

Starting an oral JAK inhibitor for atopic dermatitis

Stephanie DePouw-Simmerman, DNP, APRN

Nurse Practitioner

Conflict of Interest

- AbbVie
- Arcutis
- Bristol Myers
- Dermavant
- EPI Health
- Novartis
- Sun

Obstacles

- Fear of the land mine
- Understand the history and box warning
- Context for concerns
- Adapting change in practice
- Unmet needs

Tale of the Box Warning

- Different drug – tofacitinib
- Rheumatoid Arthritis patients, >65 y/o, concomitant MXT
- Increased risk of heart attack or stroke, cancer, blood clots, serious infections, and death for tofacitinib when compared to a TNF inhibitor
- Fair and balanced discussion?

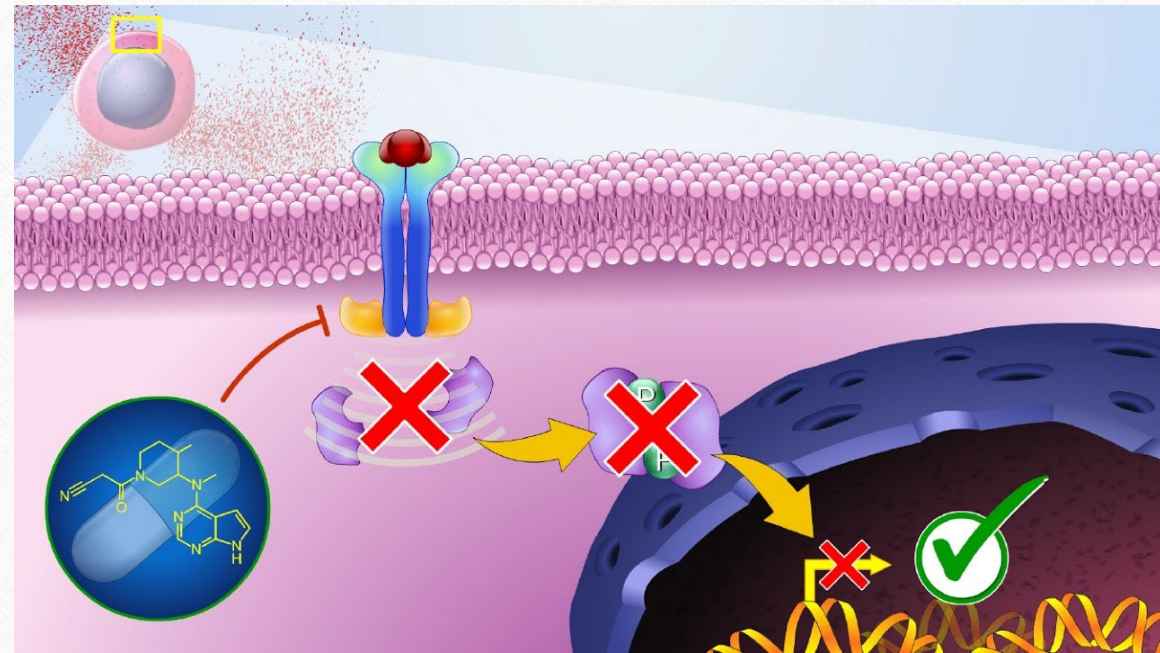
Janus Kinase (JAK) Inhibitors

- Small molecule medication
 - not a biologic
- Upadacitinib (Rinvoq)
 - JAK-1 Inhibitor
- Abrocitinib (Cibinqo)
 - JAK-1 Inhibitor

The Oversimplification

JAK inhibitors antagonize JAK protein function and prevent activation of the pathway

- ✗ No phosphorylation of receptor subunits
- ✗ No receptor docking site prevents STAT phosphorylation
- ✗ No translocation of STAT dimer complex to nucleus
- ✗ No transcription of pro-inflammatory genes



Operational Efficiencies

- Labs
- Vaccinations
- Follow-up schedule
- Navigating patient discussion on options, risks vs benefits
- Patient Expectations
 - Itch relief
 - Skin clearance

Screening

- Not a Current smoker
- Not a Previous smoker
- No History of high cholesterol
- No History of malignancy or cancer
- No History of blood clot/s
- No Family history of blood clots
- Not Being treated for an infection
- No History of Chronic or recurrent infection
- No History of Diabetes
- No History of Lung Disease
- No History of HIV
- No History of Weak Immune System
- No History of TB
- No Active TB
- No History of shingles
- No History of or active Hep B and or C

