Bimekizumab impact on efficacy and patient-reported outcomes in moderate versus severe hidradenitis suppurativa

Amit Garg,¹ Steven Daveluy,² Seth Forman,³ <u>Francesca Prignano</u>,⁴ Linnea Thorlacius,^{5,6} Vincent Piguet,⁷ Robert Rolleri,⁸ Bartosz Lukowski,⁹ Tom Vaux,¹⁰ Jérémy Lambert,¹¹ Georgios Kokolakis¹²

¹Northwell, New Hyde Park, New York, USA; ²Department of Dermatology, Wayne State University School of Medicine, Detroit, Michigan, USA; ³ForCare Clinical Research, Tampa, Florida, USA; ⁴Department of Health Sciences, Section of Dermatology, University of Florence, Florence, Italy; ⁵Department of Dermatology, Zealand University Hospital, Roskilde, Denmark; ⁶Biostatistics and Evidence-Based Research, the Parker Institute, Bispebjerg and Frederiksberg Hospital, Copenhagen, Denmark; ⁷Division of Dermatology, Department of Medicine, Women's College Hospital, University of Toronto, Toronto, Ontario, Canada; ⁸UCB, Morrisville, North Carolina, USA; ⁹Vedim/UCB, Warsaw, Poland; ¹⁰UCB, Slough, UK; ¹¹UCB, Colombes, France; ¹²Psoriasis Research and Treatment Center, Clinic of Dermatology, Venereology and Allergology, Charité-Universitätsmedizin Berlin, corporate member of Freie Universität Berlin and Humboldt-Universität zu Berlin, Berlin, Germany



To access the presentation, scan the QR code

Link expiration: 19 Sep 2025

ICD 2025 | Rome, Italy | 18 – 21 June 2025

Presentation session: FC04 Adnexal and pigmentary disorders

Disclosures & Acknowledgements

Disclosures

AG: Receives honoraria as an advisor for AbbVie, Almirall, Boehringer Ingelheim, Engitix, Immunitas Therapeutics, Incyte, Insmed, Novartis, Pfizer, Sonoma Biotherapeutics, UCB, Union Therapeutics and Zura Bio; receives research grants from AbbVie, CHORD COUSIN Collaboration (C3) and UCB.

SD: Speaker for AbbVie and UCB; consultant for AbbVie, Novartis and UCB; receives research grants from AbbVie, Pfizer and UCB.

SF: Investigator/consultant and/or advisor to AbbVie, Aclaris, Almirall, Arcutis, ASLAN Pharmaceuticals, BioHaven, Boehringer Ingelheim, Bristol Myers Squibb, Cali, Concert, Eli Lilly and Company, Evelo, Horizon Therapeutics, Incyte, Janssen, Merck, Pfizer, UCB and Vertex.

FP: Professor of Dermatology at the University of Florence; advisory board member and consultant, has received fees and speaker's honoraria or has participated in clinical trials for AbbVie, Almirall, Biogen, Boehringer Ingelheim, Eli Lilly and Company, Janssen, LEO Pharma, Novartis, Sanofi Genzyme and UCB.

LT: Co-copyright holder of HiSQOL© (Hidradenitis Suppurativa Quality of Life), HS-IGA© (Hidradenitis Suppurativa Investigator Global Assessment) and HIDE© (HIdradenitis suppurativa DrainagE); investigator for Incyte, Janssen-Cilag, Novartis and UCB; speaker fee from UCB.

VP: Consulting fees from AbbVie, Amgen, Boehringer Ingelheim, Celgene, Dermira, Janssen, Eli Lilly and Company, MedImmune, Novartis, Pfizer, Sun Pharma, UCB and Valeant.

RR, BL, TV, JL: Employees and shareholders of UCB.

GK: Receives travel grants or honoraria, has been a consultant member of advisory boards and speaker bureaus or serves as an investigator for AbbVie, Actelion, Almirall, Amgen, Basilea, Biogen, Boehringer Ingelheim, Bristol Myers Squibb, Celgene, Eli Lilly and Company, Hexal-Sandoz, Janssen, LEO Pharma, MSD, Novartis, Pfizer, Sanofi, Takeda and UCB.

Acknowledgements

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, Monheim am Rhein, Germany for publication coordination, and May-Li MacKinnon, PhD, Costello Medical, UK for medical writing and editorial assistance. These studies were funded by UCB. All costs associated with the development of this presentation were funded by UCB.

