

ELECTRONIC SUPPLEMENTARY MATERIAL

Early and Sustained Improvements in Symptoms and Quality of Life With Upadacitinib in Adults and Adolescents With Moderate-to-Severe Atopic Dermatitis: 52-Week Results From 2 Phase 3 Randomized Clinical Trials (Measure Up 1 and Measure Up 2)

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Supplemental Table 1 Pre-defined MCID and minimal disease burden threshold scores for reported PRO measures

PRO	MCID ^a	Minimal disease burden threshold score ^b
WP-NRS ^c	≥ 4-point improvement	0 or 1 ^d
POEM ^e	≥ 4-point improvement	0–2 ^f
DLQI	≥ 4-point improvement	0 or 1 ^g
ADerm-SS Skin Pain ^{c,e}	≥ 4-point improvement	0 or 1 ^d
ADerm-SS TSS-7 ^e	≥ 28-point improvement	0–11 ^d
ADerm-IS Sleep ^{c,e}	≥ 12-point improvement	0–3 ^d
ADerm-IS Emotional State ^e	≥ 11-point improvement	0–2 ^d
ADerm-IS Daily Activities ^e	≥ 14-point improvement	0–2 ^d
PGIS ^h	—	“absent” or “minimal”
PGIC ⁱ	—	“very much improved” or “much improved”
PGIT ^j	—	“extremely satisfied” or “very satisfied”

AD atopic dermatitis, ADerm-IS Atopic Dermatitis Impact Scale, ADerm-SS Atopic Dermatitis Symptom Scale, DLQI Dermatology Life Quality Index, MCID minimal clinically important differences, PGIC Patient Global Impression of Change, PGIS Patient Global Impression of Severity, PGIT Patient Global Impression of Treatment, POEM Patient-Oriented Eczema Measure, PRO patient-reported outcome, TSS-7 7-item total symptom score, WP-NRS Worst Pruritus Numerical Rating Scale

^aMCID-based endpoints were assessed among patients with a baseline score greater than or equal to the MCID value

^bMinimal disease burden endpoints were assessed among patients with a baseline score greater than the minimal disease burden threshold score

^cUp to week 16, endpoints were assessed daily and were reported as the weekly rolling average. Values were rounded to the nearest integer when determining the achievement of the minimal disease burden threshold score

^dThreshold score interpreted as “no or minimal” impact of AD on itch, skin pain, skin symptoms, sleep, emotional state, or daily activities

^eAbsolute threshold scores were assessed post hoc

^fThreshold score interpreted as “clear or almost clear” skin

^gThreshold score interpreted as “no” impact of AD on quality of life

^hOverall AD symptom severity assessed on a 7-level scale ranging from a score of 0 (“absent”) to 6 (“very severe”)

ⁱOverall change in AD symptoms assessed on a 7-level scale ranging from a score of 1 (“very much improved”) to 7 (“very much worse”)

^jOverall level of satisfaction/dissatisfaction with current treatment for AD assessed on a 7-level scale ranging from 1 (“extremely dissatisfied”) to 7 (“extremely satisfied”)

Fig. S1 Improvement in itch (OC).^a **a** WP-NRS (LS mean percent change from baseline). **b** SCORAD itch (LS mean percent change from baseline). Error bars indicate 95% confidence interval. ^aAssessed daily through week 16, and reported as the weekly average; assessed at scheduled visits thereafter. LS least squares, OC observed case, PBO placebo, SCORAD SCORing Atopic Dermatitis, UPA upadacitinib, WP-NRS Worst Pruritus Numerical Rating Scale

