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# Efficacy and safety of switching biological agents to Vunakizumab in patients with plaque psoriasis: a multicenter prospective observational study

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## Introduction & Objectives:

Biologic therapies have transformed psoriasis management, yet treatment resistance remains a challenge. Vunakizumab, a novel IL-17A inhibitor, showed efficacy in phase III trials. This study evaluates its real-world performance in patients with plaque psoriasis who have previously been treated with biologics or targeted small-molecule drugs.

## Materials & Methods:

A prospective observational study was conducted from three hospitals (October 2024–April 2025). Eligible patients (n=15) had used ≥1 biologic/targeted therapy. Subcutaneous Vunakizumab (240 mg at weeks 0.2.4 and q4w thereafter) was administered for ≥8 weeks. Assessments included Psoriasis Area and Severity Index (PASI), Investigator Global Assessment (IGA), Body Surface Area (BSA) and Dermatology Life Quality Index (DLQI) at baseline and week 8. Safety was monitored for adverse events (AEs).

## Results:

**Table 1. Baseline Characteristics and Clinical Outcomes**

| PARAMETER | BASELINE | WEEK 8 | CHANGE |
|---|---|---|---|
| **MEDIAN PASI (RANGE)** | 9.4 (3.3–25.2) | 1.6 (0.6–3.2) | **-83%** |
| **IGA ≥3, N (%)** | 13 (86.7%) | 0 (0%) | — |
| **IGA 0/1, N (%)** | 0 (0%) | 15 (100%) | — |
| **MEDIAN BSA % (RANGE)** | 20 (5-62) | 10 (2-17) | **-50%** |
| **MEDIAN DLQI (RANGE)** | 15 (9–25) | 5 (0–9) | **-66.7%** |
| **DEMOGRAPHICS** | | | |
| **MEAN AGE (YEARS)** | 35.5 ± 8.2 | — | — |
| **MALE, N (%)** | 13 (86.7%) | — | — |
| **PRIOR THERAPIES** | | | |
| **IL-17A INHIBITORS, N (%)** | 10 (66.7%) | — | — |
| **TNF-A INHIBITORS, N (%)** | 3 (20%) | — | — |
| **OTHER BIOLOGICS*, N (%)** | 2 (13.3%) | — | — |

*Including guselkumab.

At week 8, all patients achieved complete/near-complete clearance (IGA 0/1), with a median PASI reduction of 83% and DLQI improvement of 66.7%. Subgroup analyses showed consistent efficacy across prior therapy classes. No severe AEs (e.g., infections, hypersensitivity) were reported; mild injection-site erythema resolved spontaneously in 2 patients.

**Conclusion:**

Vunakizumab demonstrated rapid and profound efficacy in patients resistant to multiple biologics, achieving 100% IGA 0/1 response with no significant safety concerns. Its high binding affinity for IL-17A may explain its salvage potential. Larger, long-term studies are needed to validate these findings.