

Prior Treatment Patterns, Clinical Characteristics, and Disease Burden Among Early Icotrokinra Initiators

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Objective

- Icotrokinra (ICO), a first-in-class targeted oral peptide, precisely blocks the interleukin (IL)-23 receptor and is approved for the treatment of moderate-to-severe plaque psoriasis (PsO) in adults and adolescents ≥12 years of age who are candidates for systemic therapy¹
- This study aims to characterize the demographics, clinical characteristics, prior treatment patterns, and disease burden of early initiators of ICO in routine clinical practice

Methods

Study Design and Data Source

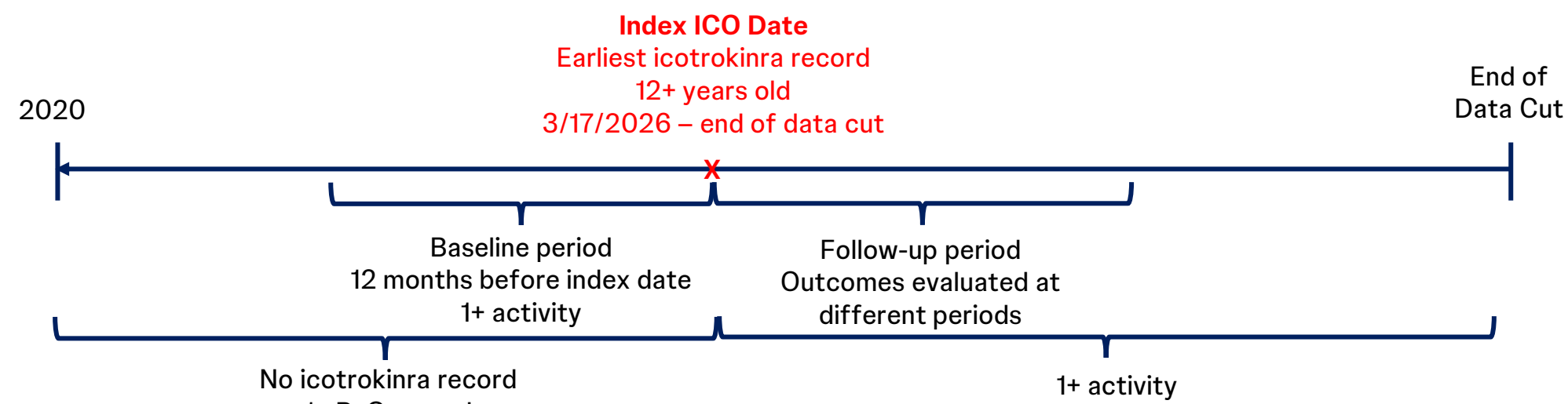
- A retrospective cohort study using Modernizing Medicine (ModMed) Dermatology Real World Data (RWD)
- ModMed is a de-identified dataset derived from the Electronic Medical Assistant (EMA®), a dermatology-specific electronic health record (EHR) database, and comprises data from private-practice dermatologists.
- ModMed RWD are geographically and age representative of the United States population

Study Population

- Patients aged ≥12 years with PsO who initiated ICO on or after FDA approval¹ (March 17, 2026 through July 3, 2026) (**Figure 1**). Index date was defined as the first ICO record
- A patient was included in the ModMed database if they had at least one PsO diagnosis*
- Eligible patients for this study had ≥1 PsO diagnosis before index, no prior ICO use, and ≥1 activity record during the 12-month baseline period (**Figure 2**)

*Excluded patients with the following diagnoses: Generalized Pustular Psoriasis, Pustular Psoriasis, Psoriatic Arthropathy, Psoriatic Arthritis, Dactylitis (Psoriatic), Guttate Psoriasis, Guttate Psoriasis (known spelling variant in the source EHR), Palmoplantar Pustulosis, Palmoplantar Psoriasis, Palmoplantar Dermatitis, Acrodermatitis Continua of Hallopeau, Dermatitis Repens)