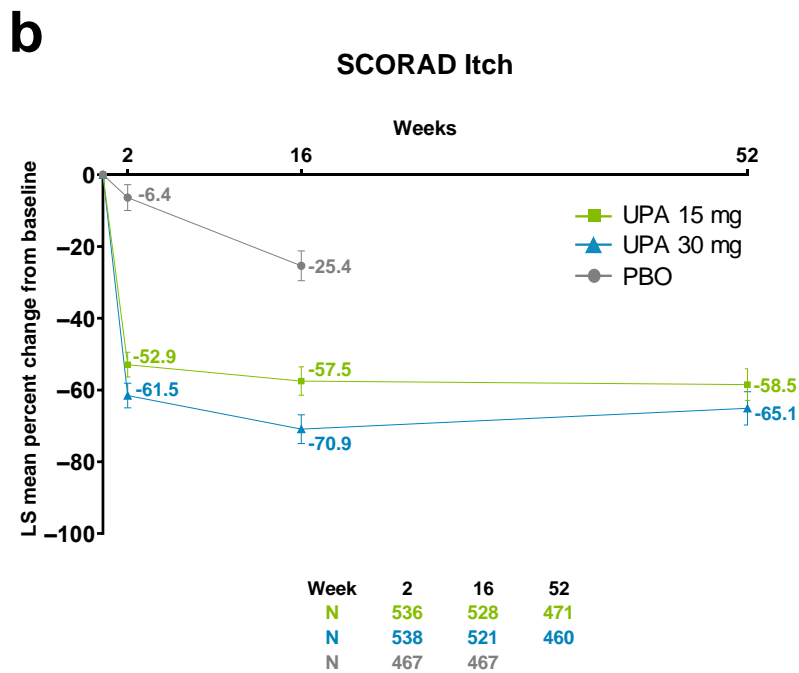
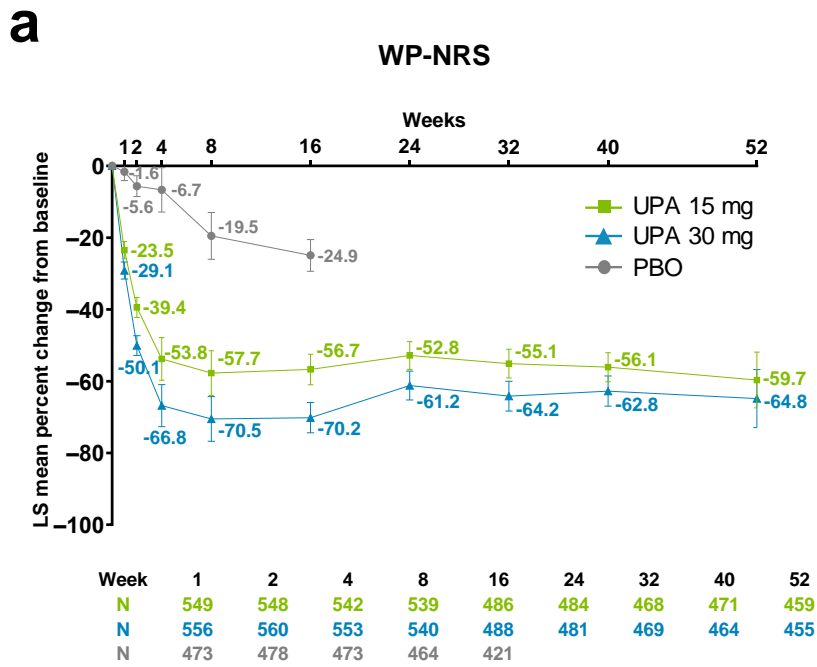


Fig. S2 Improvement in pain and other skin symptoms (OC). **a** ADerm-SS Skin Pain (LS mean percent change from baseline).^a **b** ADerm-SS TSS-7 (LS mean percent change from baseline). **c** POEM (LS mean percent change from baseline). Error bars indicate 95% confidence interval. ^aAssessed daily through week 16, and reported as the weekly average; assessed at scheduled visits thereafter. *ADerm-SS* Atopic Dermatitis Symptom Scale, *DLQI* Dermatology Life Quality Index, *LS* least squares, *OC* observed case, *POEM* Patient-Oriented Eczema Measure, *PBO* placebo, *TSS-7* 7-item total symptom score, *UPA* upadacitinib

