



Clinical trial results:

An open-label, long-term extension trial of spesolimab treatment in adult patients with Hidradenitis Suppurativa (HS)

Summary

EudraCT number	2020-005587-55
Trial protocol	FR HU DE NO CZ NL BE IT ES
Global end of trial date	26 April 2024

Results information

Result version number	v1 (current)
This version publication date	26 April 2025
First version publication date	26 April 2025

Trial information

Trial identification

Sponsor protocol code	1368-0067
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Additional study identifiers

ISRCTN number	-
ClinicalTrials.gov id (NCT number)	NCT04876391
WHO universal trial number (UTN)	-

Notes:

Sponsors

Sponsor organisation name	Boehringer Ingelheim
Sponsor organisation address	Binger Strasse 173, Ingelheim am Rhein, Germany, 55216
Public contact	Boehringer Ingelheim, Call Center, Boehringer Ingelheim, 001 018002430127, clintrriage.rdg@boehringer-ingelheim.com
Scientific contact	Boehringer Ingelheim, Call Center, Boehringer Ingelheim, 001 018002430127, clintrriage.rdg@boehringer-ingelheim.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	14 June 2024
Is this the analysis of the primary completion data?	Yes
Primary completion date	26 April 2024
Global end of trial reached?	Yes
Global end of trial date	26 April 2024
Was the trial ended prematurely?	No

Notes:

General information about the trial

Main objective of the trial:

The primary objective of this trial was to assess the long-term safety of spesolimab in patients with hidradenitis suppurativa (HS) who had completed the proof-of-clinical-concept (PoCC) trial 1368-0052 and were qualified for entry into this trial. The secondary objectives were to evaluate efficacy at a lower dose than tested in PoCC trial.

Protection of trial subjects:

Only subjects that met all the study inclusion and none of the exclusion criteria were to be entered in the study. All subjects were free to withdraw from the clinical trial at any time for any reason given. Close monitoring of all subjects was adhered to throughout the trial conduct. Rescue medication was allowed for all subjects as required.

Background therapy: -

Evidence for comparator: -

Actual start date of recruitment	24 August 2021
Long term follow-up planned	No
Independent data monitoring committee (IDMC) involvement?	Yes

Notes:

Population of trial subjects

Subjects enrolled per country

Country: Number of subjects enrolled	Spain: 1
Country: Number of subjects enrolled	Poland: 5
Country: Number of subjects enrolled	Norway: 1
Country: Number of subjects enrolled	Netherlands: 4
Country: Number of subjects enrolled	Australia: 8
Country: Number of subjects enrolled	Canada: 2
Country: Number of subjects enrolled	Czechia: 2
Country: Number of subjects enrolled	France: 4
Country: Number of subjects enrolled	Germany: 7
Country: Number of subjects enrolled	Italy: 4
Country: Number of subjects enrolled	United States: 7
Worldwide total number of subjects	45
EEA total number of subjects	28

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)	45
From 65 to 84 years	0
85 years and over	0

Subject disposition

Recruitment

Recruitment details:

This multinational, multicenter, open-label extension of the Proof of Concept Clinical (PoCC) trial 1368-0052 included a 104-week treatment period and a 16-week safety follow-up. Subjects from the PoCC trial were enrolled to assess the long-term safety of spesolimab in hidradenitis suppurativa (HS) and to evaluate efficacy at a lower dose.

Pre-assignment

Screening details:

All subjects were screened for eligibility prior to participation in the trial. Subjects attended a specialist site which ensured that they (the subjects) strictly met all inclusion and none of the exclusion criteria. Subjects were not to be allocated to a treatment group if any of the entry criteria were violated.

Period 1

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

Blinding implementation details:

This is an open label trial.

Arms

Are arms mutually exclusive?	Yes
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Arm title	Prior Placebo (PP)
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Arm description:

Subjects in the placebo arm of the 1368-0052 Proof of Concept Clinical (PoCC) trial received an initial 1200 mg intravenous (i.v.) loading dose of spesolimab plus subcutaneous (s.c.) placebo at Visit 1, followed by 600 mg s.c. doses of spesolimab every two weeks for the next 12 weeks. Further dosing was based on changes in HS-PGA grade assessment from baseline to week 12.

Arm type	Experimental
Investigational medicinal product name	Spesolimab 1200 mg
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Solution for injection/infusion
Routes of administration	Intravenous use

Dosage and administration details:

Subjects in the placebo arm of the 1368-0052 Proof of Concept Clinical (PoCC) trial received an initial 1200 mg intravenous (i.v.) loading dose of spesolimab at Visit 1, followed by 600 mg subcutaneous (s.c.) doses every two weeks for the next 12 weeks. Further dosing was based on changes in HS-PGA grade assessment from baseline to week 12.

Investigational medicinal product name	Spesolimab-matching placebo
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Solution for injection/infusion
Routes of administration	Subcutaneous use

Dosage and administration details:

Subjects from the placebo arm of the 1368-0052 PoCC trial will receive a subcutaneous (s.c.) administration of placebo matching 600 mg spesolimab at Visit 1.

