



Clinical trial results:

A Phase 3b, multicenter, interventional, open-label study of adult subjects with moderate to severe plaque psoriasis who have a suboptimal response to secukinumab or ixekizumab and are switched to risankizumab.

Summary

EudraCT number	2019-000904-14
Trial protocol	GB DE ES IT
Global end of trial date	07 November 2022

Results information

Result version number	v1 (current)
This version publication date	19 November 2023
First version publication date	19 November 2023

Trial information

Trial identification

Sponsor protocol code	M19-164
-----------------------	---------

Additional study identifiers

ISRCTN number	-
ClinicalTrials.gov id (NCT number)	NCT04102007
WHO universal trial number (UTN)	-

Notes:

Sponsors

Sponsor organisation name	AbbVie Deutschland GmbH & Co. KG
Sponsor organisation address	AbbVie House, Vanwall Business Park, Vanwall Road, Berkshire, United Kingdom, SL6 4UB
Public contact	Global Medical Services, AbbVie Deutschland GmbH & Co. KG, 001 8006339110, abbvieclinicaltrials@abbvie.com
Scientific contact	Global Medical Services, AbbVie Deutschland GmbH & Co. KG, 001 8006339110, abbvieclinicaltrials@abbvie.com

Notes:

Paediatric regulatory details

Is trial part of an agreed paediatric investigation plan (PIP)	No
Does article 45 of REGULATION (EC) No 1901/2006 apply to this trial?	No
Does article 46 of REGULATION (EC) No 1901/2006 apply to this trial?	No

Notes:

Results analysis stage

Analysis stage	Final
Date of interim/final analysis	07 November 2022
Is this the analysis of the primary completion data?	No
Global end of trial reached?	Yes
Global end of trial date	07 November 2022
Was the trial ended prematurely?	No

Notes:

General information about the trial

Main objective of the trial:

The objective of this study is to evaluate the efficacy and safety of switching to risankizumab for subjects with moderate to severe plaque psoriasis who have been treated with labeled dose of secukinumab or ixekizumab for at least 6 months and are experiencing a suboptimal response. Suboptimal response is defined as a static Physician's Global Assessment (sPGA) 2 or 3, and a Body Surface Area (BSA) 3% - < 10% after at least 6 months treatment with secukinumab or ixekizumab.

Protection of trial subjects:

Subject and/or legal guardian read and understood the information provided about the study and gave written permission.

Background therapy: -

Evidence for comparator: -

Actual start date of recruitment	12 November 2019
Long term follow-up planned	No
Independent data monitoring committee (IDMC) involvement?	No

Notes:

Population of trial subjects

Subjects enrolled per country

Country: Number of subjects enrolled	Israel: 34
Country: Number of subjects enrolled	Australia: 3
Country: Number of subjects enrolled	Taiwan: 22
Country: Number of subjects enrolled	United States: 64
Country: Number of subjects enrolled	Spain: 17
Country: Number of subjects enrolled	United Kingdom: 12
Country: Number of subjects enrolled	Germany: 65
Country: Number of subjects enrolled	Italy: 27
Worldwide total number of subjects	244
EEA total number of subjects	109

Notes:

Subjects enrolled per age group

In utero	0
Preterm newborn - gestational age < 37 wk	0
Newborns (0-27 days)	0

Infants and toddlers (28 days-23 months)	0
Children (2-11 years)	0
Adolescents (12-17 years)	0
Adults (18-64 years)	215
From 65 to 84 years	29
85 years and over	0

Subject disposition

Recruitment

Recruitment details:

A total of 244 subjects were enrolled and took at least 1 dose of study drug (ITT: Intent-to-treat Population) from 44 sites across 8 countries including Australia, Germany, Israel, Italy, Spain, Taiwan, United Kingdom, and the United States

Pre-assignment

Screening details:

The study consisted of a 30-day Screening Period

Period 1

Period 1 title	Overall Study (overall period)
Is this the baseline period?	Yes
Allocation method	Non-randomised - controlled
Blinding used	Not blinded

Arms

Arm title	Risankizumab
-----------	--------------

Arm description:

Risankizumab is administered as a subcutaneous (SC) injection in a pre-filled syringe (PFS)

Arm type	Drug
Investigational medicinal product name	Risankizumab
Investigational medicinal product code	
Other name	SKYRIZI
Pharmaceutical forms	Suspension for injection in pre-filled injector
Routes of administration	Cutaneous use

Dosage and administration details:

Risankizumab is administered as a subcutaneous (SC) injection in pre-filled syringe (PFS).