Figure 1. Study Design



Data Analysis and Outcome Measures

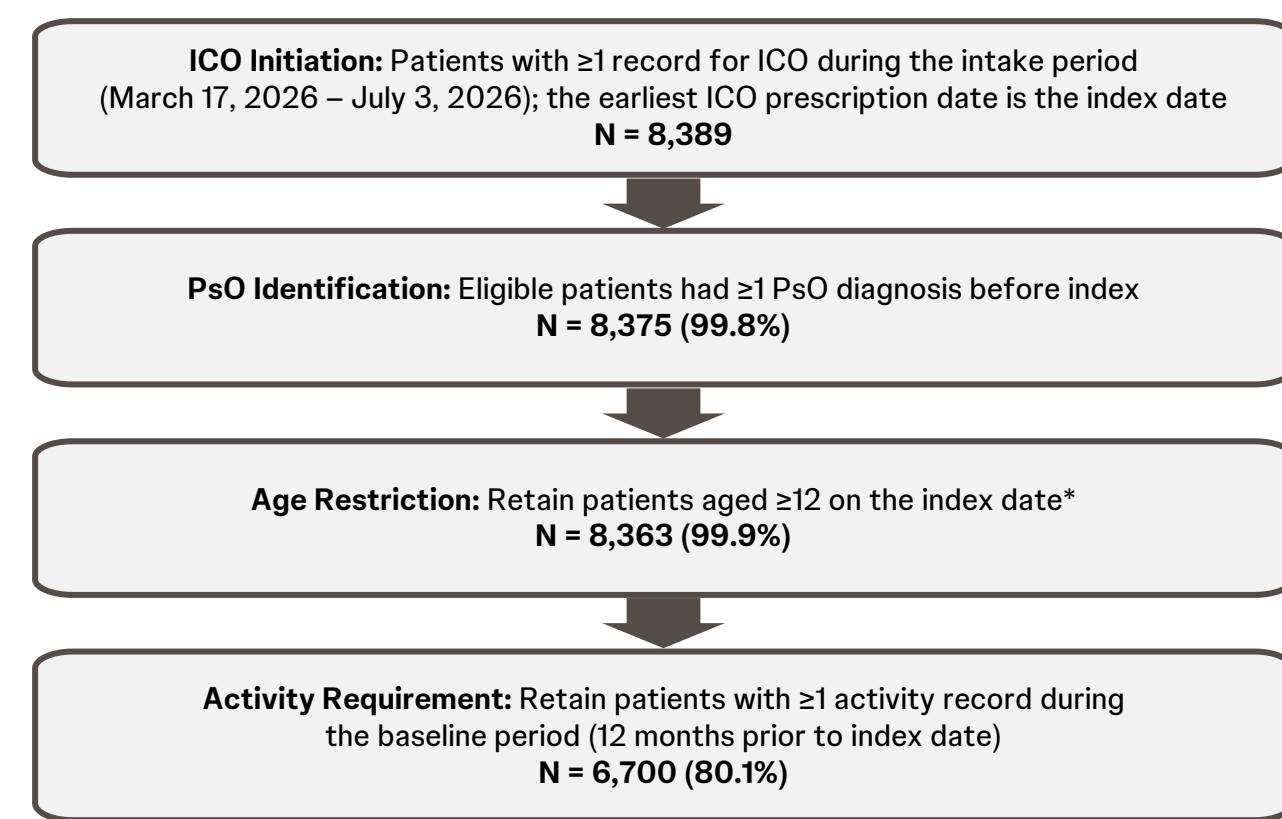
- Patient baseline demographics, comorbidities, treatment history, and clinical outcomes were summarized descriptively (**Table 1**)
 - Percentages (%) were calculated among those with available data
- Prior treatments were categorized using drug name, Generic Product Identifier (GPI) and Healthcare Common Procedure Coding System (HCPCS) codes as:
 - Advanced treatments (ADTs; biologic disease-modifying antirheumatic drugs [bDMARDs], oral small-molecule drugs [SMDs]) or conventional treatments (non-ADTs; topical treatments, conventional synthetic disease-modifying antirheumatic drugs [csDMARDs], phototherapy, opioids, systemic therapies)
- Baseline treatment outcomes and disease status were assessed from the most recent record within 3 months prior to or on the index date. Assessments included:
 - Physician Global Assessment² (PGA)
 - Body Surface Area³ (BSA)
 - Itch Numeric Rating Scale⁴ (NRS)
- Body site of disease involvement was captured from both patient-reported assessments and diagnosis-associated clinical documentation and categorized into clinically meaningful anatomical regions, including feet, head, scalp, face, arms, legs, genitals, chest/abdomen (midsection), and hands
- Diagnosis status was provided by clinicians. Descriptions were standardized into clinically relevant categories, including: improved, well controlled, resolving, resolved, inadequately controlled, worsening, stable, and unchanged

