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Efficacy and Safety of
Once-Daily Roflumilast
Foam 0.3% for Psoriasis of
the Scalp and Body Involving
Knees/Elbows: Subgroup
Results From the Phase 3
ARRECTOR Trial

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#### **ABBREVIATIONS**

AE, adverse event; B-IGA, Body Investigator Global Assessment; BSA, body surface area affected; ITT, intent-to-treat; PASI, Psoriasis Area and Severity Index; PDE4, phosphodiesterase 4; QD, daily; S-IGA, Scalp Investigator Global Assessment; SAE, serious adverse event; TCS, topical corticosteroid; TEAE, treatment-emergent AE; WI-NRS, Worst Itch-Numeric Rating Scale.

#### REFERENCES

1. National Psoriasis Foundation. About Psoriasis. Updated March 18, 2025. https://www.psoriasis.org/about-psoriasis/. 2. Blakely K, et al. *Psoriasis* (Auckl). 2016;6:33–40. 3. Cannavò SP, et al. *Skin Res Technol*. 2017;23(1):41–47. 4. Stein Gold L, et al. *Cutis*. 2020;105(2):97–102;E1. 5. Elmets CA, et al. *J Am Acad Dermatol*. 2021;84:432–470. 6. Burshtein J, et al. *Dermatol Online J*. 2025;31(1). doi: 10.5070/D331164978. 7. Berk D and Osborne DW. Poster presented at the Society for Investigative Dermatology Annual Meeting; May 18–22, 2022; Portland, OR. 8. Draelos ZD, et al. *J Drugs Dermatol*. 2024;23:834–840. 9. ZORYVE® (roflumilast) foam. Prescribing information. Arcutis Biotherapeutics, Inc.;

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## DISCLOSURES

MJG, TB, MY, AA, ML, MB, and LKF are investigators and/or consultants for and have received grants/research funding and/or honorar from Arcutis Biotherapeutics, Inc. MSS, SK, DK, and DHC are employees of Arcutis Biotherapeutics, Inc. Additional disclosures provided upon request. This study was funded by Arcutis Biotherapeutics, Inc.

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## INTRODUCTION

- Plaque psoriasis, a chronic inflammatory skin condition, can occur anywhere on the body, including the scalp, elbows, and knees<sup>1</sup>
  - Topical application of creams and ointments to hair-bearing areas can make treatment of scalp psoriasis challenging<sup>2</sup>
  - Thick stratum corneum on knees/elbows can complicate topical psoriasis treatment as topical treatments are sometimes poorly absorbed<sup>3,4</sup>
- There have been recent advances and approvals in topical treatment of psoriasis; however, TCS are still commonly used, despite limitations and growing concerns with their safety<sup>5,6</sup>
  - TCS are recommended for acute treatment of inflammatory skin diseases and are not approved for long-term use because of an increased risk of cutaneous and systemic AEs
  - High-potency TCS are not recommended for areas where systemic absorption is greater (eg, thin skin)
- Roflumilast foam 0.3% is a once-daily, water-based formulation that does not contain ethanol, propylene glycol, penetration enhancers, or fragrances that can irritate skin<sup>7,8</sup>; it is approved for seborrheic dermatitis in patients aged ≥9 years,<sup>9</sup> and is being investigated for psoriasis of the scalp and body

