

# Impact of Body Mass Index and Obesity on Clinical Response to Systemic Treatment for Psoriasis (Evidence from the Psocare Project)

**First published:** 13/10/2010

**Last updated:** 29/03/2024

Study

Finalised

## Administrative details

### EU PAS number

EUPAS1620

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### Study ID

16746

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### DARWIN EU® study

No

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### Study countries

 Italy

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### Study description

**Objective:** Our aim was to assess the role of the body mass index (BMI) in the clinical response to systemic treatment for psoriasis. **Methods:** A nationwide cohort study of patients receiving a new systemic treatment for plaque psoriasis at reference centres in Italy was conducted. Information was gathered through a web-based electronic form. Patients being maintained on the same medication and with data available at 8 and 16 weeks by March 31, 2007, were eligible. The outcome was a reduction in the Psoriasis Area Severity Index (PASI) of at least 75% at follow-up compared to baseline (PASI-75). **Results:** Out of 8,072 patients enrolled, 2,368 were eligible and analysable at 8 weeks and 2,042 at 16 weeks. PASI-75 was achieved by 819 patients (34.5%) at 8 weeks and 1,034 (50.6%) at 16 weeks. The proportion steadily decreased with increased values of BMI. Compared to normal weight (BMI = 20–24) the adjusted odds ratio for achieving PASI-75 in obese patients was 0.73 (95% CI = 0.58–0.93) at 8 weeks and 0.62 (95% CI = 0.49–0.79) at 16 weeks. The impact of the BMI did not show remarkable variations according to the drug prescribed at entry. **Conclusion:** The BMI affects the early clinical response to systemic treatment for psoriasis.

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## Study status

Finalised

## Research institutions and networks

### Institutions

Centro Studi GISED



Italy

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**Institution**

**Not-for-profit**

**Multiple centres: 147 centres are involved in the study**

**Psocare, Italy**

## Networks

**Psocare**

## Contact details

### **Study institution contact**

Luigi Naldi [luigi.naldi@gised.it](mailto:luigi.naldi@gised.it)

**Study contact**

[luigi.naldi@gised.it](mailto:luigi.naldi@gised.it)

### **Primary lead investigator**

Luigi Naldi

**Primary lead investigator**

# Study timelines

## **Date when funding contract was signed**

Planned: 01/06/2005

Actual: 24/04/2012

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## **Study start date**

Planned: 01/09/2005

Actual: 02/10/2012

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## **Date of final study report**

Planned: 31/03/2007

Actual: 05/11/2013

# Sources of funding

- Other

## More details on funding

Agenzia Italiana del Farmaco

# Regulatory

## **Was the study required by a regulatory body?**

No

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## **Is the study required by a Risk Management Plan (RMP)?**

Not applicable

# Methodological aspects

## Study type

**Study topic:**

Disease /health condition  
Human medicinal product

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**Study type:**

Non-interventional study

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**Scope of the study:**

Assessment of risk minimisation measure implementation or effectiveness  
Drug utilisation

**Data collection methods:**

Primary data collection

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**Main study objective:**

-to assess the prevalence of exposure to topical NSAIDs in a sample of hospital controls selected as in case-control studies-to develop strict diagnostic criteria for severe photosensitivity-to estimate the incidence of severe photosensitivity leading to hospitalization in selected sampling areas.

## Study Design

**Non-interventional study design**

Case-control

## Study drug and medical condition

**Anatomical Therapeutic Chemical (ATC) code**

(M01A) ANTIINFLAMMATORY AND ANTIRHEUMATIC PRODUCTS, NON-STEROIDS

ANTIINFLAMMATORY AND ANTIRHEUMATIC PRODUCTS, NON-STEROIDS

(M01AE03) ketoprofen

ketoprofen

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### **Medical condition to be studied**

Photosensitivity reaction

## Population studied

### **Short description of the study population**

Patients receiving a new systemic treatment for plaque psoriasis at reference centres in Italy.

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### **Age groups**

- Adults (18 to < 46 years)
  - Adults (46 to < 65 years)
  - Adults (65 to < 75 years)
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### **Special population of interest**

Other

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### **Special population of interest, other**

Plaque psoriasis patients

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### **Estimated number of subjects**

900

## Study design details

## **Outcomes**

-the estimate of prevalence of exposure to topical ketoprofen in the general population. A secondary outcome will be the prevalence of exposure to other topical NSAIDs -The definition of a standard operative procedure for the identification and diagnosis of photosensitivity reactions-The estimate of the incidence of photosensitivity reactions in selected European areas

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## **Data analysis plan**

Row and age-standardized prevalence rates together with their 95% confidence intervals (CI) will be calculated for NSAIDs exposure as well as for other variables of interest. Stratification by gender and country will be used for general descriptive statistics as well as for exposure rates. Differences among categories will be tested with Pearson's chi-squared test or Fisher's exact test for nominal variables and by Mann-Whitney U test for continuous variables. To estimate possible selection biases in the collection of the sample, a comparison of general characteristics of individuals undergoing the interview and, in particular, their exposure rates to topical NSAIDs, with the expected distribution based on demographic and general sales data obtained from individual areas will be made. Whenever it will be possible risk estimate for exposure will be derived from odds ratio calculation. Multiple logistic regressions will be used to adjust risk estimates for potential confounders.

## **Data management**

## **ENCePP Seal**

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The use of the ENCePP Seal has been discontinued since February 2025. The ENCePP Seal fields are retained in the display mode for transparency but are no longer maintained.

## Data sources

### Data sources (types)

Other

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### Data sources (types), other

Prospective patient-based data collection

## Use of a Common Data Model (CDM)

### CDM mapping

No

## Data quality specifications

### Check conformance

Unknown

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### Check completeness

Unknown

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### Check stability

Unknown

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### Check logical consistency

Unknown

## Data characterisation

### **Data characterisation conducted**

Unknown