NOVARTIS

Cosentyx Derm - Mechanism of action - HCP

Prescribing information

Image

Image

Cosentyx® (secukinumab): Mechanism of action

Cosentyx is indicated for the treatment of moderate to severe plaque psoriasis (PsO) in adults, children and adolescents from the age of 6 years who are candidates for systemic therapy; active psoriatic arthritis (PsA) in adult patients (alone or in combination with methotrexate [MTX]) when the response to previous disease-modifying anti-rheumatic drug therapy has been inadequate; active ankylosing spondylitis (AS) in adults who have responded inadequately to conventional therapy; active nonradiographic axial spondyloarthritis (nr-axSpA) with objective signs of inflammation as indicated by elevated C-reactive protein and/or magnetic resonance imaging evidence in adults who have responded inadequately to non-steroidal anti-inflammatory drugs; active moderate to

severe hidradenitis suppurativa (HS; acne inversa) in adults with an inadequate response to conventional systemic HS therapy; active enthesitis-related arthritis (ERA) in patients 6 years and older (alone or in combination with MTX) whose disease has responded inadequately to, or who cannot tolerate, conventional therapy; active juvenile psoriatic arthritis (JPsA) in patients 6 years and older (alone or in combination with MTX) whose disease has responded inadequately to, or who cannot tolerate, conventional therapy.[1,2]

The Cosentyx mechanism of action works by blocking IL-17A, a key proinflammatory cytokine associated with inflammation in axSpA, PsA, PsO and HS[1–14]

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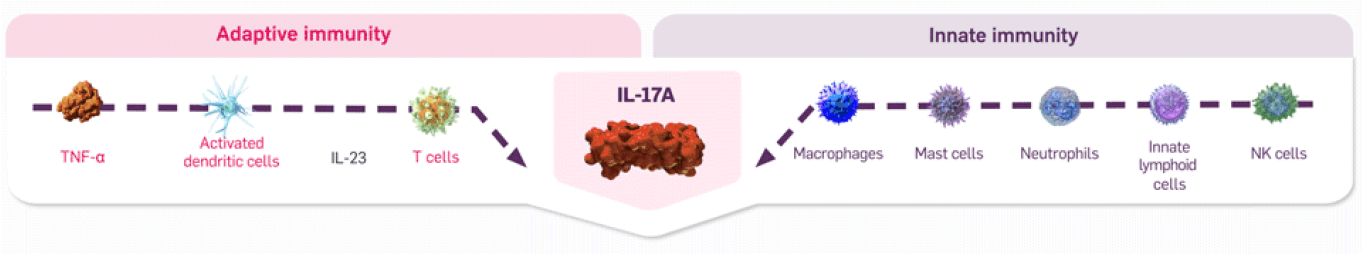


Increased levels of IL-17A are found in the affected tissues of patients with axSpA, PsA, PsO and HS[1,2,8,15,16]

How does Cosentyx work?

The active ingredient, secukinumab, mechanism of action works by targeting IL-17A, preventing it from binding to the IL-17A receptor.[1,2] It acts downstream of several other biologics and inhibits IL-17A cytokines irrespective of adaptive or innate immunity origin.[17,18]

Cosentyx mechanism of action video

This video has been produced and funded by Novartis Pharmaceuticals Ltd.
Intended for UK healthcare professionals only.

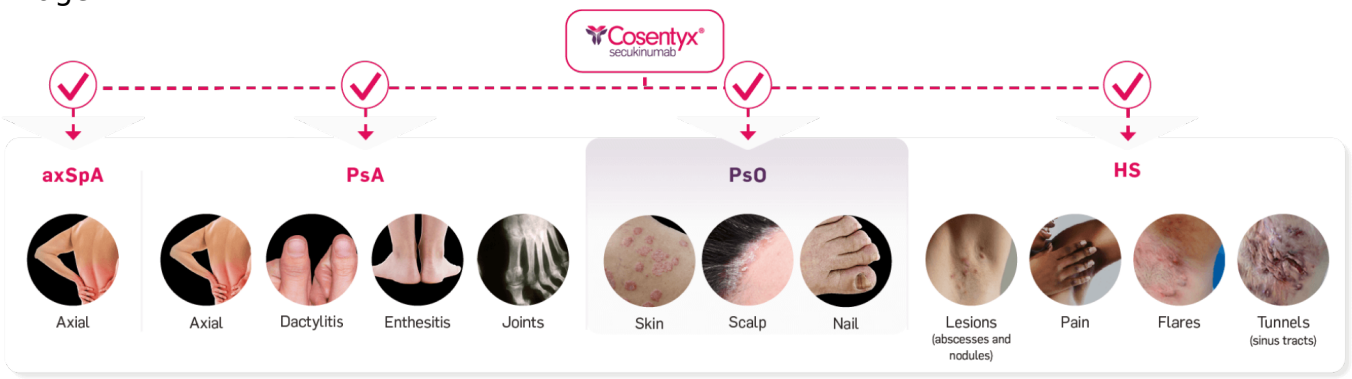
September 2023 | 286183

VIDEO

Watch the short video below to discover the mode of action of Cosentyx.

