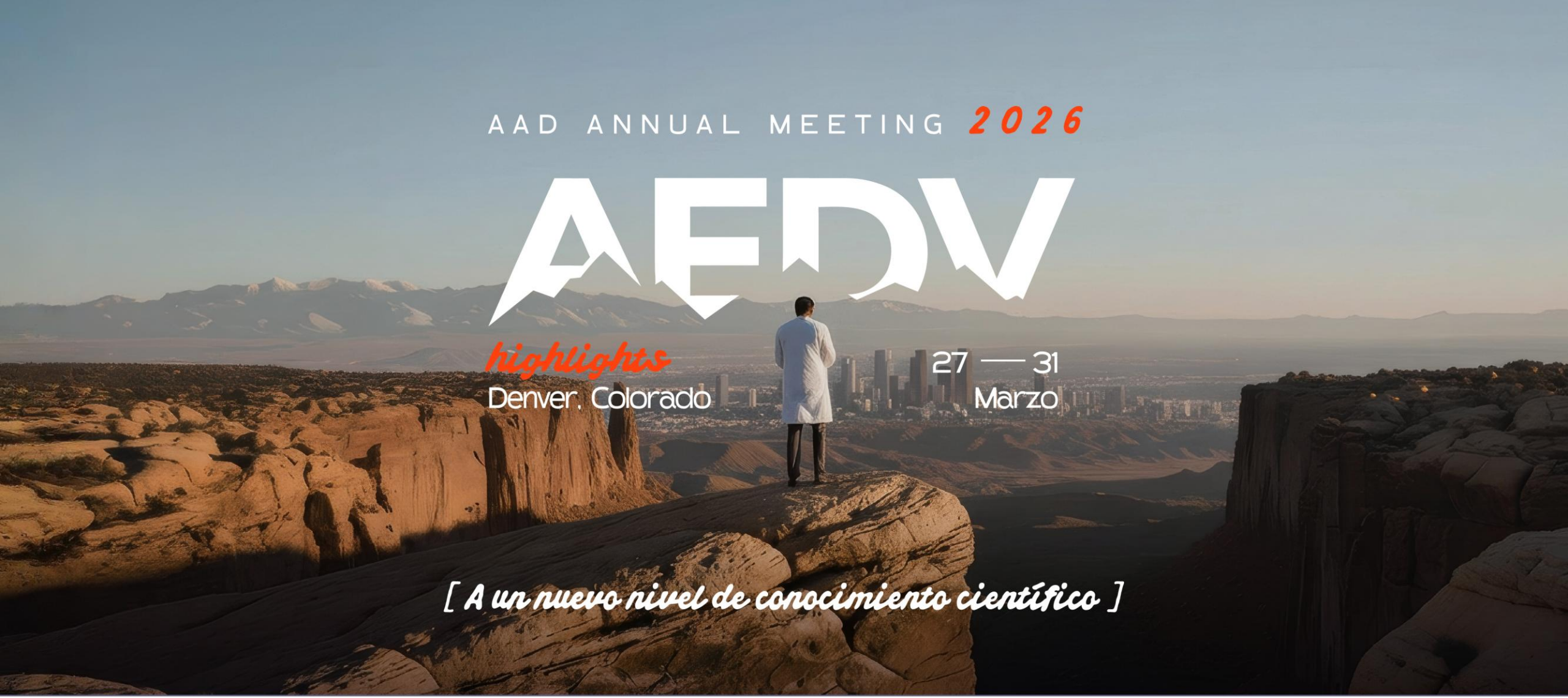


Una iniciativa de:

AEDV 1909 ACADEMIA ESPAÑOLA DE DERMATOLOGÍA Y VENEREOLOGÍA

FUNDACIÓN AEDV PIEL SANA ACADEMIA ESPAÑOLA DE DERMATOLOGÍA Y VENEREOLOGÍA

Con el patrocinio de:

ucb

Dermatología Pediátrica

Dermatitis atópica y más

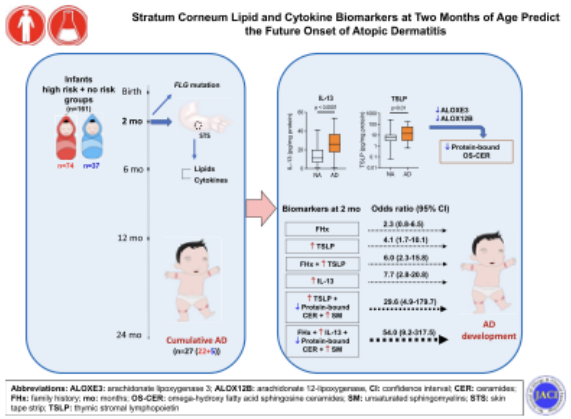
Helena Iznardo Ruiz

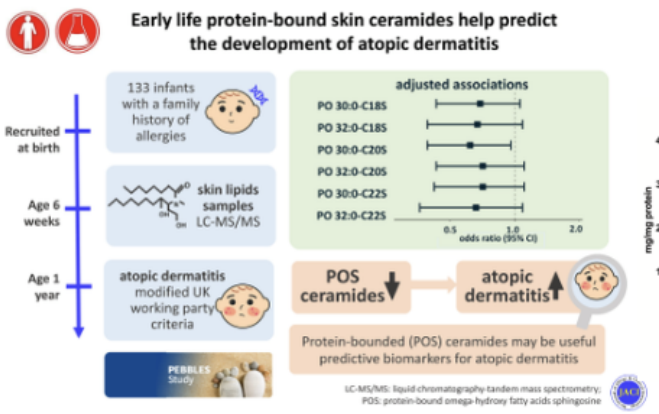
Hospital de Dénia, Alicante

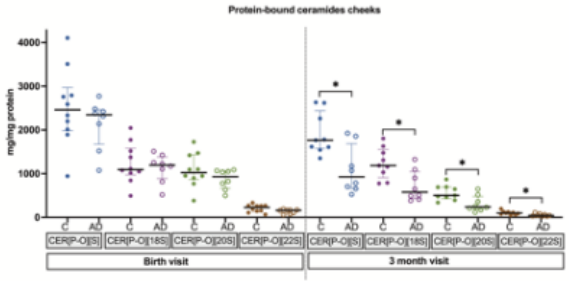
Sin conflictos de interés para esta presentación

Marcha atópica

Decreased Expression of Protein-Bound Ceramides Identified in Future AD Infants by STS Lipidomic Analysis is Seen in Three Different Birth Cohort Studies at 6-8 Weeks of Age







Korean birth cohort study
Berdyshev E. et al.
J Allergy Clin Immunol, 2023

Australian birth cohort study
Chang C.-L., et al.
J Allergy Clin Immunol, 2025

NJH birth cohort
Hui et al.,
J Allergy Clin Immunol, 2025

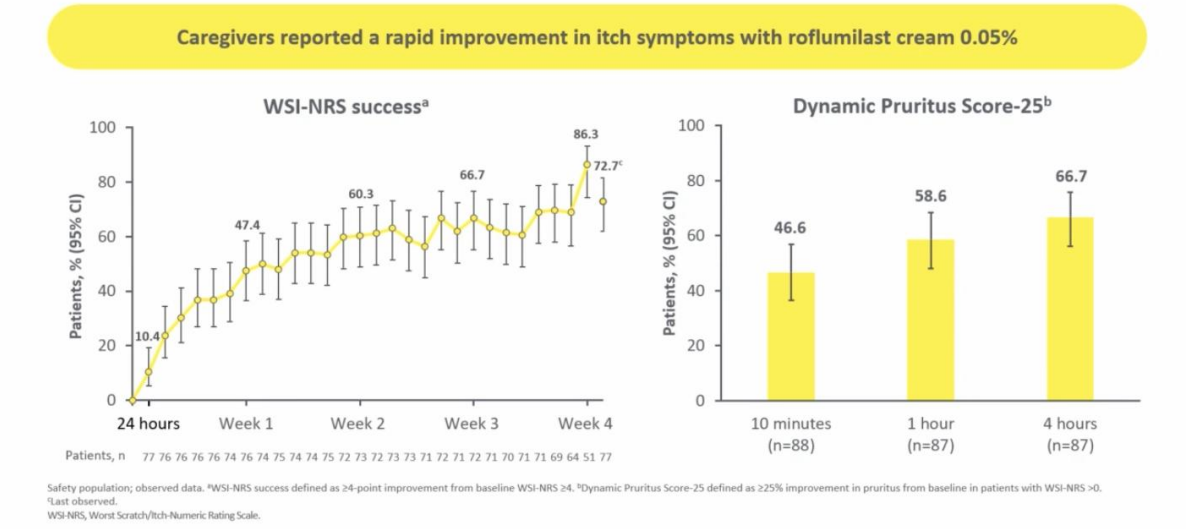
Waizman DA, et al., Sci Immunol 2025 Apr 4;10(106):eadn0688