Arm title	Prior Spesolimab (PS)
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Arm description:

Subjects in the active arm of the 1368-0052 Proof of Concept Clinical (PoCC) trial received an initial 600 mg subcutaneous (s.c.) loading dose of spesolimab plus intravenous (i.v.) placebo at Visit 1, followed by 600 mg s.c. doses of spesolimab every two weeks for the next 12 weeks. Further dosing was based on changes in HS-PGA grade assessment from baseline to week 12.

Arm type	Experimental
Investigational medicinal product name	Spesolimab-matching placebo
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Solution for injection/infusion
Routes of administration	Intravenous use

Dosage and administration details:

Subjects from the active arm of the 1368-0052 PoCC trial will receive an intravenous (i.v.) infusion of placebo matching 1200 mg spesolimab at Visit 1.

Investigational medicinal product name	Spesolimab 600 mg
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Solution for injection/infusion
Routes of administration	Subcutaneous use

Dosage and administration details:

Subjects in the active arm of the 1368-0052 Proof of Concept Clinical (PoCC) trial received an initial 600 mg subcutaneous (s.c.) dose of spesolimab at Visit 1, followed by 600 mg s.c. doses every two weeks for the next 12 weeks. Further dosing was based on changes in HS-PGA grade assessment from baseline to week 12.

Number of subjects in period 1	Prior Placebo (PP)	Prior Spesolimab (PS)
Started	15	30
Completed	7	9
Not completed	8	21
Consent withdrawn by subject	1	10
Personal reasons	-	1
Adverse event, non-fatal	3	1
Patient non-compliance	-	1
Lost to follow-up	2	4
Withdrawn as per protocol	2	2
Lack of efficacy	-	2

Baseline characteristics

Reporting groups

Reporting group title	Prior Placebo (PP)
Reporting group description:	
Subjects in the placebo arm of the 1368-0052 Proof of Concept Clinical (PoCC) trial received an initial 1200 mg intravenous (i.v.) loading dose of spesolimab plus subcutaneous (s.c.) placebo at Visit 1, followed by 600 mg s.c. doses of spesolimab every two weeks for the next 12 weeks. Further dosing was based on changes in HS-PGA grade assessment from baseline to week 12.	
Reporting group title	Prior Spesolimab (PS)
Reporting group description:	
Subjects in the active arm of the 1368-0052 Proof of Concept Clinical (PoCC) trial received an initial 600 mg subcutaneous (s.c.) loading dose of spesolimab plus intravenous (i.v.) placebo at Visit 1, followed by 600 mg s.c. doses of spesolimab every two weeks for the next 12 weeks. Further dosing was based on changes in HS-PGA grade assessment from baseline to week 12.	

Reporting group values	Prior Placebo (PP)	Prior Spesolimab (PS)	Total
Number of subjects	15	30	45
Age categorical			
Safety Analysis Set (SAF): This subject set included all subjects who were enrolled and received at least one dose of the study drug.			
Units: Subjects			
In utero	0	0	0
Preterm newborn infants (gestational age < 37 wks)	0	0	0
Newborns (0-27 days)	0	0	0
Infants and toddlers (28 days-23 months)	0	0	0
Children (2-11 years)	0	0	0
Adolescents (12-17 years)	0	0	0
Adults (18-64 years)	15	30	45
From 65-84 years	0	0	0
85 years and over	0	0	0
Age Continuous			
Safety Analysis Set (SAF): This subject set included all subjects who were enrolled and received at least one dose of the study drug.			
Units: years			
arithmetic mean	35.7	35.5	
standard deviation	± 10.7	± 10.8	-
Sex: Female, Male			
Safety Analysis Set (SAF): This subject set included all subjects who were enrolled and received at least one dose of the study drug.			
Units: Subjects			
Female	8	19	27
Male	7	11	18
Race (NIH/OMB)			
Safety Analysis Set (SAF): This subject set included all subjects who were enrolled and received at least one dose of the study drug.			
Units: Subjects			
American Indian or Alaska Native	0	0	0
Asian	2	4	6

Native Hawaiian or Other Pacific Islander	0	1	1
Black or African American	2	2	4
White	11	19	30
More than one race	0	0	0
Unknown or Not Reported	0	4	4
Ethnicity (NIH/OMB)			
Safety Analysis Set (SAF): This subject set included all subjects who were enrolled and received at least one dose of the study drug.			
Units: Subjects			
Hispanic or Latino	1	1	2
Not Hispanic or Latino	14	25	39
Unknown or Not Reported	0	4	4

End points

End points reporting groups

Reporting group title	Prior Placebo (PP)
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Reporting group description:

Subjects in the placebo arm of the 1368-0052 Proof of Concept Clinical (PoCC) trial received an initial 1200 mg intravenous (i.v.) loading dose of spesolimab plus subcutaneous (s.c.) placebo at Visit 1, followed by 600 mg s.c. doses of spesolimab every two weeks for the next 12 weeks. Further dosing was based on changes in HS-PGA grade assessment from baseline to week 12.

Reporting group title	Prior Spesolimab (PS)
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Reporting group description:

Subjects in the active arm of the 1368-0052 Proof of Concept Clinical (PoCC) trial received an initial 600 mg subcutaneous (s.c.) loading dose of spesolimab plus intravenous (i.v.) placebo at Visit 1, followed by 600 mg s.c. doses of spesolimab every two weeks for the next 12 weeks. Further dosing was based on changes in HS-PGA grade assessment from baseline to week 12.