Results

Patient Characteristics

- A total of 6,700 ICO initiators meeting study eligibility were identified (**Figure 2**)
- The mean (SD) age was 50.8 years (17.6), with 47.1% of patients aged 40 to 64 years; 55.4% of patients were female and 46.0% were White (84.0% among patients with a known race) (**Table 1**)
- The most common baseline comorbidities were anxiety (12.7%), hypertension (11.9%), obesity (11.2%), and diabetes (10.1%)

Figure 2. Patient Attrition



Abbreviations: ICD, International Classification of Diseases; ICO, icotrokinra.
*Date of birth was set as mid-year (July 1) of the date of birth year ModMed provides.

Table 1. Patient Demographics and Clinical Characteristics

Characteristic	N = 6,700
Demographics	
Age category at index, n (%)	
12–17 years	174 (2.6)
18–39 years	1,706 (25.5)
40–64 years	3,153 (47.1)
≥65 years	1,667 (24.9)
Sex, n (%)	
Male	2,979 (44.5)
Female	3,709 (55.4)
Unknown	12 (0.2)
Race, n (%)	
White	3,085 (46.0)
African American	216 (3.2)
Asian	193 (2.9)
Other	179 (2.7)
Unknown	2,562 (38.2)
Ethnicity, n (%)	
Hispanic or Latino	369 (5.5)
Not Hispanic or Latino	2,735 (40.8)
Unknown	3,596 (53.7)
Clinical Characteristics	
General comorbid conditions, n (%)	
Anxiety	850 (12.7)
Hypertension	794 (11.9)
Obesity*	749 (11.2)
Diabetes	678 (10.1)
Depression	674 (10.1)
Psoriatic arthritis	249 (3.7)
Cancer	141 (2.1)
Pain	115 (1.7)
Hypothyroidism	89 (1.3)
Coronary artery disease	74 (1.1)

*Percentages (%) were calculated among those with available information
*Patients with a BMI of 30 kg/m² or greater were classified as having obesity

Treatment Experience at Baseline

- Most were treatment-experienced during baseline (88.2%); 3,216 (48.0%) had received only non-ADT, 703 (10.5%) had received only ADT, and 1,990 (29.7%) had received both treatment types (**Figure 3**)
- Among 2,693 patients with prior ADT, 46.7% received bDMARDs and 58.8% received oral SMDs; IL-23i and IL-17i were the most used bDMARDs (29.6% and 16.1%, respectively) (**Figure 4**)
- Among 5,206 patients with prior non-ADTs, 98.7% received topical treatments and 8.6% received csDMARDs or phototherapy. Corticosteroids were the most common topical treatment (84.4%) (**Figure 5**)

