Supplementary material

Apremilast use in severe psoriasis: real-world data from Central and Eastern Europe

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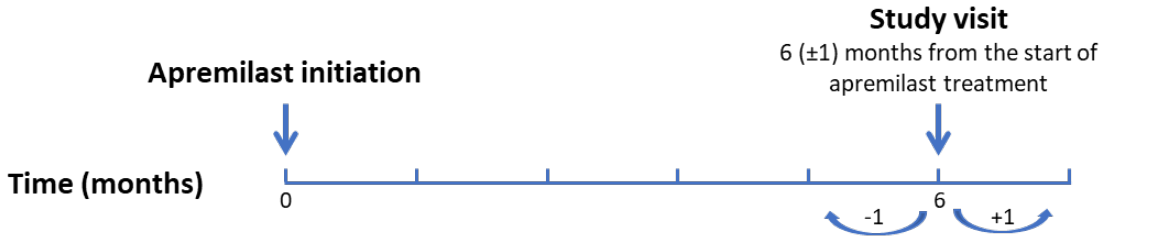
Figure S1. Overview of outcome measures



Baseline[a]

- patient demographics and characteristics
- co-morbidities
- prior psoriasis treatments
- time since psoriasis diagnosis
- clinical manifestations of psoriasis
- presence of psoriatic arthritis
- other significant disease history
- reasons for initiating apremilast

Apremilast outcome assessment

- apremilast treatment status
- disease severity (scores for PASI, PGA, BSA)
- impact on patient well-being (DLQI score)
- adverse events during apremilast therapy

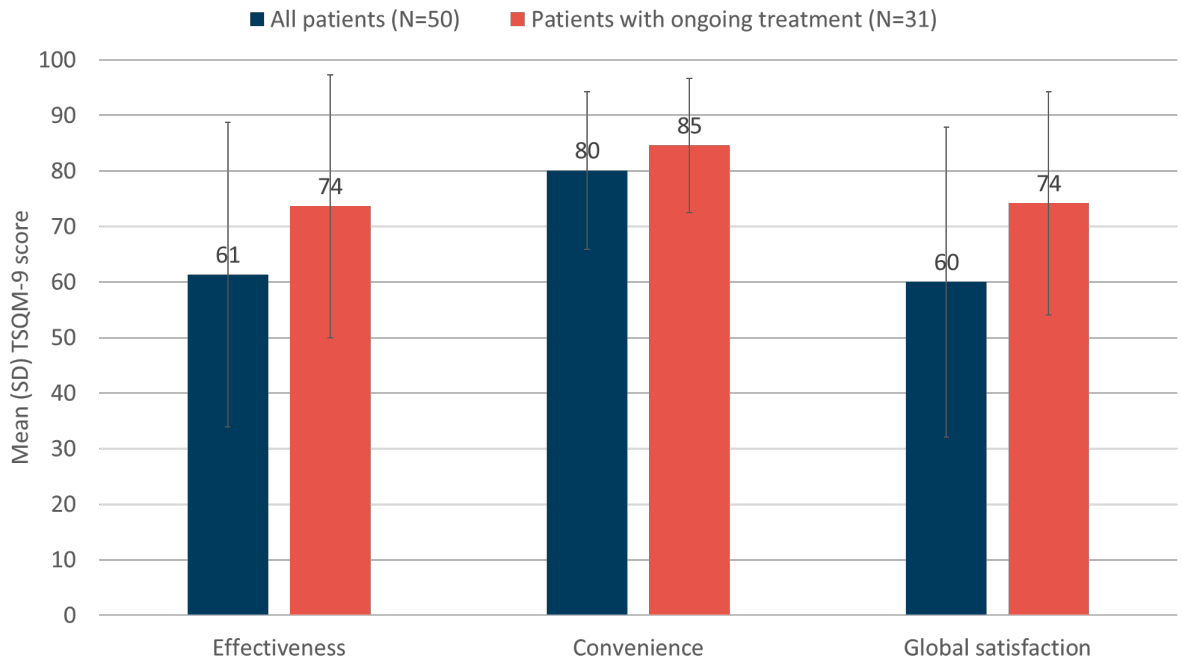
Apremilast satisfaction assessment

- patient and physician questionnaire assessing the treatment effect
- patient PBI questionnaires (PBQ, PNQ)
- TSQM-9

