



## Abstract N°: 3804

**Efficacy and safety of delgocitinib cream in adults with moderate to severe Chronic Hand Eczema: pooled results of the Phase 3 DELTA 1 and 2 trials**

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**Introduction & Objectives:** Chronic Hand Eczema (CHE) is a frequent inflammatory skin disease associated with pain, pruritus, and significant occupational, functional, social, and psychological burden. Delgocitinib is a topical pan-JAK inhibitor which showed a dose-dependent efficacy in adults with CHE in a Phase 2b trial. The objectives of this analysis were to study (1) the efficacy, as assessed by Investigator's Global Assessment for CHE (IGA-CHE) treatment success (primary outcome), and the secondary outcomes  $\geq 75\%$ / $\geq 90\%$  improvement in Hand Eczema Severity Index (HECSI-75/90) and  $\geq 4$ -point improvement in the Dermatology Life Quality Index (DLQI), and (2) the safety of twice-daily applications of delgocitinib cream 20 mg/g compared with cream vehicle in the treatment of adults with moderate to severe CHE in a pooled analysis of the DELTA 1 and DELTA 2 trials.

**Materials & Methods:** In the Phase 3 DELTA 1 (NCT04871711) and DELTA 2 (NCT04872101) trials, adults with moderate to severe CHE were randomized 2:1 to twice-daily delgocitinib cream 20 mg/g or cream vehicle for 16 weeks. The primary endpoint was the IGA-CHE treatment success at Week 16, defined as IGA-CHE score of 0/1 (clear / almost clear, i.e., no or barely perceptible erythema and no other signs), with a  $\geq 2$ -step improvement from baseline. Key secondary endpoints included HECSI-75/90 and  $\geq 4$ -point improvement in the DLQI. This DELTA 1 and 2 pooled analysis included 639 patients treated with delgocitinib cream and 321 with cream vehicle.

**Results:** At Week 16, a significantly greater proportion of delgocitinib-treated patients, versus cream vehicle, achieved IGA-CHE treatment success (24.3% vs. 8.4%;  $P < 0.001$ ), HECSI-75 (49.4% vs. 20.9%;  $P < 0.001$ ), HECSI-90 (30.3% vs. 10.6%;  $P < 0.001$ ), and DLQI  $\geq 4$ -point improvement (73.3% vs. 47.8%;  $P < 0.001$ ). Most frequent adverse events (occurring in  $\geq 5\%$  of patients) were COVID-19, nasopharyngitis, and headache with similar rates in both treatment groups.

**Conclusion:** In the DELTA 1 and 2 pooled analysis, delgocitinib cream twice-daily confirmed its clinical efficacy in patient- and clinician-reported efficacy outcomes versus cream vehicle in adult CHE patients and suggests an innovative treatment option in this often difficult-to-treat patient population.