Figure 3. Treatment by Group

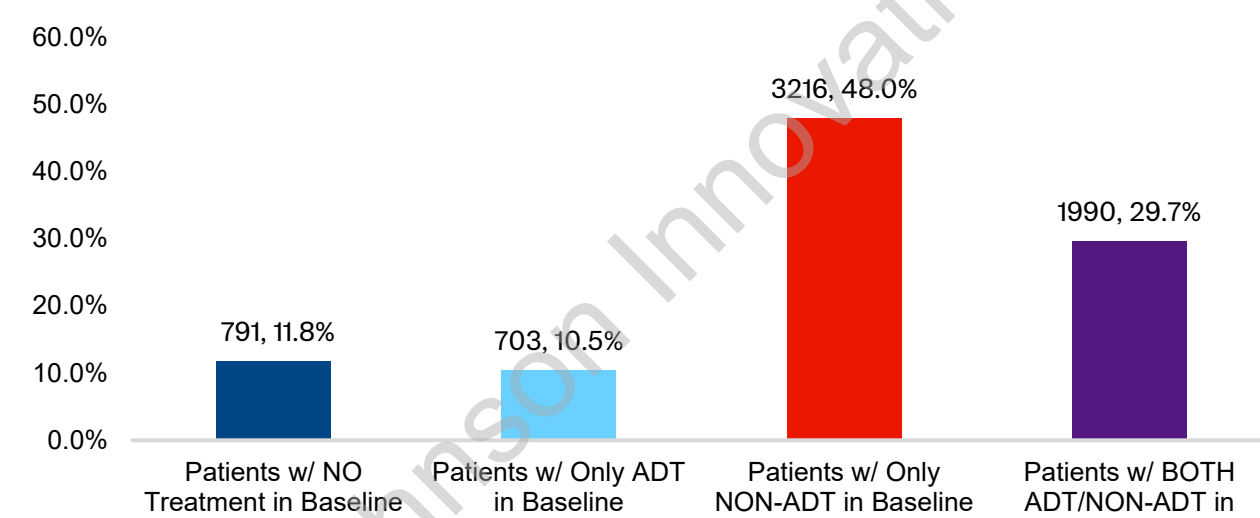


Figure 4. Advanced Treatment by Class

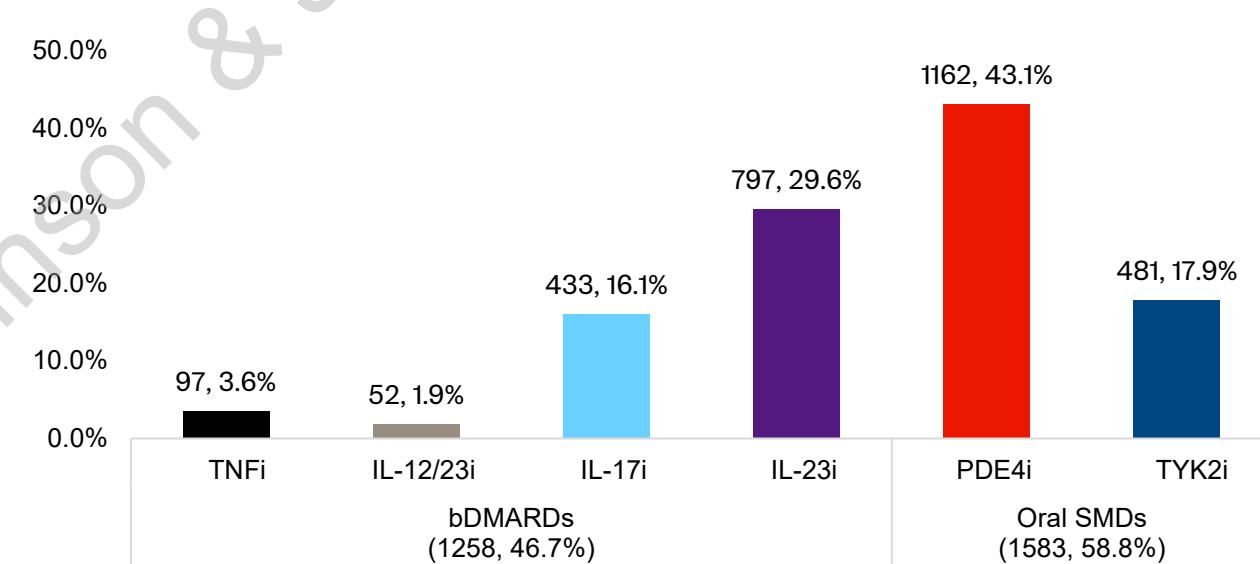
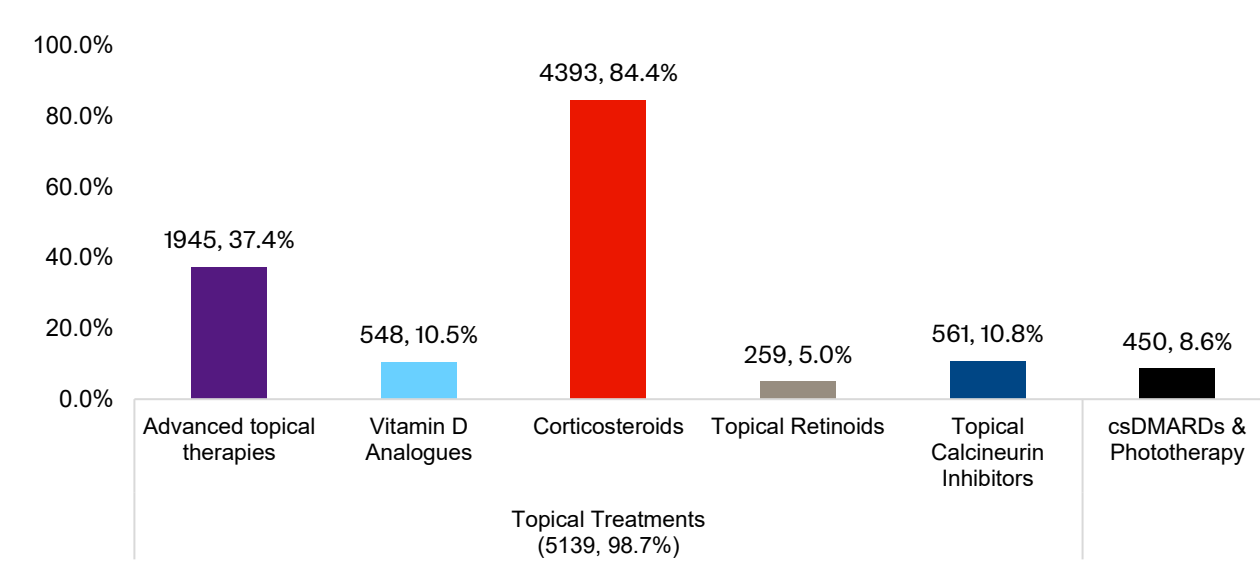


Figure 5. Non-Advanced Treatment



Abbreviations: ADT, advanced therapy; bDMARD, biologic disease-modifying antirheumatic drug; csDMARD, conventional synthetic disease-modifying antirheumatic drug; IL, interleukin; IL-12/23i, interleukin-12/23 inhibitor; IL-17i, interleukin-17 inhibitor; IL-23i, interleukin-23 inhibitor; PDE4i, phosphodiesterase-4 inhibitor; SMD, small-molecule drug; TNFi, tumor necrosis factor inhibitor; TYK2i, tyrosine kinase 2 inhibitor.
*Percentages (%) were calculated among those with available information