BSA, Body Surface Area; DLQI, Dermatology Life Quality Index; PASI, Psoriasis Area and Severity Index; PBI, Patient Benefit Index; PBQ, Patient Benefit Questionnaire; PGA, Physician's Global Assessment; PNQ, Patient Need Questionnaire; TSQM-9, Treatment Satisfaction Questionnaire for Medication

[a]Data retrospectively collected at study visit from patient medical records

Figure S2. Patients' satisfaction with apremilast treatment according to the TSQM-9 score

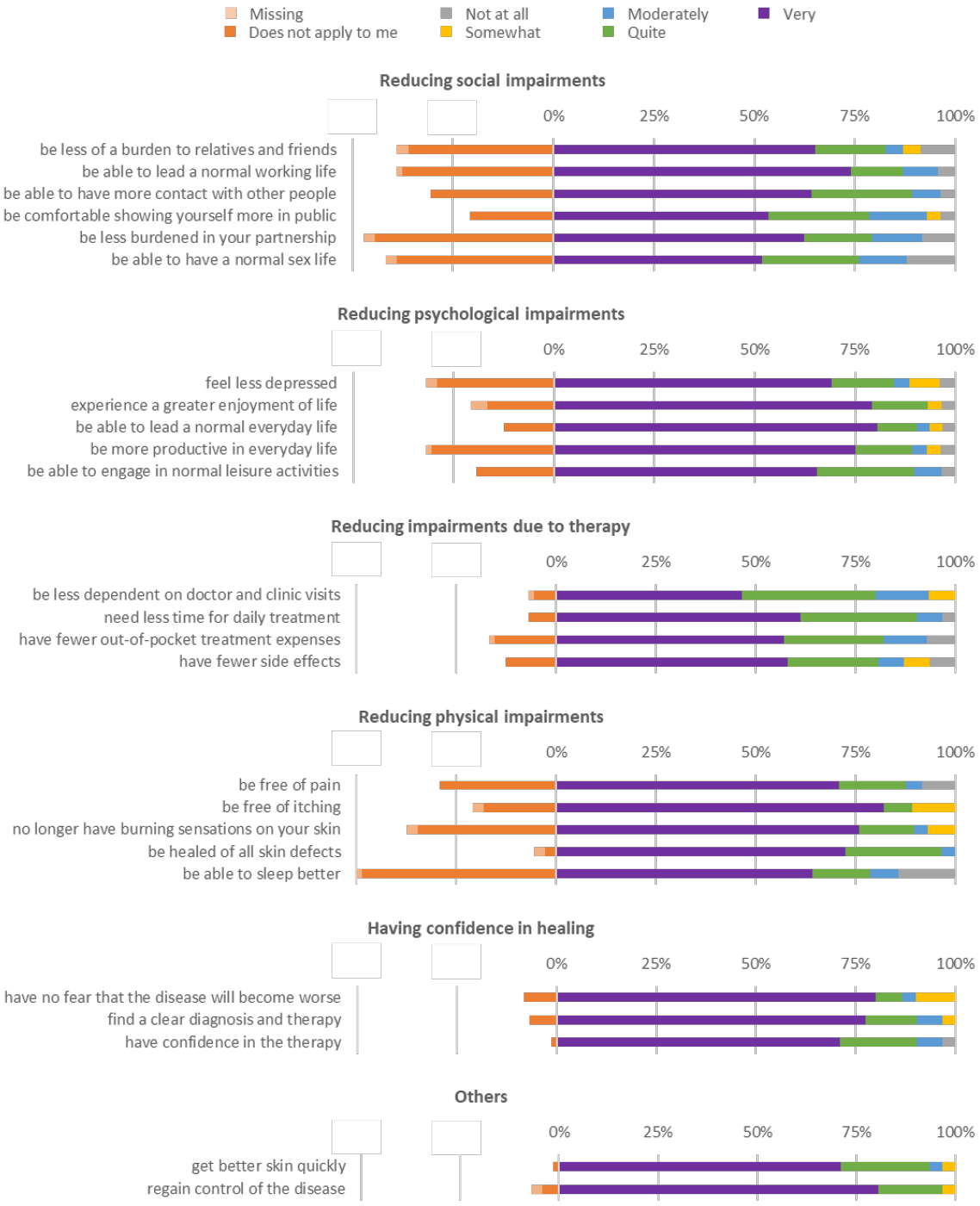


SD, standard deviation; TSQM, treatment satisfaction questionnaire for medication

