

High Prevalence of Obesity and Related Complications with Limited Utilization of Obesity Medication in Patients with Psoriasis or Psoriatic Arthritis: Real-World Clinical Insights from the US



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OBJECTIVE

- To assess the prevalence of obesity related complications among patients with psoriasis (PsO) or psoriatic arthritis (PsA) and comorbid overweight or obesity, and prevalence of Obesity Management Medication (OMMs) fills.

CONCLUSION

- Despite the high prevalence of additional obesity related complications among patients with obesity/overweight and PsO and/or PsA, which make them OMM-eligible per FDA PI, OMM use remains low.
- The comparable distribution of obesity related complications among both OMM users and non-users indicates that current obesity related complications based prescribing criteria may not be effectively identifying or prioritizing patients with the greatest clinical need.
- These findings underscore the importance of a more holistic approach to care of patients with PsO/PsA, integrating disease and weight management strategies, for better patient outcomes.

BACKGROUND

Psoriatic disease (psoriasis [PsO] and psoriatic arthritis [PsA]) and obesity are linked. Obesity is associated with worsening psoriatic disease outcomes. PsO and PsA treatment guidelines recommend weight reduction to minimize disease impacts^{1,2,3}. However, the burden of additional obesity related complications* in patients with comorbid PsO or PsA and overweight/obesity remains under-characterized in real-world settings.

METHODS

- Retrospective, cross-sectional cohort study utilizing Truvena EHR data
- Eligibility criteria**
 - ≥18 years
 - BMI ≥27-29kg/m² (overweight) or ≥30kg/m² (obesity)
 - ≥1 PsO and/or PsA diagnosis
 - Use of ≥1 advanced treatment (biologic, PDE-4 or JAK inhibitor) recorded for PsO/PsA
 - Patients with diabetes or any prior use of OMMs during pre-index period were excluded

Statistical Analyses and Assessments

- Based on disease type and OMM prevalence, participants were stratified into four groups:
 - PsO with OMM (n=509),
 - PsO without OMM (n=7,618)
 - PsA with OMM (n=418), and
 - PsA without OMM (n=5,674)
- Patient characteristics were assessed during the 12-month baseline period prior to the index date, the date of OMM initiation [on/after June 4, 2021], or a random date for non OMM-users, matching OMM index date distributions
- Obesity related complications* were defined per ZEPBOUND® (TZP) PI⁴
- Analyses were descriptive and no matching was performed

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ABBREVIATIONS: ASCVD=Atherosclerotic Cardiovascular Disease; BMI=Body mass index; FDA PI= U.S. Food and Drug Administration Prescribing Information; HFpEF=Heart Failure with Preserved Ejection Fraction; MASH=Metabolic Dysfunction-Associated Steatohepatitis; MetS= Metabolic Syndrome; OA=Osteoarthritis; OSA=Obstructive Sleep Apnea; ORC= Obesity related complication; OMM= Obesity management medication; Sema=Semaiglucide; TZP= Tirzepatide USP; United States Prescribing Information; PsO= Psoriasis; PsA= Psoriatic Arthritis; PDE-4= Phosphodiesterase-4

REFERENCES:
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 2. ACR/NPF Joint Guideline for the Treatment of Psoriatic Arthritis. (2018)
 3. Group for Research and Assessment of Psoriasis and Psoriatic Arthritis (GRAPPA): updated treatment recommendations for psoriatic arthritis 2021. (2022)
 4. ZEPBOUND® PI, FDA, 2024

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Footnote:*ORCs as per the ZEPBOUND PI: Hypertension, dyslipidemia, obstructive sleep apnea or cardiovascular disease.

