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Dupilumab treatment in moderate-to-severe atopic dermatitis: A systematic review and meta-analysis

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Dupilumab, a monoclonal antibody against the IL-4-receptor α subunit has been developed and used in clinical trials to treat atopic dermatitis (AD). We performed a meta-analysis to assess the overall efficacy and safety of dupilumab treatment in moderate to severe AD. PubMed, Embase, Cochrane library databases and the Chinese biological medicine published up to September 2017 were searched. All randomized controlled trials of dupilumab treatment on adult patients with AD were included. Fixed- or random-effects models were used to calculate pooled standard mean differences or relative risks (SMD or RR, respectively). Six trials involving 2447 patients were identified. Pooled analysis revealed significant improvements in eczema area and severity index (EASI) scores (SMD= -0.89, 95% CI: -1.0 to -0.78), percentage of body surface area (BSA) (SMD= -0.83, 95% CI: -0.90 to -0.75), pruritus numeric rating scale (NRS) scores (SMD= -0.81, 95% CI: -0.96 to -0.66), and dermatology life quality index (DLQI) scores (SMD= -0.78, 95% CI: -0.89 to -0.66). Dupilumab treatment was also associated with significantly increased the proportion of patients achieving investigator's global assessment (IGA) response (RR=3.82; 95 % CI: 3.23 to 4.51) and a similar incidence of adverse events (RR=1.0; 95 % CI: 0.96 to 1.04). Our analysis provided evidence that dupilumab had an acceptable safety profile and resulted in clinically relevant improvements in signs and symptoms of AD. 300 mg weekly (qw) and every 2 weeks (q2w) of dupilumab seemed to have the similar benefit for patients.

Biography

Fa-Ping Wang is a Doctoral student in West China School of Medicine, Sichuan University. She has published more than 10 papers and has joined several programs.

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