BF-P8 RETROSPEKTIVNA OPSERVACIONA STUDIJA EFIKASNOSTI RISANKIZUMABA I IKSEKIZUMABA KOD PACIJENATA SA PLAK PSORIJAZOM U REALNIM USLOVIMA KLINIČKE PRAKSE

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Risankizumab (anti-IL-23) i iksekizumab (anti-IL-17A) su biološki lekovi za lečenje plak psorijaze dokazane efikasnosti u randomizovanim kliničkim studijama, sa ograničenim podacima iz realne kliničke prakse.

Cilj ove retrospektivne opservacione studije bio je da proceni i uporedi efikasnost navedenih lekova tokom prve godine lečenja plak psorijaze u realnim uslovima kliničke prakse.

Od 41 pacijenta, u studiju je uključeno 35 (risankizumab, n=17; iksekizumab, n=18), dok je šestoro isključeno zbog prethodne biološke terapije (n=3) ili alergijske reakcije (n=3; iksekizumab). U predefinisanim vremenskim intervalima, koji odgovaraju 4., 16. i 52. nedelji lečenja, meren je *Psoriasis Area and Severity Index* (PASI) skor. Izvršeno je poređenje poboljšanja PASI skora (≥75%, ≥90% i 100%). Statistička analiza je sprovedena korišćenjem *Chi-Square* testa, *Fisher*-ovog egzaktnog testa, *t*-testa i *Mann-Whitney U* testa, sa statističkom značajnošću $p<0,05$.

Zabeležena je značajno veća zastupljenost pušača (p=0,034) u grupi tretiranoj iksekizumabom i povišen indeks telesne mase, BMI (p=0,011) u grupi tretiranoj risankizumabom. Efikasnost lekova, iskazana PASI skorom bila je uporediva tokom 52 nedelje lečenja. Iako bez statističkog značaja, poređenje ukazuje na razliku u poboljšanju PASI skora za ≥90% u korist iksekizumaba (11,77% *vs.* 23,53%) u intervalu koji odgovara 4. nedelji lečenja. Istovremeno, zabeležena su tri prekida terapije iksekizumabom zbog pojave alergijske reakcije što nije bio slučaj sa risankizumabom.

Iako nije zabeležena statistički značajna razlika u efikasnosti dva leka, potrebno je nastaviti praćenje u dužem vremenskom periodu i na većem broju pacijenata.

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BF-P8 RETROSPECTIVE OBSERVATIONAL STUDY OF THE EFFECTIVENESS OF RISANKIZUMAB AND IXEKIZUMAB IN PATIENTS WITH PLAQUE PSORIASIS IN REAL-WORLD CLINICAL PRACTICE

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Risankizumab (anti-IL-23) and ixekizumab (anti-IL-17A) are biologic therapies for plaque psoriasis of proven efficacy in randomized clinical trials, while real-world evidence remains limited.

This retrospective observational study aimed to evaluate and compare the effectiveness of these therapies during the first year of plaque psoriasis treatment in real-world practice.

Out of 41 screened patients, 35 were included in the study (risankizumab, n=17; ixekizumab, n=18), while 6 were excluded due to prior biologic therapy (n=3) or due to exhibiting an allergic reaction (n=3; ixekizumab). Psoriasis Area and Severity Index (PASI) was measured in predefined time intervals corresponding to the 4th, 16th, and 52nd week of treatment. Comparison of PASI reduction (≥75%, ≥90%, 100%) was performed. Statistical analysis was conducted using the Chi-Square test, Fisher's exact test, t-test, and Mann-Whitney U test, with statistical significance set at $p<0.05$.

Significantly more smokers (p=0.034) were found in the ixekizumab-treated group, and higher body mass index, BMI (p=0.011) was found in the risankizumab-treated group. Both treatments showed comparable PASI outcomes over 52 weeks. Although not statistically significant, the comparison indicated a difference in reduction of PASI by ≥90%, favouring ixekizumab (11.77% vs. 23.53%) in the time interval corresponding to the 4th week. Three ixekizumab-treated patients discontinued due to allergic reactions, while no discontinuations occurred with risankizumab.

Although no statistically significant differences in the effectiveness of risankizumab and ixekizumab were reported, further studies are needed for longer follow-up periods and with larger sample sizes.

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