Ruxolitinib Cream 1.5%: Adis Evaluation

Clinical Considerations

- First topical Janus kinase (JAK) inhibitor approved in the USA
- Provides early and sustained improvements in disease severity, pruritus and sleep disturbance measures when applied twice daily over the short term
- Controls disease severity measures when applied as needed to active lesions over the longer term
- Safety profile similar to that of vehicle cream; no safety findings suggestive of systemic JAK inhibition

Plain Language Summary

Background and rationale

- Atopic dermatitis (AD; also known as atopic eczema) is a chronic, relapsing, inflammatory skin disease that most commonly occurs in children but may also affect adults
- Ruxolitinib cream 1.5% (OPZELURA™) is a topical therapy that inhibits JAK1 and JAK2, which are enzymes that can modify the inflammatory pathways involved in AD. It is approved in the USA for short-term and non-continuous longer-term treatment of mild to moderate AD in non-immunocompromised patients aged ≥ 12 years whose disease is not adequately controlled with topical prescription therapies or when those therapies are not advisable

Clinical findings

- Patients experienced clearer skin and a reduction in itch and disturbed sleep when treated with ruxolitinib cream 1.5% twice daily compared with a non-medicated cream for 8 weeks. Moreover, clearer skin was maintained for a further 44 weeks when using the treatment as needed
- The safety profile of ruxolitinib cream 1.5% was similar to that of the non-medicated cream, and stinging/burning sensations following application were infrequent

Conclusion

Ruxolitinib cream 1.5% offers an alternative to established topical agents (e.g. corticosteroids and calcineurin inhibitors) for the treatment of adults and adolescents with mild to moderate AD.