#### 14005

## Association between hidradenitis suppurativa and Down syndrome: Systematic review and meta-analysis



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Background: Hidradenitis suppurativa (HS) is an inflammatory skin disorder characterized by nodules, sinus tracts, and scarring, with associations with multiple systemic conditions. There have been a number of case reports and few case series suggesting an association between HS and Down syndrome (DS).

Objective: To perform a systematic review and meta-analysis to assess the association between HS and DS.

Methods: A meta-analysis of proportions was performed to determine the pooled prevalence of DS in HS populations, and in the pooled prevalence of HS in DS cohorts compared with population controls. Results We identified from electronic database searches 5 studies which reported the prevalence of DS in HS cohorts. Meta-analysis demonstrated pooled prevalence of DS in HS was 3.6% (95% CI 2.5%-5.4%), with no significant heterogeneity ( $I^2=25.15\%$ ). We identified 4 studies which reported prevalence of HS in DS. Pooled prevalence was 11.9% (95% CI 3.1%-20.7%), compared with prevalence on controls of 0.4% (95% CI 0.2%-0.6%). This difference was significantly different (P=0.034).

Conclusions: Our meta-analysis supports a significant association between HS and DS. This association is not well known, thus clinicians looking after these populations should be more aware of this. Further investigation into the nature of the relationship between these 2 disease entities is warranted.

Commercial disclosure: None identified.

#### 14020

Durability of responses with bimekizumab, a selective dual inhibitor of interleukin-17A and -17F, in moderate to severe chronic plaque psoriasis in a 60-week randomized, double-blinded, phase 2b study (BE ABLE 2)



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Background: Bimekizumab provided substantial clinical improvements and was generally well tolerated in patients with moderate to severe plaque psoriasis in the 12-week phase 2b BE ABLE 1 study (NCT02905006); responses were maintained for 48 additional weeks (60 weeks' total exposure) in the BE ABLE 2 extension study (NCT03010527). We report post hoc analyses of response durability with bimekizumab.

Methods: BE ABLE 1 PASI90 responders ( $\geq$ 90% reduction in Psoriasis Area Severity Index at week 12) receiving bimekizumab q4w 64 mg or 160 mg ( $\pm$ 320 mg loading dose [LD]) continued the same treatment in BE ABLE 2. All patients previously receiving bimekizumab q4w 320 mg or 480 mg received q4w 320 mg. Sustained PASI90 and PASI100 responses, defined as PASI90/PASI100 response observed at all study visits from week 12 through week 60 (nonresponder imputation), were assessed in week 12 PASI90/PASI100 responders, respectively. Intention-to-treat analyses were conducted for PASI90.

Results: At week 12 (BE ABLE 2 baseline), 133/180 (73.9%) bimekizumab-treated patients were PASI90 responders. At week 60, 80.5% (107/133) of these responders had sustained PASI90 responses. The results for individual dose groups were bimekizumab  $\geq$ 64 mg  $\rightarrow$  64 mg 14/15, 93.3%; 160  $\pm$  320 mg  $\rightarrow$  160 mg 41/55, 74.5%; 320 mg  $\rightarrow$  320 mg 26/33, 78.8%; and 480 mg  $\rightarrow$  320 mg 26/30, 86.7%. Among week 12 PASI100 responders (86/180, 47.8%), 54/86 (62.8%) patients sustained PASI100 responses through week 60, with a response pattern across dose groups consistent with PASI90. Intent-to-treat analyses showed higher responses with bimekizumab 320 mg versus 160 mg.

Conclusions: Across dose groups, PASI90 responses were sustained to week 60 in 80.5% of patients who achieved PASI90 at week 12, demonstrating high-level durable efficacy with bimekizumab treatment.

Commercial disclosure: The study was sponsored by UCB Pharma.

### 14006

# Parental sun protection behaviors in the Australian population: A survey study



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Background: Skin cancer is a major problem facing the Australian public with multiple contributing factors. The incidence is likely related to sun protection behaviour not only in children but also influenced by behaviours of their parents and peers. There is a lack of data on this from an Australian context.

Objective: We aimed to determine parent's sun protection behaviours and whether it correlates with the behaviour and sunburn rates in children.

Methods: A 36-item survey was completed by consenting participants, which asked about participant's demographics, their sun protection behaviours and that which they implement for their children. Logistical regression analysis was performed.

Results: A total of 116 parents (232 children) were recruited. A high percentage of respondents were shown to use sunscreen, however over 66% did not reapply after 2 hours and over 50% did had been sunburnt at least once in the past year. A large proportion of respondents (86%) were not aware of the degradation effects of heat on sunscreen. A strong association was found between a parent burning and their child also burning (P < .01). Children who were responsible for applying their own sunscreen were more likely to have experienced sunburn in the past year (P < .01).

Conclusions: Our results suggest improper use of sun protection methods, and that messages about sun safety are just as important for adults as they are for children. Modelling the right behaviour will translate to long lasting changes for children that will ultimately reduce the incidence of skin cancer.

Commercial disclosure: None identified.

### 14026

## The influence of dermatologists' use of social media on attracting patients



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Many dermatologists consider social media to be useful for building their practices and personal brands. However, limited data exists on patients' perceptions of the value of social media in dermatology. Therefore, this cross-sectional study sampled a diverse online population to examine how social media influences patients when choosing a dermatologist. Chi-square tests were used to compare survey answers by visit type, age, gender, and education level. The survey response rate was 85%. Of the 715 respondents who completed the survey, nearly three-quarters reported using social media several times a day (72%). Fifty-seven percent of participants reported that social media is only slightly important or not at all important when selecting a dermatologist. Patient reviews (56%), years of experience (51%), and medical information written by the dermatologist (47%) were the most important aspects of dermatologists' social media sites. Interestingly, the least common factors were the number of likes/followers/friends (14%) and personal photos posted (14%). Cosmetic patients, younger patients, and participants with fewer years of education valued social media significantly more when selecting a dermatologist compared with their counterpart populations (P < .002). Overall, this survey demonstrates that patients have a low reliance on social media when selecting a dermatologist as only 22% felt that social media is very or extremely important when choosing a dermatologist. As a result, dermatologists should consider tools other than social media to attract new patients. However, if dermatologists maintain social media accounts, they should highlight patient reviews, providers' experience levels, and original medical content over personal photos.

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