

PRESS RELEASE

New biologic option for severe plaque psoriasis now available on Pharmaceutical Benefits Scheme¹

- *Government adds new psoriasis treatment to Pharmaceutical Benefits Scheme (PBS) from December 1, 2019¹*
- *An estimated 19,000 Australian patients² are eligible to receive new biologic medication – SKYRIZI, an interleukin-23 (IL-23) inhibitor.^{1,4}*
- *Local research amongst general public indicates stigma and misunderstanding about psoriasis remains prevalent³*

SYDNEY AUSTRALIA December 1, 2019 - AbbVie (NYSE: ABBV), a research-based global biopharmaceutical company, welcomes the Federal Government's decision to list SKYRIZI™ (risankizumab), a new treatment option for adults living with severe chronic plaque psoriasis, which eligible Australian patients will be able to access from December 1, 2019 on the Pharmaceutical Benefits Scheme (PBS)^{1,4}

Psoriasis affects an estimated 450,000 people in Australia⁵ and 125 million people worldwide, with reports suggesting that its prevalence may be on the rise making it a growing serious global health concern.⁶⁻⁷ Psoriasis can negatively impact many aspects of a person's long-term health and quality of life.⁶ The highly visible nature of the disease can be psychologically distressing, and patients often experience embarrassment, lack of self-esteem, anxiety and are at an increased risk for depression.⁶

A recent online survey of 1,050 members of Australian public, conducted by YouGov Galaxy* and supported by AbbVie, highlighted the difficult realities that people living with psoriasis face every day, including widespread stigma among the general public. When presented with an image of a patient with severe plaque psoriasis, 49% of Australians surveyed incorrectly assumed the condition could be contagious. Nearly half (42%) said they would avoid or be very uncomfortable shaking hands with the person pictured, and one in three (33%) claimed they would only do so if they confirmed the condition was not contagious. More than half (68%) of respondents were unable to correctly identify the skin condition, with 14% assuming it to be eczema and 10% assuming a skin infection.³

When asked to consider how they would feel if they were living with this skin condition, more than half (54%) of surveyed Australians said they would want to cover it up even during summer and 72% would want to demand a treatment to clear it up completely. Many also claimed it would make them feel embarrassed (48%), miserable (53%) and that they would feel angry/frustrated at having this condition (44%).³

Psoriasis Australia CEO Murray Turner said that while some would find the realities of living with psoriasis unacceptable, for many people living with severe psoriasis, this isn't just a hypothetical scenario.

*YouGov research funded by AbbVie Pty Ltd.



“There is still a great amount of misunderstanding about psoriasis amongst the public and it makes life for those affected extremely hard, particularly if they are facing societal stigma in addition to the physical symptoms and challenges they face.”

“Many of the psycho-social issues, such as stigma, along with mental health co-morbidities, are driven by the physical symptoms people with psoriasis experience. We welcome the government’s decision to list any new treatment options which may help relieve psoriasis symptoms and in turn impact overall quality of life.”

Associate Professor Peter Foley, Director of Research at the Skin Health Institute, said that new therapeutic options are always welcomed in the clinical dermatology community to ensure that everyone living with the condition has access to treatment that may work for them.

“The journey for people living with severe psoriasis can be long and difficult, and after several years of trying and failing on treatments, they may come out the other side feeling deflated and like there is nothing more that they can do. Some patients may lose hope of the possibility that they can live a life unhindered by psoriasis,” said Foley.

“The continued introduction of new treatments like SKYRIZI is important to remind the psoriasis community that new therapies are available all the time and to keep engaging with their dermatologists to find the right option for them.”

SKYRIZI is part of a collaboration between Boehringer Ingelheim and AbbVie, with AbbVie leading development and commercialisation globally.

Plaque psoriasis is the most common form of the disease.⁶⁻⁷ It has been reported that many patients with moderate to severe plaque psoriasis are undertreated and a large portion do not achieve and maintain high-levels of skin clearance.⁹ More than 80 percent of patients with moderate to severe psoriasis are treated only with topical therapy or are not treated at all, according to the Multinational Assessment of Psoriasis and Psoriatic Arthritis Survey that was published in 2014.⁸

Whilst there has been significant progress in the psoriasis treatment landscape, including biologic therapies which have improved outcomes for patients with moderate to severe plaque psoriasis¹⁰⁻¹¹, there are still many patients who do not achieve an adequate level of skin clearance, symptom relief or improvements in quality of life.¹²

About SKYRIZI (risankizumab)⁴

SKYRIZI (risankizumab) is an interleukin 23 (IL-23) inhibitor and is indicated for the treatment of moderate to severe plaque psoriasis in adults (18 years or older) who are candidates for phototherapy or systemic therapy.⁴

IL-23 is a protein which initiates an inflammatory response and signals the release of pro-inflammatory cytokines associated with chronic conditions such as psoriasis.¹³ SKYRIZI works by inhibiting this protein, which can help reduce the inflammation responsible in the development and maintenance of psoriasis.¹⁴

*YouGov research funded by AbbVie Pty Ltd.