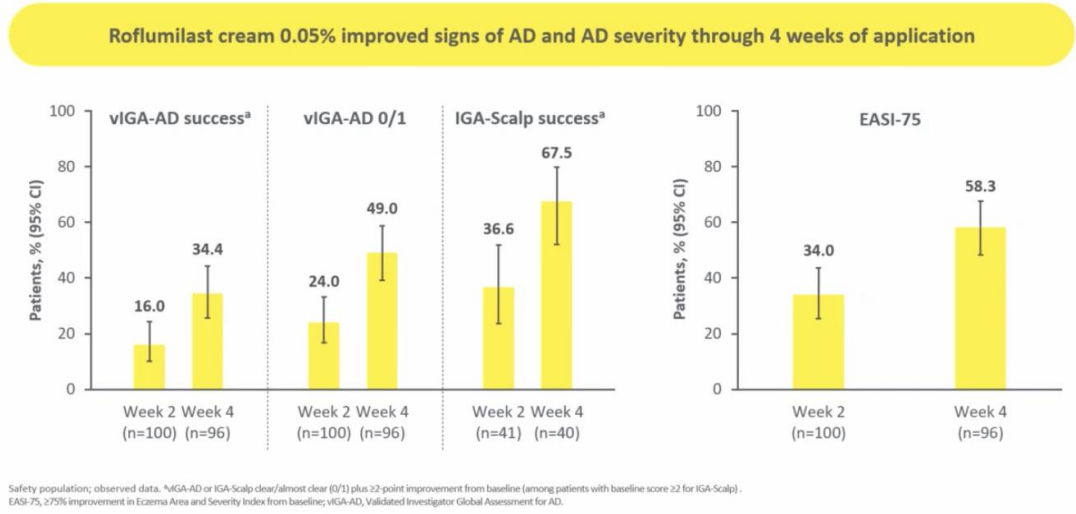
Roflumilast 0.05% en bebés (3 m a 24m)

- Inhibidor PDE4. Ya aprobado en niños de 2-5 años (0.05%) y ≥6 años (0.15%)
- No contiene excipientes irritantes
- Buena tolerancia, no nuevas alertas de seguridad
- No irritación en ≥97.9% durante 4 semanas de aplicación
- Mejoría **rápida** de los síntomas, tras **primera** aplicación

INTEGUMENT-INFANT

The safety and efficacy of roflumilast cream 0.05% in infants aged 3 to <24 months with mild-to-moderate AD were investigated in the 4-week phase 2 INTEGUMENT-INFANT (NCT06998056) trial.





#AEDVenAAD2026

Late-breaking. Lawrence Eichenfield

Dupilumab

- **Up to 5 years of data for preschool children:**
  - No new safety signals: Injection site reactions and conjunctivitis
  - 33.1% achieve remission after treated for >40 wks
  - Remission off drug in 53.7% for 3 mos. and 29.6% for 6 months

  Siegfried et al. Reported at Eur Acad Paediatr Sc, Oct, 2024
- **Marked reduction in bacterial skin infections**
- No laboratory monitoring needed: increased eosinophils not clinically meaningful

  Adolescents: Siegfried…Paller. Am J Clin Dermatol 2021;23:515 6-11 yo: Paller…Levit. Paediatr Drugs 2021;23:515
  6 months-5 yo: Paller…Prescilla. Paediatr Drugs 2023;25:67

Growth in children with AD and bone health

- Better increase in growth percentile on dupilumab

  Irvine et al. AAD, 2025
- >3000 children on dupi vs >3000 on immunosuppressants: Especially males (more growth delay) and those over 6 yo

  Chen et al. JAAD 2025;93:1471

Long-term study of large numbers of children starting very early….