Subject analysis set title	Prior Placebo (PP)
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Subject analysis set type	Full analysis
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Subject analysis set description:

Subjects in the placebo arm of the 1368-0052 Proof of Concept Clinical (PoCC) trial received an initial 1200 mg intravenous (i.v.) loading dose of spesolimab plus subcutaneous (s.c.) placebo at Visit 1, followed by 600 mg s.c. doses of spesolimab every two weeks for the next 12 weeks. Further dosing was based on changes in HS-PGA grade assessment from baseline to week 12.

Subject analysis set title	Prior Spesolimab (PS)
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Subject analysis set type	Full analysis
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Subject analysis set description:

Subjects in the active arm of the 1368-0052 Proof of Concept Clinical (PoCC) trial received an initial 600 mg subcutaneous (s.c.) loading dose of spesolimab plus intravenous (i.v.) placebo at Visit 1, followed by 600 mg s.c. doses of spesolimab every two weeks for the next 12 weeks. Further dosing was based on changes in HS-PGA grade assessment from baseline to week 12.

Primary: Number of Participants With Treatment-Emergent Adverse Events (TEAEs)

End point title	Number of Participants With Treatment-Emergent Adverse Events (TEAEs) ^[1]
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End point description:

TEAEs were defined as all adverse events (AEs) occurring from the start of treatment in this extension trial to the end of its residual effect period. AEs that began during the on-treatment period of the parent Proof of Concept and Confirmatory (PoCC) trial (1368-0052) and were still ongoing in this extension trial will also be considered as treatment-emergent.

End point type	Primary
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End point timeframe:

From drug administration until the end of maintenance treatment period (120 weeks). This period includes the Residual effect period (REP) (i.e., 16 weeks after the last study treatment).

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: All statistical assessments were performed in an explorative manner in the safety analysis set (SAF) using descriptive statistics.

End point values	Prior Placebo (PP)	Prior Spesolimab (PS)		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	15	30		
Units: Subjects	15	28		

Statistical analyses

No statistical analyses for this end point

Secondary: Percent change in total abscess and inflammatory nodule (AN) count from baseline up to Week 12

End point title	Percent change in total abscess and inflammatory nodule (AN) count from baseline up to Week 12
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End point description:

Percentage change from baseline in total abscess and inflammatory nodule count at Week 12= [(Total Abscess at Week 12 + Total Inflammatory Nodule at Week 12) - (Total Abscess at baseline + Total Inflammatory Nodule at baseline)] *100/ (Total Abscess at baseline + Total Inflammatory Nodule at baseline).

Percentage change from baseline in total abscess and inflammatory nodule count at Week 12 was modelled using a restricted maximum likelihood (REML)-based mixed effect model with repeated measures (MMRM) approach, accounting for the following sources of variation: fixed, categorical effects of treatment at each visit, prior use of TNF inhibitor and the fixed continuous effects of baseline at each visit (Weeks 1, 2, 4, 6, 8, 10, and 12) as well as random effect of each visit. Baseline refers to the last measurement prior to the start of spesolimab.

End point type	Secondary
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End point timeframe:

MMRM included measurements from baseline (Week 12 of 1368-0052) and at Weeks 1, 2, 4, 6, 8, 10, and 12 after first drug administration. MMRM estimates of percent change in draining fistula from baseline to Week 12 is reported.

End point values	Prior Placebo (PP)	Prior Spesolimab (PS)		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	12	26		
Units: Percentage change				
least squares mean (standard error)	-18.3 (± 19.2)	-35.0 (± 12.7)		

Statistical analyses

No statistical analyses for this end point

Secondary: Hidradenitis Suppurativa Physician Global Assessment (HS-PGA) score of 0 or 1 up to Week 12

End point title	Hidradenitis Suppurativa Physician Global Assessment (HS-PGA) score of 0 or 1 up to Week 12
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End point description:

HS-PGA documents the physician's assessment of the subject's HS at a given timepoint. The score ranges from 0 to 5, where: 0=clear - no abscesses, draining fistula, inflammatory nodules or

noninflammatory nodules); 1=minimal - no abscesses, draining fistula or inflammatory nodules and the presence of noninflammatory nodules); 2=mild - no abscesses or draining fistula and 1-4 inflammatory nodules, or 1 abscess or draining tunnel and no inflammatory nodules); 3=moderate - no abscesses or draining fistula and ≥ 5 inflammatory nodules, or 1 abscess or draining fistula and ≥ 1 inflammatory nodule, or 2-5 abscesses or draining fistula and < 10 inflammatory nodules); 4=severe - 2-5 abscesses or draining fistula and ≥ 10 inflammatory nodules); 5=very severe - > 5 abscesses or draining fistula).

Percentage of subjects with achievement of HS-PGA score of 0 or 1 at Week 12 was calculated as: number of subjects with achievement of HS-PGA score of 0 or 1 at Week 12/number of subjects analyzed *100.

End point type	Secondary
End point timeframe:	
At Week 12.	