Important Safety Information^{4,15}

SKYRIZI must not be used if the patient has an allergy to risankizumab or any of its ingredients. In addition, it must not be used if the patient has an active infection which the doctor thinks is important. If the patient currently has an infection, or has had an infection that keeps coming back, their healthcare professional should be informed before using SKYRIZI.

Prior to using SKYRIZI, patients should be checked for tuberculosis (TB) infection. SKYRIZI must not be given to patients with active TB. Patients receiving SKYRIZI should be monitored for signs and symptoms of active TB. Treatment for TB should be considered prior to using SKYRIZI in patients with a past history of latent or active TB in whom an adequate course of treatment cannot be confirmed.

Prior to initiating therapy with SKYRIZI, completion of all appropriate immunisations should be considered according to current immunisation guidelines. SKYRIZI should not be used with live vaccines.

Common side effects include upper respiratory infections with symptoms such as a sore throat and stuffy nose, feeling tired, fungal skin infection, injection site reactions, headache, small raised red bumps on the skin.

Please review the Consumer Medicines Information [here](#) for further safety information on SKYRIZI.

About AbbVie

AbbVie is a global, research and development-based biopharmaceutical company committed to developing innovative advanced therapies for some of the world's most complex and critical conditions. The company's mission is to use its expertise, dedicated people and unique approach to innovation to markedly improve treatments across four primary therapeutic areas: immunology, oncology, virology and neuroscience. In more than 75 countries, AbbVie employees are working every day to advance health solutions for people around the world. For more information about AbbVie, please visit us at www.abbvie.com.au. Follow @AbbVie_AU on Twitter, [Facebook](#) and [Instagram or follow AbbVie Global on LinkedIn](#).

###

Media enquiries:

Red Havas

Simone McKay
Account Manager
+61 430 551 906
Simone.mckay@redhavas.com

AbbVie

Sam Pearson
Communications & Patient Relations Manager
+61 418 419 549
Sam.pearson@abbvie.com

*YouGov research funded by AbbVie Pty Ltd.

References

1. Pharmaceutical Benefits Schedule www.pbs.gov.au
2. Australian Government. Post-market Review of the use of biologics in the treatment of severe chronic plaque psoriasis - Report to PBAC Term of Reference 3. Department of Health: Pharmaceutical Benefits Scheme. 2017. <http://www.pbs.gov.au/reviews/biologics-files/Post-market-review-biologic-medicines-cpp-minutes-04-2018.pdf>. Accessed November 4, 2019.
3. AbbVie Data on File CLA-AU-190024
4. SKYRIZI Approved Product Information - <http://www.medicines.org.au/files/vepskyri.pdf>. Accessed 22 July 2019.
5. Skin Health Institute Australia – Available at: <https://www.skinhealthinstitute.org.au/page/97/psoriasis>. Accessed November 4, 2019
6. World Health Organization. Global Report on Psoriasis. 2016. Available at: http://apps.who.int/iris/bitstream/10665/204417/1/9789241565189_eng.pdf. March 28, 2019.
7. International Federation of Psoriasis Associations. Psoriasis is a serious disease deserving global attention. 2017. Available at: <https://ifpa-pso.com/wp-content/uploads/2017/01/Brochure-Psoriasis-is-a-serious-disease-deserving-global-attention.pdf>. Accessed October 30, 2018.
8. Lebwohl M., et al. Do we need more psoriasis therapies? *The Lancet*. 2015;386(9993):512-514. doi: 10.1016/S0140-6736(15)60205-7.
9. Lebwohl M., et al. Patient perspectives in the management of psoriasis: results from the population-based Multinational Assessment of Psoriasis and Psoriatic Arthritis Survey. *J Am Acad Dermatol*. 2014 May;70(5):871-81.e1-30. doi: 10.1016/j.jaad.2013.
10. Conrad C & Gilliet M. Psoriasis: from Pathogenesis to Targeted Therapies. *Clinical Reviews in Allergy & Immunology*. January 2018. 54:102–113. doi: 10.1007/s12016-018-8668-1
11. Villasenor-Park, J., et al. Psoriasis: Evolving treatment for a complex disease. *Cleveland Clinic Journal of Medicine*. 2012 June;79(6):413-423. doi:10.3949/ccjm.79a.11133.
12. Kerdel F and Zaiac M. An evolution in switching therapy for psoriasis patients who fail to meet treatment goals. *Dermatol Ther*. 2015 Nov-Dec; 28(6): 390–403. doi: 10.1111/dth.12267.
13. Teng M., et al. IL-12 and IL-23 cytokines: from discovery to targeted therapies for immune-mediated inflammatory diseases. *Nat Med*. 2015 Jul;21(7):719-29. doi: 10.1038/nm.3895.
14. Hawkes, E., et al. Psoriasis Pathogenesis and the Development of Novel, Targeted Immune Therapies. *J Allergy Clin Immunol*. 2017 September ; 140(3): 645–653. doi:10.1016/j.jaci.2017.07.004.
15. SKYRIZI Approved Consumer Medicines Information - <http://www.medicines.org.au/files/vecskeyri.pdf>. Accessed 22 July 2019.

*YouGov research funded by AbbVie Pty Ltd.