- Real-world BioDay study with 84 children on dupilumab for 52 wks
  - Among 59.5% with asthma, FeNO levels decreased and FEV1 scores increased ($p<0.001$)
  - Among 85.7% with allergic rhinitis, aeroallergen-specific IgE levels decreased 61-89%
  - Among 42.9% with food allergies, sIgE levels of common food allergens decreased 71-83%

  Van der Rijst et al. Pedi Allergy Immunol 2024;35:e14178 and Clin Transl Allergy 2024;13:e12381

Lebrikizumab

Studies completed down to 6 months of age

Randomized, double-blind, PBO-controlled, Phase 3 Adorable-1 study

- 2:1 randomization of Lebri + TCS: PBO + TCS
- Loading at W0 and W2
- Weight-based dosing (≥40 kg, 250 q2wk; 15-<40 kg, q4w; 6-<15, 125 mg q4w)
- TCS starting two weeks before; could stop if to mild/IGA = 2
- Primary endpoints EASI-75 and IGA 0/1

Key efficacy at Week 16		
	LEBRI	PBO
EASI-75	63%	22%
IGA0/1	44%	15%
EASI-90	39%	11%
Pruritus NRS ≥4-point improvement	35%	6%

- No new safety signals
- No difference in injection site reactions between arms

Press Release, Mar 16, 2026

Nemolizumab

- **Resultados en niños 2-12 años: fase 2**
  - Tres cohortes, tratamiento Q4W ajustado por peso y uso concomitante de TCS/TCI
  - Mejores resultados que en adolescentes
  - Volumen de inyección menor (0.49 ml) –> inyección menos dolorosa

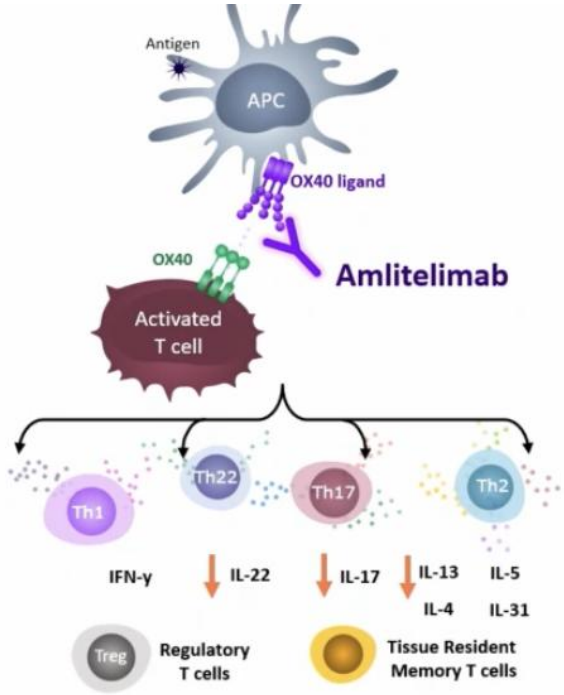
  - Mejoría clínica desde la semana 4, sostenida hasta la semana 52
    - Semana 16: IGA 0/1 40.5-47.2%, EASI75 69-73%

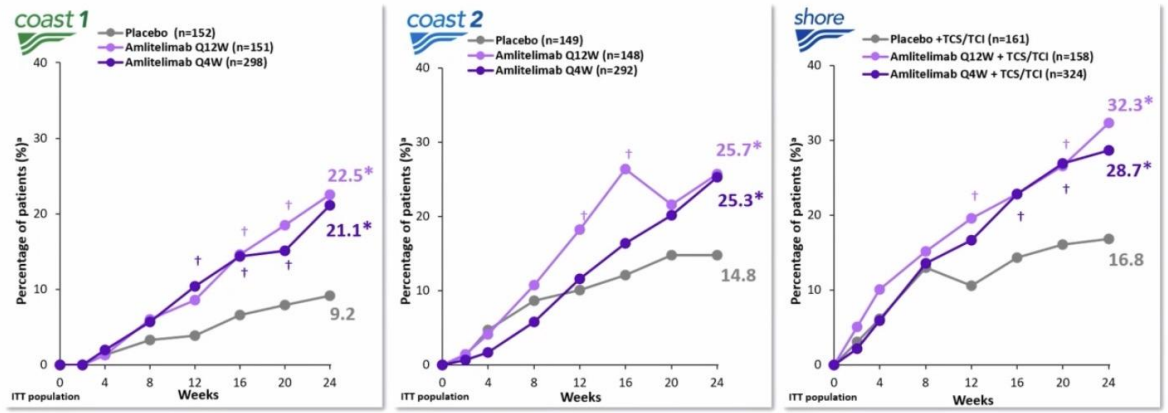
  - Mejoría del prurito desde la semana 1, sostenida hasta la semana 52
    - Semana 16: respuesta ≥4 puntos en PP-NRS: 59.5-72.2%

