

Abstract

Psoriasis is a complex systemic disease included among the Immune-Mediated Inflammatory Diseases (IMID). Although not life-threatening in itself, it has a dramatic impact on patients' quality of life and is associated with a risk of developing a number of comorbidities.

Therefore, considering that it is one of the most common chronic dermatoses, affecting more than 100 million people worldwide, the WHO has designated psoriasis as a major global health problem.

The goal of the treatment is to get the disease under long-term control, to achieve the fewest visible manifestations and minimal activity of new ones, while in patients with severe psoriasis, systemic therapy is necessary. However, this has been very difficult for a long time, because conventional systemic therapies were often not sufficiently effective, and due to side effects and the need for frequent laboratory tests, they were also not appropriate for long-term administration. Nevertheless, intensive research and a better understanding of the aetiopathogenesis of psoriasis have led to the development of targeted biological therapy, which represents a significant advance in both efficacy and safety. But it is a new therapy, so many questions are not yet answered, especially with newer generations of biological therapy.

Therefore, our work focused on obtaining and analyzing the Real World Data (RWD) of patients from the entire Czech Republic who were indicated for targeted biological therapy with guselkumab, the first member of the newest drug class of selective IL-23 inhibitors.

The obtained epidemiological data as well as information on comorbidities and initial severity of psoriasis were similar to those obtained in patients treated with other targeted biological therapies; thus, we could exclude that the positive results of guselkumab therapy were biased/overestimated by a different epidemiological profile or severity of treated patients. Therapy with guselkumab showed very good efficacy, both on the skin involvement itself and on the improvement of patients' quality of life. Moreover, the achieved effect persisted steadily over a long-term follow-up period of 36 months, with a high percentage of drug survival. The therapy was also well tolerated, the safety profile was favourable, with only a minimum of adverse events occurring during the entire follow-up period, most of which were of an insignificant transient nature and did not lead to discontinuation of the therapy.