Initial Labs

- TB
- Viral Hepatitis
- CBC
- CMP
- Lipids
- HIV*
- Pregnancy*

Vaccinate

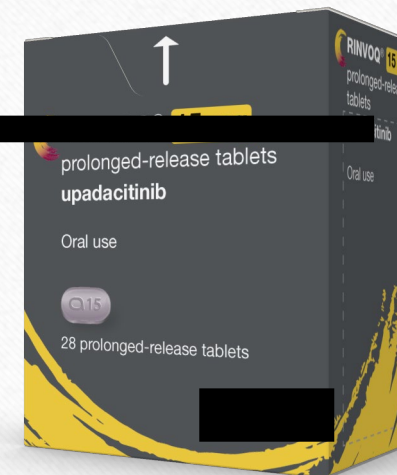
- Ensure up to date prior to initiating
- Consider Zoster, even those 19 and older on immune suppressing therapies

Follow-up Lab Monitoring

- CBC, CMP, Lipids
 - @ 4-12 weeks
 - Repeat Annually
- TB Annually

Upadacitinib (Rinvoq)

- MOA
 - Inhibits JAK 1
 - leading to disruption of cytokine and growth factor signaling pathways
- Indication
 - Mod to severe Atopic Dermatitis in those 12 and older



Upadacitinib (Rinvoq) cont.

- Dosing

- 12-65 y/o initiate 15 mg qd, can increase to 30 mg qd, decrease dose once goal achieved
- >65 y/o 15 mg qd *recommended to not increase dose

- ISI

- Acne
- Zoster
- Severe hepatic impairment and end stage renal disease
- Check for drug interactions
- URI
- Hypersensitivity

Upadacitinib (Rinvoq) cont.

- Managing expectations
 - Skin clearing in first few weeks
 - Itch relief as early as 2 days, significant by the end of 1 month
 - Facial acne, mild to moderate resolves around 90 days

Abrocitinib (Cibinqo)

- MOA
 - Inhibits JAK1 specific by blocking adenosine triphosphate (ATP) binding site
- Indication
 - Mod/Severe Atopic Dermatitis for those 12 and older



Practical Dermatology

Abrocitinib (Cibinqo) Cont.

- Dosing

- 50mg, 100mg and 200mg tablet
- Start with 100mg qd
 - Consider increase to 200mg qd if non-responder @ 12 weeks
 - Labs 4 weeks after any dose adjustment (cbc, cmp, lipids)

- ISI

- GI Side Effects
- Renal impairment adjustments
- Avoid in ESRD or hepatic disease
- Avoid use with antiplatelet therapies except low dose aspirin during first 3 mos of trmt, screen for drug interactions
- Nasopharyngitis, nausea, headache

Abrocitinib (Cibinqo) Cont.

- Managing expectations
 - Skin clearance in first few weeks
 - Itch relief within a couple weeks

Challenging Cases

- Noncompliance with labs
- Fears with Access/Cost
 - Field reimbursement managers
- Admin Burden
 - ensure your patient is committed to plan of care
- Acne
 - Standard therapies effective
- GI
 - Standard OTC remedies

Know your resources

- MSL- Medical Science Liaison
- FRM- Field Reimbursement Managers
- Sales Reps
- TLL- Thought Leader Liaison
- Specialty Pharmacy

References

- Cameron, M. (2023). JAK Inhibitor Safety: What Did ORAL Surveillance Reach Teach Us? *The Dermatologist*, 31(2). Accessed March 15, 2023. <https://www.hmpgloballearningnetwork.com/site/thederm/cover-story/jak-inhibitor-safety-what-did-oral-surveillance-really-teach-us>
- CIBINQO full prescribing information. US Food and Drug Administration. Revised January 2022. Accessed March 8, 2023. https://www.accessdata.fda.gov/drugsatfda_docs/label/2022/213871s000lbl.pdf
- RINVOQ full prescribing information. US Food and Drug Administration. Revised April 2022. Accessed March 13, 2023. https://www.accessdata.fda.gov/drugsatfda_docs/label/2022/211675s003lbl.pdf
- Mechanism of Action of JAK inhibitors. <https://www.youtube.com/watch?v=dnnsqiDjAgM>
- <http://www.abbviepro.com/gb/en/immunology/rheumatology/products/psa/dosing.html>
- <https://practicaldermatology.com/news/fda-approves-pfizers-cibinqo-for-moderate-to-severe-ad-in-adults>

References

- Vaccination. Centers for Disease Control. May 2022
<https://www.cdc.gov/vaccines/vpd/shingles/public/shingrix/index.html>