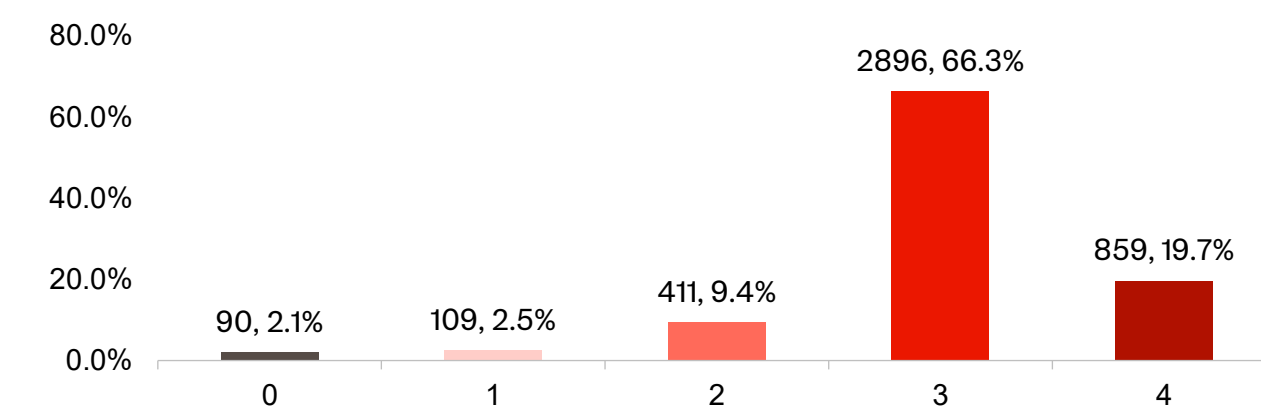
Outcome Measures at Baseline Among Patients with Data

- Among 4,365 patients with available data, disease severity per PGA was moderate (score = 3) in 66.3% and severe (score = 4) in 19.7% of patients (**Figure 6**)
- In the 5,484 patients with available BSA data, 47.5% had moderate BSA (3–10%) and 43.7% had severe BSA involvement (>10%) (**Figure 7**)
- Among 4,961 patients with available self-reported itch NRS data, 22.9% reported moderate itch (score 4–5) and 52.7% reported severe itch (score ≥6) (**Figure 8**)

Outcome Measures at Baseline Among Patients with Data (Cont.)

- Among 2,803 patients with documented high-impact affected body sites, scalp (27.3%), head (22.7%), face (22.1%), hands (11.5%), genitals (7.5%), and feet (6.2%) were commonly involved (**Figure 9**)
- Among the 4,650 patients with clinician-reported baseline disease status, 81.4% had inadequately controlled or were not at treatment goal, and 10.8% had worsening disease (**Figure 10**)

