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IL-17A inhibitors: Revolutionizing treatment for moderate to severe psoriasis

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The management of moderate to severe psoriasis with conventional therapies like topical medications and oral immunosuppressants which posed several treatment challenges



Psoriasis is an auto-immune condition characterized by chronic inflammation in the body, causing skin cells to grow faster resulting in red patches or silvery scales on the body's surface. The choice of treatment for psoriasis is determined by the severity of psoriasis and the presage of developing associated co-morbidities such as psoriatic arthritis, cardiovascular diseases, metabolic syndrome, obesity, etc. Studies have indicated that psoriasis patients above the age of 65 have a higher prevalence of hypertension, left ventricular hypertrophy, waist-hip ratio, and raised blood glucose levels.

Earlier, the management of moderate to severe psoriasis with conventional therapies like topical medications and oral immunosuppressants which posed several treatment challenges.

However, advanced research has led to the development of effective modern therapies like biologicals. Amongst the various types of biologicals, Interleukin (IL) -17A inhibitor has substantially shown excellent results in the management of moderate to severe psoriasis. It prevents systemic inflammation and works as a disease-modifying agent in patients with psoriasis. Early detection and treatment with IL-17A help in reducing disease activity, thereby improving the quality of life of patients.

Developments in research in the last decade have shown IL-17A cytokine to be a key factor in the pathogenesis of psoriasis. IL-17A inhibitors help in blocking this cytokine which subsequently reduces disease progression and improves treatment efficacy. Biologics that target IL-17A function lead to a rapid improvement of joint symptoms and reduces disease progression in patients with psoriatic arthritis, a condition that affects around 30% psoriasis patients.

With the development of advanced treatment therapies like biologicals, achieving clear skin seems an attainable treatment goal for psoriasis patients. Continuous treatment with IL-17A inhibitor can show promising results on the skin by reducing scaly patches and redness. IL-17A is a pro-inflammatory cytokine or a chemical messenger that is important for the inflammatory cascade in the pathogenesis of psoriasis. Inhibition of this cytokine by IL-17A inhibitors results in approximately 75% improvement in skin lesion in 12 weeks. Gradually, the improvement can be up to 90% and more which seems a far-fetched goal with conventional therapies.

The safety and efficacy profile of the drug is greater compared to other biologicals and the remission can last for a year or more even after discontinuing the treatment. Long-term remission and clear skin reduce the chances of developing psychological co-morbidities like depression and enhances the quality of life of the patients. While it can be easily administered, favorable dosing schedules and safety precautions should be provided.

Although TNF blockers are historically considered the first line of biological treatment and have a broader action mechanism but are also associated with numerous risks like reactivation of tuberculosis, hep B and other infections. Since IL-17A inhibitors are more targeted, the precautions and risks associated are lower compared to TNF blockers. IL-17A inhibitors score well on the parameters of efficacy, safety and tolerability. But despite of high safety index, pre-evaluation and investigations are important before considering the drug. Regular follow up with the treating dermatologist is important to get the best benefit of the therapy.

Treatment of psoriasis involves extensive use of topical, oral and injectable medications. In many cases, treatment may last for long-term before achieving complete remission. Moreover, multiple triggers like stress, alcohol, obesity and other health issues can lead to relapse. Delay in treatment can result in the development of metabolic syndrome and other severe co-morbidities. For effective treatment and management, psoriasis patients require long-term financial assistance. The absence of health insurance packages for psoriasis patients could pose a significant financial burden on patients. Therefore, insurance regulators and providers need to recognize the impact of psoriasis on the physical, mental and social health of the patient and not as a superficial skin disease with only cosmetic implication.

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