  - Seguridad
    - Bien tolerado, sin EA graves
    - Perfil similar al observado en adultos/adolescentes

Amlitelimab

- Inhibidor 0X40L – adultos y adolescentes
  - Fase 2b (STREAM-AD): respuesta sostenida tras retirada
  - Fase 2b (ATLANTS): respuestas sostenidas hasta 52 semanas (sin meseta)
  - Fase 3 (COAST1, COAST2, SHORE)
    - IGA 0/1 alcanzado en semana 24 con mejorías progresivas
    - Eficacia comparable Q4W y Q12W, en monoterapia y con TCS/TCI
    - Seguridad ≈ placebo
    - EA + frec: nasofaringiits, infecciones respiratorias altas, dermatitis atópica
    - No infecciones severas, no sangrado gastrointestinal





Following AEs were generally similar between amlitelimab and placebo:

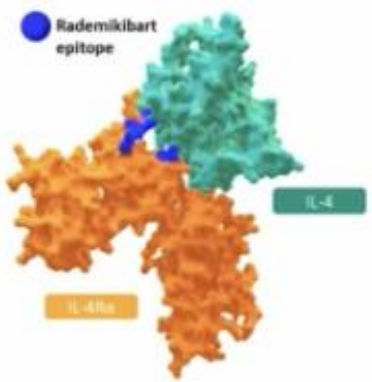
- **Pyrexia, chills** and **headache** (with the majority not injection related[a]) (all < 5%)
- **Herpes viral infection, aphthous ulcers,** and **conjunctivitis**[b] (all < 3%)
- **Infections** and **serious infections**
- **Malignancy**[c]

coast 1	Placebo (n=152)	Amlitelimab Q12W (n=151)	Amlitelimab Q4W (n=298)
	1 (0.7%)	0	0
coast 2	Placebo (n=149)	Amlitelimab Q12W (n=146)	Amlitelimab Q4W (n=292)
	0	1 (0.7%)	0
shore	Placebo + TCS/TCI (n=160)	Amlitelimab Q12W+ TCS/TCI (n=158)	Amlitelimab Q4W+ TCS/TCI (n=324)
	1 (0.6%)	0	0

Late-breaking research – Eric Lawrence Simpson

Rademikibart

- Bloquea IL-4 e IL-13 por unión a IL-4Ra (epítopo distinto a dupilumab)



		Rademikibart	Dupilumab
K_D (pM)		20.7	45.8
IC_{50} (ng/ml)	STAT6 signaling	7.0	9.9
	TF-1 cell proliferation	8.0	10.8
	TARC secretion	59.2	65.2

