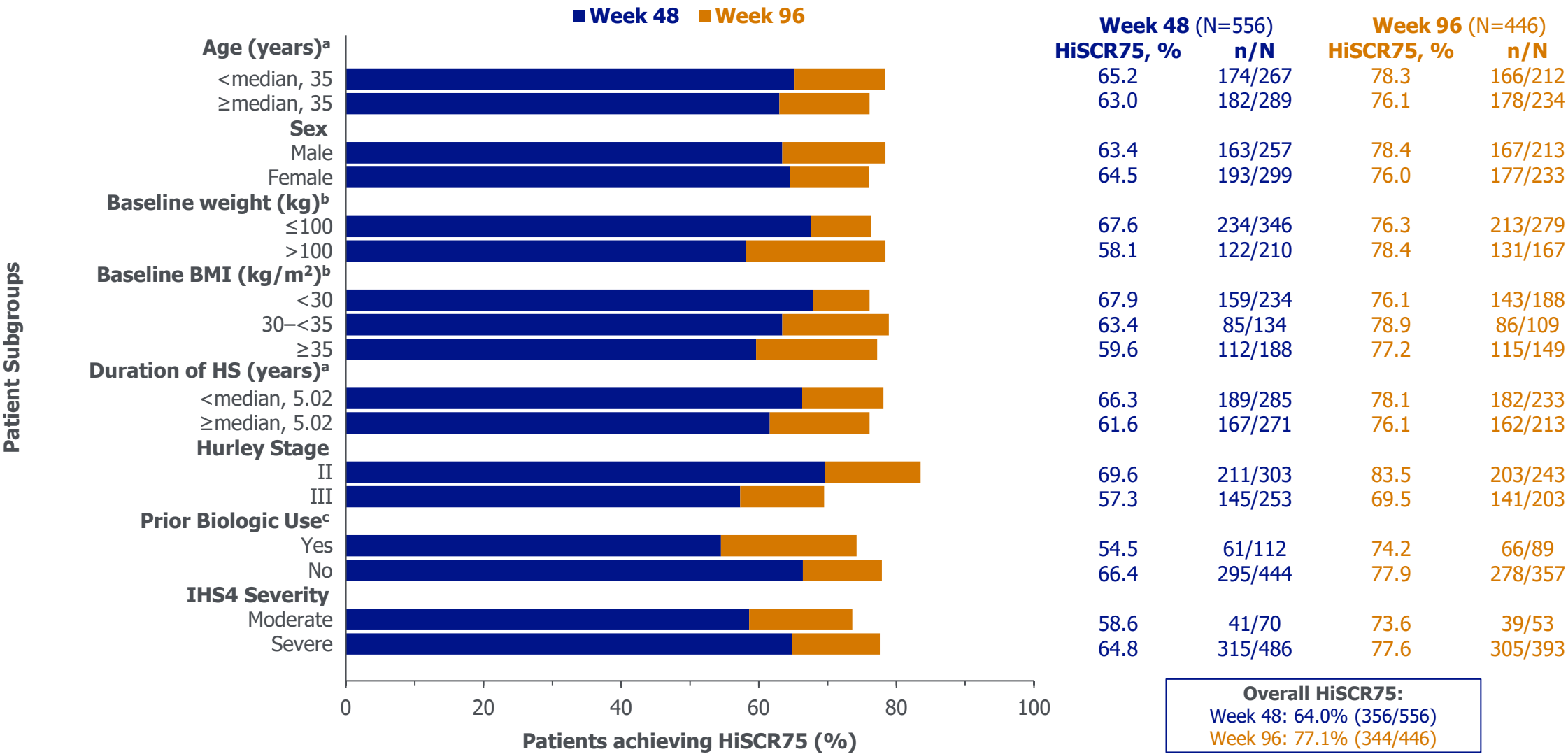
OLE set; only included patients who entered BE HEARD EXT at Week 48. BKZ Total (N=556) comprised patients randomized to BKZ from baseline in BE HEARD I&II who entered BE HEARD EXT and continued to receive BKZ. **[a]** Patients who completed Week 48 of BE HEARD I&II could enroll in BE HEARD EXT and receive open-label BKZ Q2W or BKZ Q4W based on HiSCR90 responder status using the average lesion counts from Week 36, Week 40, and Week 44 of BE HEARD I&II; **[b]** In the first 48 weeks of the ongoing BE HEARD EXT, dose adjustment from BKZ Q4W to BKZ Q2W was permitted based on prespecified criteria for reduction in improvement from baseline in AN count; **[c]** Cumulative 2-year data (48 weeks in BE HEARD I&II and 48 weeks in BE HEARD EXT); **[d]** Patients received prior biologic therapy for any indication. **1.** Kimball AB. et al. Lancet 2024;403:2504–19 (NCT04242446, NCT04242498); **2.** BE HEARD EXT: www.clinicaltrials.gov/study/NCT04901195. AN: abscess and inflammatory nodule; BMI: body mass index; DT: draining tunnel; HiSCR50/90: ≥50%/90% reduction in the total AN count from baseline with no increase from baseline in abscess or DT count; IHS4: international HS severity score system; ITP: initial treatment period; MTP: maintenance treatment period; OLE: open-label extension; PBO: placebo; Q2W: every 2 weeks; Q4W: every 4 weeks; SD: standard deviation.

Achievement of HiSCR50 by Subgroups for BKZ Total (OC)



OLE set; only included patients who entered BE HEARD EXT at Week 48. BKZ Total (N=556) comprised patients randomized to BKZ from baseline in BE HEARD I&II who entered BE HEARD EXT and continued to receive BKZ. OC, n/N: denominator represents number of patients with a non-missing lesion count assessment in the given week, and percentages are calculated accordingly. **[a]** Median value calculated based on all subjects who entered BE HEARD I&II at baseline (N=657); **[b]** Baseline value for BKZ Total; **[c]** Patients received prior biologic therapy for any indication. BKZ: bimekizumab; BMI: body mass index; HiSCR50: ≥50% reduction in the total abscess and inflammatory nodule count from baseline with no increase from baseline in abscess or draining tunnel count; IHS4: international hidradenitis suppurativa severity score system; OC: observed case; OLE: open-label extension.

Achievement of HiSCR75 by Subgroups for BKZ Total (OC)



OLE set; only included patients who entered BE HEARD EXT at Week 48. BKZ Total (N=556) comprised patients randomized to BKZ from baseline in BE HEARD I&II who entered BE HEARD EXT and continued to receive BKZ. OC, n/N: denominator represents number of patients with a non-missing lesion count assessment in the given week, and percentages are calculated accordingly. **[a]** Median value calculated based on all subjects who entered BE HEARD I&II at baseline (N=657); **[b]** Baseline value for BKZ Total; **[c]** Patients received prior biologic therapy for any indication. BKZ: bimekizumab; BMI: body mass index; HiSCR75: ≥75% reduction in the total abscess and inflammatory nodule count from baseline with no increase from baseline in abscess or draining tunnel count; IHS4: international hidradenitis suppurativa severity score system; OC: observed case; OLE: open-label extension.

CONCLUSIONS



Patients treated with bimekizumab demonstrated high clinical response rates across subgroups at 1 year, with responses maintained or increased through to 2 years.



These results emphasize the benefit of bimekizumab as an effective treatment option for patients with hidradenitis suppurativa, regardless of patient demographics and disease characteristics.

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