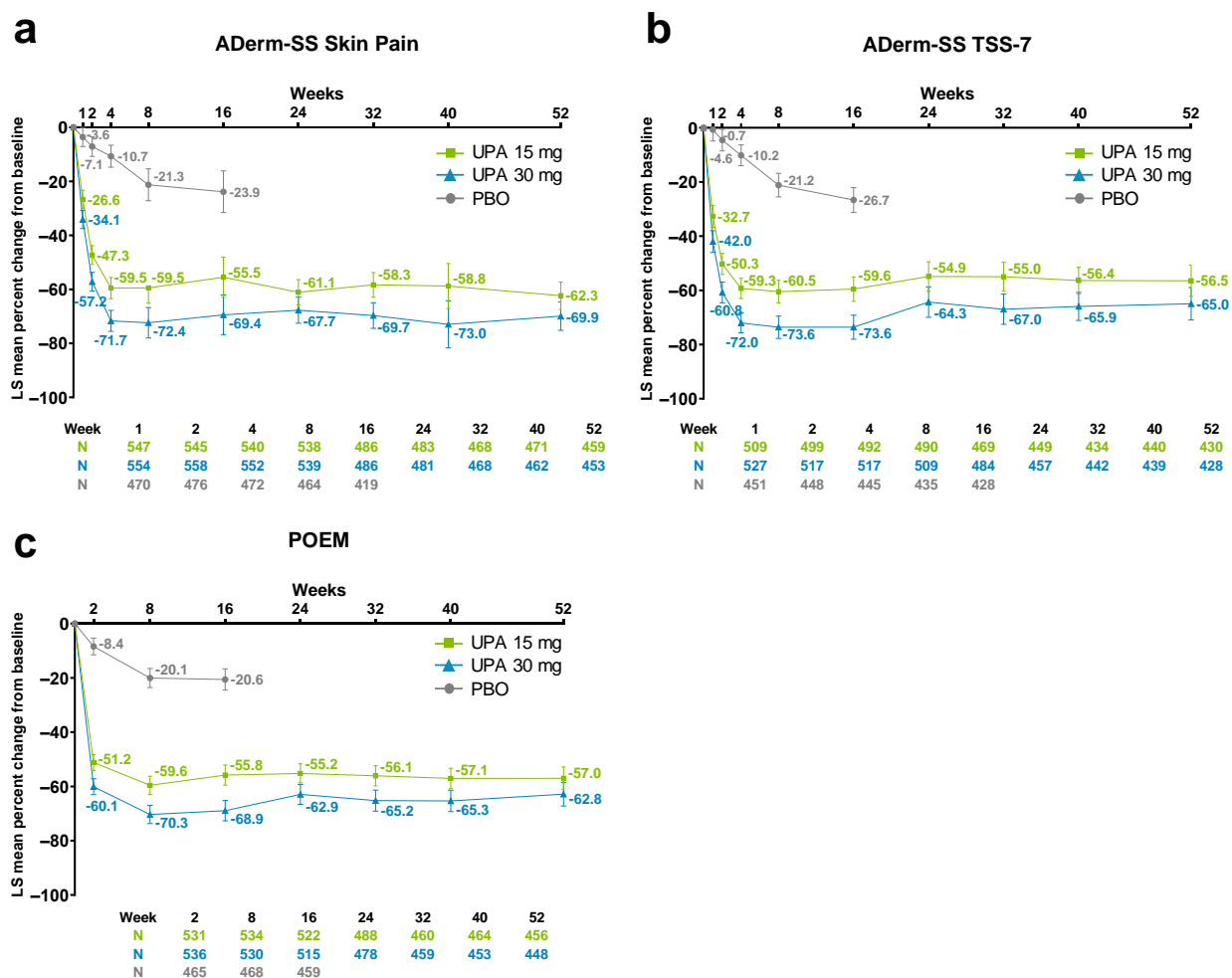


Fig. S3 Improvement in sleep (OC). **a** ADerm-IS Sleep (LS mean percent change from baseline). **b** SCORAD sleep (LS mean percent change from baseline). **c** POEM sleep 0. Error bars indicate 95% confidence interval. ^aAssessed daily through week 16, and reported as the weekly average; assessed at scheduled visits thereafter. ^bAssessed in patients with POEM sleep > 0 at baseline. ADerm-IS Atopic Dermatitis Impact Scale, LS least squares, OC observed case, POEM Patient-Oriented Eczema Measure, PBO placebo, SCORAD SCORing Atopic Dermatitis, UPA upadacitinib

