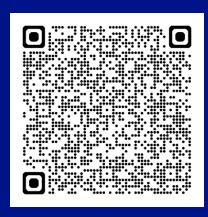
Bimekizumab maintenance of response during treatment interruption and retreatment in US/Canadian patients with psoriasis

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Disclosures & acknowledgements

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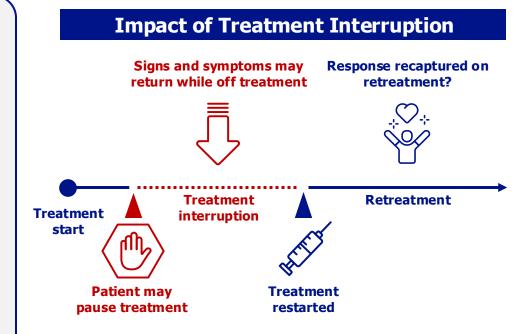
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Introduction

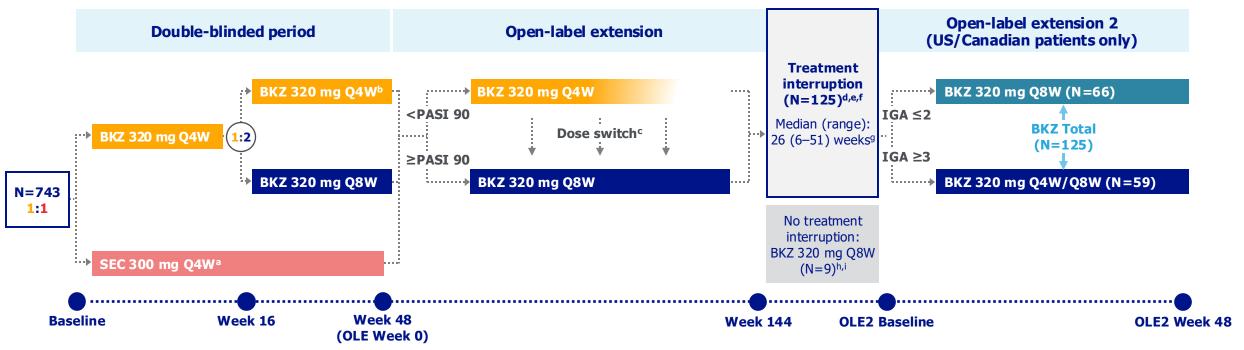
- Patients with psoriasis often experience treatment interruptions due to factors such as travel, adverse events and financial considerations.^{1,2}
- It is important to evaluate **recapture** and **maintenance of clinical response** upon retreatment.
- Bimekizumab (BKZ), which inhibits interleukin (IL)-17A and IL-17F,³
 has previously demonstrated sustained disease control after
 treatment withdrawal at 16 weeks, potentially indicating disease
 modification;^{4,5} high levels of response recapture have also
 been observed upon retreatment.⁶
- However, responses following a treatment interruption after a longer period of BKZ treatment have not yet been reported.



OBJECTIVE: To report BKZ responses among US/Canadian patients before and after a treatment interruption.

Methods

• After completing the initial open-label extension (OLE) of BE RADIANT, US/Canadian patients could have had a treatment interruption of variable length before entering a second, 48-week OLE (OLE2).



Data reported at Week 144 (before treatment interruption) and through OLE2 (OC):

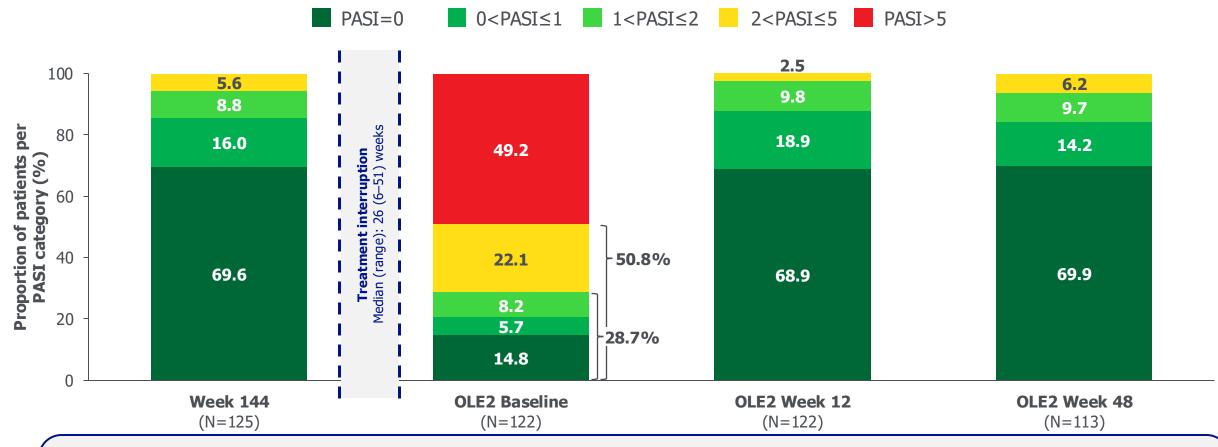
- Proportions of patients with absolute Psoriasis Area and Severity Index (PASI) scores of $0, >0-\le 1, >1-\le 2, >2-\le 5$ and >5.
- Proportions of patients with Investigator's Global Assessment (IGA) scores of 0, 1, 2, 3 and 4.