End point values	Prior Placebo (PP)	Prior Spesolimab (PS)		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	13	27		
Units: Percentage of subjects				
number (confidence interval 95%)	0 (0 to 22.8)	3.7 (0.7 to 18.3)		

Statistical analyses

No statistical analyses for this end point

Secondary: Percentage change in total draining fistula (DF) count from baseline up to Week 12

End point title	Percentage change in total draining fistula (DF) count from baseline up to Week 12
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End point description:

Percentage change from baseline in draining fistula at Week 12 was calculated as: [(total draining fistula at Week 12) - (total draining fistula at baseline)] * 100 %/ (total draining fistula at baseline).

Percentage change from baseline in draining fistula count at Week 12 was modelled using a restricted maximum likelihood (REML)-based mixed effect model with repeated measures (MMRM) approach, accounting for the following sources of variation: fixed, categorical effects of treatment at each visit, prior use of TNF inhibitor and the fixed continuous effects of baseline at each visit (Weeks 1, 2, 4, 6, 8, 10, and 12) as well as random effect of each visit. Baseline refers to the last measurement prior to the start of spesolimab. Unstructured covariance matrix was used.

End point type	Secondary
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End point timeframe:

MMRM included measurements from baseline (Week 12 of 1368-0052) and at Weeks 1, 2, 4, 6, 8, 10, and 12 after first drug administration. MMRM estimates of percentage change in draining fistula from baseline to Week 12 is reported.

End point values	Prior Placebo (PP)	Prior Spesolimab (PS)		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	11	21		
Units: Percentage change				
least squares mean (standard error)	25.4 (± 25.5)	-44.6 (± 18.1)		

Statistical analyses

No statistical analyses for this end point

Secondary: Change from baseline in International Hidradenitis Suppurativa Severity Score System (IHS4) value up to Week 12

End point title	Change from baseline in International Hidradenitis Suppurativa Severity Score System (IHS4) value up to Week 12
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End point description:

The IHS4 assesses the hidradenitis suppurativa (HS) severity and the resulting IHS4 score is arrived at by= number of nodules * 1 + number of abscesses * 2 + number of draining tunnels (fistulae or sinuses) * 4.

A total score of 3 or less signifies mild, 4-10 signifies moderate and 11 or higher signifies severe disease.

The minimum score is 0 while the maximum score is variable and depends on the counts of nodules, abscesses, and draining tunnels (fistulae or sinuses).

Absolute change from baseline in IHS4 value at Week 12 was modelled using a restricted maximum likelihood (REML)-based mixed effect model with repeated measures (MMRM) approach, accounting for the following sources of variation: fixed, categorical effects of treatment at each visit, prior use of TNF inhibitor and the fixed continuous effects of baseline at each visit (Weeks 1, 2, 4, 6, 8, 10, and 12) as well as random effect of each visit. Baseline refers to the last measurement prior to the start of spesolimab.

End point type	Secondary
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End point timeframe:

MMRM included measurements at baseline (Week 0) and at Weeks 1, 2, 4, 6, 8, 10, and 12 after first drug administration. MMRM estimates of absolute change in IHS4 from baseline to Week 12 is reported.

End point values	Prior Placebo (PP)	Prior Spesolimab (PS)		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	13	26		
Units: Score on a scale				
least squares mean (standard error)	-3.1 (± 4.8)	-10.5 (± 3.3)		

Statistical analyses

No statistical analyses for this end point

Secondary: Achievement of Hidradenitis Suppurativa Clinical Response (HiSCR) up

to Week 12

End point title	Achievement of Hidradenitis Suppurativa Clinical Response (HiSCR) up to Week 12
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End point description:

HiSCR is defined as at least a 50% reduction in the total abscess and inflammatory nodule (AN) count with no increase in abscess count and no increase in draining fistula count relative to baseline. Percentage of subjects with achievement of Hidradenitis Suppurativa Clinical Response (HiSCR) at Week 12 is reported. Percentage of subjects with achievement of HiSCR at Week 12 was calculated as: number of subjects with achievement of HiSCR at Week 12/number of subjects analyzed * 100.

End point type	Secondary
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End point timeframe:

At baseline (Week 0) and at Week 12.

End point values	Prior Placebo (PP)	Prior Spesolimab (PS)		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	12	27		
Units: Percentage of subjects				
number (confidence interval 95%)	33.3 (13.8 to 60.9)	40.7 (24.5 to 59.3)		

Statistical analyses

No statistical analyses for this end point

Secondary: Occurrence of at least one flare (defined as at least 25 % increase in AN count with a minimum increase of 2 relative to baseline) up to Week 12

End point title	Occurrence of at least one flare (defined as at least 25 % increase in AN count with a minimum increase of 2 relative to baseline) up to Week 12
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End point description:

Percentage of subjects with occurrence of at least one flare at Week 12. Flare was defined as at least 25 % increase in abscess and inflammatory nodule count with a minimum increase of 2 relative to baseline. Percentage of patients with occurrence of at least one flare at Week 12 was calculated as: number of patients with occurrence of at least one flare at Week 12/number of subjects analyzed * 100.