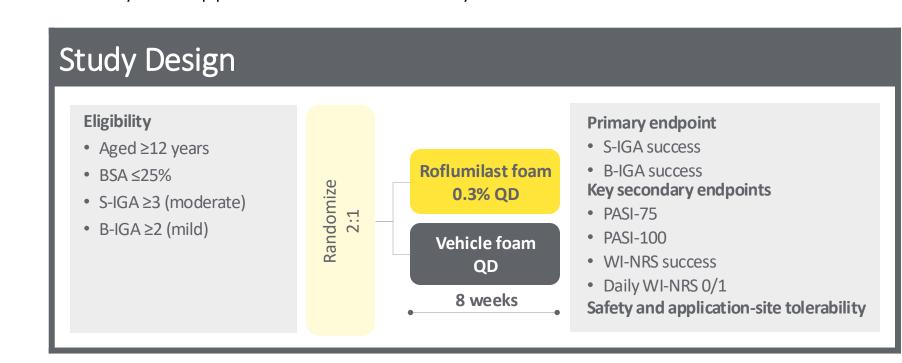
# **METHODS**

## **Study Design**

- ARRECTOR (NCT05028582) was a double-blind, randomized, parallel group, vehicle-controlled, phase 3 trial of roflumilast foam 0.3% in patients with psoriasis of the scalp and body
- Involvement of psoriasis on the knees and/or elbows was documented at screening

#### **Endpoints**

- B-IGA (body, non-scalp) and S-IGA (scalp only) success, defined as clear (0) or almost clear (1) plus a ≥2 grade improvement from baseline
- PASI-75/100, defined as ≥75%/100% improvement in PASI from baseline
- WI-NRS success, defined as ≥4-point improvement from baseline for patients with a baseline score ≥4
- Daily WI-NRS 0/1, defined as no (0) or minimal (1) itch rated on a scale from 0 to 10 (worst possible itch)
- Safety and application-site tolerability



## RESULTS

- Mean age (SD) of patients in the roflumilast foam 0.3% and vehicle foam groups was 48.6 years (14.9) and 45.0 years (14.3), respectively
- 54.1% and 60.3% of patients in the roflumilast foam 0.3% and vehicle foam groups, respectively, were female
- Overall, the majority of patients were White (81.9%) and not Hispanic or Latino (79.9%)
- At baseline, 70.8% of the roflumilast group and 72.2% of the vehicle group had knee or elbow involvement
- After 8 weeks, B-IGA success rates for patients with knee or elbow involvement were significantly higher with roflumilast vs vehicle (43.0% vs 18.0%; P=0.0002)
  Roflumilast foam 0.3% significantly improved disease severity compared with
- vehicle foam in patients with knee and/or elbow involvement
   At week 8, PASI-75/100 for the upper and lower extremity regions were achieved by significantly higher proportions of patients treated with roflumilast versus vehicle regardless of elbow (both P≤0.003) or knee
- Improvements were also observed with roflumilast for individual PASI components in both upper and lower extremity regions (data not shown)

