Featured data at EADV 2024

Johnson&Johnson

European Academy of Dermatology and Venereology

Amsterdam, Netherlands
25-28 Sept 2024

Johnson & Johnson Sponsored Studies

E-poster or Session	Title	Presentation time and location
FRONTIER-2 Study		
Oral Presentation		
P3097	Early and Durable Improvements in Patient-Reported Symptoms and Signs of Moderate-to-Severe Psoriasis with JNJ-77242113: 1-Year Results from FRONTIER 1 & 2	Oral Presentation Date: Friday, 27 Sept. 2024 Presentation Time: 11:35-11:45 Room: G104-G105
E-poster		
P3144	Treatment Satisfaction with JNJ-77242113 in Patients with Moderate-to-Severe Plaque Psoriasis: 1-Year Results from the FRONTIER 1 & 2 Studies	Hall 3
P3092	Sustained Improvements in Psoriasis Area and Severity Index and in Percent Body Surface Area of Psoriasis with JNJ-77242113 in Patients with Moderate-to-Severe Plaque Psoriasis: Treat-to-Target Analyses in the FRONTIER 1 & 2 Studies	Hall 3
P3105	Phase 2b, Long-Term Extension, Dose-Ranging Study of Oral JNJ-77242113 for the Treatment of Moderate-to-Severe Plaque Psoriasis: FRONTIER-2	Hall 3
CASSIOPEE Study		
E-poster		
P0988	Guselkumab Real-World Efficacy and Impact on Quality of Life and Sexual Life in Moderate to Severe Psoriasis Patients with Genital Involvement: Data from the CASSIOPEE Study	Hall 3
G-EPOSS Study		
E-poster		
P3244	Guselkumab Improves Quality of Life and Perceived Stigmatization in Patients with Psoriasis and Psoriasis-Specific Comorbidities: Results from the Real-World G-EPOSS Study	Hall 3
P3242	Guselkumab improved psoriatic skin, quality of life, and sexual health in the real-world G-EPOSS study, regardless of biological sex	Hall 3
P3240	Guselkumab improves psoriatic skin, quality of life, sexual health, and perceived stigmatization across BMI subgroups: results from the real-world G-EPOSS study	Hall 3

E-poster or Session	Title	Presentation time and location
GUIDE Study		
Oral Presentations		
FC05	Identifying Super Responders who Remain Treatment Free for More Than 2 Years After Guselkumab Withdrawal: Data from the Phase 3b GUIDE Trial in Psoriasis	Oral Presentation Date: Friday, 27 Sept. 2024 Session Time: 8:30-10:00 Presentation Time: 9:40-9:50 Room: G104-G105
Chinese Phase 4 Study		
E-poster		
P1593	Guselkumab in Chinese Patients with Scalp and Nail Psoriasis: Subgroup Results from a Phase 4 Study	Hall 3
Japan Real-World Evidence		
E-poster		
P0977	Biologic Use and Treatment Outcomes in Patients with Psoriasis in Real-World Settings Among the Japanese Population	Hall 3
PSOLAR study		
E-poster		
P3160	A Novel, Rapid, and Reliable Measure of Psoriasis Severity for Use in Clinical Practice; Validating G2-PASE Using Registry Data	Hall 3
P3101	Malignancy Rates in Patients with a History of Malignancy in the Psoriasis Longitudinal Assessment and Registry (PSOLAR)	Hall 3
P0933	Real-World Baseline Characteristics of Patients with Psoriasis from Europe, the Middle East and Africa who were Treated with Guselkumab or Interleukin-17 Inhibitors in the Psoriasis Longitudinal Assessment and Registry (PSOLAR)	Hall 3
PROSPER Study		
E-poster		
P3187	Results from a Prospective study on the Psychosocial and Quality of Life Implications of Switching Biologics in Patients with Chronic Plaque Psoriasis	Hall 3

E-poster or Session	Title	Presentation time and location
STAR Study		
	E-poster	
P2482	Associations Between Clinical Characteristics and Screening MRI Findings: Exploratory Analysis of the Ongoing Phase 4, Multicenter, Randomized, Controlled STAR Study of Biologic-Naïve Patients with PsA with MRI-Confirmed Axial Involvement	Hall 3
VISIBLE Study		
	E-posters	
P3183	VISIBLE: Clearance and Symptom Improvement with Guselkumab at Week 16 in Skin of Color Participants with Moderate-to-Severe Plaque Psoriasis	Hall 3
P3192	VISIBLE: Guselkumab Demonstrated Significant Scalp Psoriasis Clearance and Scalp Itch Improvements at Week 16 in Skin of Color Participants with Moderate-to-Severe Plaque Psoriasis	Hall 3
GUIDE Study		
	E-poster	
P3206	GUIDE Trial Results After Withdrawal in Part 3: Long-Term Remission in Patients with Psoriasis Treated with Guselkumab Within 15 Months from Onset of Symptoms	Hall 3
FC06	GUIDE Trial (Part 3): Following Guselkumab Withdrawal and a Long Treatment-Free Period, Disease Control is Rapidly Regained Upon Re-treatment in Psoriasis Super-Responders	Oral Presentation Date: Friday, 27 Sept. 2024 Session Time: 10:15-11:45 Presentation Time: 10:25-10:35 Room: G104-G105
DISCOVER-1 & DISCOVER-2 Studies		
	E-poster	
P0961	Guselkumab Treatment Shows Rapid Onset of Effect on Components of American College of Rheumatology Response Criteria: Results of 2 Randomised Phase 3 Trials	Hall 3