End point type	Secondary
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End point timeframe:

From drug administration until the end of maintenance treatment period including Residual effect period (REP) (i.e., 16 weeks after the last study treatment)

End point values	Prior Placebo (PP)	Prior Spesolimab (PS)		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	12	27		
Units: Percentage of subjects				
number (confidence interval 95%)	8.3 (1.5 to	14.8 (5.9 to		

Statistical analyses

No statistical analyses for this end point

Secondary: Achievement of at least 30% reduction from baseline in Numerical Rating Scale (NRS30) in Patient's Global Assessment of HS Pain up to Week 12

End point title	Achievement of at least 30% reduction from baseline in Numerical Rating Scale (NRS30) in Patient's Global Assessment of HS Pain up to Week 12
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End point description:

The analysis assessed the percentage of subjects who achieved at least a 30% reduction from baseline in the Numerical Rating Scale (NRS30) for the subject's Global Assessment of HS Pain by Week 12.

The HS Pain Numerical Rating Scale (NRS) measures HS-related pain severity, with a recall period of 24 hours and responses on an 11-point scale from 0 (no pain) to 10 (worst possible pain). For pain analysis, a weekly average of daily assessments was calculated at each visit, based on recorded values before the visit. Weeks with at least four reported daily values were included, ignoring any missing daily values.

The percentage of subjects achieving at least a 30% reduction from baseline in NRS30 by Week 12 was calculated as the number of subjects meeting this criterion divided by the total number of subjects analyzed * 100.

End point type	Secondary
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End point timeframe:

At baseline (Week 0) and at Week 12.

End point values	Prior Placebo (PP)	Prior Spesolimab (PS)		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	12	27		
Units: Percentage of subjects				
number (confidence interval 95%)	25.0 (8.9 to 53.2)	36.0 (20.2 to 55.5)		

Statistical analyses

No statistical analyses for this end point

Secondary: Absolute change from baseline in Hidradenitis Suppurativa Area and Severity Index (HASI) score up to Week 12

End point title	Absolute change from baseline in Hidradenitis Suppurativa Area and Severity Index (HASI) score up to Week 12
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End point description:

The HASI assesses HS severity across four domains: erythema, induration, open ulcer, and draining

fistula, scored on a 0 (none) to 3 (severe/extensive) Likert scale for each body region.

For body surface area (BSA) assessment, the number of palms (one palm indicates 1% of the patient's BSA) involved for each body region (head, right axilla, left axilla, anterior chest, back, anterior bathing trunk, posterior bathing trunk, other) is assessed and converted to a percentage of that region. An area score was assigned to each region using the approach (0 = none, 1 = 1–9%, 2 = 10–29%, 3 = 30–49%, 4 = 50–69%, 5 = 70–89%, 6 = 90–100%). Scores for the four domains of HS are summed and adjusted for the area affected, and the score of each area are summed to calculate the total HASI score, which ranges from 0 (no disease) to 72 (severe disease).

The Least Squares Mean (Standard Error (SE)) was derived from mixed effect model with repeated measures (MMRM).

End point type	Secondary
End point timeframe:	
MMRM included measurements at baseline (Week 0) and at Weeks 1, 2, 4, 6, 8, 10, and 12 after first drug administration. MMRM estimates of absolute change from baseline in HASI score at Week 12 is reported.	

End point values	Prior Placebo (PP)	Prior Spesolimab (PS)		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	13	26		
Units: Score on a scale				
least squares mean (standard error)	5.0 (± 8.9)	-22.8 (± 6.1)		

Statistical analyses

No statistical analyses for this end point

Adverse events

Adverse events information

Timeframe for reporting adverse events:

All-cause mortality, AEs and SAEs: From drug administration until the end of maintenance treatment period (120 weeks). This period includes the Residual effect period (REP) (i.e., 16 weeks after the last study treatment).

Adverse event reporting additional description:

Safety Analysis Set (SAF): The safety analysis set includes all subjects who received at least one dose of the trial drug.

Assessment type	Systematic
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Dictionary used

Dictionary name	MedDRA
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Dictionary version	26.1
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Reporting groups

Reporting group title	Prior Spesolimab (PS)
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Reporting group description:

Subjects in the active arm of the 1368-0052 Proof of Concept Clinical (PoCC) trial received an initial 600 mg subcutaneous (s.c.) loading dose of spesolimab plus intravenous (i.v.) placebo at Visit 1, followed by 600 mg s.c. doses of spesolimab every two weeks for the next 12 weeks. Further dosing was based on changes in HS-PGA grade assessment from baseline to week 12.

Reporting group title	Prior Placebo (PP)
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Reporting group description:

Subjects in the placebo arm of the 1368-0052 Proof of Concept Clinical (PoCC) trial received an initial 1200 mg intravenous (i.v.) loading dose of spesolimab plus subcutaneous (s.c.) placebo at Visit 1, followed by 600 mg s.c. doses of spesolimab every two weeks for the next 12 weeks. Further dosing was based on changes in HS-PGA grade assessment from baseline to week 12.