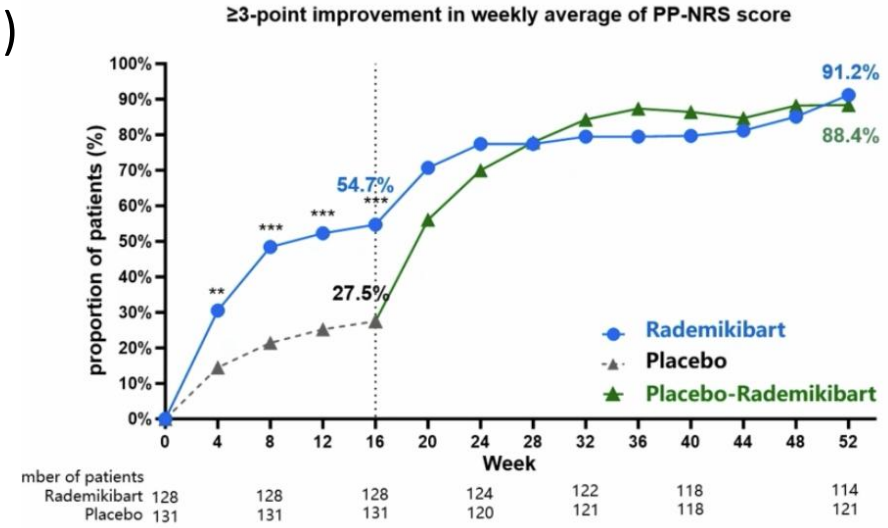
RADIANT-AD
Ph3 study completed

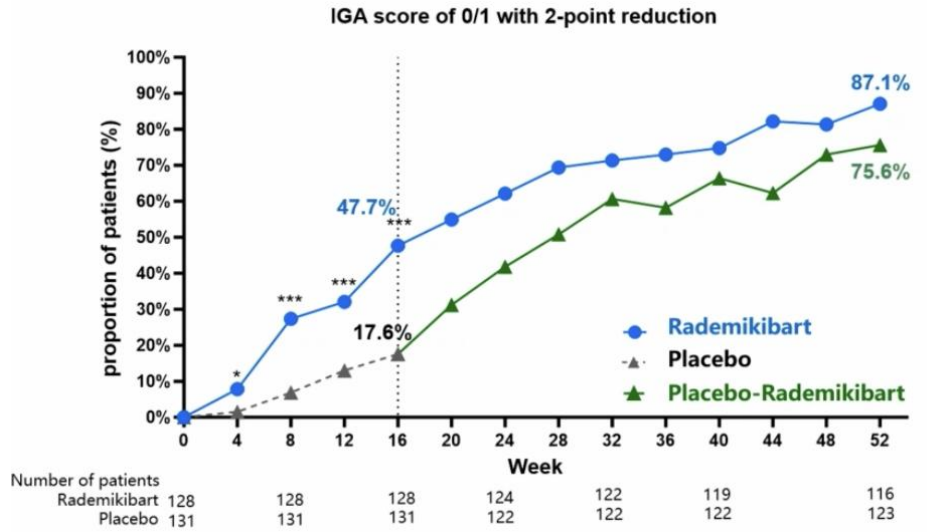
RADIANT-Asthma
Ph3 study on-going

Asthma exacerbation
Ph2 study on-going

COPD exacerbation
Ph2 study on-going

- Eficacia a 16 semanas (Rademikibart vs Placebo)
  - IGA0/1: 47.7% vs. 17.6%; EASI-75 74.2% vs. 34.4%
  - EASI-90: 43.0% vs. 14.5%; PP-NRS≥3 54.7% vs. 27.5%
- Respuesta sostenida a las 52 semanas con mejorías adicionales
  - IGA0/1: 87.1%, EASI-75: 96.6%, EASI-90: 85.3%, PP-NRS≥3
- Seguridad similar a placebo y bien tolerado
  - Conjuntivitis Rademikibart vs placebo 3.9% vs 3.1%





Líneas de futuro

- **KT-621: degradador de STAT6 oral**
  - Fase 1b DA
  - ++ Degradación STAT6 en sangre y piel lesional
  - Mejoría desde las 4s
  - Perfil de seguridad favorable

- **Fármacos bi i y tri-específicos**
  - Dirigidos frente a IL4R, IL-13, IL-18, IL31R, IL-33 y/o TSLP para mayor eficacia con intervalos de dosis más largos.

Dermatitis de contacto alérgica

- **Alérgenos relevantes en eccema de manos**

Allergen	Source	Clinical Significance
Nickel	Jewelry, electronics, musical instruments	Most common sensitizer
Methylisothiazolinone	Personal care products, cosmetics, nail polish	
Propylene Glycol	Emollients, medications	Common in products used to treat eczema
Decyl Glucoside	Hand soaps, shampoos, cleansers	Surfactant exposure from frequent hand washing
Lanolin	Moisturizers	
Fragrances, Preservatives	Soaps, lotions, cosmetics	
Rubber additives (Thiuram mix, carba mix)	Gloves, sports equipment, toys	

Silverberg J et al. Br J Dermatology. 2021;185(1):185-194.
Tam I, Yu J. Curr Allergy Asthma Rep. 2020;20(9):41.

