

THE POWER OF IMAGERY IN CLINICAL MEDICINE: LEVERAGING CLINICAL PHOTOS FROM THE VISIBLE STUDY TO FOSTER CONVERSATIONS BETWEEN CLINICIANS AND PATIENTS

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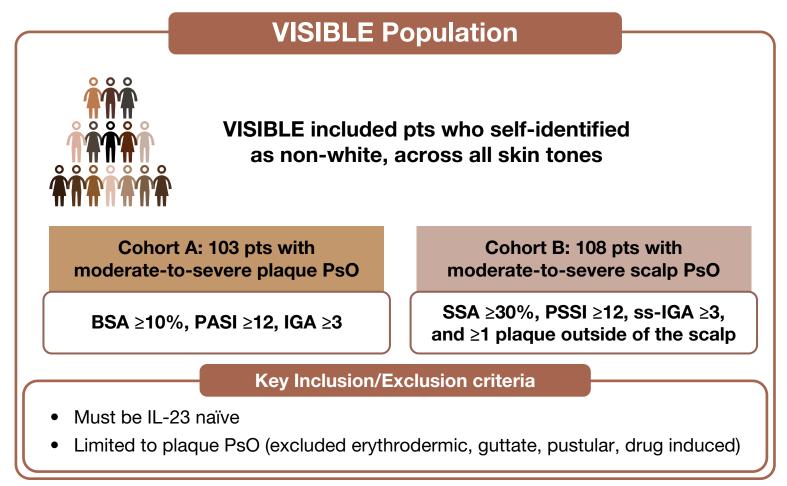
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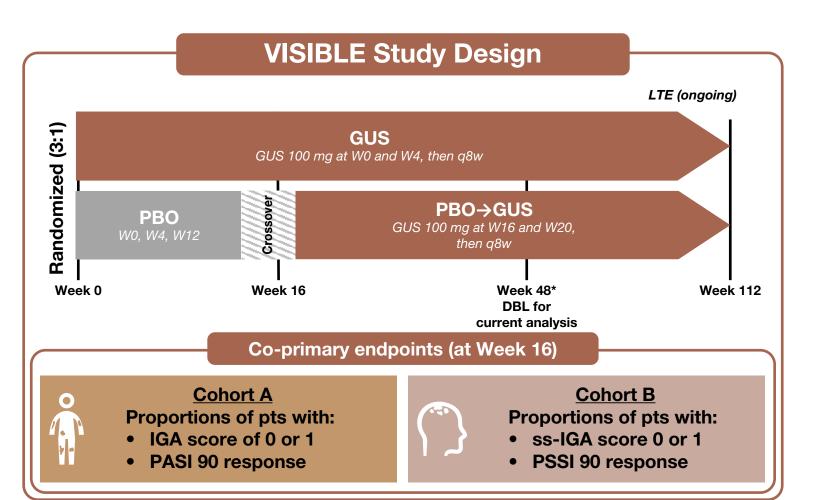
BACKGROUND/OBJECTIVE

- Psoriasis (PsO) is often described as well-defined, inflamed, red or pink plaques with scaling; however, in individuals with skin of color (SOC), this description is not always accurate^{1,2}
- Only 4–19% of images in dermatology textbooks are on darker skin tones³
- VISIBLE (NCT05272150) evaluated efficacy of guselkumab (GUS) versus placebo (PBO) in participants (pts) with moderate-to-severe plaque PsO or scalp PsO in SOC
- As a first-of-its-kind study 100% dedicated to people of color with PsO, VISIBLE enabled the development of a digital photo library to address the clinical knowledge gap for visualizing PsO in a range of skin tones; here we present a snapshot of this tool
- To compile a PsO digital photo library from VISIBLE clinical trial pts with a range of skin tones
- To educate providers and patients on the clinical features of PsO in all skin tones
- To improve diagnostic accuracy of PsO across all skin tones

METHODS: THE VISIBLE STUDY

Figure 1. VISIBLE Population and Study Design





BSA=Body surface area; DBL=Database lock; GUS=Guselkumab; IGA=Investigator's Global Assessment; IL=Interleukin; LTE=Long-term extension; PASI=Psoriasis Area and Severity Index; PBO=Placebo; PSSI=Psoriasis Scalp Severity Index; **Ps0**=Psoriasis; **Pts**=Participants; **q8w**=Every 8 weeks; **SSA**=Scalp surface area; **ss-IGA**=Scalp-specific IGA; **W**=Week.

