

Patient-Reported Outcomes for Tirbanibulin Effectiveness and Safety in Actinic Keratosis in Real-world Settings: PROAK Study Protocol

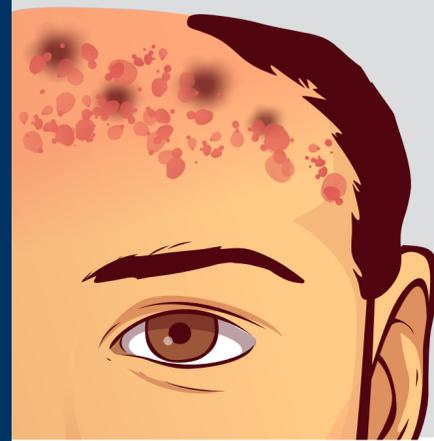
Brian Berman,¹ April Armstrong,² Mark Lebwohl,³ Ayman Grada,⁴ Neal Bhatia,⁵ Vishal A. Patel,⁶ Darrel Rigel,⁷ James Del Rosso,⁸ Todd Schlessinger,⁹ Leon Kircik,³ Raidah Salem,⁴ Ismail Kasujee¹⁰

¹University of Miami Miller School of Medicine, Miami, FL, USA; ²Keck School of Medicine University of Southern California, Los Angeles, CA, USA; ³Icahn School of Medicine, Mount Sinai, New York, NY, USA; ⁴Almirall LLC, Malvern, PA, USA; ⁵Therapeutics Clinical Research, San Diego, CA, USA; ⁶George Washington School of Medicine and Health Sciences, Washington, DC, USA; ⁷NYU Grossman School of Medicine, New York, NY, USA; ⁸JDR Dermatology Research/Thomas Dermatology, Las Vegas, NV, USA; ⁹Clinical Research Center of the Carolinas, Charleston, SC, USA; ¹⁰Almirall SA, Barcelona, Spain

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INTRODUCTION

- Actinic keratosis (AK) lesions occur primarily on visible, sun-exposed areas such as the face and scalp and may negatively affect health-related quality of life (HRQoL)
- Common treatments are also associated with severe local skin reactions (LSRs)^{1,2} that may further impact HRQoL and treatment adherence²⁻⁵
- Therefore, it is vital to consider patient experiences and preferences when weighing treatment options
- Tirbanibulin demonstrated safety and efficacy in treating AK in phase 3 clinical trials⁶
- In 2021, a consensus meeting generated an AK-specific expert panel questionnaire (EPQ), which includes questions about skin appearance, LSRs, and treatment satisfaction, to complement the validated Skindex-16 and treatment satisfaction questionnaire for medicine (TSQM-9) tools
- Here we describe the protocol for the Patient-Reported Outcomes for Actinic Keratosis (PROAK) study

DESIGN

- This a prospective cohort study enrolling 300 participants ≥18 years with AK on the face or scalp treated with tirbanibulin 1% ointment from 50 community practices across the United States (Figure 1)

Patient inclusion criteria

- Diagnosed with AK of the face and scalp
- Has clinically typical, visible, and discrete AK lesions
- Considered as a potential candidate for tirbanibulin treatment to manage their AK
- Male or female, aged 18 years and above at the time of initiation of treatment with tirbanibulin
- Willing to avoid excessive sun or UV exposure and/or use relevant sunscreen protection and protective clothing during the study duration
- Able to read and write English
- Provide consent to participate in the study