Figure 6. Physician Global Assessment



Scale: 0 = clear, 1 = almost clear, 2 = mild, 3 = moderate, 4 = severe disease

Figure 7. Body Surface Area

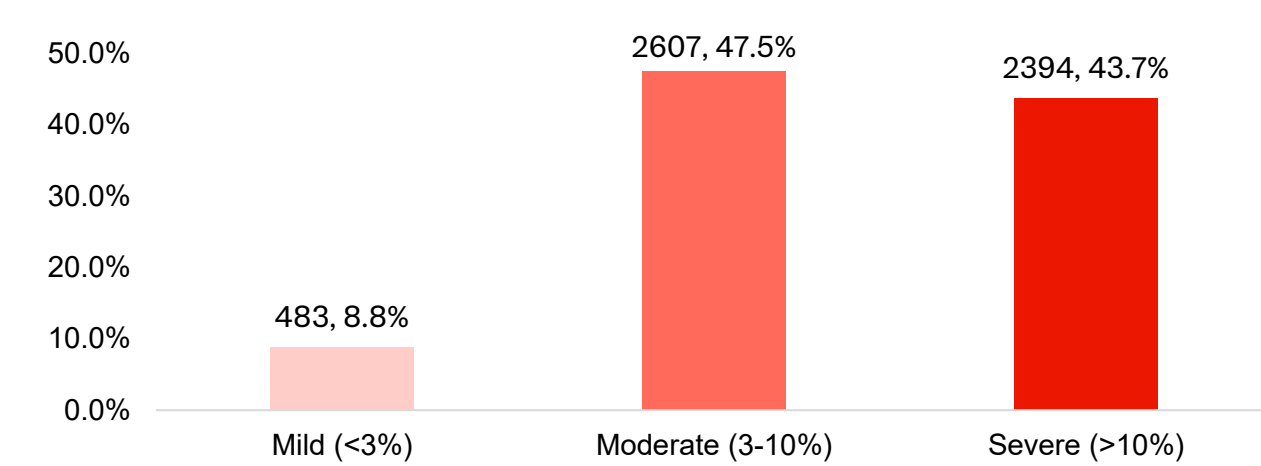
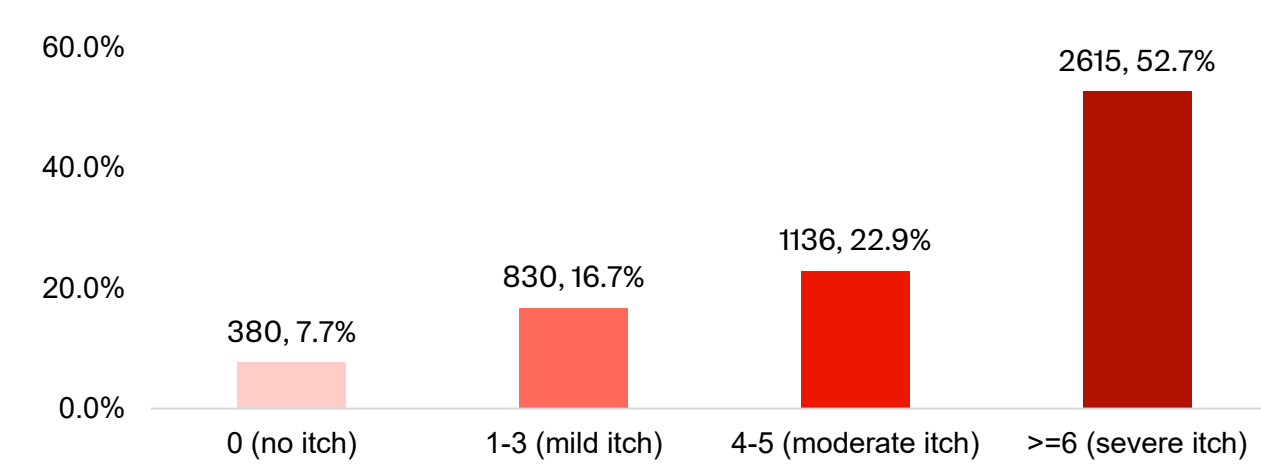
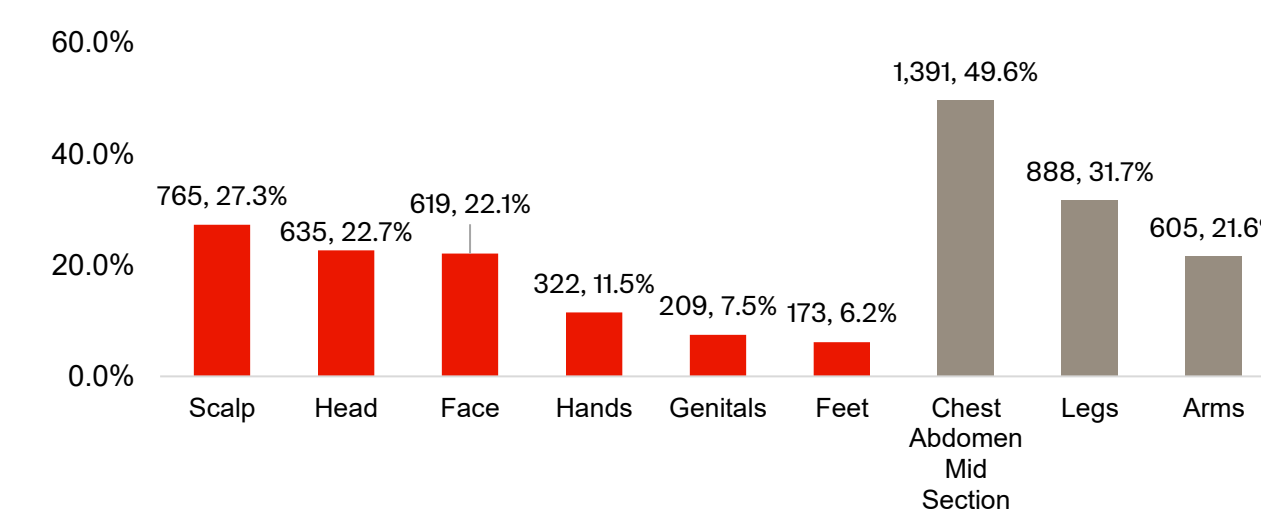