RESULTS

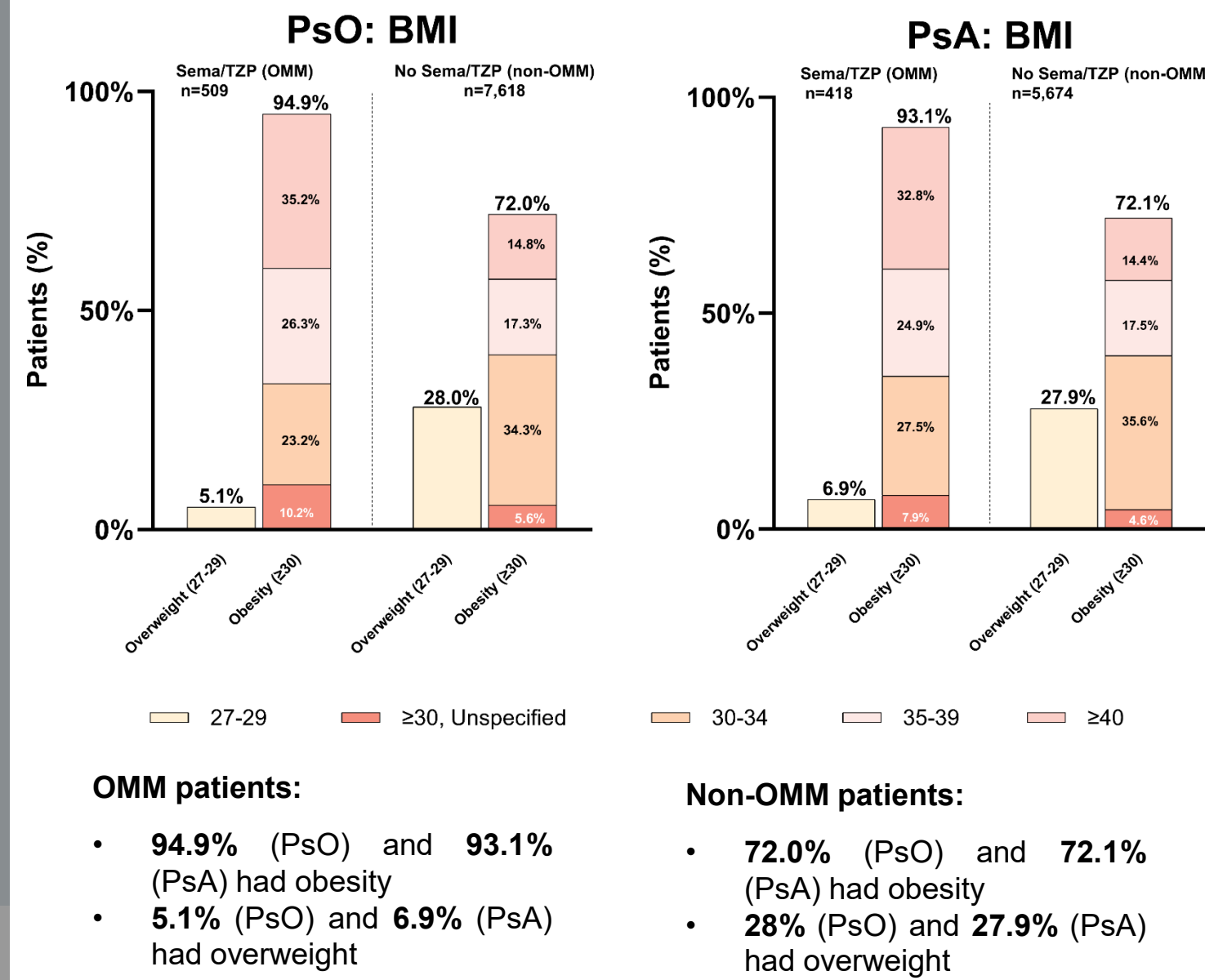


Figure 1. Distribution of BMI Categories among OMM Users and Non-Users in PsO and PsA with comorbid overweight and obesity
 Note: No matching was performed between OMM and non-OMM groups

Approx. 64% of patients with PsO who had Overweight (BMI 27-29) and not receiving an OMM had at least 1 ORC

