Secukinumab Is Superior to Ustekinumab in Clearing Skin of Patients With Moderate to Severe Plaque Psoriasis: CLARITY, a Randomized, Controlled, Phase 3b Trial

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Secukinumab, a fully human anti-interleukin-17A monoclonal antibody, has previously demonstrated superior efficacy to ustekinumab in the phase 3b CLEAR study of moderate to severe plaque psoriasis.1-3. Here, we report 16-week results from CLARITY, the second head-to-head trial comparing secukinumab with ustekinumab.

Methods: In this ongoing multicenter, head-to-head, double-blind, parallel-group, phase 3b, double-blind extension (CLEAR3) study, patients with moderate to severe plaque psoriasis were randomized 1:1 to receive subcutaneous secukinumab 300 mg or ustekinumab per label. The co-primary objectives were to demonstrate the superiority of secukinumab over ustekinumab at Week 12 in relation to the proportion of patients with (1) 90% or more improvement from Baseline (Psoriasis Area and Severity Index [PASI] 90) and (2) a score of 0 (clear)/1 (slightly/most clear) on the Investigator’s Global Assessment (IGA mod 2011)/0.1. Key secondary objectives include demonstrating the superiority of secukinumab over ustekinumab with respect to PASI 75 at Week 4 and IGA mod 2011 (72.3% vs 55.4%; P < 0.0001). The safety of secukinumab was consistent with the known safety profile of secukinumab.

Results: At Week 12, both co-primary objectives were met. Secukinumab 300 mg (n = 550) was significantly superior to ustekinumab (n = 552) for the proportion of patients achieving both PASI 90 (85.5% vs 69.7%; P < 0.0001) and IGA mod 2011 0/1 (72.3% vs 55.4%; P < 0.0001) response rates. Additionally, all key secondary objectives were met. At Week 4, PASI 75 response rates were significantly superior for secukinumab 300 mg compared to ustekinumab (40.2% vs 19.3%; P < 0.0001). At Week 16, secukinumab 300 mg demonstrated significantly superior response rates compared to ustekinumab for PASI 90 (75.7% vs 79.8%, P < 0.0001), PASI 40 (78.5% vs 54.2%, P < 0.0001), PASI 100 (45.3% vs 29.6%, P < 0.0001), and IGA mod 2011 0/1 (78.6% vs 59.5%, P < 0.0001). The safety profile of secukinumab 300 mg compared to ustekinumab had significantly greater PASI 75 (88.0% vs 74.2%, P < 0.0001) and IGA mod 2011 (81.0% vs 21.0%, P < 0.0001). Findings were consistent with the known safety profile of secukinumab.

Conclusions: Secukinumab demonstrated superior results with greater improvements compared to ustekinumab across all study outcomes at Weeks 4, 12, and 16 in patients with moderate to severe plaque psoriasis. Additional, secukinumab demonstrated robust superiority with greater improvements compared with ustekinumab across all study objectives up to Week 16.

REFERENCES

DISCLOSURES
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