Figure 8. Itch Numeric Rating Scale



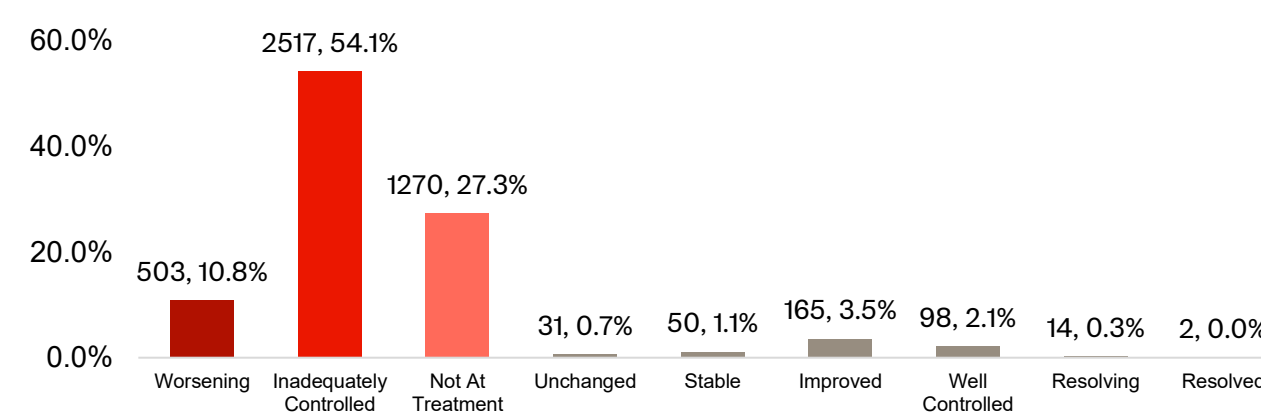
Scale: 0 = no itch, 10 = worst imaginable itch

Figure 9. Affected Body Sites



Note: Scalp includes records explicitly documented as scalp or hair-related terms. Head includes other head-region anatomical terms (ear, temple, tragus, concha, postauricular region, etc.). Categories are assigned according to predefined mapping rules and are not intended to imply separate anatomical systems.

Figure 10. Diagnosis Status



Note: The pre-index outcomes were assessed from the most recent record within 3 months prior to or on the index date.
*Percentages (%) were calculated among those with available information

Synopsis

This retrospective cohort study used Modernizing Medicine Dermatology Real World Data to characterize early initiators of icotrokinra in routine clinical practice

Among 6,700 initiators, 88.2% were treatment-experienced; among those with available data, 86.0% had moderate-to-severe disease based on Physician Global Assessment, 52.7% had an itch Numeric Rating Scale score ≥6, and 81.4% were not at treatment goal

These findings demonstrate that regardless of prior treatment exposure, early icotrokinra initiators experienced substantial disease burden

Conclusions

Early ICO initiators had substantial disease burden at baseline, including moderate-to-severe skin involvement, persistent itch, involvement of high-impact sites, and failure to achieve treatment goals—highlighting an ongoing unmet need in PsO

As a targeted oral peptide, ICO provides an innovative treatment option for PsO that may address the needs of patients with inadequate disease control

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