Serious adverse events	Prior Spesolimab (PS)	Prior Placebo (PP)	
Total subjects affected by serious adverse events			
subjects affected / exposed	6 / 30 (20.00%)	4 / 15 (26.67%)	
number of deaths (all causes)	0	0	
number of deaths resulting from adverse events	0	0	
Injury, poisoning and procedural complications			
Road traffic accident			
subjects affected / exposed	1 / 30 (3.33%)	0 / 15 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Nervous system disorders			
Guillain-Barre syndrome			
subjects affected / exposed	1 / 30 (3.33%)	0 / 15 (0.00%)	
occurrences causally related to treatment / all	1 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	

Gastrointestinal disorders			
Pancreatitis			
subjects affected / exposed	1 / 30 (3.33%)	0 / 15 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Skin and subcutaneous tissue disorders			
Hidradenitis			
subjects affected / exposed	2 / 30 (6.67%)	1 / 15 (6.67%)	
occurrences causally related to treatment / all	0 / 3	0 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	
Psychiatric disorders			
Acute psychosis			
subjects affected / exposed	1 / 30 (3.33%)	0 / 15 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Infections and infestations			
Abdominal abscess			
subjects affected / exposed	1 / 30 (3.33%)	0 / 15 (0.00%)	
occurrences causally related to treatment / all	0 / 1	0 / 0	
deaths causally related to treatment / all	0 / 0	0 / 0	
Acute hepatitis C			
subjects affected / exposed	0 / 30 (0.00%)	1 / 15 (6.67%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Latent tuberculosis			
subjects affected / exposed	0 / 30 (0.00%)	1 / 15 (6.67%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	
Vulval abscess			
subjects affected / exposed	0 / 30 (0.00%)	1 / 15 (6.67%)	
occurrences causally related to treatment / all	0 / 0	0 / 1	
deaths causally related to treatment / all	0 / 0	0 / 0	

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

Non-serious adverse events	Prior Spesolimab (PS)	Prior Placebo (PP)	
Total subjects affected by non-serious adverse events			
subjects affected / exposed	27 / 30 (90.00%)	15 / 15 (100.00%)	
General disorders and administration site conditions			
Injection site haematoma			
subjects affected / exposed	2 / 30 (6.67%)	1 / 15 (6.67%)	
occurrences (all)	2	7	
Axillary pain			
subjects affected / exposed	0 / 30 (0.00%)	1 / 15 (6.67%)	
occurrences (all)	0	1	
Chest pain			
subjects affected / exposed	1 / 30 (3.33%)	1 / 15 (6.67%)	
occurrences (all)	1	1	
Fatigue			
subjects affected / exposed	2 / 30 (6.67%)	0 / 15 (0.00%)	
occurrences (all)	3	0	
Feeling hot			
subjects affected / exposed	0 / 30 (0.00%)	1 / 15 (6.67%)	
occurrences (all)	0	21	
Influenza like illness			
subjects affected / exposed	3 / 30 (10.00%)	0 / 15 (0.00%)	
occurrences (all)	3	0	
Injection site bruising			
subjects affected / exposed	0 / 30 (0.00%)	1 / 15 (6.67%)	
occurrences (all)	0	1	
Injection site erythema			
subjects affected / exposed	2 / 30 (6.67%)	1 / 15 (6.67%)	
occurrences (all)	2	1	
Injection site pain			
subjects affected / exposed	2 / 30 (6.67%)	0 / 15 (0.00%)	
occurrences (all)	3	0	
Injection site pruritus			
subjects affected / exposed	2 / 30 (6.67%)	0 / 15 (0.00%)	
occurrences (all)	3	0	
Injection site swelling			

subjects affected / exposed occurrences (all)	2 / 30 (6.67%) 2	0 / 15 (0.00%) 0	
Pyrexia subjects affected / exposed occurrences (all)	4 / 30 (13.33%) 4	0 / 15 (0.00%) 0	
Swelling face subjects affected / exposed occurrences (all)	0 / 30 (0.00%) 0	1 / 15 (6.67%) 1	
Reproductive system and breast disorders Dysmenorrhoea subjects affected / exposed occurrences (all)	2 / 30 (6.67%) 5	1 / 15 (6.67%) 12	
Heavy menstrual bleeding subjects affected / exposed occurrences (all)	0 / 30 (0.00%) 0	1 / 15 (6.67%) 1	
Respiratory, thoracic and mediastinal disorders Oropharyngeal pain subjects affected / exposed occurrences (all)	2 / 30 (6.67%) 2	2 / 15 (13.33%) 2	
Cough subjects affected / exposed occurrences (all)	3 / 30 (10.00%) 4	0 / 15 (0.00%) 0	
Psychiatric disorders Anxiety subjects affected / exposed occurrences (all)	0 / 30 (0.00%) 0	1 / 15 (6.67%) 1	
Investigations Amylase increased subjects affected / exposed occurrences (all)	0 / 30 (0.00%) 0	1 / 15 (6.67%) 2	
Bacterial test positive subjects affected / exposed occurrences (all)	0 / 30 (0.00%) 0	1 / 15 (6.67%) 2	
Blood fibrinogen increased subjects affected / exposed occurrences (all)	1 / 30 (3.33%) 1	1 / 15 (6.67%) 1	