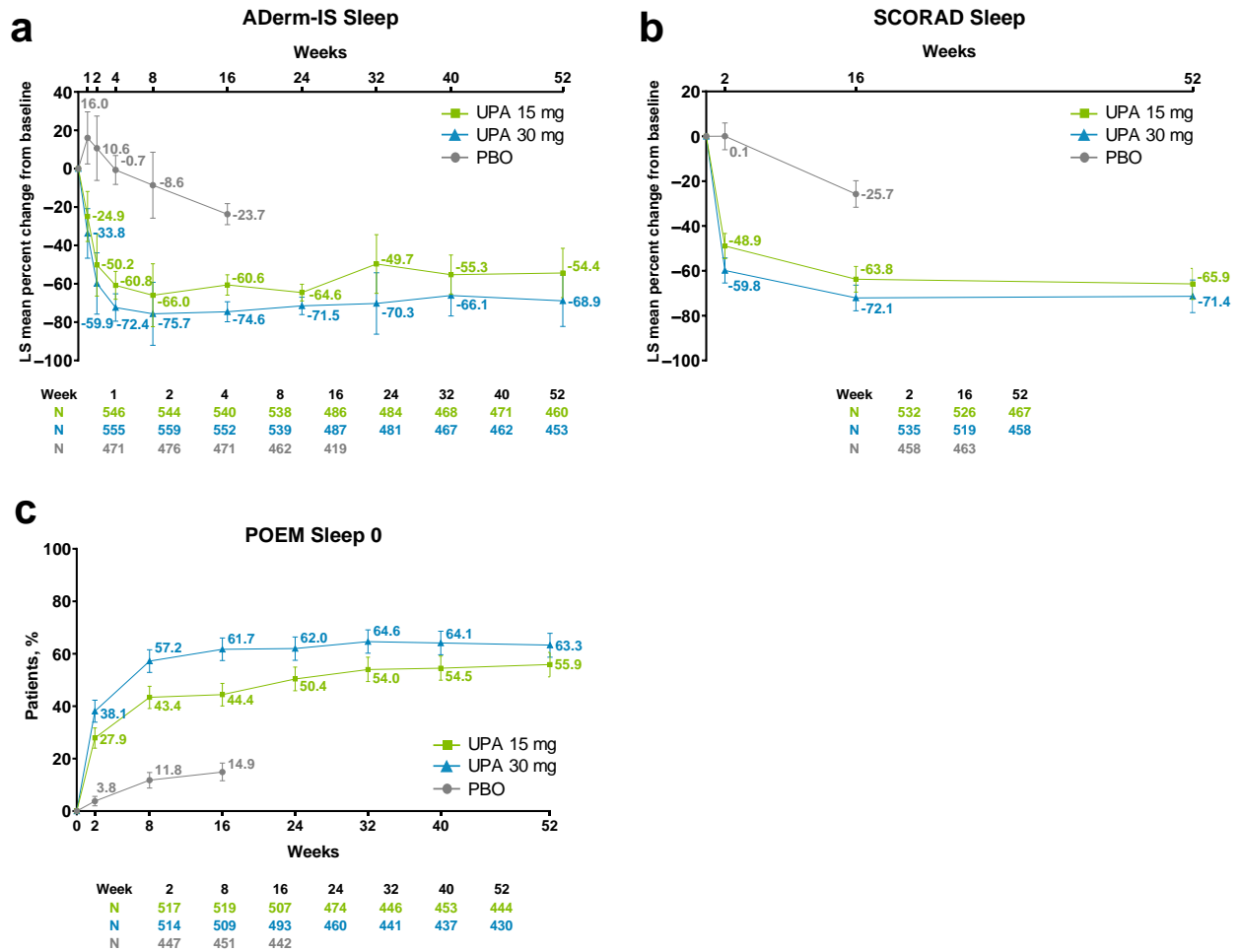


Fig. S4 Improvement in daily living, daily activities, and emotional state (OC). **a** DLQI (LS mean percent change from baseline). **b** CDLQI 0/1.^a **c** CDLQI (LS mean percent change from baseline). **d** ADerm-IS Daily Activities (LS mean percent change from baseline). **e** ADerm-IS Emotional State (LS mean percent change from baseline). Error bars indicate 95% confidence interval. ^aAssessed in