Introduction

- Hidradenitis suppurativa (HS) is a chronic, painful skin condition with substantial negative impacts on patients' quality of life.¹
- Bimekizumab (BKZ), a humanised monoclonal antibody which selectively inhibits interleukin (IL)-17F in addition to IL-17A, has previously demonstrated efficacy and safety in patients with moderate to severe HS.^{2,3}

Methods

- Data were pooled from the phase 3 BE HEARD I&II studies.³
- Here, outcomes are reported by **HS severity** (baseline Hurley Stage II [moderate] and III [severe]) to Week 48:
 - International HS Severity Score System

 (IHS4) response rates: IHS4-55/75/90, defined as
 ≥55/75/90% improvement from baseline in IHS4 score.
 - HS Symptom Questionnaire (HSSQ) skin pain response: ≥30% and ≥1-unit reduction from baseline in HSSQ skin pain score among patients with a score of ≥3 at baseline.
 - HS Quality of Life (HiSQOL) total score response:
 ≥21-point reduction from baseline total score among patients with a score ≥21 at baseline.
- Data are reported for the BKZ Q2W/Q4W subset and all patients randomised to BKZ (BKZ Total) at baseline.
- Data reported as observed case (OC).

OBJECTIVE: To compare the impact of bimekizumab on efficacy outcomes and patient-reported outcomes (PROs) in patients with moderate vs severe HS after 48 weeks of treatment.

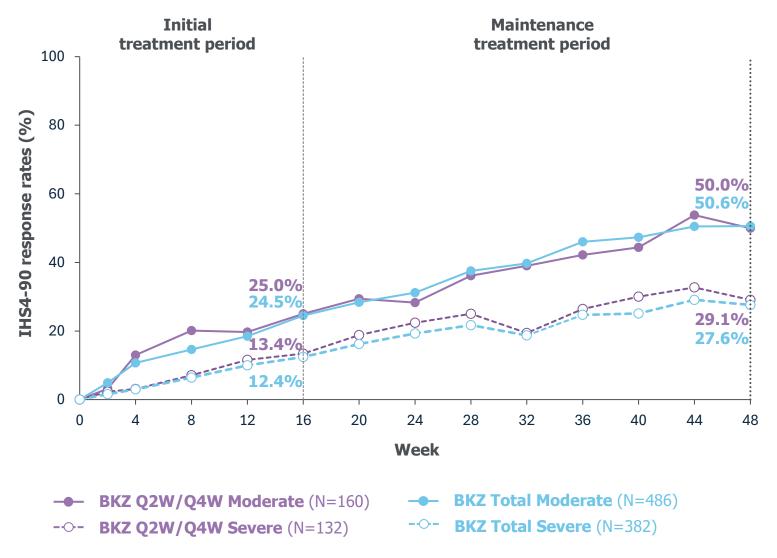
1. Zouboulis CC et al. Dermatology 2015;231:184–190; 2. Adams R et al. Front Immunol 2020;11:1894; 3. Kimball AB et al. Lancet 2024;403:2504–19 (NCT04242446, NCT04242498). BKZ: bimekizumab; HiSQOL: HS Quality of Life; HS: hidradenitis suppurativa; HSSQ: HS Symptom Questionnaire; IHS4: International HS Severity Score System; IHS4-55/75/90: ≥55/75/90% improvement from baseline in IHS4 score; IL: interleukin; OC: observed case; PRO: patient-reported outcome; Q2W: every two weeks; Q4W: every four weeks.

Baseline characteristics

_	BKZ Q2W/Q4W N=292		BKZ Total N=868	
	Moderate ^a n=160	Severe ^a n=132	Moderate ^a n=486	Severe ^a n=382
Age (years), mean (SD)	38.0 (12.4)	35.8 (12.2)	36.9 (12.3)	36.0 (11.8)
Sex, female, n (%)	102 (63.8)	72 (54.5)	304 (62.6)	197 (51.6)
BMI (kg/m²), mean (SD)	32.2 (7.3)	33.2 (8.5)	33.0 (8.1)	33.1 (8.2)
Duration of HS (years), mean (SD)	7.9 (7.7)	8.7 (7.7)	7.6 (7.6)	7.9 (7.2)
IHS4 score, mean (SD)	21.4 (14.1)	53.7 (41.8)	23.2 (20.7)	49.6 (36.1)
HSSQ skin pain score, mean (SD)	5.4 (2.3)	6.2 (2.3)	5.4 (2.4)	6.3 (2.3)
DLQI total score, mean (SD)	10.0 (6.5)	11.8 (6.8)	10.3 (6.6)	12.4 (7.0)
HiSQOL total score, mean (SD)	22.8 (13.1)	26.5 (13.0)	23.1 (13.0)	27.6 (13.2)

