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Results from the open-label treatment period of a long-term proactive management phase III trial using fixed-dose combination calcipotriene 0.005% and betamethasone dipropionate 0.064% foam

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Patients received Cal/BD once daily for 4 weeks during the open-label period of this phase III long-term proactive management trial. Patients who achieved treatment success (PGA score 'clear'/'almost clear' with ≥ 2 grade improvement from baseline) were randomized 1:1 in a double-blind fashion to Cal/BD or vehicle twice weekly for 52 weeks. Patients who did not achieve treatment success were withdrawn from the study. Eligible patients: ≥ 18 years; truncal and/or limb psoriasis at least 'mild' by PGA; covering 2%-30% of body surface area (BSA); with a modified psoriasis area and severity index (m-PASI) of ≥ 2 . End points included: change from baseline in PGA, m-PASI and, BSA, and number of adverse events (AEs). 650 patients entered the open-label phase; 521 (80.2%) achieved treatment success at week 4. More than 90% of patients achieving success had PGA score moderate or severe at baseline (moderate, $n = 444$ [85.2%]; severe, $n = 34$ [6.5%]). PGA at week 4 was 'clear' ($n = 110$, 21.1%) and 'almost clear' ($n = 411$, 78.9%) in those achieving success. Mean (SD) m-PASI and mean (SD) BSA at baseline were 7.8 (3.8) and 8.2% (6.2%), respectively, in patients achieving treatment success. Change in mean (SD) m-PASI and BSA from baseline to week 4 was -0.8% (0.2%) and -0.6% (0.4%), respectively, in successful patients. Of the 650 patients assigned to treatment, 115 (17.7%) experienced 157 AEs; 5 patients (0.8%) experienced AEs possibly or probably related to the study drug; and 2 patients (0.3%) withdrew during the open-label phase due to an AE.

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Risk of hemorrhagic and ischemic stroke subsequent to diagnosis for hidradenitis suppurativa: Real-world data from a large urban Midwestern US patient population

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Background: Although hidradenitis suppurativa (HS) has been reported to be associated with cardiovascular events, the risk for stroke has been inconsistently reported. The aim of this study is to determine the incidence of stroke in HS patients from real world data within a large urban midwestern US dermatology patient population.

Methods: Data were extracted from a medical record data repository (>8 million patients), for adult patients with a dermatologist diagnosis for HS (ICD-9-10 codes; 705.83, L73.2; Jan 2001–Oct 2018), and who had ≥ 1 month follow-up. Control population included all adult dermatology patients without a diagnosis for HS during the same time frame. Outcome of interest was subsequent diagnosis for hemorrhagic or ischemic stroke. Crude and adjusted odds ratios (aORs) were obtained using logistic regression (sex, race, stroke risk factors and follow-up time). A stratified analysis by age (≤ 60 years vs 61-89 years; using 60 y as peak incidence for stroke) was also conducted.

Results: Of all 248,054 dermatology patients, for HS by age: 18-60 y: $n = 1223$ in with $n = 16$ (6M/10F) for stroke, aOR 1.6, 95% CI 0.96-2.63; $P = .069$; for 61-89 y: $n = 101$ with $n = 5$ (1M/4F) for stroke, aOR 1.06, 95% CI 0.43-2.63; $P = .89$.

Conclusions: The trend toward significantly higher risk for stroke in younger HS patients compared with younger patients with no HS was unexpected. Moreover, for HS patients, the older age group had less risk for stroke than the younger group. These new findings further inform the management of those with HS.

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Peptides: An effective ingredient to complement vitamin C for skin aging

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Peptides and vitamin C are effective anti-aging ingredients but the formulation is critical for delivery across the stratum corneum. Peptide-C anti-aging formula contains peptides, vitamin C, hyaluronic acid, and Vichy mineralizing water, in daily-dose amber glass ampoules with no preservatives. These studies evaluated the effectiveness of Peptide-C formulation on wrinkles and radiance. In study A ($n = 32$), dansyl chloride patches were placed on each forearm for 24 hours. After removal, the remaining fluorescence was measured daily and Peptide-C formulation was applied twice-daily on one randomly designated forearm for 3 weeks. The mean cumulative fluorescence score at day 22 was lower for Peptide-C treated skin compared with untreated skin (59.6 vs 64.9; $P < .0001$) and the mean cell turnover was faster (17.1 vs 19.2 days; $P < .0001$). In study B ($n = 47$), investigator clinical scoring of wrinkle severity of crows feet wrinkles, forehead wrinkles and nasolabial folds decreased by 9%, 11%, and 5%, respectively, after 28 days of Peptide-C compared with baseline (all $P < .05$). After 28 days, 79% of subjects indicated their skin complexion was more radiant and 64% indicated the fine lines were less visible. In study C ($n = 40$), after 30 days twice-daily Peptide-C, the number of wrinkles measured by instrumental scoring (quantification software and 3D fringe projection analysis) decreased 11.5% ($P < .05$) and the maximal vertical distance between the highest peak and lowest valley decreased 13% ($P < .05$) compared with baseline. A combination of anti-aging ingredients, in innovative packaging to allow a minimalist formula, provide significant results on improving facial wrinkles and radiance.

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Patient perceptions on nutrition and skin health

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Background and Objective: Many clinical studies have explored the link between nutrition and skin. However, it is unclear whether patients come to their dermatologists with this knowledge and where they obtain their skin health information. We characterized patient perceptions surrounding nutrition and skin health, including what patients identified as aggravating and alleviating foods and their sources of information.

Methods: A questionnaire was administered to 409 participants attending UC Davis Dermatology and Pacific Skin Institute in Sacramento. This survey assessed their perception on the influence of nutrition, and we stratified responses by diseases.

Results: 82% of all respondents believed that nutrition affects skin health. Respondents who agreed were more likely to get their information from reputable sources ($P = .003$). Those with skin conditions were also more likely to get their information from reputable sources ($P = .02$). Reputable sources were defined as physicians and scientific journals, and nonreputable sources were all others. When online blogs were included as reputable, the relationship was not as significant ($P = .065$). Among survey participants, 71% with acne, 56% with eczema, 73% with rosacea, and 63% with seborrheic dermatitis identified fried/fatty foods as negatively influencing skin health. In addition, 56% with acne, 64% with rosacea, and 50% with seborrheic dermatitis identified high-glycemic index foods as triggers.

Conclusions: Most participants agreed that nutrition affects skin. Participants who agreed and participants with skin conditions more likely received their information from reputable sources. Fried/fatty and high-glycemic index foods were major groups identified by participants with skin conditions as negative triggers.

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