patients with CDLQI > 1 at baseline. *ADerm-IS* Atopic Dermatitis Impact Scale, *CDLQI* Children's Dermatology Life Quality Index, *DLQI* Dermatology Life Quality Index, *LS* least squares, *OC* observed case, *PBO* placebo, *UPA* upadacitinib

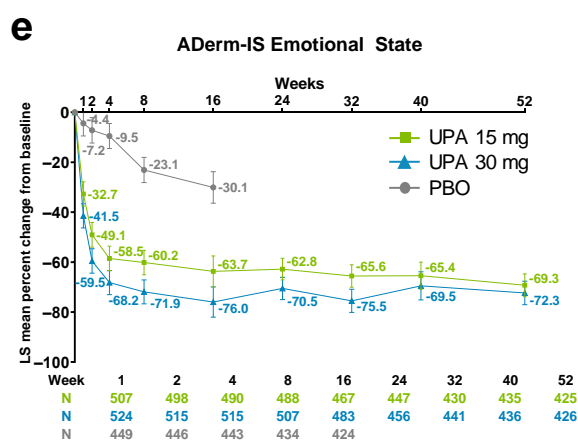
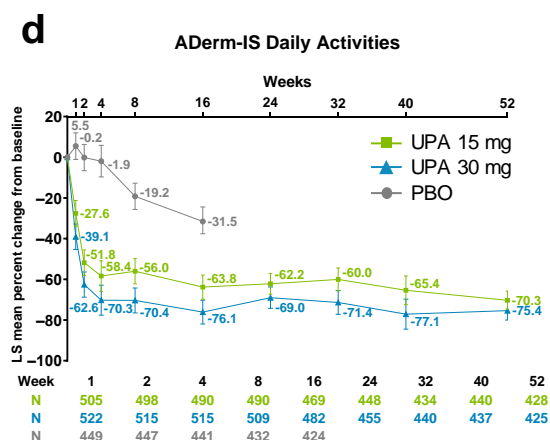
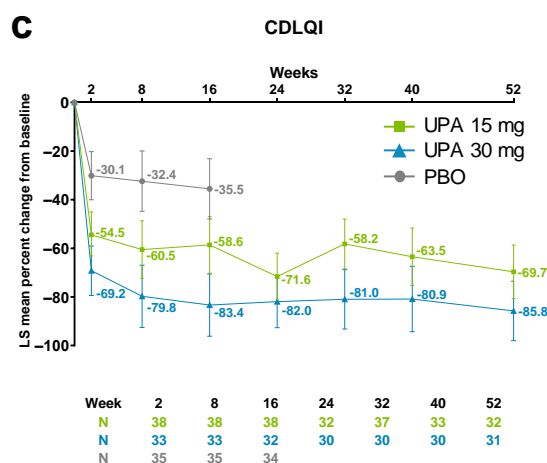
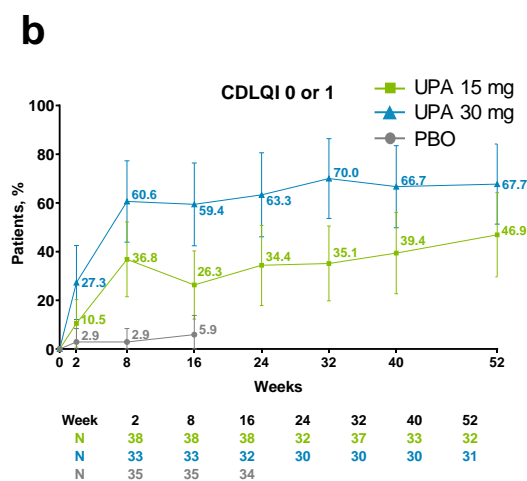
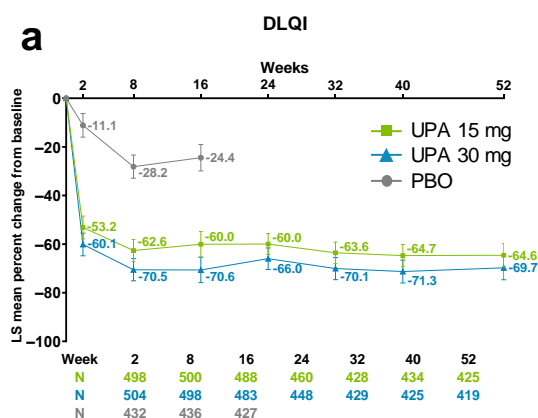