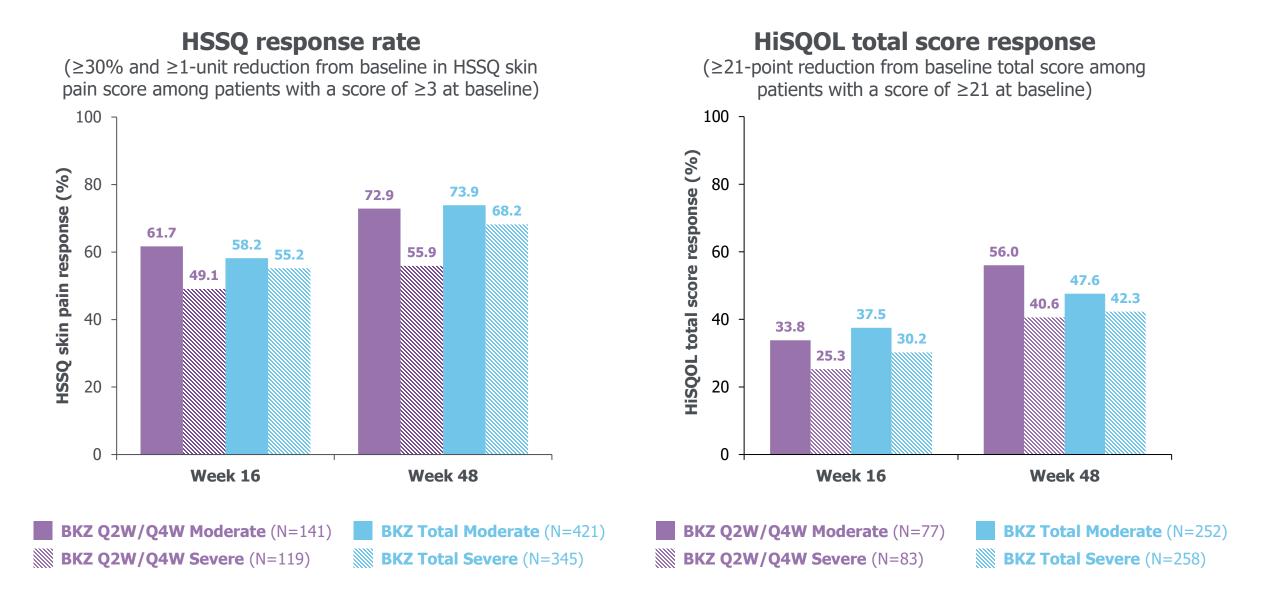
OLE set; only included patients who entered BE HEARD EXT at Week 48. BKZ Total (N=556) comprised patients randomised to BKZ from baseline in BE HEARD I&II (NCT04242446, NCT04242498) who entered BE HEARD EXT (NCT04901195) and continued to receive BKZ. N represents the number of randomised patients. [a] HS disease severity was based on baseline Hurley stage, where Hurley Stage II defined a patient with moderate HS and Hurley Stage III defined a patient with severe HS. BKZ: bimekizumab; BMI: body mass index; DLQI: dermatology life quality index; HS: hidradenitis suppurativa; HSSQ: HS Symptom Questionnaire; HiSQOL: HS Quality of Life; IHS4: International HS Severity Score System; OLE: open-label extension; Q2W: every two weeks; Q4W: every four weeks; SD: standard deviation.

IHS4-90 by HS severity (OC)



n/N Moderate HS (Hurley Stage II) Week 16: BKZ Q2W/Q4W, 36/144; BKZ Total, 106/433; Week 48: BKZ Q2W/Q4W, 54/108; BKZ Total, 167/330. n/N Severe HS (Hurley Stage III) Week 16: BKZ Q2W/Q4W, 16/119; BKZ Total, 43/346; Week 48: BKZ Q2W/Q4W, 30/103; BKZ Total, 78/283. IHS4-90 defined as ≥90% improvement from baseline in IHS4 score. BKZ: bimekizumab; HS: hidradenitis suppurativa; IHS4: International HS Severity Score System; OC: observed case; Q2W: every two weeks; Q4W: every four weeks.

HSSQ skin pain and HiSQOL response rates (OC)



BKZ: bimekizumab; HS: hidradenitis suppurativa; HSSQ: HS symptom questionnaire; HiSQOL: HS quality of life; OC: observed case; Q2W: every two weeks; Q4W: every four weeks.

Conclusions

Bimekizumab treatment resulted in **clinically meaningful response rates** across efficacy and patient-reported outcomes among patients with moderate to severe hidradenitis suppurativa. Ł

Patients with moderate disease severity demonstrated **better efficacy** and tended to have **better patient-reported outcomes**, emphasising the importance of **earlier treatment** for patients with moderate to severe hidradenitis suppurativa.

To access the presentation, scan the QR code



Link expiration: 19 Sep 2025