Transcript Details
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BE RADIANT: Long-Term Psoriasis Outcomes with Dual Inhibition

Announcer:
Welcome to *DermConsult* on ReachMD. On this episode, we'll hear from Dr. Steven Feldman, a Professor of Dermatology at Wake Forest University School of Medicine in Winston-Salem. He'll be sharing insights from the BE RADIANT open-label extension. Here's Dr. Feldman now.

Dr. Feldman:
The BE RADIANT study compared bimekizumab, which is a blocker of both interleukin-17A and 17F, to secukinumab, which only blocks interleukin-17A and not 17F. And it's a large study where the secukinumab arm goes out for a year, and the bimekizumab arm is compared to secukinumab for the year, but then there's an extension where everybody gets the bimekizumab for at least a couple years after that. And we have two more years of data so far. And in the initial study, bimekizumab was more effective than secukinumab at getting people completely clear. If you looked at week sixteen, roughly 62 percent of the bimekizumab group got completely clear compared to about 49 percent in the secukinumab arm. So with this really high level of success and complete clearing, you could really see a difference when you block IL-17A and F. And the initial studies, with those objective measures, also looked at safety, and both drugs were quite safe, but IL-17 may be important for fighting off candida infections. And so you saw more candidiasis with the bimekizumab than with the secukinumab. In fact, almost 20 percent of patients with bimekizumab had oral candidiasis compared to three percent with secukinumab, which is not a severe side effect. It's something you could manage with a fluconazole pill or even something more mild than that. But you're getting more efficacy.

Now, in the open-label extension study, they also looked at quality-of-life outcomes, and the bimekizumab group had more people who had no itching, no skin pain, and no scaling. Patients' quality of life in psoriasis studies is often measured with the Dermatology Life Quality Index, or the DLQI. And more patients achieve a score of zero or one, so basically very minimal to no impact measurable on your quality of life, with bimekizumab compared to secukinumab.

That said, the secukinumab group did pretty well too. The difference is in the less stringent measures. If you looked at no skin pain after sixteen weeks, more patients achieved that with bimekizumab than with secukinumab, but it was 85 percent versus 82 percent. So you're still getting a lot of success with secukinumab, just not quite the degree of success that you get with bimekizumab. If we're trying to give patients the greatest degree of clearing and the best quality of life, bimekizumab is better, but it's a marginal difference.

Announcer:
That was Dr. Steven Feldman sharing findings from the BE RADIANT open-label extension. To access this and other episodes in our series, visit *DermConsult* on ReachMD.com, where you can Be Part of the Knowledge. Thanks for listening!