

**Abstract N°: 3710****Clinical response to topical tirbanibulin in actinic keratoses of the scalp: potential predictive factors**

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Introduction & Objectives:

Actinic keratoses (AKs) and field cancerization are commonly treated with therapies associated with high rates of local skin reactions, which can compromise adherence and efficacy. Tirbanibulin 1% ointment is a novel topical treatment with antiproliferative and antitumor activity that is generally better tolerated. However, predictive clinical factors for treatment response remain unclear.

Our objective was to evaluate the clinical efficacy of tirbanibulin in treating AKs on the scalp and to identify clinical variables potentially associated with treatment response.

Materials & Methods:

We conducted a retrospective study of patients treated with tirbanibulin 1% ointment for AKs located on a single contiguous area of <25 cm² between June 2023 and June 2024. Inclusion criteria required ≥10 non-hyperkeratotic, clinically typical AKs. Treatment consisted of once-daily application for five consecutive days. Response was independently evaluated by two dermatologists and categorized as complete (>80% clearance), partial (40–80% clearance), or no response (<40% clearance). Clinical and demographic data were collected. A descriptive and bivariate analysis was performed to identify potential associations with treatment outcomes.

Results:

Fifty patients were included (mean age: 72 years; sex ratio 1:1). The most common locations were scalp and cheeks (34%). Complete response was observed in 64% of patients, partial response in 18%, and no response in 14%. No significant associations were found between treatment response and age, sex, or history of non-melanoma skin cancer. While no statistically significant differences were identified regarding lesion location, a trend toward better outcomes was noted in scalp lesions.

Conclusion:

Topical tirbanibulin is effective in treating AKs, particularly those located on the scalp. Although no clinical variables reached statistical significance as predictors of response, the anatomical site may influence treatment outcomes. Multicenter studies with larger cohorts are needed to better characterize the clinical profile of responders.

