ABSTRACT

Psoriasis is a chronic inflammatory skin disease affecting about 2-4% Central-European population. Treatment options include topical or systemic, often in combination. Among conventional systemic therapies we include phototherapy (UVB, PUVA), methotrexate, cyclosporine and acitretin. The newest drugs are so-called biologics: drugs blocking tumor necrosis factor alpha (TNF alpha) - adalimumab, etanercept, infliximab, drugs blocking interleukin-12 and 23 (IL-12/23) - ustekinumab and newly drugs blocking interleukin 17 - secukinumab, ixekizumab, brodalumab and recently as well IL-23 blockers – guselkumab, risankizumab.. The aim of this paper is to describe the long-term efficacy and safety of treatment of patients with moderate to severe psoriasis with adalimumab, a fully human monoclonal antibody against TNF-alpha. Retrospectively we analyzed all patients with moderate to severe psoriasis who between 2008 and 2016 were treated with adalimumab in the center of biological therapy in Dermatovenereology clinic of Faculty hospital of Kralovske Vinohrady. Although the average PASI patients assigned to treatment was 22.5, the results shows a rapid onset of adalimumab, where after 3 months of treatment PASI75 was observed in 85.6% of patients. The efficacy persisted long-term when PASI75 after two years was retained in 94.8% and PASI90 in 75.9% patients still in treatment. After 48 months of follow up a set of nearly 40 patients are still on therapy which is around 80% of patients. The safety profile of adalimumab in our group was very good, no patients were discontinued from treatment due to adverse events.