Number of subjects in period 1	Risankizumab
Started	244
Completed	205
Not completed	39
Consent withdrawn by subject	12
Adverse event, non-fatal	4
Protocol Deviation	5
Eligibility violation	5
Pregnancy	1
Protocol Compliance	1
Withdrew treatment	2
Lost to follow-up	3
Lack of efficacy	6

Baseline characteristics

Reporting groups

Reporting group title	Overall Study
-----------------------	---------------

Reporting group description: -

Reporting group values	Overall Study	Total	
Number of subjects	244	244	
Age categorical			
Units: Subjects			
From 65-84 years	29	29	
Adults (18-39 years)	65	65	
Adults (40-64 years)	150	150	
Age continuous			
Units: years			
arithmetic mean	49.2		
standard deviation	± 12.81	-	
Gender categorical			
Units: Subjects			
Female	63	63	
Male	181	181	
Race			
Units: Subjects			
American Indian or Alaska Native	1	1	
Asian	27	27	
Native Hawaiian or Other Pacific Islander	0	0	
Black or African American	1	1	
White	214	214	
More Than One Race	1	1	
Unknown or Not Reported	0	0	

Subject analysis sets

Subject analysis set title	Intent-to-Treat (ITT) Population
----------------------------	----------------------------------

Subject analysis set type	Intention-to-treat
---------------------------	--------------------

Subject analysis set description:

Intent-to-Treat (ITT) Population, which is defined as all subjects who had at least 1 dose of study drug

Reporting group values	Intent-to-Treat (ITT) Population		
Number of subjects	244		
Age categorical			
Units: Subjects			
From 65-84 years	29		
Adults (18-39 years)	65		
Adults (40-64 years)	150		

Age continuous Units: years arithmetic mean standard deviation	49.2 ± 12.81		
Gender categorical Units: Subjects			
Female	63		
Male	181		
Race Units: Subjects			
American Indian or Alaska Native	1		
Asian	27		
Native Hawaiian or Other Pacific Islander	0		
Black or African American	1		
White	214		
More Than One Race	1		
Unknown or Not Reported	0		

End points

End points reporting groups

Reporting group title	Risankizumab
Reporting group description: Risankizumab is administered as a subcutaneous (SC) injection in a pre-filled syringe (PFS)	
Subject analysis set title	Intent-to-Treat (ITT) Population
Subject analysis set type	Intention-to-treat
Subject analysis set description: Intent-to-Treat (ITT) Population, which is defined as all subjects who had at least 1 dose of study drug	

Primary: Proportion of Participants Achieving Static Physician Global Assessment (sPGA) 0/1

End point title	Proportion of Participants Achieving Static Physician Global Assessment (sPGA) 0/1 ^[1]
End point description: The sPGA is a 5-point score ranging from 0 to 4, based on the physician's assessment of the average thickness, erythema, and scaling of all psoriatic lesions. A lower score indicates less body coverage, with 0 being clear and 1 being almost clear.	
End point type	Primary
End point timeframe: At Week 16	

Notes:

[1] - No statistical analyses have been specified for this primary end point. It is expected there is at least one statistical analysis for each primary end point.

Justification: There is no statistical test for this study

End point values	Risankizumab	Intent-to-Treat (ITT) Population		
Subject group type	Reporting group	Subject analysis set		
Number of subjects analysed	244	244		
Units: Participants	140	140		

Statistical analyses

No statistical analyses for this end point

Secondary: Proportion of Participants Achieving a sPGA Clear Response (sPGA 0)

End point title	Proportion of Participants Achieving a sPGA Clear Response (sPGA 0)
End point description: The sPGA is a 5-point score ranging from 0 to 4, based on the physician's assessment of the average thickness, erythema, and scaling of all psoriatic lesions. A lower score indicates less body coverage, with 0 being clear and 1 being almost clear.	
End point type	Secondary
End point timeframe: At Week 16	

End point values	Risankizumab	Intent-to-Treat (ITT) Population		
Subject group type	Reporting group	Subject analysis set		
Number of subjects analysed	244	244		
Units: Participants	50	50		

Statistical analyses

No statistical analyses for this end point

Secondary: Proportion of Participants Achieving a Dermatology Life Quality Index (DLQI) 0/1

End point title	Proportion of Participants Achieving a Dermatology Life Quality Index (DLQI) 0/1
-----------------	--

End point description:

The DLQI is a self-administered, 10-question questionnaire covering 6 domains (symptoms and feelings, daily activities leisure, work and school, personal relationships, and bother with psoriasis treatment). The response options range from 0, not affected at all, to 3, very much affected. This gives an overall range of 0 to 30 where lower scores mean better quality of life.

