

Achieving Clear or Almost-Clear Skin Clearance in Moderate-to-Severe Psoriasis is Associated with Clinically Meaningful Itch Reduction and Lower Healthcare Costs

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Background

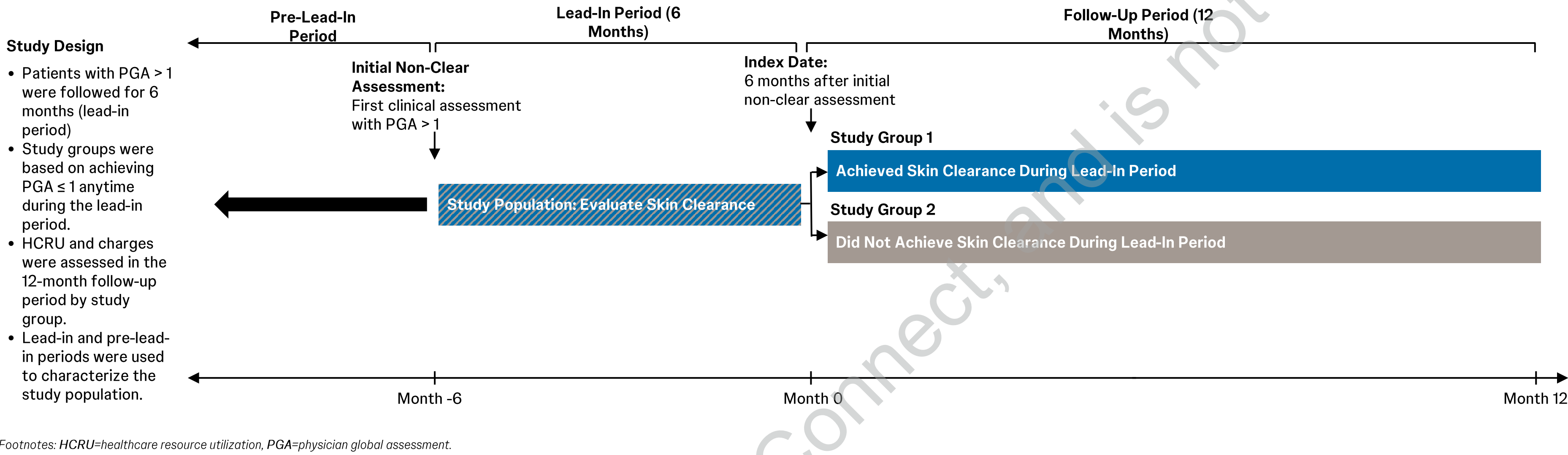
- Achieving skin clearance is the central treatment goal in the clinical management of moderate-to-severe plaque psoriasis (PsO), as it reflects effective disease control and correlates with improved patient outcomes. Complete or near-complete clearance of lesions has been associated with better health-related quality of life (HRQoL), reduced symptom burden, and greater treatment satisfaction.¹
- Itch is one of the most burdensome and difficult-to-treat symptoms of PsO, often persisting even when skin lesions are partially controlled. Uncontrolled itch has a significant impact on HRQoL.²
- Real-world data on the relationship between skin clearance, itch reduction, and healthcare resource utilization (HCRU) remain limited, highlighting the need for further investigation.³

Objectives

- To characterize patients based on skin clearance achievement and to assess the impact of skin clearance on itch control, HCRU, and associated costs.

Methods

- Linked electronic health record and claims data from specialty dermatology networks in the OMNY Health platform from 2017 to 2024 were analyzed.
- Patients aged ≥ 18 years with a PsO diagnosis code were selected if they had a physician global assessment (PGA) of non-clear skin (i.e., PGA > 1) and a follow-up PGA measurement within six months of the initial non-clear assessment (designated as lead-in period).
- Clear skin was defined as a PGA of clear or almost clear (0 or 1). Patients were grouped based on skin clearance achievement during the lead-in period and indexed at the end of the lead-in period.
- Patients were characterized at the index date (demographics) and during the lead-in period (disease activity). Itch was measured using the itch numeric rating scale (NRS). All-cause HCRU was assessed during the 6-month lead-in period and 12 months following the index date (designated as follow-up period).