Through blocking IL-17A, Cosentyx works across the key manifestations of axSpA, PsA, PsO and HS[1–9]

Image

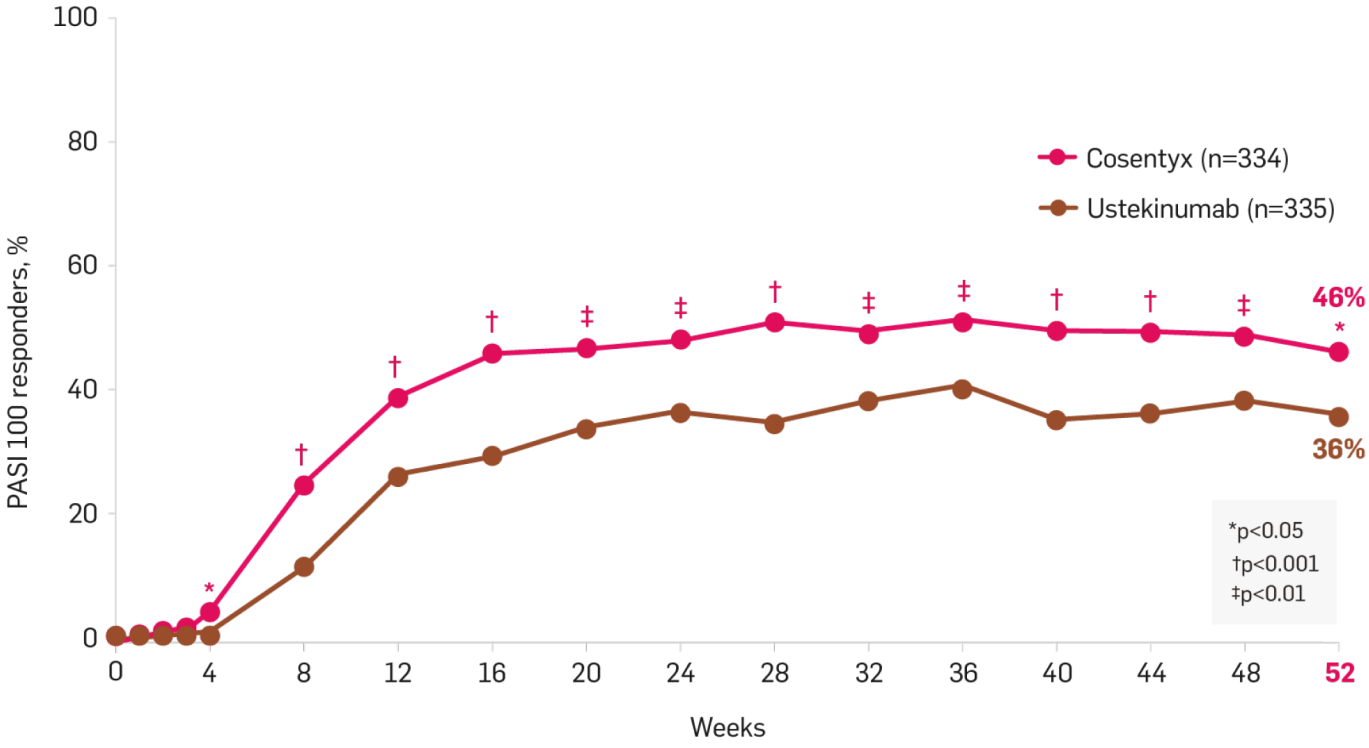


Cosentyx's mechanism of action may provide an alternative option for patients with an inadequate response to IL-12/23[1,2,4,18,19]

Consider IL-17 MoA as an alternative option for patients with inadequate response to IL-12/23[1–9]

CLEAR study: PASI 100 over 52 weeks (secondary endpoint)[19]

Image



Graph adapted from Blauvelt A, et al. 2017.[19]

- Starting at Week 4 and lasting through to Week 52, each dose of Cosentyx 300 mg resulted in a statistically significant improvement in PASI 100 response rates compared with ustekinumab 45 mg or 90 mg[19]

- **CLEAR primary endpoint:** The proportion of patients achieving PASI 90 at Week 16 for Cosentyx 300 mg vs ustekinumab 45 mg or 90 mg was met by 79% vs 58%, respectively; $p<0.0001$[19]

- Cosentyx and ustekinumab exhibited comparable safety and tolerability profiles with no new or unexpected safety signals. The most common AEs for both were nasopharyngitis and headache[19]

- CLEAR was a Phase IIIb, randomised, double-blind, head-to-head study comparing Cosentyx and ustekinumab at Week 52.*[19]

In the CLEAR study, Cosentyx demonstrated superior long-lasting skin clearance vs ustekinumab over 1 year[19]

BAD recommends a TNF antagonist or an IL-17 inhibitor (such as Cosentyx) as a first-line biologic for eligible adult patients with psoriasis and PsA[20]

