

# **Autoimmune Bullous Disease: Pemphigus**

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## **Conflict of Interest**

- **PI, Dapsone trial for pemphigus (no funding)**
- **Desmoglein-3 synthetic peptide (PI-0824)  
(Peptimmune)**
- **P38 MAPK inhibitor (Kemia)**
- **Infliximab Trial (PI: Russ Hall, NIAID)**
- **VAY (Novartis, anti-BAFF receptor)**
- **Rituximab (Roche, Genentech)**

# Conflict of Interest

- **Syntimmune (monoclonal antibody against FcRn receptor)**
- **Helped develop the Pemphigus Disease Area and Severity Index (PDAI)**
- **Medical Advisory Board, International Pemphigus and Pemphigoid Foundation (IPPF)**
- **Consultant: Novartis, Lilly, Immune Pharma, Pharmacia**

# Rituximab: A New Treatment Option in PV

- Rituximab, a CD20-targeting monoclonal antibody, is a treatment option for many autoimmune diseases
  - Targets CD20-expressing B cells
- Safety and efficacy in severe PV demonstrated in  $\approx$ 500 patients across several small trials and case studies, with clinical remission occurring within 6 wks in up to 95% of patients<sup>1</sup>

# Anti-CD20 (Rituximab)

- Improvement with combined anti-CD20 and IVIG (*Ahmed et al, NEJM 355:1772, 2006*)
- 86% of patients (18/21) responded to one course of 4 weekly infusions of Rituximab (*Joly et al, NEJM 357:545, 2007*)
- Controlled trials ongoing in Europe (Joly)

*Joly P et al, Lancet 389:2031-2040, 2017*

## **Rituximab**

- **French study, 91 patients (74 with PV)**
- **Participants (1:1) received either oral prednisone alone, 1.0 or 1.5 mg/kg per day tapered over 12 or 18 months (prednisone alone group)**
- **or 1000 mg of intravenous rituximab on days 0 and 14, and 500 mg at months 12 and 18, combined with a short-term prednisone regimen, 0.5 or 1.0 mg/kg per day tapered over 3 or 6 months (rituximab plus short-term prednisone group).**
- **Follow-up was for 3 years**

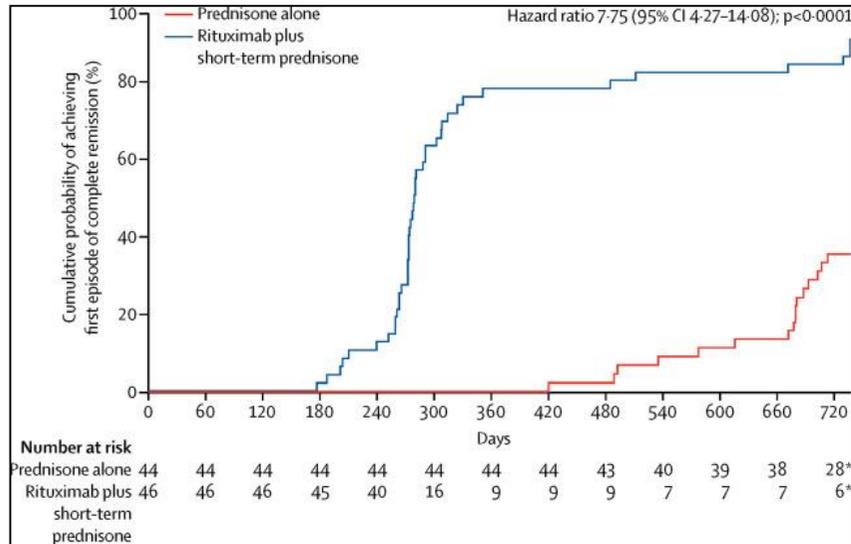
# Rituximab

- At month 24, 41 (89%) of 46 patients assigned to rituximab plus short-term prednisone were in complete remission off-therapy versus 15 (34%) of 44 assigned to prednisone alone (absolute difference 55 percentage points,  $p < 0.0001$ ).

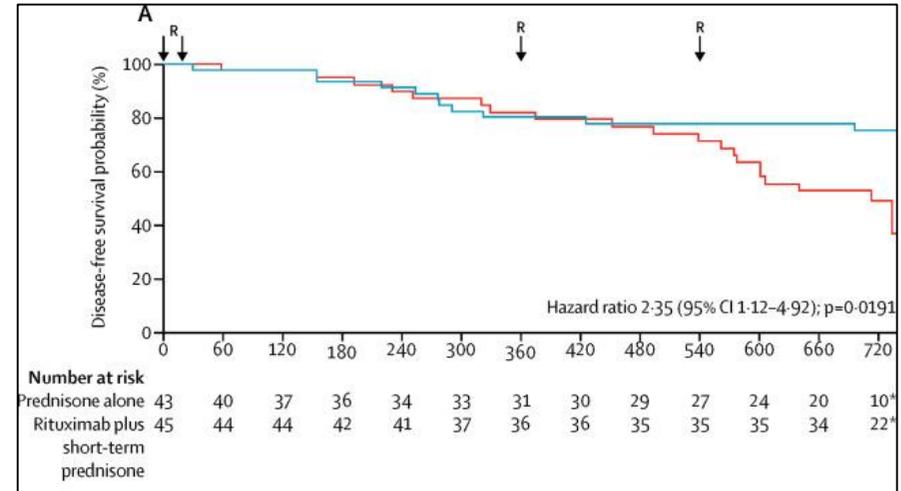
*Joly P et al, Lancet 389:2031-2040, 2017*

