

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

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Study

Planned

## Administrative details

### EU PAS number

EUPAS1000000659

### Study ID

1000000659

### DARWIN EU® study

No

### Study countries

☐ Denmark

☐ Finland

☐ France

☐ Germany

☐ Norway

☐ Spain

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## Study status

Planned

# Research institutions and networks

## Institutions

### Bristol-Myers Squibb (BMS)

**First published:** 01/02/2024

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Institution

## Contact details

### Study institution contact

Transparency and Disclosure Lead [ctt.group@bms.com](mailto:ctt.group@bms.com)

Study contact

[ctt.group@bms.com](mailto:ctt.group@bms.com)

### Primary lead investigator

Julie Scotto

Primary lead investigator

## Study timelines

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

Actual: 06/01/2025

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### **Study start date**

Planned: 15/12/2025

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### **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

## Regulatory

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

Yes

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

EU RMP category 3 (required)

## Methodological aspects

**Study topic:**

Disease /health condition

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**Study type:**

Non-interventional study

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**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

**Name of medicine**

SOTYKTU

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

DEUCRAVACITINIB

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**Anatomical Therapeutic Chemical (ATC) code**

(L04AF07) deucravacitinib

deucravacitinib

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**Medical condition to be studied**

Psoriasis

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**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 comparator cohorts during the indexing period.

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**Age groups**

Adult and elderly population ( $\geq 18$  years)

Adults (18 to  $< 65$  years)

Adults (18 to  $< 46$  years)

Adults (46 to  $< 65$  years)

Elderly ( $\geq 65$  years)

Adults (65 to  $< 75$  years)

Adults (75 to  $< 85$  years)

Adults (85 years and over)

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**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.

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## 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)

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### 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)

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### Data sources (types)

[Disease registry](#)

[Other](#)

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### 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

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**Check completeness**

Yes

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**Check stability**

Unknown

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**Check logical consistency**

Yes

## Data characterisation

**Data characterisation conducted**

Yes

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**Data characterisation moment**

after extract-transform-load to a common data model