The TSQM-9 score ranges from zero to 100, with 100 representing maximum satisfaction

Figure S3. Patients' treatment goals (A) and their achievement under apremilast therapy (B)

A. Patients' treatment goals (Patient Need Questionnaire, PNQ)



B. Achievement of patients' subjective treatment goals under apremilast therapy (Patient Benefit Questionnaire, PBQ)

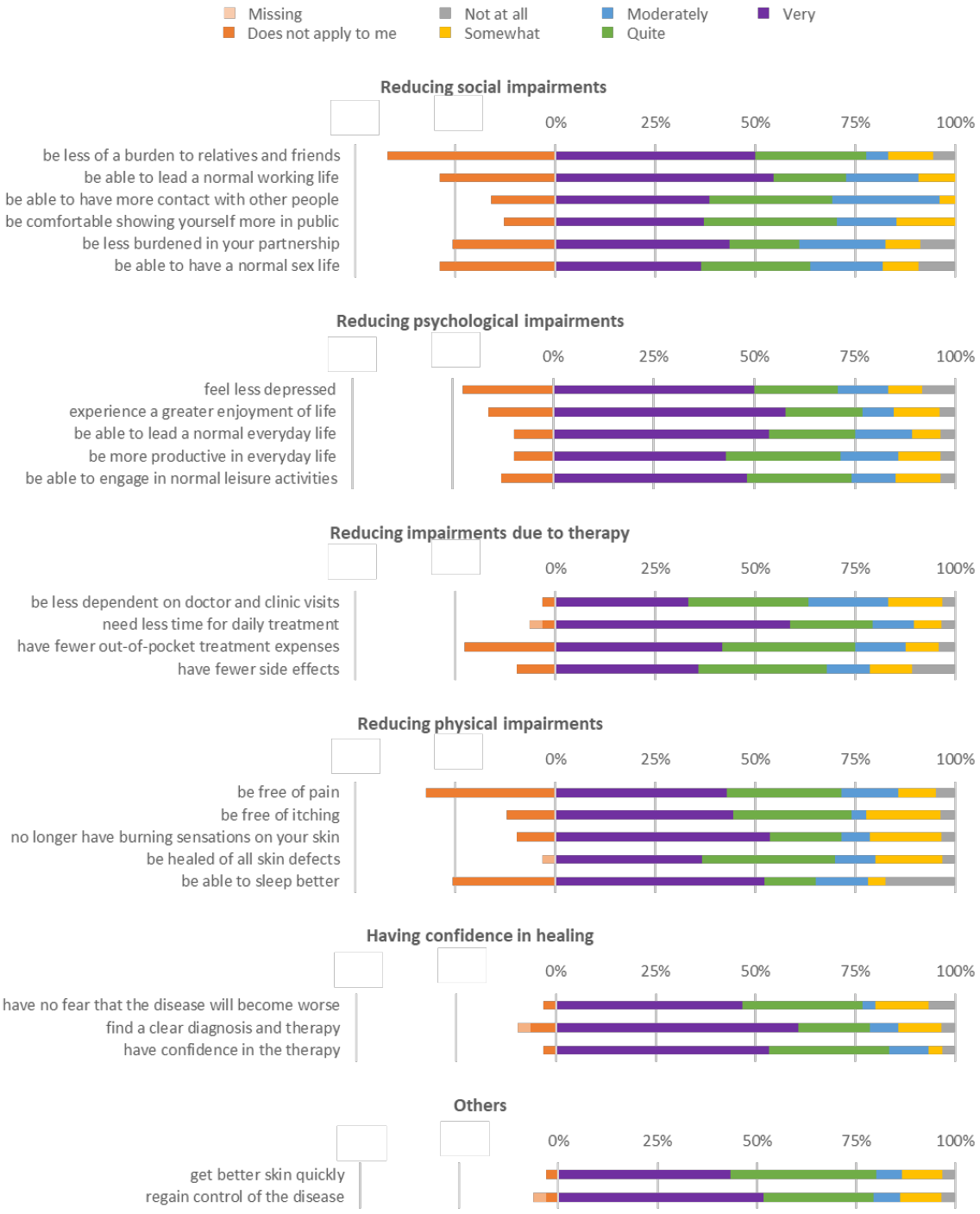


Table S1. Local reimbursement criteria for apremilast at the time of patient enrolment

COUNTRY	PRESCRIBING CRITERIA
CROATIA	Moderate-to-severe psoriasis (PASI >15 and / or BSA > 15% and / or DLQI > 15), exceptionally in case of involvement of specific parts of the skin as for example, face and / or scalp and / or the hands and / or feet and / or genital region and / or a strong involvement of the nail, and to those patients who did not respond or cannot tolerate or have contraindications to at least two different previously implemented systemic drug including PUVA therapy, retinoids, cyclosporine and methotrexate, as recommended by specialists dermato-venerologists. Treatment should be initiated and supervised by a physician who has experience with the diagnosis and treatment of psoriasis. Before introduction of the drug, the PASI and / or BSA value as well as the quality-of-life index, DLQI, should be evaluated/calculated. After initial titration, recommended dose is 30 mg twice daily. Evaluation of the effect of the therapy and disease activity should be performed after 16 weeks by calculating the value of PASI, BSA and DLQI. Continuation of treatment is possible only with a positive response to the treatment, meaning if after 16 weeks, at least 50% improvement in PASI value and improvement in DLQI values greater than 5 points were achieved and if after 28 weeks achieved at least 75% improvement in PASI or value of at least 50% PASI improvement with the decline in the value of DLQI values below 5. Treatment has to be approved by the Hospital Drug Committee.
SLOVENIA	According to SmPC