Blood pressure increased subjects affected / exposed occurrences (all)	0 / 30 (0.00%) 0	1 / 15 (6.67%) 1	
C-reactive protein increased subjects affected / exposed occurrences (all)	1 / 30 (3.33%) 1	1 / 15 (6.67%) 1	
Haemoglobin decreased subjects affected / exposed occurrences (all)	0 / 30 (0.00%) 0	1 / 15 (6.67%) 1	
Heart rate irregular subjects affected / exposed occurrences (all)	0 / 30 (0.00%) 0	1 / 15 (6.67%) 1	
Hepatic enzyme increased subjects affected / exposed occurrences (all)	1 / 30 (3.33%) 1	1 / 15 (6.67%) 1	
Lipase increased subjects affected / exposed occurrences (all)	0 / 30 (0.00%) 0	1 / 15 (6.67%) 2	
Mycobacterium test positive subjects affected / exposed occurrences (all)	0 / 30 (0.00%) 0	1 / 15 (6.67%) 1	
Platelet count increased subjects affected / exposed occurrences (all)	0 / 30 (0.00%) 0	1 / 15 (6.67%) 1	
Injury, poisoning and procedural complications			
Foot fracture subjects affected / exposed occurrences (all)	0 / 30 (0.00%) 0	1 / 15 (6.67%) 1	
Head injury subjects affected / exposed occurrences (all)	0 / 30 (0.00%) 0	1 / 15 (6.67%) 1	
Ligament sprain subjects affected / exposed occurrences (all)	1 / 30 (3.33%) 1	1 / 15 (6.67%) 1	
Sunburn			

subjects affected / exposed occurrences (all)	0 / 30 (0.00%) 0	1 / 15 (6.67%) 1	
Cardiac disorders			
Ventricular extrasystoles			
subjects affected / exposed	0 / 30 (0.00%)	1 / 15 (6.67%)	
occurrences (all)	0	1	
Sinus tachycardia			
subjects affected / exposed	0 / 30 (0.00%)	1 / 15 (6.67%)	
occurrences (all)	0	1	
Nervous system disorders			
Paraesthesia			
subjects affected / exposed	2 / 30 (6.67%)	0 / 15 (0.00%)	
occurrences (all)	2	0	
Lethargy			
subjects affected / exposed	0 / 30 (0.00%)	1 / 15 (6.67%)	
occurrences (all)	0	1	
Headache			
subjects affected / exposed	4 / 30 (13.33%)	1 / 15 (6.67%)	
occurrences (all)	11	6	
Dizziness			
subjects affected / exposed	2 / 30 (6.67%)	0 / 15 (0.00%)	
occurrences (all)	2	0	
Blood and lymphatic system disorders			
Lymphadenopathy			
subjects affected / exposed	0 / 30 (0.00%)	1 / 15 (6.67%)	
occurrences (all)	0	1	
Eye disorders			
Vision blurred			
subjects affected / exposed	0 / 30 (0.00%)	1 / 15 (6.67%)	
occurrences (all)	0	1	
Gastrointestinal disorders			
Abdominal pain			
subjects affected / exposed	2 / 30 (6.67%)	1 / 15 (6.67%)	
occurrences (all)	3	1	
Abdominal pain upper			
subjects affected / exposed	2 / 30 (6.67%)	0 / 15 (0.00%)	
occurrences (all)	2	0	

Diarrhoea			
subjects affected / exposed	4 / 30 (13.33%)	1 / 15 (6.67%)	
occurrences (all)	6	1	
Dyspepsia			
subjects affected / exposed	0 / 30 (0.00%)	1 / 15 (6.67%)	
occurrences (all)	0	1	
Toothache			
subjects affected / exposed	1 / 30 (3.33%)	1 / 15 (6.67%)	
occurrences (all)	1	1	
Vomiting			
subjects affected / exposed	2 / 30 (6.67%)	1 / 15 (6.67%)	
occurrences (all)	4	1	
Skin and subcutaneous tissue disorders			
Skin haemorrhage			
subjects affected / exposed	0 / 30 (0.00%)	1 / 15 (6.67%)	
occurrences (all)	0	1	
Rosacea			
subjects affected / exposed	1 / 30 (3.33%)	1 / 15 (6.67%)	
occurrences (all)	1	1	
Rash			
subjects affected / exposed	0 / 30 (0.00%)	1 / 15 (6.67%)	
occurrences (all)	0	1	
Pruritus			
subjects affected / exposed	2 / 30 (6.67%)	0 / 15 (0.00%)	
occurrences (all)	3	0	
Intertrigo			
subjects affected / exposed	1 / 30 (3.33%)	1 / 15 (6.67%)	
occurrences (all)	1	1	
Urticaria			
subjects affected / exposed	0 / 30 (0.00%)	1 / 15 (6.67%)	
occurrences (all)	0	3	
Erythema			
subjects affected / exposed	0 / 30 (0.00%)	1 / 15 (6.67%)	
occurrences (all)	0	23	
Eczema			