End point type	Secondary
----------------	-----------

End point timeframe:

At Week 16

End point values	Risankizumab	Intent-to-Treat (ITT) Population		
Subject group type	Reporting group	Subject analysis set		
Number of subjects analysed	244	244		
Units: Participants	98	98		

Statistical analyses

No statistical analyses for this end point

Secondary: Proportion of Participants Achieving a Psoriasis Symptoms Scale (PSS) 0

End point title	Proportion of Participants Achieving a Psoriasis Symptoms Scale (PSS) 0
-----------------	---

End point description:

The PSS is a 4-item patient-reported outcome (PRO) instrument that assesses the severity of psoriasis symptoms in patients with moderate to severe psoriasis (Appendix 8.2). The symptoms included are: pain, redness, itching and burning from psoriasis. Current symptom severity is assessed as a daily diary, using a 5-point scale ranging from 0 (none) to 4 (very severe).

End point type	Secondary
End point timeframe:	
At Week 16	

End point values	Risankizumab	Intent-to-Treat (ITT) Population		
Subject group type	Reporting group	Subject analysis set		
Number of subjects analysed	244	244		
Units: Participants	51	51		

Statistical analyses

No statistical analyses for this end point

Secondary: Proportion of Participants Achieving Static Physician Global Assessment (sPGA) 0/1

End point title	Proportion of Participants Achieving Static Physician Global Assessment (sPGA) 0/1
-----------------	--

End point description:

The sPGA is a 5-point score ranging from 0 to 4, based on the physician's assessment of the average thickness, erythema, and scaling of all psoriatic lesions. A lower score indicates less body coverage, with 0 being clear and 1 being almost clear.

End point type	Secondary
End point timeframe:	
At Week 52	

End point values	Risankizumab	Intent-to-Treat (ITT) Population		
Subject group type	Reporting group	Subject analysis set		
Number of subjects analysed	244	244		
Units: Participants	152	152		

Statistical analyses

No statistical analyses for this end point

Secondary: Proportion of Participants Achieving a sPGA Clear Response (sPGA 0)

End point title	Proportion of Participants Achieving a sPGA Clear Response (sPGA 0)
-----------------	---

End point description:

The sPGA is a 5-point score ranging from 0 to 4, based on the physician's assessment of the average thickness, erythema, and scaling of all psoriatic lesions. A lower score indicates less body coverage, with 0 being clear and 1 being almost clear.

0 being clear and 1 being almost clear.

End point type	Secondary
End point timeframe:	
At Week 52	

End point values	Risankizumab	Intent-to-Treat (ITT) Population		
Subject group type	Reporting group	Subject analysis set		
Number of subjects analysed	244	244		
Units: Participants	66	66		

Statistical analyses

No statistical analyses for this end point

Secondary: Proportion of Participants Achieving a Dermatology Life Quality Index (DLQI) 0/1

End point title	Proportion of Participants Achieving a Dermatology Life Quality Index (DLQI) 0/1
-----------------	--

End point description:

The DLQI is a self-administered, 10-question questionnaire covering 6 domains (symptoms and feelings, daily activities, leisure, work and school, personal relationships, and bother with psoriasis treatment). The response options range from 0, not affected at all, to 3, very much affected. This gives an overall range of 0 to 30 where lower scores mean better quality of life

End point type	Secondary
End point timeframe:	
At Week 52	

End point values	Risankizumab	Intent-to-Treat (ITT) Population		
Subject group type	Reporting group	Subject analysis set		
Number of subjects analysed	244	244		
Units: Participants	115	115		

Statistical analyses

No statistical analyses for this end point

Secondary: Proportion of Participants Achieving a PSS 0

End point title	Proportion of Participants Achieving a PSS 0
-----------------	--

End point description:

The PSS is a 4-item patient-reported outcome (PRO) instrument that assesses the severity of psoriasis symptoms in patients with moderate to severe psoriasis (Appendix 8.2). The symptoms included are: pain, redness, itching and burning from psoriasis. Current symptom severity is assessed as a daily diary, using a 5-point scale ranging from 0 (none) to 4 (very severe).

End point type	Secondary
----------------	-----------

End point timeframe:

At Week 52

End point values	Risankizumab	Intent-to-Treat (ITT) Population		
Subject group type	Reporting group	Subject analysis set		
Number of subjects analysed	244	244		
Units: Participants	67	67		

Statistical analyses

No statistical analyses for this end point

Secondary: Time to Achieve sPGA 0/1

End point title	Time to Achieve sPGA 0/1
-----------------	--------------------------

End point description:

The sPGA is a 5-point score ranging from 0 to 4, based on the physician's assessment of the average thickness, erythema, and scaling of all psoriatic lesions. A lower score indicates less body coverage, with 0 being clear and 1 being almost clear.