- Pts in the trial gave consent for the medical use of their photos
- Photography was done using standard and cross polarized lighting; cross polarization enhances visualization of erythema and pigmentation, especially in SOC
- Standard positions were used for body and scalp photos, with software assistance to match positioning between visits
- The protocol included photo collection at screening and Weeks 0, 4, 12, 16, 20, 24, 32, 44, 48, 52, 68, 84,

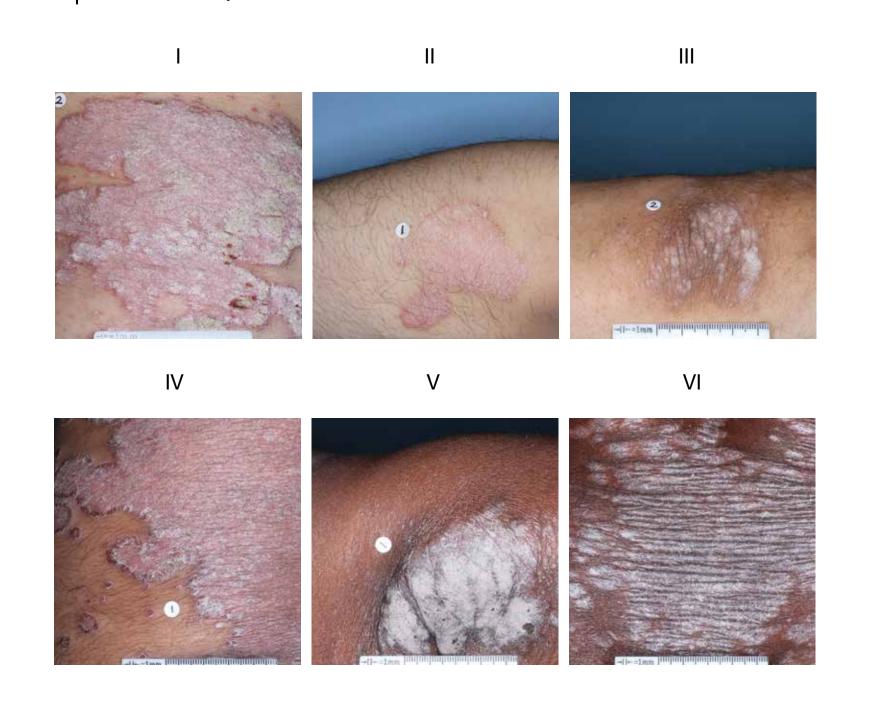
CONCLUSIONS

- The first-of-its-kind VISIBLE study recruited a diverse population of pts with moderate-to-severe plaque PsO across all skin tones and was intentionally designed to collect standardized serial photos to help address the dearth of photos of darker skin tones in medical and educational materials
- VISIBLE pts' Ps0:
 - ranged in color from traditional erythematous spectrum to violaceous and brown
 - exhibited diverse morphology ranging from small, scattered plaques, to large, thin, or very thick plaques, with varied scale features even within the same pt
- exhibited a broader differential for PsO across diverse skin tones because of the variations in color and morphology
- The VISIBLE study starts a photo library that is an expandable, searchable, digital platform for bridging education gaps around treating those currently underrepresented

VISIBLE REPRESENTS A DIVERSE POPULATION ACROSS SKIN TONES Cohort A & Cohort B (N=211) Cohort A & B Race/Ethnicity (N=211) Alaska Native, 0.5% Pacific Islander or Native Hawaiian, 0.5% African American/Black (n=23) American Indian or Alaska Native (n=1) Asian (n=63) East Asian (n=14) Filipino (n=7) Asian, 29.9% South Asian (n=22) Southeast Asian (n=20) Non-white Hispanic/Latino (n=94) Central American (n=9) Cuban (n=13) Hispanic or Latino Mexican (n=50) 44.5% Puerto Rican (n=5) Black, 11.4% South American (n=15) Middle Eastern (n=13)

Snapshot of the VISIBLE Photo Library

The VISIBLE study provides a library of images representative of all Fitzpatrick skin types (as determined by colorimetry measurement of non-sun exposed skin)



EXPANDING THE PSORIASIS DIFFERENTIAL

Data on file. Johnson & Johnson. ^aSubcategories shown were reported in ≥5 pts; ^bEfficacy analysis population, all pts who met Cohort B inclusion criteria. **Pts**=Participants.