E-poster or Session	Title	Presentation time and location
TREMFYA Post Hoc Analyses		
Oral Presentation		
FC06.03	Longitudinal Evaluation of Neutrophil-to-Lymphocyte Ratio in Guselkumab-Treated Patients with Psoriatic Disease and Levels of Systemic Inflammation Associated with Elevated Cardiovascular Risk: Post Hoc Analysis of 4 Phase 3, Randomized, Controlled Studies	Oral Presentation Date: Friday, 27 Sept. 2024 Session Time: 10:15-11:45 Presentation Time: 10:35-10:45 Room: G104-G105
E-poster		
P3200	Safety in patients with latent tuberculosis who received concomitant anti-tuberculosis medications: Analysis of 11 studies of guselkumab in psoriatic disease	Hall 3
STELLAR Teens Study		
E-poster		
P2799	Long-Term Safety of Ustekinumab in Paediatric Patients with Moderate-to-Severe Plaque Psoriasis: Results from an Ongoing Observational Study	Hall 3
Psoriasis Screening and Assessment Research		
E-posters		
P3256	A Decentralized Clinical Study for Remote Assessment of Psoriasis Severity with Deep Learning-based Automated Classification	Hall 3
P3255	Enhanced Psoriasis Trial Screening Using an Artificial Intelligence (AI) Model to Remotely Assess Digital Skin Images	Hall 3
P3255	An International Delphi Consensus to Define a Clinically Appropriate Definition of Disease Modification for Plaque Psoriasis	Hall 3

TREMFYA® IMPORTANT SAFETY INFORMATION

What is the most important information I should know about TREMFYA®?

TREMFYA® is a prescription medicine that may cause serious side effects, including:

Serious Allergic Reactions.

Stop using TREMFYA® and get emergency medical help right away if you develop any of the following symptoms of a serious allergic reaction:

- fainting, dizziness, feeling lightheaded (low blood pressure)
- swelling of your face, eyelids, lips, mouth, tongue or throat
- trouble breathing or throat tightness
- chest tightness
- skin rash, hives
- itching

Infections.

TREMFYA® may lower the ability of your immune system to fight infections and may increase your risk of infections. Your healthcare provider should check you for infections and tuberculosis (TB) before starting treatment with TREMFYA® and may treat you for TB before you begin treatment with TREMFYA® if you have a history of TB or have active TB. Your healthcare provider should watch you closely for signs and symptoms of TB during and after treatment with TREMFYA®.

Tell your healthcare provider right away if you have an infection or have symptoms of an infection, including:

- fever, sweats, or chills
- muscle aches
- weight loss
- cough
- warm, red, or painful skin or sores on your body different from your psoriasis
- diarrhea or stomach pain
- shortness of breath
- blood in your phlegm (mucus)
- burning when you urinate or urinating more often than normal

Do not use TREMFYA® if you have had a serious allergic reaction to guselkumab or any of the ingredients in TREMFYA®.

Before using TREMFYA®, tell your healthcare provider about all of your medical conditions, including if you:

- have any of the conditions or symptoms listed in the section “What is the most important information I should know about TREMFYA®?”
- have an infection that does not go away or that keeps coming back.
- have TB or have been in close contact with someone with TB.
- have recently received or are scheduled to receive an immunization (vaccine). You should avoid receiving live vaccines during treatment with TREMFYA®.

- are pregnant or plan to become pregnant. It is not known if TREMFYA® can harm your unborn baby.
- are breastfeeding or plan to breastfeed. It is not known if TREMFYA® passes into your breast milk.
- Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins and herbal supplements.

What are the possible side effects of TREMFYA®?

TREMFYA® may cause serious side effects. See "What is the most important information I should know about TREMFYA®?"

The most common side effects of TREMFYA® include: upper respiratory infections, headache, injection site reactions, joint pain (arthralgia), diarrhea, stomach flu (gastroenteritis), fungal skin infections, herpes simplex infections and bronchitis.

These are not all the possible side effects of TREMFYA®. Call your doctor for medical advice about side effects.

Use TREMFYA® exactly as your healthcare provider tells you to use it.

Please read the full Prescribing Information, including Medication Guide for TREMFYA®, and discuss any questions that you have with your doctor.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch or call 1-800-FDA-1088.

STELARA® IMPORTANT SAFETY INFORMATION

STELARA® is a prescription medicine that affects your immune system. STELARA® can increase your chance of having serious side effects including:

Serious Infections

STELARA® may lower your ability to fight infections and may increase your risk of infections. While taking STELARA®, some people have serious infections, which may require hospitalization, including tuberculosis (TB), and infections caused by bacteria, fungi, or viruses.

