

Clinical Characteristics of Generalized Pustular Psoriasis Flares in the Real-World Setting

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GPP patients continue to experience frequent flares with current traditional and off-label therapies in the real-world setting; more active disease, gender, race, ethnicity, and history of systemic infection are associated with experiencing a flare

INTRODUCTION

- Generalized pustular psoriasis (GPP) is a rare, chronic, often unpredictable, severe multisystemic inflammatory skin disease^{1,2}
- In the acute phase, patients with GPP experience flares – unpredictable episodes of extensive, sterile pustular eruptions – often accompanied by systemic symptoms^{1,2}
 Accurate patient cohort identification from realworld data is key to performing accurate epidemiologic research³; however, GPP flares often go unreported because there is no specific procedure code for them in structured electronic health records (EHRs)

RESULTS

- Of 7.4 million specialty dermatology network patients, 2,154 had ≥ 1 GPP diagnosis code, and 638 patients met remaining eligibility criteria; mean follow-up time was 1.5 years
 - Average age was 58 years (standard deviation: 15 years), and most patients were female (74%), white (88%), and not Hispanic or Latino (93%)
 - Previous treatments at index included topical steroids (85%), other topical agents (38%), other systemic agents (14%), oral steroids (13%), and biologics (11%)
- Mean (median) body surface area was 11% (5%); 60% of patients had moderate or severe physician global assessment; 47% of patients reported pain due to GPP
 Of the 638 study patients, 404 (63%) had at least 1 flare, and 106 had 2 or more flares
- As such, GPP patient characteristics and clinical characteristics of GPP flares in the real-world setting are not well characterized

PURPOSE

- To describe underlying demographic, clinical, and disease activity characteristics of GPP patients by flare status in the outpatient dermatology setting
- To characterize timing and frequency of GPP flares

METHODS

- Outpatient EHR data from 6 specialty dermatology networks in the OMNY Health real-world data platform from 2017 to January 2023 were accessed
- Patients were included if they met the following criteria*:
- \geq 1 GPP diagnosis code (International Classification of Diseases, 10th Revision: L40.1) \geq 12 years of age at first GPP diagnosis code \geq 30 days of data before the first GPP diagnosis code Accessible clinical notes Patients were indexed at their first GPP diagnosis code and followed until their last available record (Figure 1) GPP flares in the follow-up period were identified based on an algorithm derived from a combination of natural language processing of clinical notes and the presence of structured procedure codes indicative of moderate or complex disease management⁴

• Patient characteristics by flare status in the follow-up period are presented in Figure 2