CZECH REPUBLIC	Treatment of moderate to severe psoriasis with a PASI greater than 10 in adults who have previously undergone one of the following conventional systemic treatments: acitretin, cyclosporine, methotrexate, or phototherapy (PUVA or NBUVB) and are not suitable for treatment with methotrexate mainly due to contraindications. Termination of treatment with apremilast is indicated in case of: - not reaching the PASI 50 value after 4 months of initial treatment, - a decrease in the effectiveness of the established treatment below PASI 50 or in the interval PASI 50 - 75, but with the current DLQI value greater than or equal to 5.

Table S2. Scores used for outcome assessment

Index or questionnaire	Objective	Score
Body Surface Area (BSA) (1)	Measure the Body Surface Area affected by psoriasis lesions	Mild: <3% of the surface area; moderate: 3---10%; severe: >10%
Psoriasis Area and Severity Index (PASI) (1)	Assess the severity of each lesion (according to erythema, induration, and desquamation) and the area affected (head, trunk, upper and lower limbs)	Mild: 0---5; moderate: 5---10; severe: >10
Physician's Global Assessment (PGA) (1)	Assess the severity of the lesions	Cleared: 0; almost cleared: 1; mild: 2; mild to moderate: 3; moderate: 4; moderate to severe: 5; severe: 6
Dermatology Life Quality Index (DLQI) (2)	Assess the effect of disease on quality of life	No effect: 0---1; minimal effect: 2---5; moderate effect: 6−10; large effect: 11−20; extremely large effect: 21−30
Patient Benefit Index (PBI) (3)	Assess the benefit of treatment from the patient's point of the view with a questionnaire on the therapeutic needs of the patient and another on the benefit attained by treatment	No benefit: 0; minimal benefit: 1; maximal benefit: 4
Treatment Satisfaction Questionnaire for Medication (TSQM-9) (4)	Assess treatment satisfaction in terms of effectiveness, convenience, and overall satisfaction	From 0−100, where 100 represents maximum satisfaction

References

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