Please note Cosentyx is only indicated for the treatment of active psoriatic arthritis in adult patients (alone or in combination with methotrexate) when the response to previous disease modifying anti-rheumatic drug (DMARD) therapy has been inadequate.[1,2]

Image

PSO with PSA

Image

Efficacy in HS

Image

PSO dosing

Image

Safety profile

Image

Heritage

Image

Resources

Cosentyx is intended for use under the guidance and supervision of a physician experienced in the diagnosis and treatment of conditions for which Cosentyx is indicated. Please refer to the Cosentyx SmPC for full product information before prescribing.[1,2]

Therapeutic Indications[1]

Cosentyx is indicated for the treatment of moderate to severe plaque psoriasis (PsO) in adults, children and adolescents from the age of 6 years who are candidates for systemic therapy; active psoriatic arthritis (PsA) in adult patients (alone or in combination with methotrexate [MTX]) when the response to previous disease-modifying anti-rheumatic drug therapy has been inadequate; active ankylosing spondylitis (AS) in adults who have responded inadequately to conventional therapy; active nonradiographic axial

spondyloarthritis (nr-axSpA) with objective signs of inflammation as indicated by elevated C-reactive protein and/or magnetic resonance imaging evidence in adults who have responded inadequately to non-steroidal anti-inflammatory drugs; active moderate to severe hidradenitis suppurativa (HS; acne inversa) in adults with an inadequate response to conventional systemic HS therapy; active enthesitis-related arthritis (ERA) in patients 6 years and older (alone or in combination with MTX) whose disease has responded inadequately to, or who cannot tolerate, conventional therapy; active juvenile psoriatic arthritis (JPsA) in patients 6 years and older (alone or in combination with MTX) whose disease has responded inadequately to, or who cannot tolerate, conventional therapy.[1]

*CLEAR was a Phase IIIb randomised, double-blind, head-to-head study comparing Cosentyx 300 mg (n=337) to ustekinumab 45 mg or 90 mg (n=339) over 52 weeks in patients with moderate to severe PsO. The primary endpoint was PASI 90 at Week 16. The main secondary endpoint was PASI 90 at Year 1. PASI 75/90/100 over time were also evaluated.[19]

AE, adverse event; ankylosing spondylitis; axSpA, axial spondyloarthritis; BAD, British Association of Dermatologists; ERA, enthesitis-related arthritis; HS, hidradenitis suppurativa; IL-17A, interleukin 17A; IL-23, interleukin 23; JPsA, juvenile psoriatic arthritis; MTX, methotrexate; NK, natural killer; nr-axSpa, active non-radiographic axial spondyloarthritis; PASI, psoriasis area and severity index; PsA, psoriatic arthritis; PsO, plaque psoriasis; SmPC, summary of product characteristics; TNF, tumour necrosis factor.

References

1. Cosentyx® (secukinumab) GB Summary of Product Characteristics.
2. Cosentyx® (secukinumab) NI Summary of Product Characteristics.
3. Zeichner JA, et al. *J Clin Aesthet Dermatol* 2016;9(suppl 6):S3–S6.
4. Lynde CW, et al. *J Am Acad Dermatol* 2014;71(1):141–150.
5. Keijsers RR, et al. *Exp Dermatol* 2014;23(11):799–803.
6. Mease PJ, et al. *N Engl J Med* 2015;373(14):1329–1339.
7. McInnes IB, et al. *Lancet* 2015;386(9999):1137–1146.
8. Mills KHG. *Nat Rev Immunol* 2023;23(1):38–54.
9. Fletcher JM, et al. *Clin Exp Immunol* 2020;201(2):121–134.

10. Lories RJ, et al. *Nat Med* 2012;18(7):1018–1019.

11. Smith JA, et al. *Arthritis Rheumatol* 2014;66(2):231–241.

12. Kehl AS, et al. *Arthritis Rheumatol* 2016;68(2):312–322.

13. McGonagle D, et al. *Nat Rev Rheumatol* 2015;11(12):731–740.

14. Baeten D, et al. *N Engl J Med* 2015;373(26):2534–2548.

15. Constantinou CA, et al. *Ther Adv Musculoskelet Dis* 2019;11:1759720X19895488.

16. Schön M & Erpenbeck L. *Front Immunol* 2018;9:1323.

17. Gorelick J, et al. *Practical Dermatol* 2016;12:35–50.

18. Krueger J, et al. *Exp Dermatol* 2023;00:1–14.

19. Blauvelt A, et al. *J Am Acad Dermatol* 2017;76(1):60–69.

20. Smith CH, et al. *Br J Dermatol* 2020;183(4):628–637.

UK | November 2024 | 452154

Adverse events should be reported. Reporting forms and information can be found at www.mhra.gov.uk/yellowcard. Adverse events should also be reported to Novartis online through the pharmacovigilance intake (PVI) tool at www.novartis.com/report, or alternatively email medinfo.uk@novartis.com or call 01276 698370.

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