Figure 2: Patient Characteristics at Index GPP Diagnosis by Flare Status

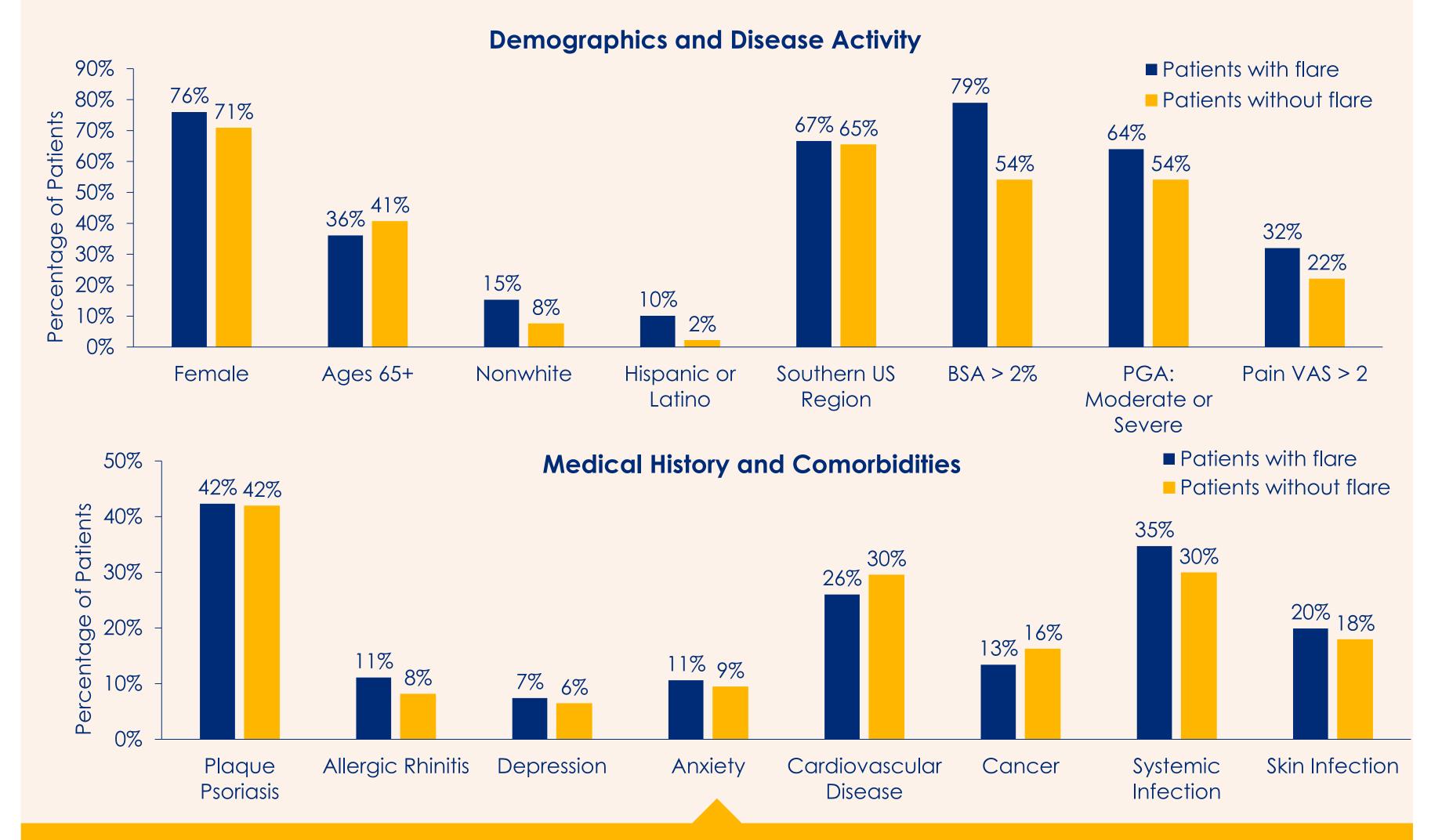
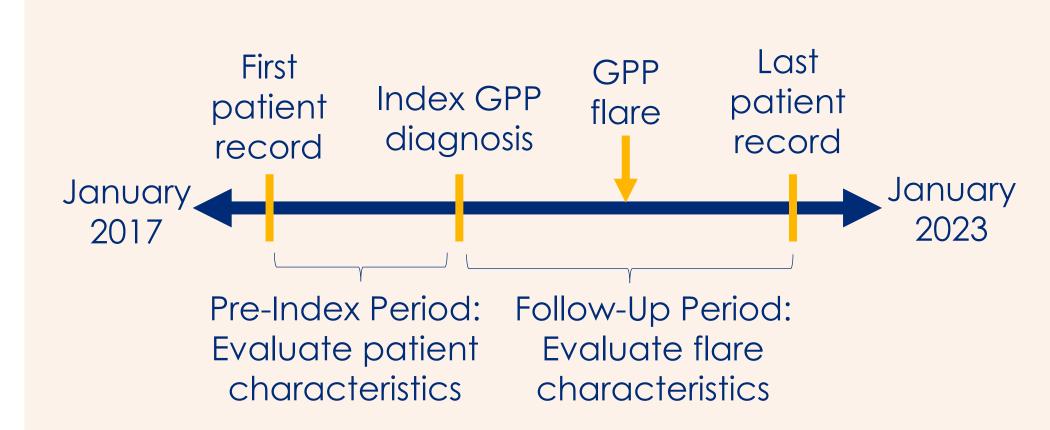