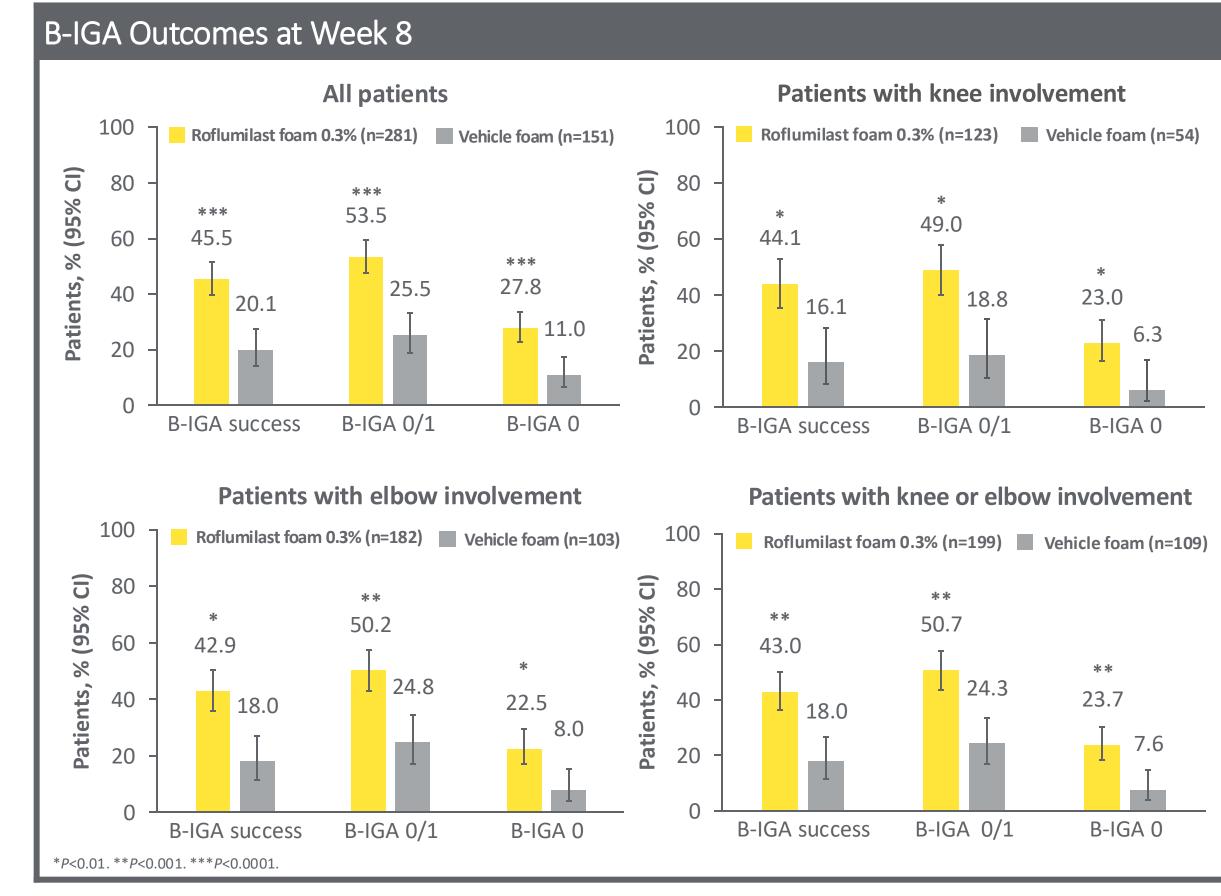
(both P<0.005) involvement

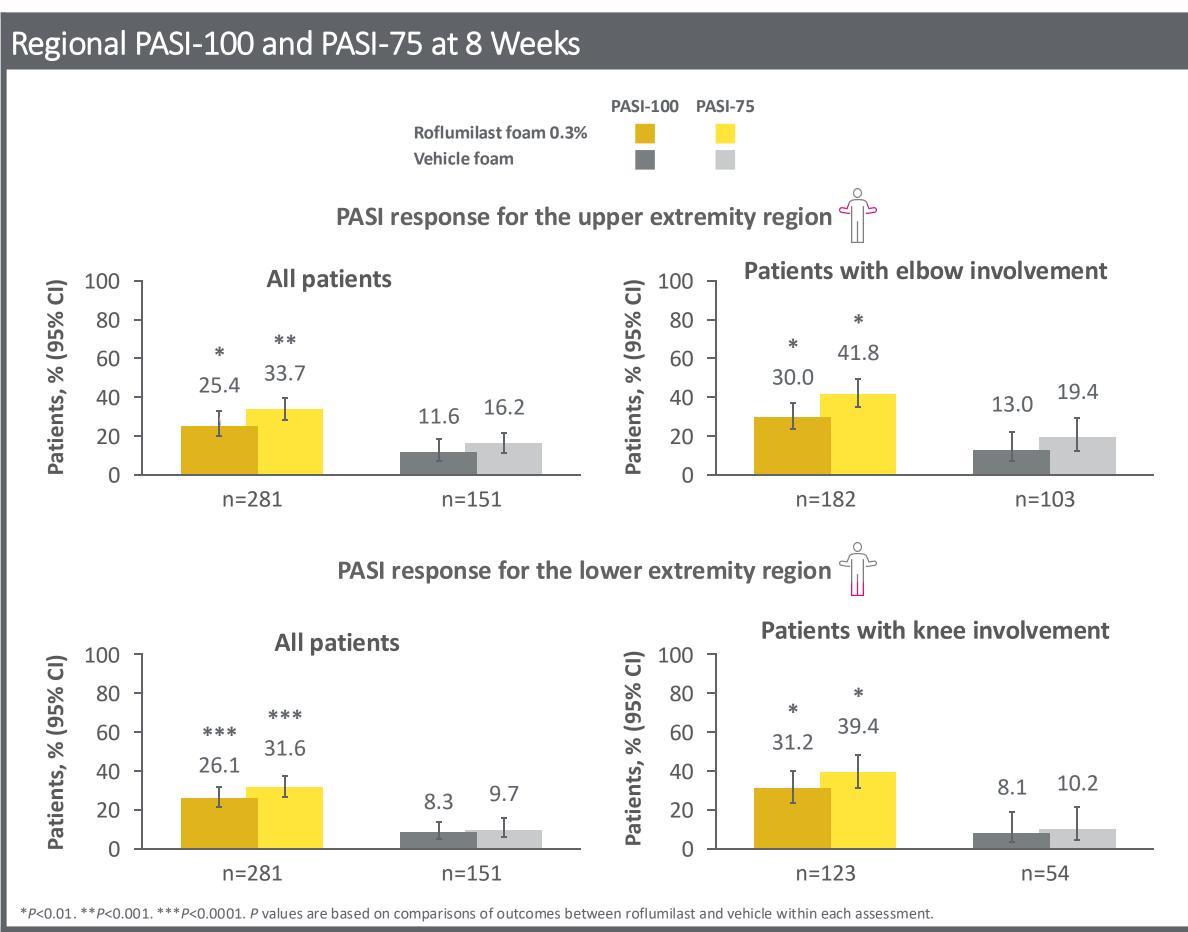
- Overall, WI-NRS success and WI-NRS 0/1 were achieved by significantly higher proportions of patients treated with roflumilast foam 0.3% versus vehicle foam at 8 weeks (P<0.0001)</li>
- Roflumilast foam 0.3% was well tolerated; most (≥95%) patients reported no/slight warm, tingling sensation at the application site at all time points assessed