- Your doctor should check you for TB before starting STELARA® and watch you closely for signs and symptoms of TB during treatment with STELARA®.
- If your doctor feels that you are at risk for TB, you may be treated for TB before and during treatment with STELARA®.

You should not start taking STELARA® if you have any kind of infection unless your doctor says it is okay.

Before starting STELARA®, tell your doctor if you:

- think you have an infection or have symptoms of an infection such as:

o fever, sweats, or chills
o muscle aches
o cough
o shortness of breath
o blood in phlegm
o weight loss
o warm, red, or painful skin or sores on your body
o diarrhea or stomach pain
o burning when you urinate or urinate more often than normal
o feel very tired

- are being treated for an infection or have any open cuts.
- get a lot of infections or have infections that keep coming back.
- have TB, or have been in close contact with someone with TB.

After starting STELARA®, call your doctor right away if you have any symptoms of an infection (see above). These may be signs of infections such as chest infections, or skin infections or shingles that could have serious complications. STELARA® can make you more likely to get infections or make an infection that you have worse. People who have a genetic problem where the body does not make any of the proteins interleukin 12 (IL-12) and interleukin 23 (IL-23) are at a higher risk for certain serious infections that can spread throughout the body and cause death. People who take STELARA® may also be more likely to get these infections.

Cancers
STELARA® may decrease the activity of your immune system and increase your risk for certain types of cancer. Tell your doctor if you have ever had any type of cancer. Some people who had risk factors for skin cancer developed certain types of skin cancers while receiving STELARA®. Tell your doctor if you have any new skin growths.

Posterior Reversible Encephalopathy Syndrome (PRES)
PRES is a rare condition that affects the brain and can cause death. The cause of PRES is not known. If PRES is found early and treated, most people recover. Tell your doctor right away if you have any new or worsening medical problems including: headache, seizures, confusion, and vision problems.

Serious Allergic Reactions
Serious allergic reactions can occur. Stop using STELARA® and get medical help right away if you have any symptoms of a serious allergic reaction such as: feeling faint, swelling of your face, eyelids, tongue, or throat, chest tightness, or skin rash.

Lung Inflammation
Cases of lung inflammation have happened in some people who receive STELARA® and may be serious. These lung problems may need to be treated in a hospital. Tell your doctor right away if you develop shortness of breath or a cough that doesn't go away during treatment with STELARA®.

Before receiving STELARA®, tell your doctor about all of your medical conditions, including if you:
- have any of the conditions or symptoms listed above for serious infections, cancers, or PRES.
- ever had an allergic reaction to STELARA® or any of its ingredients. Ask your doctor if you are not sure.
- are allergic to latex. The needle cover on the prefilled syringe contains latex.
- have recently received or are scheduled to receive an immunization (vaccine). People who take STELARA® should not receive live vaccines. Tell your doctor if anyone in your house needs a live vaccine. The viruses used in some types of live vaccines can spread to people with a weakened immune system, and can cause serious problems. **You should not receive the BCG vaccine during the one year before receiving STELARA® or one year after you stop receiving STELARA®.**
- have any new or changing lesions within psoriasis areas or on normal skin.
- are receiving or have received allergy shots, especially for serious allergic reactions.
- receive or have received phototherapy for your psoriasis.
- are pregnant or plan to become pregnant. It is not known if STELARA® can harm your unborn baby. You and your doctor should decide if you will receive STELARA® if you are breastfeeding or plan to breastfeed. It is thought that STELARA® passes into your breast milk.
- talk to your doctor about the best way to feed your baby if you receive STELARA®.

Tell your doctor about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements. Know the medicines you take. Keep a list of them to show your doctor and pharmacist when you get a new medicine.

When prescribed STELARA®:

- Use STELARA® exactly as your doctor tells you to.
- STELARA® is intended for use under the guidance and supervision of your doctor. In children 6 years and older, it is recommended that STELARA® be administered by a healthcare provider. If your doctor decides that you or a caregiver may give your injections of STELARA® at home, you should receive training on the right way to prepare and inject STELARA®. Your doctor will determine the right dose of STELARA® for you, the amount for each injection, and how often you should receive it. Do not try to inject STELARA® yourself until you or your caregiver have been shown how to inject STELARA® by your doctor or nurse.

Common side effects of STELARA® include: nasal congestion, sore throat, and runny nose, upper respiratory infections, fever, headache, tiredness, itching, nausea and vomiting, redness at the injection site, vaginal yeast infections, urinary tract infections, sinus infection, bronchitis, diarrhea, stomach pain, and joint pain. These are not all of the possible side effects with STELARA®. Tell your doctor about any side effect that you experience. Ask your doctor or pharmacist for more information.

Please click to read the full Prescribing Information and Medication Guide for STELARA® and discuss any questions you have with your doctor.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch or call 1-800-FDA-1088.