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Atopic Dermatitis: Update Bulletin #1

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Abstracts

This edition presents the views and insights from three key opinion leaders (KOLs) from North America and Europe on a variety of recent events in the atopic dermatitis (AD) market, including; Vanda Pharmaceuticals' announcement of results from an 8-week randomised Phase II clinical study of tradipitant as a monotherapy in the treatment of chronic pruritus in patients with atopic dermatitis; Sanofi and Regeneron's announcement of positive results from the Phase III CAFÉ study of Dupixent (dupilumab) in adults with moderate-to-severe atopic dermatitis who are inadequately controlled with, or intolerant to the broad immunosuppressant drug cyclosporine A (CSA), or when this treatment is medically inadvisable; and AnaptysBio's announcement of positive proof-of-concept data for ANB020, its investigational anti-IL-33 monoclonal antibody (mAb), in an ongoing Phase IIa clinical trial in adult patients with moderate-to-severe atopic dermatitis.

Business Questions:

Are KOLs optimistic about tradipitant's mechanism of action and its potential in the management of chronic pruritus in patients with AD?

What do KOLs recommend for Phase III studies with tradipitant, and should Vanda Pharmaceuticals include biomarker and gene expression data?

What impact will tradipitant's oral formulation have on the product's attractiveness?

Are KOLs concerned about the price of tradipitant, and do they believe it can work as a monotherapy?

Where do KOLs predict that tradipitant will be used in the treatment paradigm;

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as an adjunctive therapy, as a monotherapy, or in combination with other treatments?

Do KOLs view the CAFÉ study as a significant step forward, and what impact will it have on the need to use cyclosporine A?

How do KOLs see the future treatment paradigm of atopic dermatitis evolving as it relates to combination biologic approaches?

Are KOLs excited about ANB020's mechanism of action, or does the targeting of IL-33 as a potential treatment strategy for atopic dermatitis have a valid biological rationale?

What were KOL reactions to the Phase II data for ANB020, and what will KOLs look for from Phase III studies?

What will be the key drivers of use for ANB020; clinical data, cost or both?

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