

Online Resource

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Efficacy and Safety of Dupilumab Maintained in Adults \geq 60 Years of Age with Moderate-to-Severe Atopic Dermatitis: Analysis of Pooled Data from Four Randomized Clinical Trials

Jonathan I. Silverberg · Charles W. Lynde · Katrina Abuabara · Cataldo Patrino · Anna De Benedetto · Haixin Zhang · Ryan B. Thomas · Gaëlle Bégo-Le-Bagousse · Faisal A. Khokhar · Jignesh Vakil · Ainara Rodríguez Marco · Noah A. Levit

Corresponding author:

Noah Levit, Regeneron Pharmaceuticals, Inc., Tarrytown, NY, USA; noah.levit@regeneron.com

Fig. S1 Baseline biomarker levels. *IU* international units, *mL* milliliter, *pg* picograms.

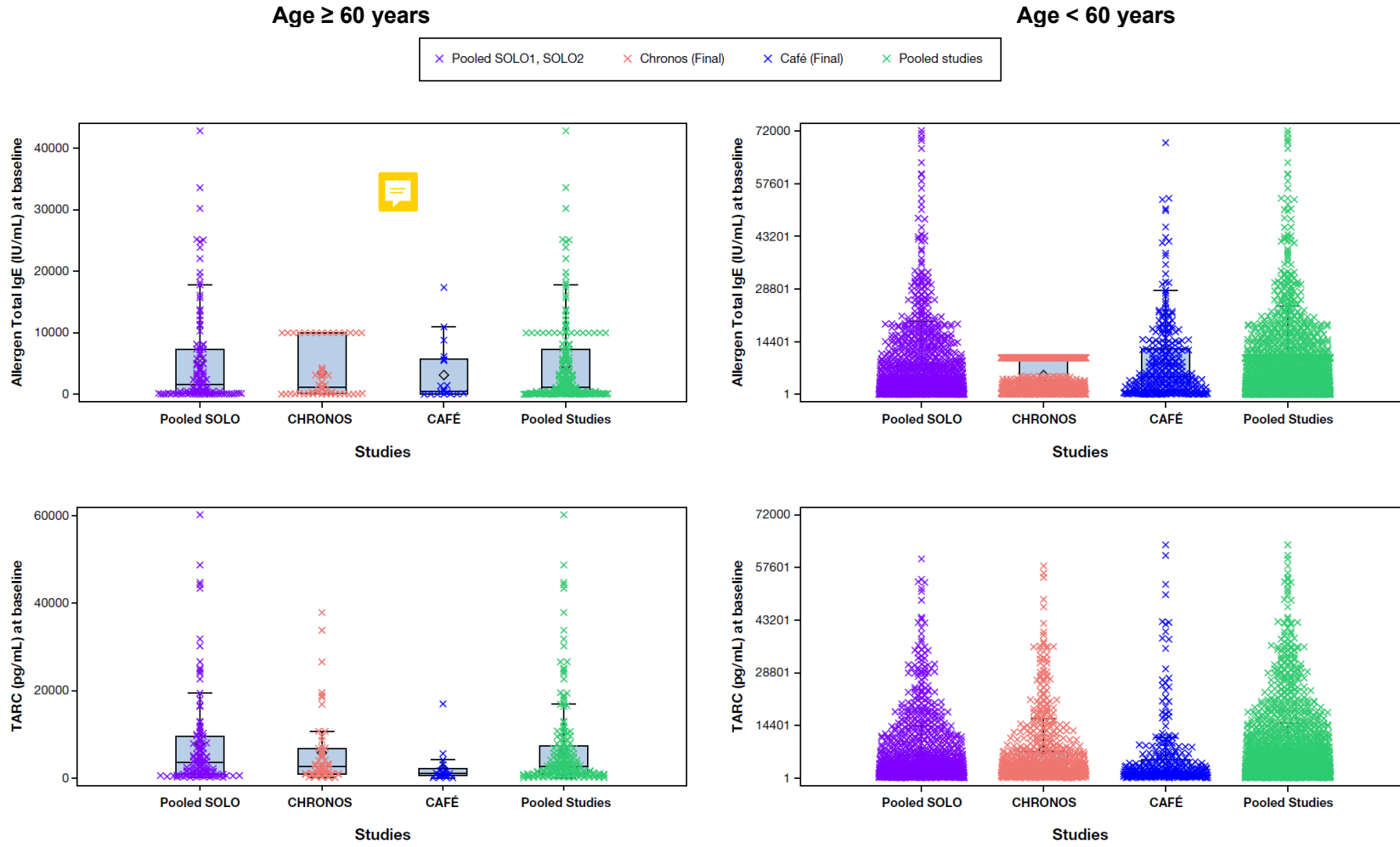
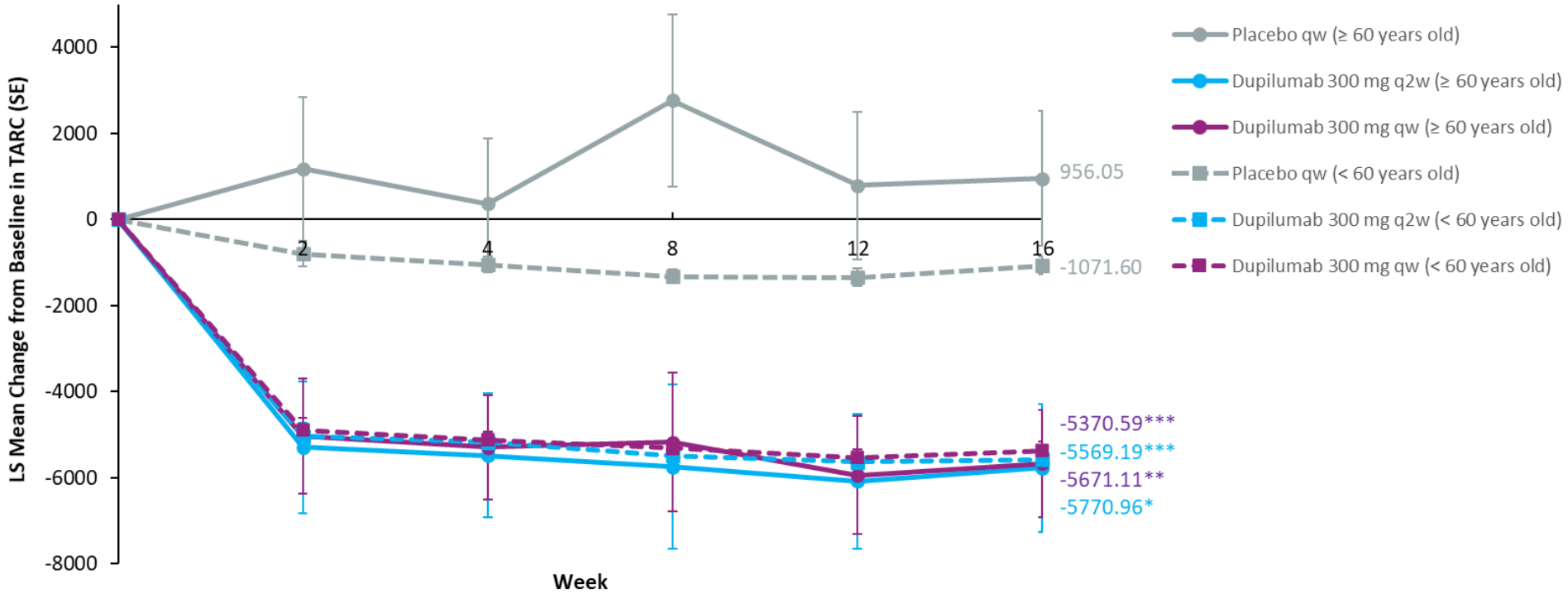
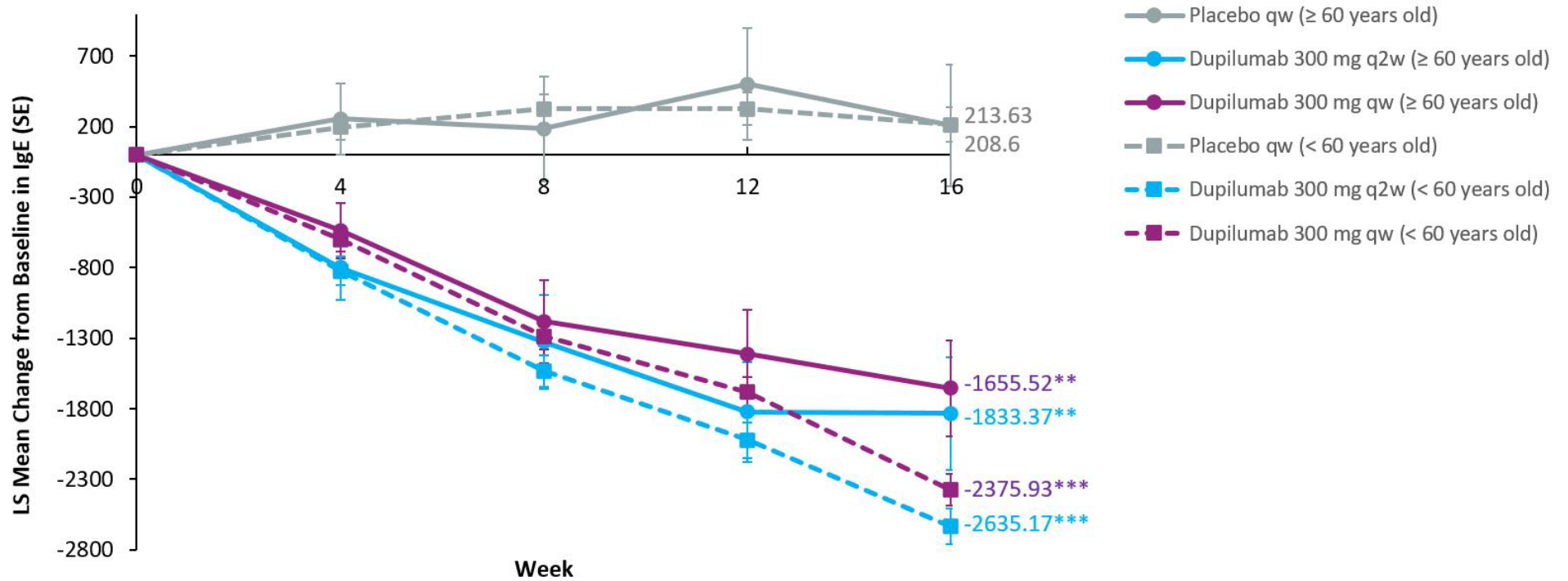