[a] SEC 300 mg was administered at baseline, weekly to Week 4, then Q4W for the remainder of the double-blinded treatment period; [b] Patients receiving BKZ Q4W who achieved PASI 90 at Week 48 continued on Q8W dosing; [c] At Week 64, or the next scheduled clinic visit, patients switched from BKZ Q4W to Q8W; [d] Patients stopped using other systemic treatments for ≥1 month prior to first BKZ dose in OLE2; [e] Patients who had completed 144 weeks of BE RADIANT, and were either in the SFU period or had finished the SFU period at the time of OLE2 implementation, underwent a 4-week screening period before restarting treatment, and are included in this analysis; [f] Ten patients received alternative biologic treatments during the treatment interruption; [g] BKZ half-life is 23 days;² [h] Reich K. N Engl J Med 2021;385:142–52 (NCT03536884); 2. European Medicines Agency. Bimekizumab Summary of Product Characteristics. 2023. Available at: https://www.ema.europa.eu/en/medicines/human/EPAR/bimzelx [Accessed March 2025]. BKZ: bimekizumab; IGA: second OLE; PASI: Psoriasis Area and Severity Index; PASI 90: ≥90% improvement from baseline in PASI; Q4W: every 4 weeks; Q8W: every 8 weeks; SEC: secukinumab; SFU: safety follow-up.

Baseline characteristics

	BKZ Total patients entering OLE2 after a treatment interruption ^a (N=125)
Age (years), mean (SD)	49.7 (14.7)
Sex, male, n (%)	86 (68.8)
Racial group, white, n (%)	109 (87.2)
BMI (kg/m²), mean (SD)	32.4 (6.9)
Duration of psoriasis (years), mean (SD)	18.1 (14.0)
PASI, mean (SD)	19.6 (6.2)
IGA, n (%)	
3: moderate	45 (36.0)
4: severe	13 (10.4)
DLQI total, mean (SD)	9.8 (6.5)
Prior systemic therapy, n (%)	81 (64.8)
Prior biologic therapy, n (%)	49 (39.2)

Absolute PASI categories by visit through 48 weeks of retreatment (BKZ Total; OC)



At OLE2 baseline, after a treatment interruption:

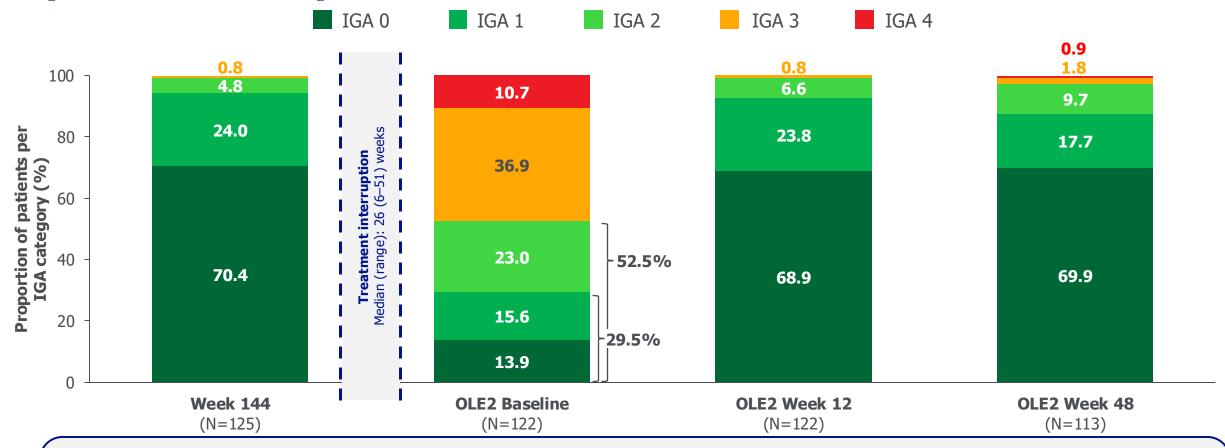
28.7% (35/122) of patients maintained **absolute PASI ≤2**



50.8% (62/122) of patients maintained **absolute PASI** ≤**5**



IGA categories by visit through 48 weeks of retreatment (BKZ Total; OC)



At OLE2 baseline, after a treatment interruption:

29.5% (36/122) of patients maintained IGA 0/1



52.5% (64/122) of patients maintained **IGA** ≤**2**^a



Conclusions



After a median treatment interruption of approximately 6 months, **almost one-third** of patients maintained absolute **PASI** ≤2 and **IGA 0/1**.



The vast majority of patients **quickly regained** responses after bimekizumab retreatment; these responses were **maintained** to OLE2 Week 48.

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