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P019 - MAINTENANCE OF CLINICAL RESPONSE IN INDIVIDUAL CHILDREN WITH JUVENILE IDIOPATHIC ARTHRITIS TREATED WITH SUBCUTANEOUS ABATACEPT

I. Calvo Penadés[1], N. Ruperto[2], H. Brunner[3], N. Tzaribachev[2], I. Louw[2], F. Zapata[4], G. Horneff[2], I. Foeldvari[2], D. Kingsbury[3], R. Joos[2], M.E. Paz Gastanaga[2], C. Wouters[2], J. Breedt[2], T. Lutz[2], T. Miraval[2], N. Rubio[2], Y. Elbez[5], M. Nys[6], R. Wong[7], A. Martini[2] and D.J. Lovell[3`poi]

[1]Hospital Universitario y Politécnico La Fe. Valencia. [2]PRINTO. Istituto Gaslini. Genoa (Italy). [3]PRCSG. CHMC Cincinnati (USA). [4]PRINTO. Star Medica Hospital. Mérida Yucatán (México). [5]Excelya. Boulogne-Billancourt (France). [6]Bristol-Myers Squibb. Braine-L'Alleud (Belgium). [7]Bristol-Myers Squibb. Princeton. NJ (USA).

Resumen

Introduction: The efficacy of SC abatacept (ABA) in patients (pts) with polyarticular-course juvenile idiopathic arthritis (pJIA) was shown in a 2-year (yr), Phase III, open-label international study (NCT01844518). However, it is unknown whether each individual pt within a treatment group consistently achieves the same efficacy endpoint at all time points.

Objectives: To investigate whether ABA efficacy is maintained by individual pts with pJIA over time.

Methods: In this subgroup analysis, pts in two age cohorts (2-5 yrs and 6-17 yrs) who achieved clinical response to weekly SC ABA (10 to < 25 kg [50 mg], 25 to < 50 kg [87.5 mg], ≥ 50 kg [125 mg]) at Day 113 (time point of primary pharmacokinetics endpoint[1]) were followed for 2 yrs. Stringent efficacy outcomes selected for analysis included JIA-ACR70, JIA-ACR100, Juvenile Arthritis Disease Activity Score 71 (JADAS71) minimal disease activity (MDA; ≤ 3.8) and JADAS71 inactive disease (ID; ≤ 1) rates. Prognostic factors for sustained response were investigated using logistic regression.

Results: A total of 219 pts entered the study (46 [21.0%] 2-5 yrs; 173 [79.0%] 6-17 yrs) and a subgroup of these pts achieved a clinical response at Day 113 (Table 1). Most pts who achieved JIA-ACR70, JIA-ACR100, JADAS71 MDA and JADAS71 ID at Day 113 sustained their response at Day 393 and at Days 393 and 645 in the 2-5-yr and 6-17-yr cohorts (Table 2). Across cohorts, more than 75% and 60% of pts maintained a JIA-ACR 70 and JADAS71 MDA response through Day 645, respectively. Prior biologic (b)DMARD use was an important prognostic factor. In pts aged 6-17 yrs, sustained JIA-ACR70 response rate at Days 393 and 645 was 81% (57/70) in pts who did not have prior bDMARDs vs 57% (12/21) in pts who had prior bDMARDs (p = 0.0715); sustained JADAS71 MDA response rate was 71% (37/52) vs 37% (7/19; p = 0.0320). Prognostic factors for JIA-ACR100 response and JADAS71 ID in pts aged 6-17 yrs and for all outcomes in pts aged 2-5 yrs could not be determined due to low pt numbers.

Table 1. Proportion of pts who achieved a clinical response at Day 113

Endpoint	Pts with response at Day 113	
	2-5 yrs (n = 46)	6-17 y (n = 173)
JIA-ACR70	34 (74)	91 (53)
JIA-ACR100	19 (41)	25 (15)
JADAS71 MDA	28 (61)	71 (41)
JADAS71 ID	17 (37)	28 (16)

Data are expressed as n (%). ID: inactive disease; JADAS71: Juvenile Arthritis Disease Activity Score 71; MDA: minimal disease activity; pt: patient; yr: year.

Table 2. Proportion of responders at Day 113 with sustained clinical response at Day 393, and at Days 393 and 645 in cohort aged 2-5 yrs and cohort aged 6-17 yrs

	2-5-yr-old pts who achieved a clinical response at Day 113				6-17-yr-old pts who achieved a clinical response at Day 113			
	JIA-ACR70 (n = 34)	JIA-ACR100 (n = 19)	JADAS71 MDA (n = 28)	JADAS71 ID (n = 17)	JIA-ACR70 (n = 91)	JIA-ACR100 (n = 25)	JADAS71 MDA (n = 71)	JADAS71 ID (n = 28)
Day 393	32 (94)	12 (63)	25 (89)	10 (59)	78 (86)	20 (80)	58 (82)	21 (75)
Day 645	32 (94)	11 (58)	23 (82)	9 (53)	69 (76)	15 (60)	44 (62)	18 (64)

Data are expressed as n (%). ID: inactive disease; JADAS71: Juvenile Arteritis Disease Activity Score 71; MDA: minimal disease activity; pt: patient; yr: year.

Conclusions: The majority of individuals with pJIA who achieved stringent efficacy endpoints with weekly SC abatacept by Day 113 sustained that clinical endpoint over time. Prior bDMARD use may be a prognostic factor for sustained response over 2 yrs.

Código EUDRACT: NCT01844518.

References

1. Brunner HI, et al. Arthritis Rheumatol. 2018;70:1144-54. Abstract presented at EULAR 2019. Published in Ann Rheum Dis. 2019. DOI: 10,1136/annrheumdis-2019-eular.236.