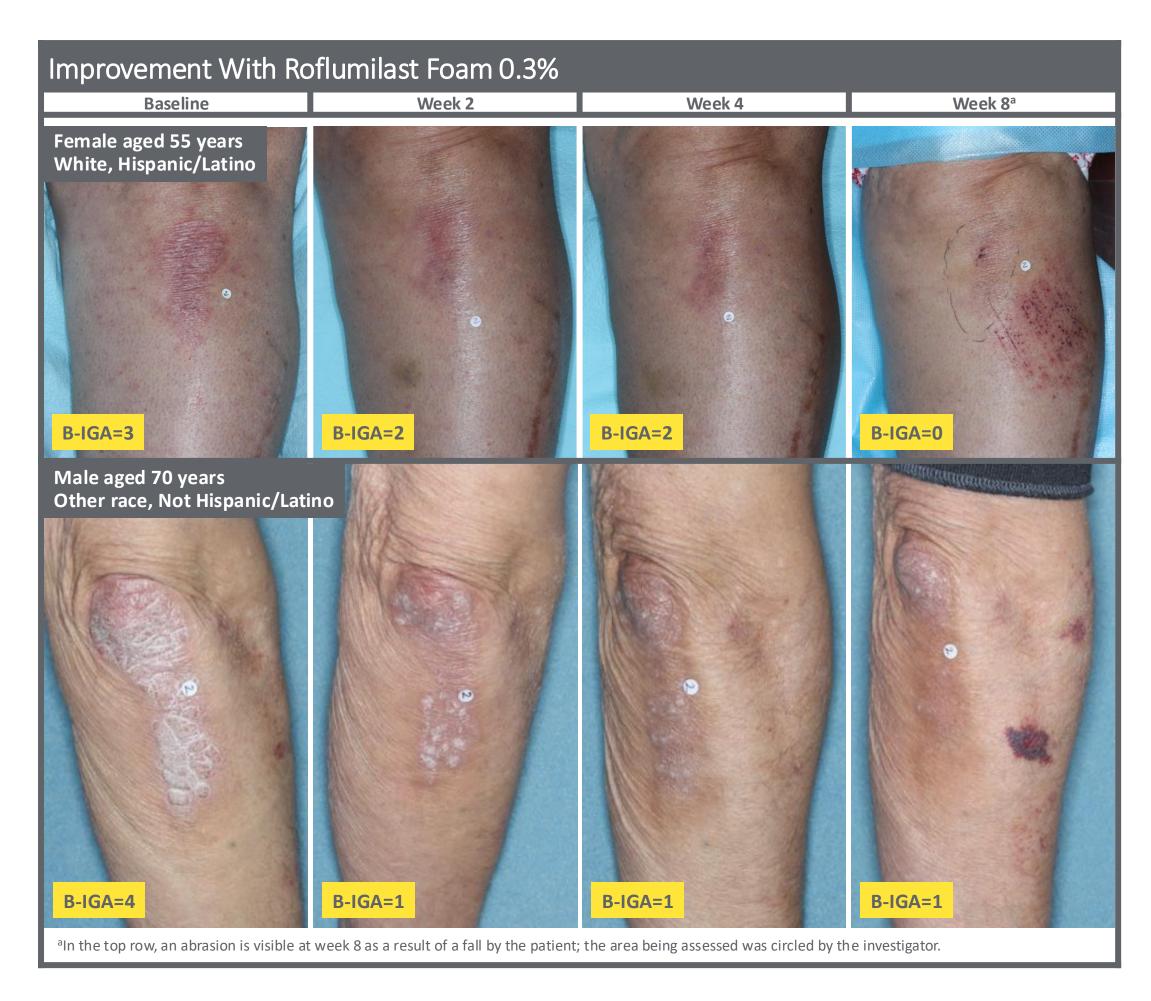
#### **Baseline Disease Characteristics**