Psoriasis may be more challenging to diagnose on diverse skin tones because it may require a broader differential, which may explain when it is 4x more likely to require a biopsy for diagnosis of skin of color⁴

erythematous plaque with silvery scale"

Differential Diagnosis may include:

 Lichen Planus Tinea Versicolor

Native Hawaiian or Pacific Islander (n=1)

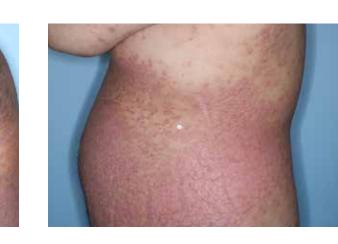
Multiracial (n=12)

Other (n=4)

- Atopic Dermatitis
- Pityriasis Rubra Pilaris
- Crusted Scabies
- Drug Eruption Erythema Dyschromicum Perstans



These are photos that do not fit the classic morphology description of "well-demarcated



PSORIASIS MORPHOLOGY MAY VARY ACROSS SKIN TONES

 Morphology descriptors include: color (violaceous, brown, pink, etc.), scale (ostraceous, micaceous, thick, etc.) and size (large, small plaques, etc.), and groupings (agminated, confluent, etc.)

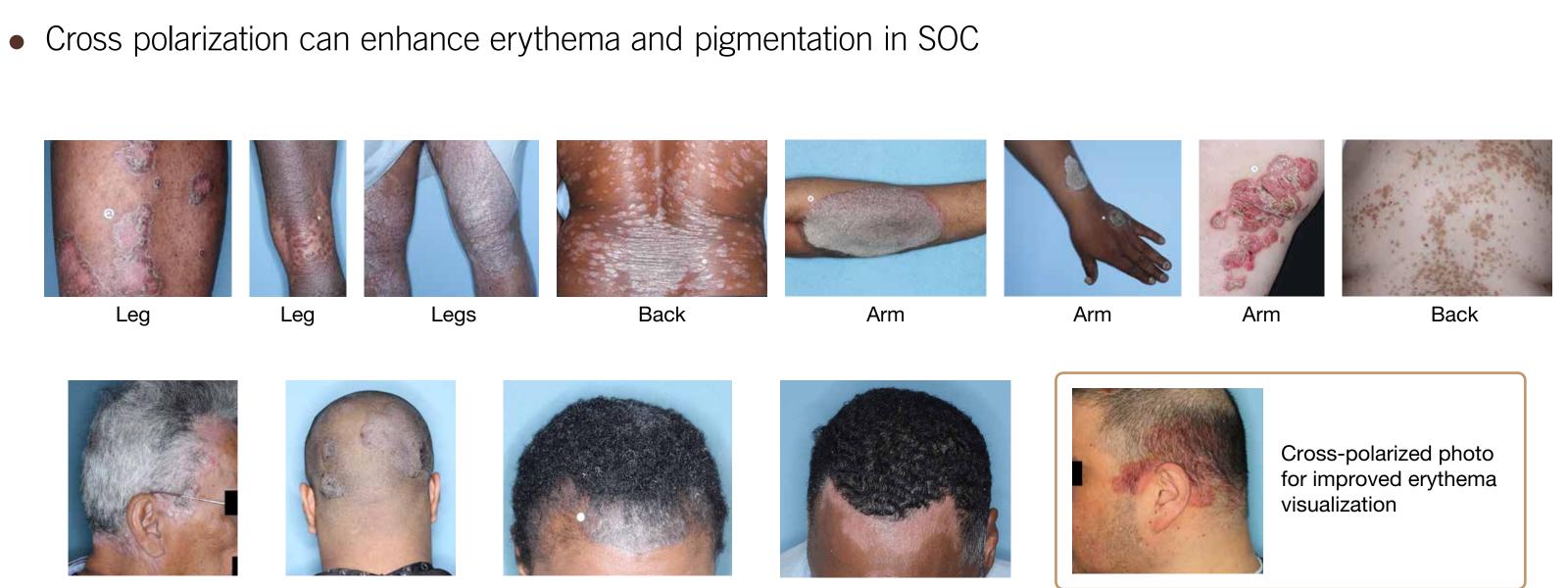
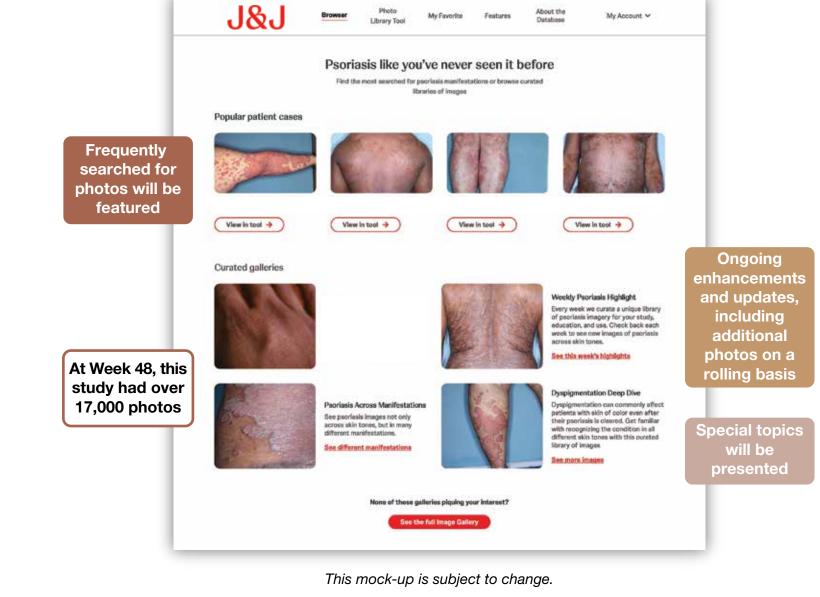
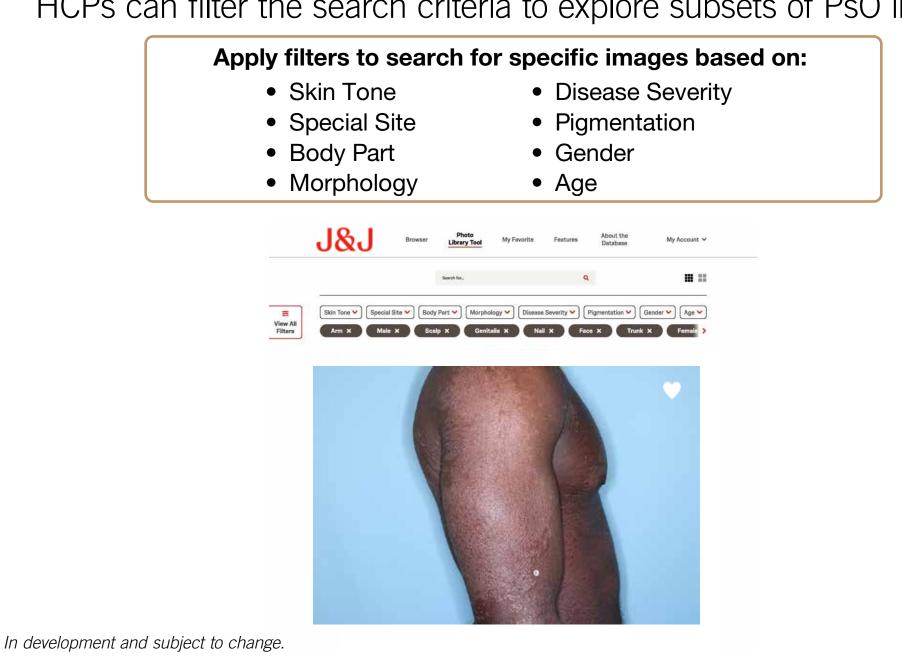


PHOTO LIBRARY INTERFACE ELEMENTS Health Care Professionals (HCPs) and patients can find the most searched for PsO manifestations or browse curated libraries of images



HCPs can filter the search criteria to explore subsets of PsO images



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