# Phase 2 Trial: Rituximab Improves Outcomes

24-mo remission rate: 89% vs 34%



Disease-free survival at 24 mo: 75.4% vs 36.7%



## Safety

- No treatment-related deaths
- Fewer severe grade 3/4 treatment-related adverse events in rituximab arm

# Rituximab

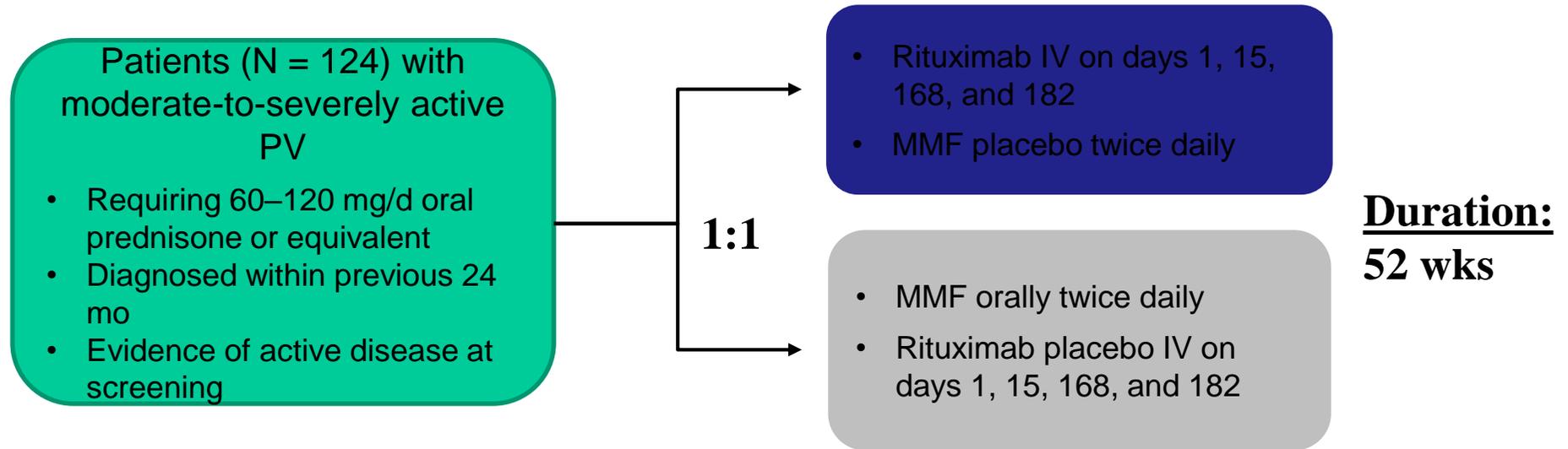
- Has changed treatment of pemphigus
- Given either 375 mg/m<sup>2</sup> every week x4 or 1000 mg every other week X2.
- Relapses frequent, average about 18 months but early relapses also occur
- May need to retreat at six months if still active or consider retreatment between 6 and 12 months to prevent relapse
- Need more data to know optimal management with Rituximab

# Treatment Considerations with Rituximab

- Infusion reactions
- Hepatitis B Virus Reactivation: Have to check for Hep B surface antigen and Hep B core antibody
- Progressive multifocal leukoencephalopathy: JC virus (rare, not seen in pemphigus yet)
- Chills, infections, body aches, tiredness, low WBC, more URI's

# Phase 3 PEMPHIX Trial

**A phase 3, randomized, double-blind, double-dummy, active-comparator, parallel-arm, multicenter study currently ongoing**



**Primary Endpoint:** Percentage of participants who achieve sustained complete remission as evaluated by PDAI (from baseline up to 52 wks)

**Key Secondary Endpoints:** Time to and duration of complete remission, time to and number of protocol defined disease flares, change in health-related QoL, adverse events, change in PV disease scores

# Current Rituximab Use

- **Granted Breakthrough Therapy designation by US FDA for treatment of PV in March 2017**
- **Priority Review by FDA in February 2018**
- **US regulatory approval expected in mid-to-late 2018**

# Treatment Considerations

- Rituximab rapidly becoming first line therapy
- Early evidence of potential clinical benefit in serious disease to help ensure patients receive access to medicines as soon as possible
- Phase III study: PEMPHIX - finished enrolling and should have data shortly