Fig. S5 Improvement in anxiety and depression (OC). HADS-A < 8 and HADS-D < 8.^a Error bars indicate 95% confidence interval. ^aAssessed in patients with HADS-A ≥ 8 or HADS-D ≥ 8 at baseline. HADS-A Hospital Anxiety and Depression Scale–Anxiety, HADS-D Hospital Anxiety and Depression Scale–Depression, OC observed case, PBO placebo, UPA upadacitinib

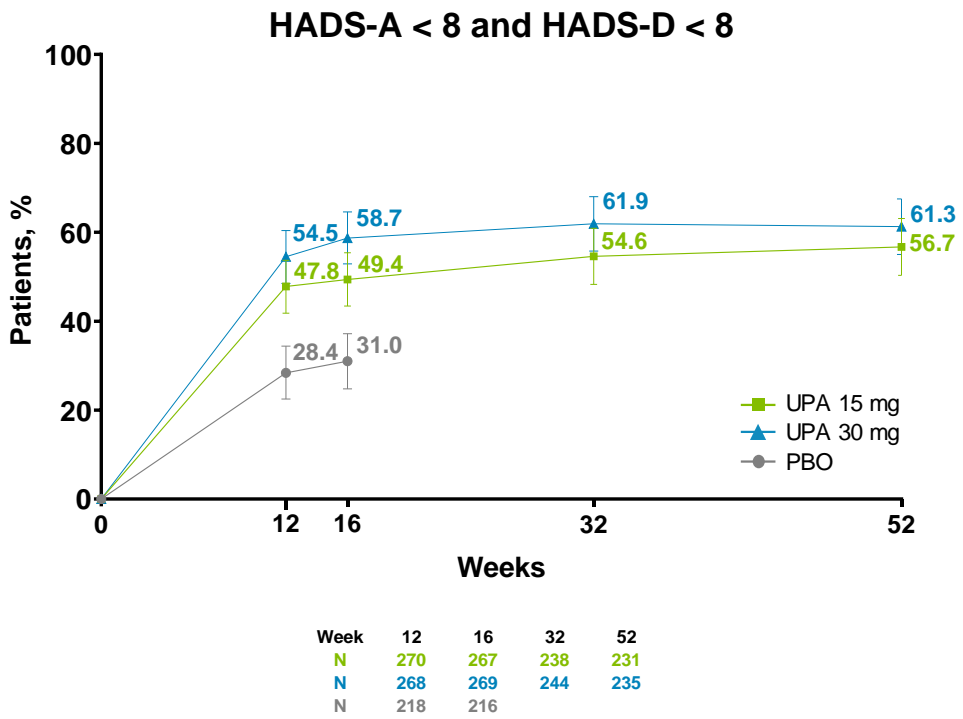


Fig. S6 Patient global impressions through 52 weeks of upadacitinib treatment (OC). **a** PGIS^a “minimal” or “absent.” **b** PGIC “very much improved” or “much improved.” **c** PGIT^b “extremely satisfied” or “very satisfied.” Error bars indicate 95% confidence interval. ^aAssessed in patients without “absent” or “minimal” symptoms at baseline. ^bAssessed in patients who were not “very satisfied” or “extremely satisfied” at baseline. OC observed case, PBO placebo, PGIC Patient Global Impression of Change, PGIS Patient Global Impression of Severity, PGIT Patient Global Impression of Treatment, UPA upadacitinib