subjects affected / exposed occurrences (all)	1 / 30 (3.33%) 1	1 / 15 (6.67%) 1	
Acne subjects affected / exposed occurrences (all)	2 / 30 (6.67%) 3	0 / 15 (0.00%) 0	
Hidradenitis subjects affected / exposed occurrences (all)	10 / 30 (33.33%) 27	8 / 15 (53.33%) 17	
Renal and urinary disorders Leukocyturia subjects affected / exposed occurrences (all)	0 / 30 (0.00%) 0	1 / 15 (6.67%) 1	
Musculoskeletal and connective tissue disorders Sacral pain subjects affected / exposed occurrences (all)	0 / 30 (0.00%) 0	1 / 15 (6.67%) 1	
Pain in extremity subjects affected / exposed occurrences (all)	4 / 30 (13.33%) 5	0 / 15 (0.00%) 0	
Myalgia subjects affected / exposed occurrences (all)	2 / 30 (6.67%) 2	2 / 15 (13.33%) 2	
Fistula subjects affected / exposed occurrences (all)	0 / 30 (0.00%) 0	1 / 15 (6.67%) 2	
Back pain subjects affected / exposed occurrences (all)	6 / 30 (20.00%) 8	0 / 15 (0.00%) 0	
Arthralgia subjects affected / exposed occurrences (all)	3 / 30 (10.00%) 3	1 / 15 (6.67%) 1	
Arthritis subjects affected / exposed occurrences (all)	0 / 30 (0.00%) 0	1 / 15 (6.67%) 1	
Infections and infestations			

Abscess sweat gland		
subjects affected / exposed	0 / 30 (0.00%)	1 / 15 (6.67%)
occurrences (all)	0	1
Anal abscess		
subjects affected / exposed	0 / 30 (0.00%)	1 / 15 (6.67%)
occurrences (all)	0	1
COVID-19		
subjects affected / exposed	13 / 30 (43.33%)	1 / 15 (6.67%)
occurrences (all)	16	1
Erythrasma		
subjects affected / exposed	1 / 30 (3.33%)	1 / 15 (6.67%)
occurrences (all)	1	1
Gastroenteritis		
subjects affected / exposed	3 / 30 (10.00%)	0 / 15 (0.00%)
occurrences (all)	4	0
Gastroenteritis viral		
subjects affected / exposed	1 / 30 (3.33%)	1 / 15 (6.67%)
occurrences (all)	1	1
Influenza		
subjects affected / exposed	1 / 30 (3.33%)	1 / 15 (6.67%)
occurrences (all)	1	1
Nail infection		
subjects affected / exposed	0 / 30 (0.00%)	1 / 15 (6.67%)
occurrences (all)	0	1
Nasopharyngitis		
subjects affected / exposed	4 / 30 (13.33%)	3 / 15 (20.00%)
occurrences (all)	5	6
Pilonidal disease		
subjects affected / exposed	2 / 30 (6.67%)	0 / 15 (0.00%)
occurrences (all)	2	0
Sinusitis		
subjects affected / exposed	2 / 30 (6.67%)	0 / 15 (0.00%)
occurrences (all)	2	0
Subcutaneous abscess		
subjects affected / exposed	0 / 30 (0.00%)	1 / 15 (6.67%)
occurrences (all)	0	3

Tinea cruris subjects affected / exposed occurrences (all)	0 / 30 (0.00%) 0	1 / 15 (6.67%) 1	
Upper respiratory tract infection subjects affected / exposed occurrences (all)	2 / 30 (6.67%) 3	0 / 15 (0.00%) 0	
Vulvovaginal mycotic infection subjects affected / exposed occurrences (all)	0 / 30 (0.00%) 0	1 / 15 (6.67%) 1	
Metabolism and nutrition disorders Diabetes mellitus subjects affected / exposed occurrences (all)	2 / 30 (6.67%) 2	0 / 15 (0.00%) 0	
Type 2 diabetes mellitus subjects affected / exposed occurrences (all)	0 / 30 (0.00%) 0	1 / 15 (6.67%) 1	

More information

Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

Date	Amendment
04 July 2022	<p>The wording of two secondary endpoints was adapted to clarify and make them more informative. The phrase "Number of patients having at least one flare (defined as at least 25% increase in AN count with a minimum increase of 2 relative to baseline) up to Week 12" was changed to "Occurrence of at least one flare...", and "Number of patients having at least 30% reduction from baseline in Numerical Rating Scale (NRS30) in Patient's Global Assessment of HS Pain up to Week 12" was revised to "Achievement of at least 30% reduction..."</p> <p>Several minor changes were made to the flow chart and text in different Clinical Trial Protocol (CTP) sections to ensure consistent wording throughout the CTP, Investigator Site File (ISF), and Trial Statistical Analysis Plan (TSAP). Additional information regarding peripheral neuropathy was added as a mitigation strategy to address the three cases reported as Guillain-Barré syndrome in spesolimab trials.</p> <p>The decision-making process regarding the continuation of trial treatment for patients receiving rescue therapy was also updated, allowing investigators to decide independently without needing prior discussion with the sponsor. To improve pain relief options for patients over the two-year trial period, synthetic opioids and tramadol were removed from the restricted medications list, allowing their use for both HS and non-HS indications.</p> <p>The requirement for investigators to write a report on the Columbia-Suicide Severity Rating Scale (C-SSRS) was replaced by a simpler confirmation in the source notes. Additionally, peripheral neuropathy was added as an Adverse Event of Special Interest (AESI) to update reporting requirements and ensure that all cases are analyzed promptly.</p>

Notes:

Interruptions (globally)

Were there any global interruptions to the trial? No

Limitations and caveats

None reported