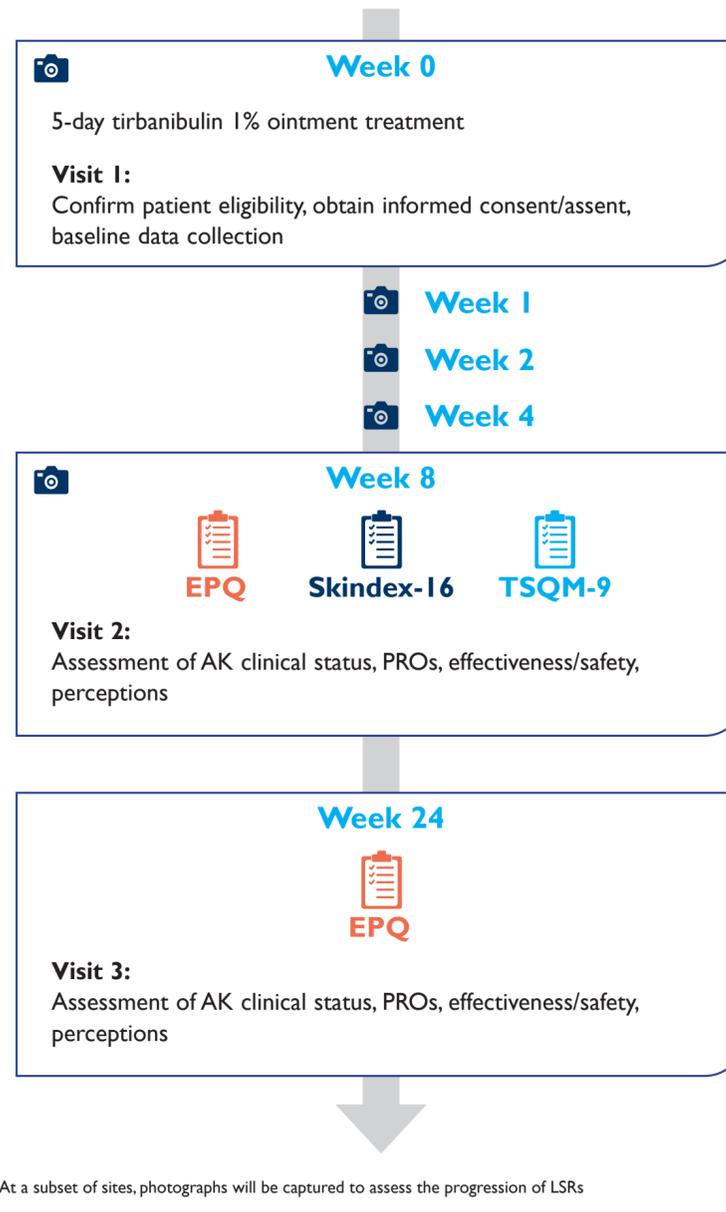
Key exclusion criteria

- Patients with any dermatological condition of the face or scalp that could interfere with the clinical evaluations
- Hypertrophic AK lesions, open wounds, or suspected skin cancers within close proximity of the treatment area

Assessments

- The primary endpoint is patient-reported outcomes at week 8 assessed by Skindex-16, with additional endpoints described in Figure 2
- Recognizing the need for an AK-specific patient-reported outcome (PRO) instrument, the EPQ (Figure 3) was developed during a consensus advisory board held in 2021; after discussion of proposed questions, revisions were made and consensus on all items was reached by all 9 advisers
- LSRs will be documented by clinicians and, in a subset of sites, will be photographed and have severity graded by clinicians; this subset of patients will also be asked to record a 1- to 3-minute audio narrating their experience with treatment
- Tirbanibulin safety and tolerability will be monitored throughout the study

Figure 1. PROAK study design. AK, actinic keratosis; EPQ, expert panel questionnaire; PRO, patient-reported outcome.



OBJECTIVE

- To assess the impact of tirbanibulin on patient-reported outcomes for patients with AK in real-world settings

CONCLUSIONS

- The real-world PROAK study will gather insights into patient experiences with tirbanibulin as a treatment for AK using validated health-related PRO measures and a recently developed EPQ
- This new EPQ was developed to capture disease-specific patient perspectives and meaningful outcomes to patients that may not be fully reflected in existing questionnaires

Figure 2. Comparison of questionnaires used to assess outcomes.

<p>Skindex-16 Number of items: 16 6-point scale (never bothered to always bothered)</p> <ul style="list-style-type: none"> • Signs and symptoms (itching, burning, hurting, irritation, persistence/recurrence, appearance) • Emotional impact (worry about condition, frustration, embarrassment, being annoyed, feeling depressed) • Impact on interactions with others, desire to be with people, showing affection, daily activities, work or other activities
<p>TSQM-9 Number of items: 9 7-point scale (extremely dissatisfied to extremely satisfied) or 5-point (not at all confident to extremely confident) scales</p> <ul style="list-style-type: none"> • Prevent/treat condition and relieve symptoms • Time to treatment effect • Convenience and ease of use • Treatment satisfaction • Confidence in benefits of treatment

TSQM, treatment satisfaction questionnaire for medicine.

Figure 3. Actinic keratosis-specific questionnaire.

<p>EPQ Number of items: 11 Consensus reached by 9/9 advisers</p> <p>Patient-reported</p> <ol style="list-style-type: none"> Overall appearance (5-pt scale: much worse to much improved) Satisfaction with improvement in appearance (7-pt scale: extremely dissatisfied to extremely satisfied) Satisfaction with improvement in texture (5-pt scale: much shorter to much longer) Satisfaction with duration of skin reactions (5-pt scale: much shorter to much longer) Severity of skin reactions compared to previous treatment Impact on daily activities compared to previous treatment (5-pt scale: much better with tirbanibulin to much worse with tirbanibulin) Convenience and ease of use Overall satisfaction Likelihood of retreating with tirbanibulin (5-pt scale: very unlikely to very likely) <p>Clinician-reported</p> <ol style="list-style-type: none"> Overall improvement in AK (5-pt scale: not cleared to completely cleared) Severity of photodamage in treated area (4-pt scale: absent to severe)

AK, actinic keratosis; EPQ, expert panel questionnaire.