Considerations in Allergic Contact Dermstitis in Children. Amber R. Atwater

Hidradenitis supurativa

- **Secukinumab**
  - Aprobado para HS en **≥12 años**
  - Dosis
    - 300 mg semanal x 5 semanas, después 300 mg Q4W
    - **Considerar** aumento a **300 mg Q2W** en pacientes que no respondan adecuadamente a Q4W

- Pendientes de aprobación
  - **Upadacitinib**
  - **Povorcitinib**

Vitiligo

- **Upadacitinib 15 mg** en adolescentes y adultos
- Repigmentación clínicamente significativa
- Mejoría sostenida hasta las 48 semanas sin alcanzar meseta
- Sin nuevas alertas de seguridad

Co-primary and secondary endpoints in Viti-Up-1 and Viti-Up-2

	Viti-Up-1				Viti-Up-2			
n (%), unless otherwise noted	PBO (N=102)	UPA15 (N=206)	Adj. Diff vs PBO (95% CI)	*P* value	PBO (N=101)	UPA15 (N=205)	Adj. Diff vs PBO (95% CI)	*P* value
Co-Primary Endpoints								
T-VASI 50 (≥ 50% reduction from baseline) at week 48	6 (5.9)	40 (19.4)	13.1 [6.3, 19.8]	< 0.001	6 (5.9)	44 (21.5)	14.7 [7.5, 21.9]	< 0.001
F-VASI 75 (≥ 75% reduction from baseline) at week 48	6 (5.9)	52 (25.2)	18.7 [11.5, 25.9]	< 0.001	7 (6.9)	48 (23.4)	16.9 [9.2, 24.5]	< 0.001
Secondary Endpoints								
F-VASI 50 at week 48	13 (12.7)	99 (48.1)	33.8 [24.8, 42.9]	< 0.001	13 (12.9)	89 (43.4)	30.1 [20.8, 39.4]	< 0.001
F-VASI 75 at week 24	2 (2.0)	31 (15.0)	13.1 [7.7, 18.5]	< 0.001	1 (1.0)	23 (11.2)	10.6 [5.8, 15.5]	< 0.001
F-VASI 90 at week 48	2 (2.0)	32 (15.5)	13.0 [7.8, 18.3]	< 0.001	3 (3.0)	25 (12.2)	9.4 [3.7, 15.1]	0.001

Most frequently reported treatment emergent adverse events (≥ 5% of patients in any treatment group)

	Viti-Up-1		Viti-Up-2	
n, (%)	PBO (N=101)	UPA15 (N=205)	PBO (N=101)	UPA15 (N=205)
Upper respiratory tract infection	8 (7.9)	29 (14.1)	11 (10.9)	20 (9.8)
Acne	5 (5.0)	23 (11.2)	3 (3.0)	24 (11.7)
Nasopharyngitis	8 (7.9)	21 (10.2)	14 (13.9)	36 (17.6)
Headache	5 (5.0)	18 (8.8)	5 (5.0)	17 (8.3)

- There were no reports of adjudicated major adverse cardiovascular events (MACE), adjudicated venous thromboembolic events (VTE), adjudicated gastrointestinal (GI) perforations, active tuberculosis, lymphoma, non-melanoma skin cancer (NMSC), or opportunistic infections aside from herpes zoster in either study
- Four serious infections were reported in the Viti-Up-1 UPA15 group; none led to study treatment discontinuation
  - Bronchitis and influenza in 1 patient
  - Complicated appendicitis and parainfluenza virus infection in 2 other patients

Late-breaking research.

Timolol tópico 0.5% gel

- EC Fase 3: **120** bebés de **28-180 días** de vida con **HI superficial proliferativo**, 2:1 (timolol vs placebo)
- Aplicación 3 veces al día
- Seguimiento: semana 4, 8, 12 y 24. PKs en semana 12 y 24.
- Respuesta: evaluación del color (0-4) y regresión según escala de Achauer

