

Adverse events of biologic therapy in psoriasis

Abstract

This doctoral thesis focuses on psoriasis vulgaris and its therapy, especially biologic agents and their safety profiles. The objectives of this research were to identify prognostic factors of severe psoriasis, compare the safety profiles of different therapy types (topical compounds, non-biologic systemic agents and biologic agents) and those of biologic agents themselves (adalimumab, etanercept, infliximab, secukinumab, ustekinumab). A total of 289 psoriatic patients were followed up for 30 months; these were divided into 3 groups according to therapy type. Comorbidities, epidemiological parameters, and rates of adverse events were compared between the three groups and, also, between each of the 5 biologic agents, and the data were statistically analysed. It was concluded that psoriasis severity is directly related to an increased risk of cardiovascular disease, depression, hyperuricemia, and nonspecific noninfectious liver disease. Male gender, increased height, early age at disease onset, viral upper respiratory infections and periods of hormonal changes seem to be prognostic of higher levels of psoriasis severity. When comparing therapy types, biologic agents were the most effective therapies; however, they were associated with higher rates of adverse events and treatment discontinuation. A higher incidence of adverse events was observed among adalimumab- and infliximab-treated patients, with ustekinumab found to have the safest profile. Our results demonstrate that a personalized approach, including evaluation of a patient's risk profile, is necessary before commencing a biologic. Further research is warranted to confirm the findings of this study.

Keywords

adalimumab, biologic agents, etanercept, infliximab, psoriasis prognostic factors, psoriasis vulgaris, safety profile of biologic agents, secukinumab, ustekinumab