Results

Baseline Characteristics of Study Population

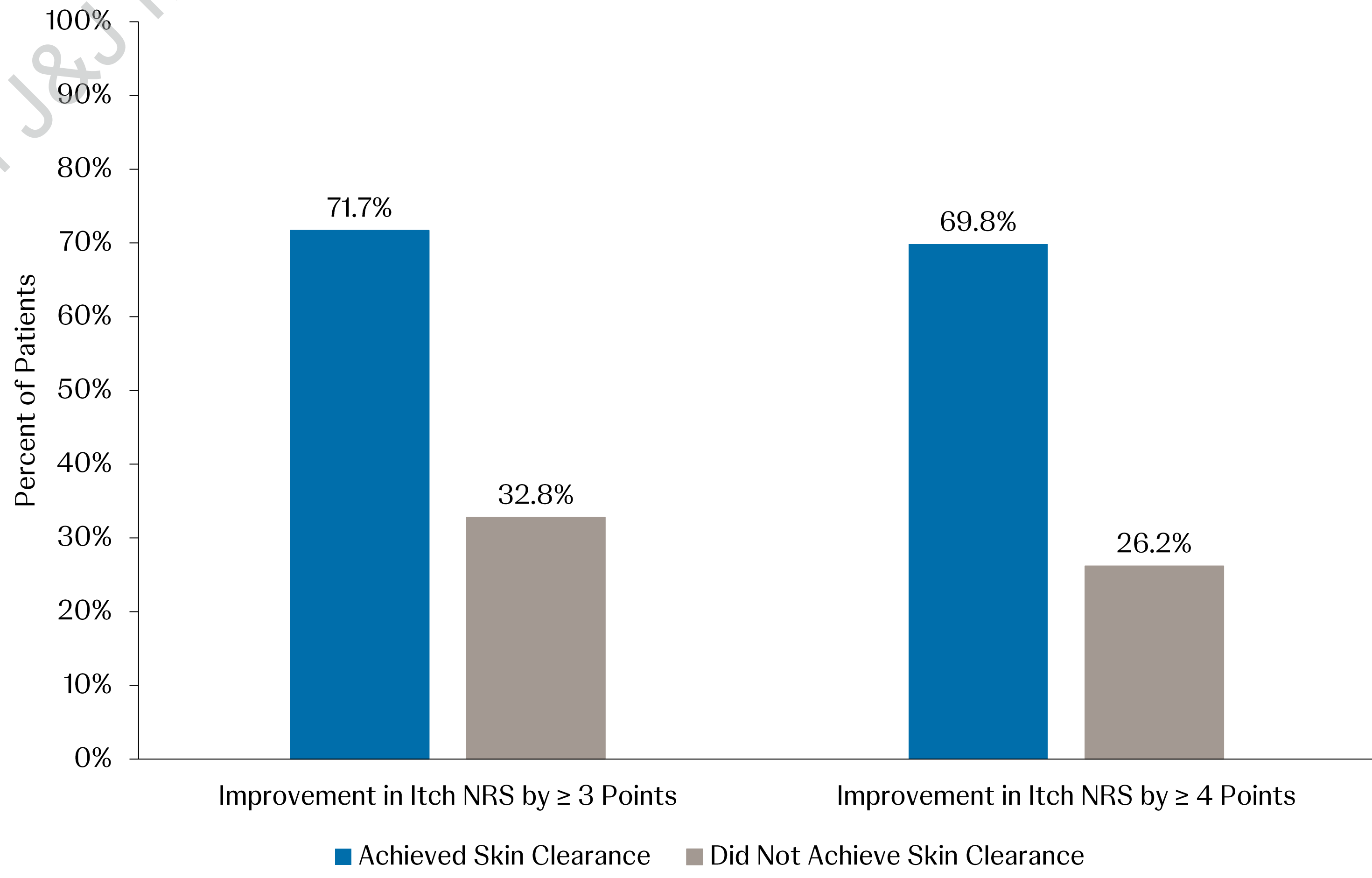
Baseline Characteristics	Achieved Skin Clearance (N = 7,194)	Did Not Achieve Skin Clearance (N = 17,239)
Demographics at Index Date		
Age, yrs	53.7 (16.5)	54.1 (16.5)
Female	55.6%	55.4%
Race, Asian/Black/Other/White	3.8/5.5/4.6/86.1%	4.2/6.6/5.3/83.9%
BMI, kg/m ²	30.3 (7.1)	31.0 (7.4)
Disease Characteristics		
PsO disease duration in OMNY data ^a , yrs	1.0 (1.7)	1.0 (1.7)
% BSA with PsO ^b , mean (SD); median	15.1 (17.5); 10	18.4 (19.7); 10
PGA score ^b , Moderate (3)/Severe (4)	55.8/12.9%	61.5/18.5%
Itch NRS (0-10) ^b , mean (SD); median	5.3 (2.9); 5	5.8 (2.8); 6
Medical History/Comorbidities		
Cardiovascular disease	53.0%	55.0%
Type 2 diabetes	19.6%	21.9%
Cancer	12.6%	14.2%
Asthma	11.2%	12.4%
Allergic rhinitis	19.1%	18.1%
Anxiety or depression	29.3%	32.1%
Charlson comorbidity index	2.7 (3.1)	2.9 (3.2)
Prior Treatments		
Topical steroids	82.4%	85.0%
Nonsteroidal topical agents ^c	43.0%	48.2%
Oral steroids ^d	24.9%	26.1%
Systemic agents/DMARDs ^e	18.7%	19.3%
Apremilast	10.3%	11.4%
Methotrexate	6.8%	6.6%
Other systemic agents/DMARDs ^f	3.9%	4.0%
Biologics ^g	19.6%	16.0%
TNF-alpha inhibitors ^g	10.9%	9.1%
Interleukin inhibitors ^h	10.7%	8.7%
Number of biologics	0.2 (0.6)	0.2 (0.5)
Opioids	19.8%	20.6%