		Roflumilast foam 0.3% (n=281)	Vehicle foam (n=151)
B-IGA, n (%)	2 (mild)	76 (27.0)	43 (28.5)
	3 (moderate)	191 (68.0)	99 (65.6)
	4 (severe)	14 (5.0)	9 (6.0)
PASI total, mean (SD)		6.70 (3.59)	6.00 (3.28)
Psoriasis involvement, n (%)	Elbows	182 (64.8)	103 (68.2)
	Knees	123 (43.8)	54 (35.8)
	Elbows or knees	199 (70.8)	109 (72.2)

ITT population







## **Summary of Adverse Events**

n (%)	Roflumilast foam 0.3% (n=281)	Vehicle foam (n=151)
Patients with any TEAE	75 (26.7)	25 (16.6)
Patients with any treatment-related TEAE	16 (5.7)	3 (2.0)
Patients with any treatment-emergent SAE <sup>a</sup>	2 (0.7)	1 (0.7)
Patients with any treatment-related SAE	1 (0.4)	0
Patients who discontinued study drug due to an AE	7 (2.5)	2 (1.3)
Most common TEAEs by preferred term, ≥2% in any group		
Headache	13 (4.6)	3 (2.0)
Diarrhea	9 (3.2)	4 (2.6)
COVID-19	8 (2.8)	4 (2.6)
Nausea	6 (2.1)	0
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<sup>a</sup>SAEs include bipolar disorder (roflumilast; unrelated), gastritis (roflumilast; possibly related), joint dislocation, peripheral artery occlusion, and radius fracture (vehicle; all unrelated).

# CONCLUSIONS

Once-daily roflumilast foam 0.3% was well tolerated and provided improvement across multiple efficacy measures in patients with psoriasis of the scalp and body involving knees and/or elbows

- A higher proportion of patients with knee and/or elbow involvement achieved B-IGA 0 with roflumilast compared with patients receiving vehicle
- Disease severity on the lower and upper extremities, which include the knees and elbows, also improved at week 8
- Notably, one-quarter to nearly one-third of patients achieved clearance (ie, PASI-100) at week 8
- Efficacy results in knee and elbow involvement subgroups were generally consistent with the overall population in ARRECTOR