End point type	Secondary
----------------	-----------

End point timeframe:

Up to Week 52

End point values	Risankizumab			
Subject group type	Reporting group			
Number of subjects analysed	244			
Units: Days				
number (confidence interval 95%)				
25th	30 (29 to 38)			
Median	57 (57 to 110)			
75th	199 (134 to 282)			

Statistical analyses

No statistical analyses for this end point

Secondary: Time to Achieve sPGA 0

End point title	Time to Achieve sPGA 0
-----------------	------------------------

End point description:

"9999" Explanation: If a participant never attained the endpoint, then the outcome was censored at the last visit where variable was measured

End point type	Secondary
----------------	-----------

End point timeframe:

Up to 52 Weeks

End point values	Risankizumab			
Subject group type	Reporting group			
Number of subjects analysed	244			
Units: Days				
number (confidence interval 95%)				
25th	121 (113 to 201)			
Median	370 (366 to 99999)			
75th	99999 (99999 to 99999)			

Statistical analyses

No statistical analyses for this end point

Adverse events

Adverse events information

Timeframe for reporting adverse events:

From Baseline Day 1 up to Week 52

Assessment type	Systematic
-----------------	------------

Dictionary used

Dictionary name	MedDRA
-----------------	--------

Dictionary version	24.1
--------------------	------

Reporting groups

Reporting group title	Risankizumab
-----------------------	--------------

Reporting group description:

Risankizumab is administered as a subcutaneous (SC) injection in a pre-filled syringe (PFS)

Serious adverse events	Risankizumab		
Total subjects affected by serious adverse events			
subjects affected / exposed	17 / 244 (6.97%)		
number of deaths (all causes)	0		
number of deaths resulting from adverse events	0		
Neoplasms benign, malignant and unspecified (incl cysts and polyps)			
NON-SMALL CELL LUNG CANCER			
subjects affected / exposed	1 / 244 (0.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
PROSTATE CANCER STAGE I			
subjects affected / exposed	1 / 244 (0.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Injury, poisoning and procedural complications			
FIBULA FRACTURE			
subjects affected / exposed	1 / 244 (0.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
HAND FRACTURE			

subjects affected / exposed	1 / 244 (0.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
MULTIPLE INJURIES			
subjects affected / exposed	1 / 244 (0.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Cardiac disorders			
CORONARY ARTERY DISEASE			
subjects affected / exposed	1 / 244 (0.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
MYOCARDIAL INFARCTION			
subjects affected / exposed	2 / 244 (0.82%)		
occurrences causally related to treatment / all	0 / 2		
deaths causally related to treatment / all	0 / 0		
Nervous system disorders			
APHASIA			
subjects affected / exposed	1 / 244 (0.41%)		
occurrences causally related to treatment / all	1 / 1		
deaths causally related to treatment / all	0 / 0		
EPILEPSY			
subjects affected / exposed	1 / 244 (0.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Gastrointestinal disorders			
LARGE INTESTINAL HAEMORRHAGE			
subjects affected / exposed	1 / 244 (0.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
OEDEMATOUS PANCREATITIS			
subjects affected / exposed	1 / 244 (0.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		

OESOPHAGEAL VARICES HAEMORRHAGE			
subjects affected / exposed	1 / 244 (0.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Hepatobiliary disorders			
CHOLELITHIASIS			
subjects affected / exposed	1 / 244 (0.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Renal and urinary disorders			
ACUTE KIDNEY INJURY			
subjects affected / exposed	1 / 244 (0.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Musculoskeletal and connective tissue disorders			
MUSCULAR WEAKNESS			
subjects affected / exposed	1 / 244 (0.41%)		
occurrences causally related to treatment / all	1 / 1		
deaths causally related to treatment / all	0 / 0		
OSTEOARTHRITIS			
subjects affected / exposed	2 / 244 (0.82%)		
occurrences causally related to treatment / all	0 / 2		
deaths causally related to treatment / all	0 / 0		
Infections and infestations			
APPENDICITIS			
subjects affected / exposed	1 / 244 (0.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
DIVERTICULITIS			
subjects affected / exposed	1 / 244 (0.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
POSTOPERATIVE WOUND INFECTION			

subjects affected / exposed	1 / 244 (0.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		

Frequency threshold for reporting non-serious adverse events: 5 %

Non-serious adverse events	Risankizumab		
Total subjects affected by non-serious adverse events			
subjects affected / exposed	31 / 244 (12.70%)		
Infections and infestations			
NASOPHARYNGITIS			
subjects affected / exposed	14 / 244 (5.74%)		
occurrences (all)	18		
COVID-19			
subjects affected / exposed	21 / 244 (8.61%)		
occurrences (all)	21		

More information

Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? No

Interruptions (globally)

Were there any global interruptions to the trial? No

Limitations and caveats

None reported