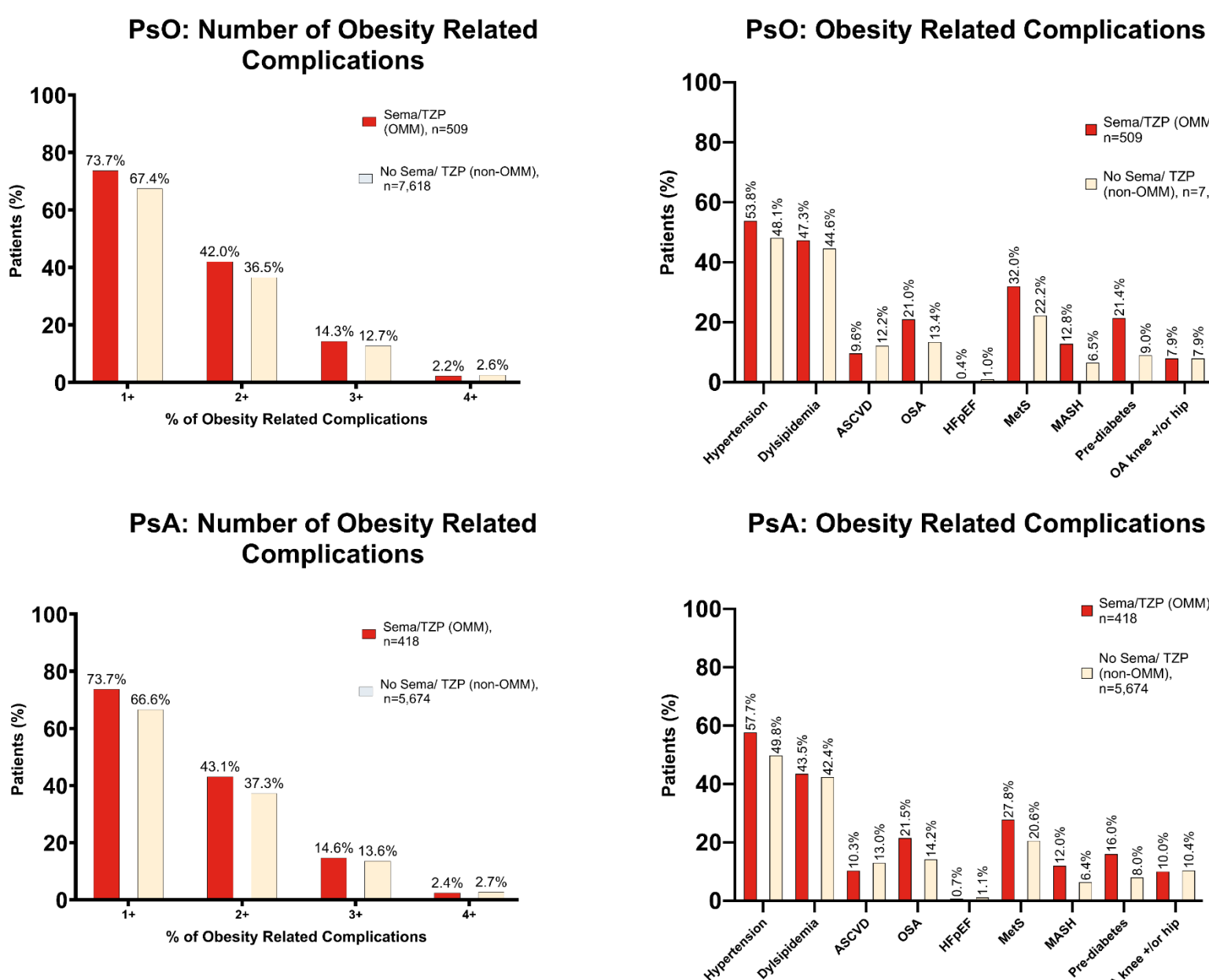


Figure 2. Number of Obesity Related Complications among OMM Users and Non-Users in PsO and PsA with comorbid overweight and obesity
 Note: No matching was performed between OMM and non-OMM groups

Figure 3. Prevalence of Obesity Related Complications among OMM Users and Non-Users in PsO and PsA with comorbid overweight and obesity
 Note: No matching was performed between OMM and non-OMM groups

Approx. 63% of patients with PsA who had Overweight (BMI 27-29) and not receiving an OMM had at least 1 ORC

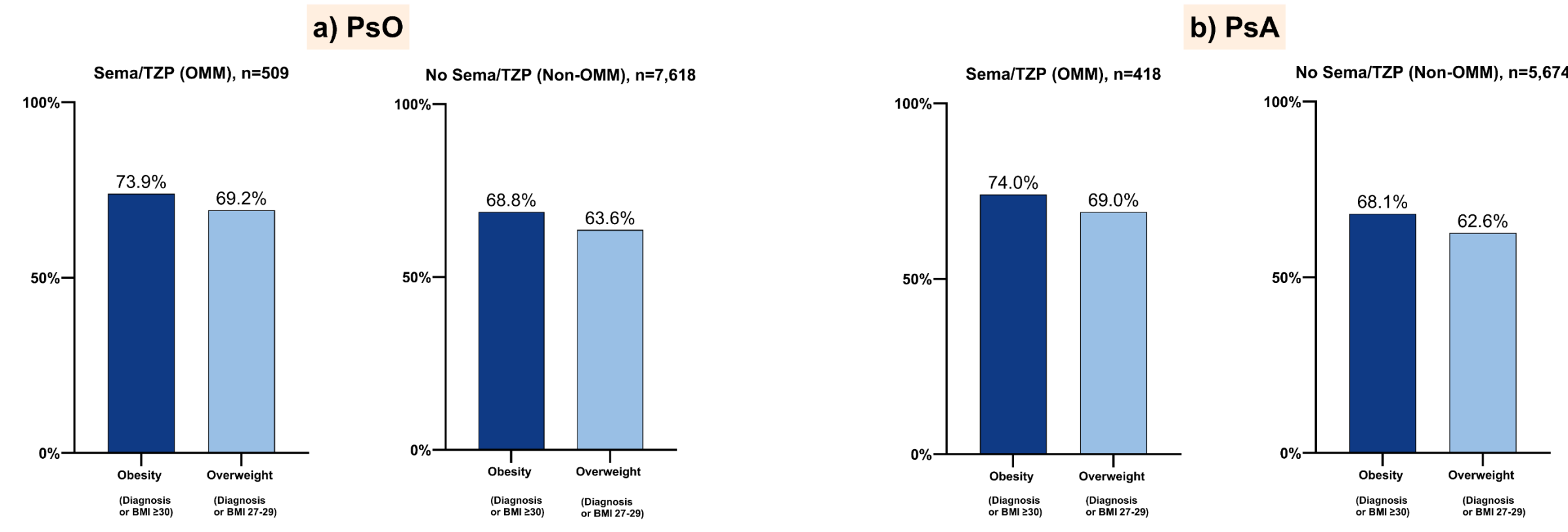


Figure 4. ≥1 Obesity Related Complications by BMI Category and OMM Users and Non-Users in PsO and PsA with comorbid overweight and obesity
 Note: No matching was performed between OMM and non-OMM groups. *BMI closest to the index date, sampling BMI was ≥ 27



Supplemental Materials
 Scan the QR code for patient demographics