Assessment of Hemangioma Color

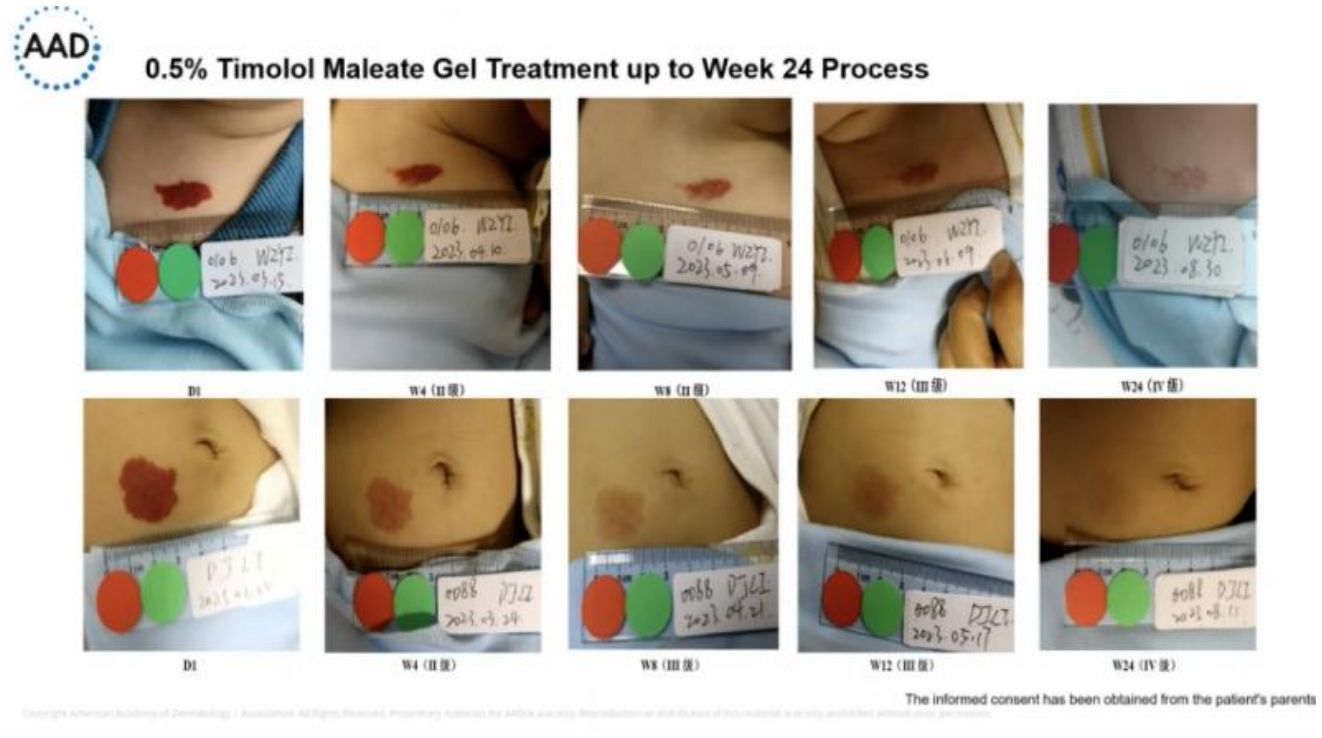
Score	Evaluation Criteria
0	Normal skin color, no erythema
1	Skin color nearly normal, a few visible telangiectasias
2	Mild erythema, pinkish skin
3	Moderate erythema, dark red skin
4	Severe erythema, bright red skin

Escala de Achauer

Grade	Criteria
I	Regression 0–25%, or color lightens
II	Regression 26–50%, or color significantly lightens
III	Regression 51–75% & color significantly lightens
IV	Regression >75%, or color disappears

- Respuesta: % pacientes Achauer ≥ II
- Curación: Achauer IV

Timolol tópico 0.5% gel



- **Eficacia**
  - Superior a placebo desde la semana 4.
  - Proporción de mejoría Achauer ≥ II:
    - W4: 48% vs 9%
    - W8: 67% vs 18%
    - W12: 76% vs 27%
    - W24: 89% vs 44%
  - Para Achauer ≥ III:
    - W24: 81% con timolol vs 21% placebo.
  - Cambio en color (CEA): mejoría significativa desde semana 4.
- **Seguridad**
  - Bien tolerado, mínima irritación local, EA similares a placebo
  - Absorción sistémica mínima (80% < 17 ng/mL)

Late-Breaking research. Li Li

A un nuevo nivel de conocimiento científico

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FUNDACIÓN AEDV PIEL SANA

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AAD ANNUAL MEETING 2026

AEDV

highlights

Denver, Colorado

27 — 31 Marzo

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