

PATTERNS OF INDEX BIOLOGIC DRUG REGISTRATIONS TO A PHARMACOVIGILANCE REGISTER OF PSORIASIS PATIENTS

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BACKGROUND: The British Association of Dermatologists Biologic Interventions Register (BADBIR) is a long-term pharmacovigilance register of patients with psoriasis treated with biologic therapies. The objectives were to describe patterns of use of index biologics for biologic-naïve psoriasis patients in BADBIR by: (i) country; and (ii) comorbid psoriatic arthritis (PsA).

METHODS: 7495 patients receiving biologics were recruited from 153 dermatology centres across the United Kingdom and the Republic of Ireland (ROI). Registrations from 01/09/2007 (cohort inception) to 01/01/2016 were included. Patients receiving their first biologic therapy (infliximab, etanercept, adalimumab or ustekinumab) were classified as "biologic-naïve" at registration. Proportions of registrations to each therapy by country and PsA were examined.

RESULTS: 6140 biologic-naïve patients (82%) registered to BADBIR (median age 45 years, inter-quartile range 36-54; 60% male). Adalimumab (57%) was the most common index biologic (23% etanercept; 18% ustekinumab; 2% infliximab). 76% registrations were in England (9% Scotland; 5% Northern Ireland (NI); 5% ROI; 5% Wales). Adalimumab registrations were highest (73%) in NI (56% England; 48% ROI; 69% Scotland; 46% Wales); etanercept accounted for 46% registrations in ROI (22% England; 15% NI; 21% Scotland; 34% Wales); ustekinumab registrations were highest (20%) in England (11% NI; 6% ROI; 9% Scotland; 18% Wales). PsA was recorded as a comorbidity in 18% of patients at registration. For patients with concomitant PsA, 62% were commenced on adalimumab (25% etanercept; 10% ustekinumab). From 2009 to 2015, registrations for patients with concomitant PsA to ustekinumab and adalimumab increased (4% to 30% and 51% to 61%, respectively), while etanercept registrations decreased (42% to 9%).

CONCLUSIONS: Adalimumab was the most commonly prescribed index biologic drug across the United Kingdom and ROI. The availability of biologics has influenced prescribing practices. Future work will explore the influence of guidelines for biologic use on prescribing patterns.

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