Psoriasis - Biologics are Yet to Make Topical Treatments Obsolete

Description: Patient perception of disease severity drives treatment-seeking behavior in psoriasis. New therapeutic options targeting specific mechanisms are set to reshape severe psoriasis therapy. However, current biologics have not undermined first-line topical therapy. In addition to efficacy, reimbursement plays a crucial role in physicians prescribing decisions.

Scope

- Opinion from 180 practicing dermatologists, each treating at least 40 psoriasis patients per month
- Including data from physicians and opinion leaders across the seven major markets of the US, Japan, France, Germany, Spain, Italy and the UK
- Analysis of psoriasis population attributes, physicians prescribing decisions, therapy outcomes and treatment satisfaction
- Brand analysis of key pharmaceuticals used in psoriasis, including biologics and branded topical formulations

Highlights of this title

The low estimated diagnosis rate of 54% reflects a lack of treatment-seeking by mild sufferers. Despite nearly 10 million diagnosed patients, the market value of psoriasis is constrained by reliance on generic and non-prescription treatments in mild disease.

Biologics risk-benefit and cost-benefit ratios are coming under review. Humira (adalimumab) and Stelara (ustekinumab) stand to benefit from the withdrawal of Raptiva (efalizumab) from the EU and more stringent labeling in the US. The position of biologics in moderate to severe psoriasis is up for challenge by payers attempting to control costs.

Topical treatments are the foundation of therapy, used alone by at least 82% of mild patients. Phototherapy is a cost-effective treatment option in psoriasis unresponsive to topical therapy. Most physicians surveyed recommend phototherapy to up to 30% of patients, and payers may influence greater use of phototherapy.

Key reasons to purchase this title

- Understand how patient behavior controls the size of the psoriasis market
- Interpret physicians priorities in prescribing personalized psoriasis treatment regimens
- Assess the regional dynamics of therapy choice in psoriasis, dictated by product availability, regulation and reimbursement

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Importance of prescribing factors
Question design
Efficacy and safety are important to all classes
Disease modification is the primary rationale for biologics
Side-effect profile comparatively more important for vitamin derivatives
Speed of action dictates the prescribing decision for steroids
Physician perception of key brands
Amevive (alefacept; Astellas, Biogen Idec)
Raptiva (efalizumab; Genentech, Xoma, Merck Serono)
Enbrel (etanercept; Amgen, Wyeth)
Remicade (infliximab; Centocor, Schering-Plough, Mitsubishi Tanabe)
Humira (adalimumab; Abbott, Eisai)
Stelara (ustekinumab; Centocor, Janssen Cilag)
Dovonex (calcipotriol; Leo Pharma, Warner Chilcott)

Amevive: poorly understood or differentiated
Raptiva: high in terms of dosing frequency
Enbrel: loses out in terms of disease modification efficacy
Remicade: used for speed of action in more severe patients
Remicade's downfall in psoriasis is its method of administration
Humira scores well on dose frequency, but loses out on top spot to Stelara for this attribute
Humira market share predicted to increase due to positive perception
Stelara awarded higher scores than other biologics on efficacy attributes
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