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Hidradenitis Suppurativa: Addressing the Unmet Need with Emerging Biologics and JAK Inhibitors

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Introduction

Hidradenitis suppurativa (HS) is a chronic, relapsing inflammatory skin disorder associated with significant physical and psychosocial burden. Current therapeutic options are limited, and many patients experience inadequate disease control. Adalimumab remains the only approved biologic, yet response rates are often suboptimal. This underscores an urgent unmet clinical need and drives the exploration of novel targeted therapies. The aim of this review is to highlight recent therapeutic advances in HS, focusing on emerging biologics and Janus kinase (JAK) inhibitors.

Materials and Methods

A systematic search and critical analysis of original research articles and high-quality reviews published over the past five years was conducted using PubMed, Scopus, ScienceDirect, and Elsevier. Only evidence-based, peer-reviewed clinical studies were included.

Results

Recent advances in the understanding of HS pathogenesis have identified multiple therapeutic targets, including TNF- α , IL-17, IL-1, and the JAK/STAT pathway. Investigational biologics include IL-17 inhibitors (e.g., secukinumab, bimekizumab), IL-1 inhibitors (e.g., anakinra, bermekimab), and anti-IL-36 agents. JAK inhibitors (e.g., upadacitinib, tofacitinib) have demonstrated potential in early-phase trials by modulating several inflammatory pathways. These agents offer a promising alternative for patients with inadequate response to conventional treatment.

Conclusions

Emerging biologics and JAK inhibitors represent a new therapeutic horizon in HS management. While adalimumab remains the only approved biologic, investigational therapies targeting distinct immunological pathways may offer improved efficacy and disease control. Further randomized controlled trials are needed to validate their long-term safety and effectiveness.