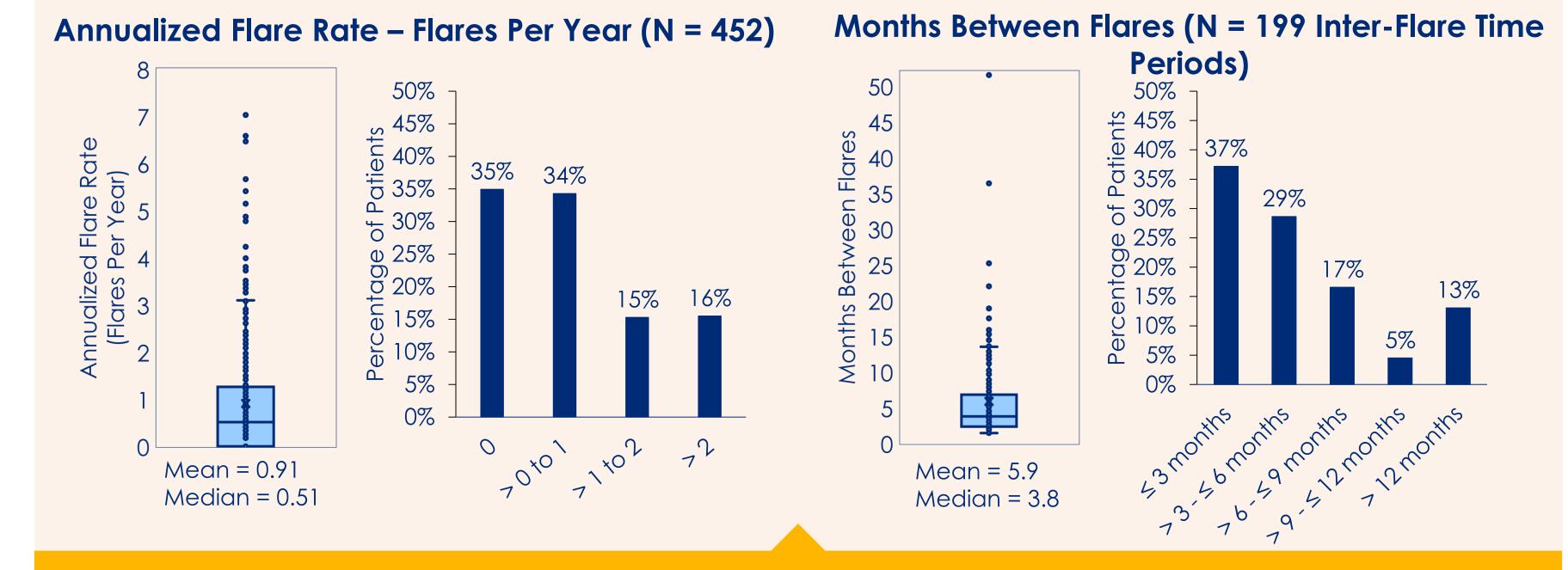
Figure 1: Study Design Schematic



Patients who subsequently experienced a GPP flare were more likely to be female, younger, nonwhite, Hispanic or Latino, have more active underlying disease, and history of systemic infection

 Mean (median) annualized flare rate (i.e., flares per year) was 0.91 (0.51) among patients with ≥ 90 days of follow-up data. Among only those with flares, mean (median) annualized flare rate was 1.40 (1.23). GPP flare characteristics are presented in Figure 3

Figure 3: Flare Characteristics Among Patients with ≥ 90 Days of Follow-Up Data



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Patients were required to have at least 30 days of data in the pre-index period to be included in analyses

- Flare duration was assumed to be 6 weeks, which is in line with previous clinical observations⁵
- Patient demographic, clinical, and disease activity characteristics at index diagnosis were summarized
- GPP flare characteristics in the follow-up period were described
- *53% of the study population had only 1 GPP diagnosis, and 47% had more than 1 GPP diagnosis code. Identification criteria may vary across publications.

Abbreviations

BSA = body surface area; EHR = electronic health record; GPP = generalized pustular psoriasis; PGA = physician global assessment; US = United States

Disclosures

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Patients with greater body surface area percent, physician global assessment of severity, and pain were more likely to experience a subsequent flare

real-world setting, most of whom experienced multiple flares, usually within 6 months

Results provide insights into real-world clinical characteristics associated with GPP flare

• GPP is a chronic disease. Almost two-thirds of GPP patients experienced at least 1 flare in the

- Demographic and medical history variables were also associated with GPP flare
- For most patients, GPP remains uncontrolled with current traditional therapies as evidenced by frequently occurring flares after index diagnosis
- This dataset is limited to outpatient EHR data from specialty dermatology networks and does not include inpatient data. Therefore, the flare rate may be underestimated.

Over 30% of GPP patients experienced more than 1 flare per year; mean (median) time between flares was 5.9 (3.8) months, and 66% of patients had a subsequent flare within 6 months of the preceding flare

CONCLUSIONS

