

Biologics tied to greater reduction in pediatric psoriasis

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(HealthDay)—Biologics seem to be associated with greater reduction in

psoriasis severity scores and higher drug survival rates than methotrexate in pediatric patients treated in a real-world setting, according to a study published online Feb. 5 in *JAMA Dermatology*.

Inge M.G.J. Bronckers, M.D., from Radboud University in Nijmegen, Netherlands, and colleagues retrospectively reviewed [medical records](#) from 20 European and North American centers to assess real-world, six-month reduction in [psoriasis](#) severity and long-term drug survival (rate and duration of adherence to a specific drug) of methotrexate versus biologics to treat moderate-to-[severe plaque psoriasis](#) in 234 children.

The researchers found that mean age at initiation was 11.6 years for methotrexate and 13.3 years for biologics (73.2 percent for etanercept; $P = 0.002$). At six-month follow-up, ≥ 75 percent improvement in Psoriasis Area and Severity Index (PASI75) was achieved in 12 of 30 patients (40.0 percent) receiving methotrexate and 20 of 28 patients (71.4 percent) receiving biologics, and Physician Global Assessment was clear/almost clear (PGA 0/1) in 41 of 115 patients (35.6 percent) receiving methotrexate and 18 of 37 patients (48.6 percent) receiving biologics. Achieving PASI75 and/or PGA 0/1 at six months was more likely with biologics versus methotrexate (PASI75: odds ratio, 4.56 [95 percent confidence interval, 2.02 to 10.27; $P = 0.001$]; PGA 0/1: odds ratio, 2.00; 95 percent confidence interval, 0.98 to 4.00; $P = 0.06$]). Overall drug survival rates for [methotrexate](#) were 77.5, 50.3, and 35.9 percent at one, three, and five years, respectively; the corresponding numbers for biologics were 83.4, 64.3, and 57.1 percent. Discontinuation owing to lack of response was similar (hazard ratio, 1.64; 95 percent confidence interval, 0.80 to 3.36; $P = 0.18$).

"In addition to their documented efficacy, biologics are convenient to use, require less monitoring, and are associated with fewer treatment-related toxic effects than conventional agents in children, making them an attractive treatment option," the authors write.

Several authors disclosed financial ties to the pharmaceutical industry.

More information: [Abstract/Full Text \(subscription or payment may be required\)](#)

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