Footnotes: Data shown are mean (SD) unless otherwise noted. All summary statistics are based on non-missing data. ^aTime from initial PsO diagnosis code to index visit and may not represent full disease duration. ^bAt initial non-clear assessment. ^cComprises the following: ketoconazole, anthralin, calcipotriene, calcitriol, pimecrolimus, tacrolimus, tazarotene. ^dComprises the following: dexamethasone, methylprednisolone, prednisone, prednisolone. ^eSubcategories are not mutually exclusive and may not sum to total. ^fComprises the following: apremilast, deucravacitinib, acitretin, tofacitinib, methotrexate, cyclosporine, chloroquine/hydroxychloroquine, sulfasalazine. ^gComprises the following: adalimumab, certolizumab, etanercept, infliximab. ^hComprises the following: secukinumab, ustekinumab, brodalumab, ixekizumab, guselkumab, tirakizumab, risankizumab. BMI=body mass index, BSA=body surface area, DMARD=disease-modifying antirheumatic drug, kg=kilograms, m=meters, NRS=Numerical Rating Scale, PGA=physician global assessment, PsO=plaque psoriasis, TNF=tumor necrosis factor, yrs=years.

Key Takeaways

- ✓ Skin clearance was achieved in fewer than 30% of real-world patients, underscoring a substantial gap in treatment effectiveness for moderate-to-severe plaque psoriasis.
- ✓ Achieving clear or almost-clear skin was associated with a clinically meaningful reduction in itch, a major driver of patient burden and impaired quality of life.
- ✓ Patients who did not achieve skin clearance incurred high healthcare costs without the benefit of reduced itch.

Percent of Patients With Clinically Meaningful Itch NRS Improvement During the Lead-In Period



Footnotes: Analyses were limited to patients with an Itch NRS at the initial non-clear assessment of at least 3 (for improvement of ≥ 3 points analysis) or 4 (for improvement of ≥ 4 points analysis). NRS=Numerical Rating Scale.

Mean Healthcare Resource Utilization and Charges Per Patient During the Follow-Up Period

