Long-term, observational cohort study of adults with plaque psoriasis (PsO), who are new users of deucravacitinib, tumour necrosis factor inhibitor (TNFi) biologics, non-TNFi biologics, or non-biologic therapies in the real-world clinical setting

First published: 01/08/2025 Last updated: 06/11/2025





Administrative details

EU PAS number

EUPAS1000000659

Study ID

1000000659

DARWIN EU® study

No

Study countries

Denmark
Finland
France
Germany
Norway
Spain
Study status
Planned
Decearch institutions and naturalis
Research institutions and networks
Institutions
University of Southern Denmark (SDU)
Denmark
First published: 01/02/2024
Last updated: 27/03/2024
Institution Educational Institution
Bordeaux PharmacoEpi, University of Bordeaux
France
First published: 07/02/2023
Last updated: 08/12/2025

Institution Educational Institution Hospital/Clinic/Other health care facility
Not-for-profit ENCePP partner
The Norwegian Institute of Public Health
Norway
First published: 01/02/2024
Last updated: 22/07/2024
Institution Hospital/Clinic/Other health care facility Other
University Medical Centre Hamburg-Eppendorf
Germany
First published: 01/02/2024
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Institution Educational Institution Hospital/Clinic/Other health care facility
Institution (Inspiration)
Spanish Academy of Dermatology and
Venereology (AEDV)
Vericionally (ALDV)
University of Eastern Finland (UEF)

Networks

The SIGMA Consortium (SIGMA)
Denmark
European Union
France
Germany
Italy
☐ Netherlands
Norway
Spain
Sweden
United Kingdom
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Network ENCePP partner

Contact details

Study institution contact

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Study contact

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Primary lead investigator

Julie Scotto

Primary lead investigator

Study timelines

Date when funding contract was signed

Actual: 06/01/2025

Study start date

Planned: 15/12/2025

Date of final study report

Planned: 24/12/2032

Sources of funding

• Pharmaceutical company and other private sector

More details on funding

Bristol-Myers Squibb

Study protocol

IM011-194_Redacted Protocol_04Nov2025.pdf (17.37 MB)

Regulatory



Yes

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

EU RMP category 3 (required)

Methodological aspects

Study type

Study type list

Study topic:

Disease /health condition

Study type:

Non-interventional study

Study design:

This is an observational cohort study using longitudinal real-world data from 6 databases and/or established disease registries in Europe. PsO treatment episodes for each patient will be classified into 4 cohorts: deucravacitinib, non-TNFi biologics, TNFi biologics, and non-biologic therapies.

Main study objective:

The primary objective of this study is to estimate the incidence rates of serious/select infections, malignancies, and select cardiovascular (CV) events among adult patients with PsO who are new users of deucravacitinib or

treatments in 1 of the 3 comparator cohorts (CV events of interest are MACE, eMACE, and VTE) and to compare the risk of serious/select infections, malignancies, and select CV events (MACE, eMACE, and VTE) between deucravacitinib and each of the 3 comparator cohorts.

Study drug and medical condition

Medicinal product name

SOTYKTU

Study drug International non-proprietary name (INN) or common name

DEUCRAVACITINIB

Anatomical Therapeutic Chemical (ATC) code

(L04AF07) deucravacitinib deucravacitinib

Medical condition to be studied

Psoriasis

Additional medical condition(s)

Plaque Psoriasis

Population studied

Short description of the study population

The study will include adult patients in Europe with diagnosed Plaque Psoriasis (PsO) who are new users of deucravacitinib or treatments from 1 of the 3

Age groups

- Adult and elderly population (≥18 years)
 - Adults (18 to < 65 years)
 - Adults (18 to < 46 years)
 - Adults (46 to < 65 years)
 - Elderly (≥ 65 years)
 - Adults (65 to < 75 years)
 - Adults (75 to < 85 years)
 - Adults (85 years and over)

Estimated number of subjects

12800

Study design details

Outcomes

The outcomes measured for this study include serious/select infections, malignancies, select CV events (MACE, eMACE, and VTE), and fatal events of the safety outcomes.

Data analysis plan

Descriptive statistics for baseline demographic data, clinical characteristics, and duration of exposure will be presented by treatment cohort.

Incidence rates and 95% confidence intervals (CIs) will be calculated for each outcome of interest over the entire observation period and at 1 year, 3 years, and 5 years of follow-up. Incidence rates will be reported overall for each treatment cohort and stratified by whether or not patients were PsO treatment-experienced (ie, received a systemic therapy from 1 of the other treatment

cohorts prior to their episode index date except for deucravacitinib).

For each outcome of interest, weighted Cox proportional hazards regression models will be developed to estimate adjusted (ie, marginal) hazard ratios (HR) and 95% CIs for deucravacitinib versus each of the 3 comparator cohorts (pairwise comparisons). Inverse probability of treatment weighting (IPTW) based on propensity score (PS) will be used to account for observed differences in characteristics across the treatment cohorts.

Patients can contribute multiple treatment episodes to each analysis, so the resulting correlated variance will be reflected in the final analysis using a robust variance estimator. Additionally, several sensitivity analyses will be conducted to assess the robustness of the results.

Data management

ENCePP Seal

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 source(s)

Système National des Données de Santé (French national health system main database)

Data source(s), other

The Danish Registries

The Norwegian National Registries

The Finnish National Registries

The German Registry on the Treatment of Psoriasis with Biologics and

Systemics (PsoBest)

The Spanish Registry of Systemic Treatments in Psoriasis (BIOBADADERM)

Data sources (types)

Disease registry

Other

Data sources (types), other

National Health Registry/Data System

Use of a Common Data Model (CDM)

CDM mapping

Yes

Data quality specifications

Check conformance

Yes

Check completeness

Yes

Check stability

Unknown

Check logical consistency

Yes

Data characterisation

Data characterisation conducted

Yes

Data characterisation moment

after extract-transform-load to a common data model