Fig. S2 LS mean change from baseline in TARC. Patients aged < 60 years treated with dupilumab 300 mg qw or q2w achieved a greater LS mean change from baseline in TARC from week 2 through week 16 vs placebo ($P < 0.0001$). Patients aged ≥ 60 years treated with dupilumab 300 mg qw or q2w achieved a greater LS mean change from baseline in TARC from week 2 through week 16 vs placebo ($P < 0.05$), and with dupilumab qw at week 16 vs placebo ($P < 0.001$).



LS least squares, q2w every 2 weeks, qw every week, TARC thymus and activation-regulated chemokine. * $P < 0.05$; ** $P < 0.001$; *** $P < 0.0001$

Fig. S3 LS mean change from baseline in total IgE. Patients aged < 60 years treated with dupilumab 300 mg qw or q2w achieved a greater LS mean change from baseline in total IgE from week 4 through week 16 vs placebo ($P < 0.0001$). Patients aged ≥ 60 years treated with dupilumab 300 mg qw or q2w achieved a greater LS mean change from baseline in total IgE from week 4 vs placebo ($P < 0.05$), and with dupilumab qw or q2w from week 12 through week 16 vs placebo ($P < 0.001$).



IgE immunoglobulin E, LS least squares, q2w every 2 weeks, qw every week. * $P < 0.05$; ** $P < 0.001$; *** $P < 0.0001$