



# CLINICAL TRIAL RESULTS

This summary reports the results of only one study. Researchers must look at the results of many types of studies to understand if a study medicine works, how it works, and if it is safe to prescribe to patients. The results of this study might be different than the results of other studies that the researchers review.

**Sponsor:** Pfizer Inc.

**Medicine(s) Studied:** Abrocitinib (PF-04965842)

**Protocol Number:** B7451014

**Dates of Trial:** 11 June 2018 to 7 October 2020

**Title of this Trial:** Study to Investigate Efficacy and Safety of PF-04965842 in Subjects Aged 12 Years and Over With Moderate to Severe Atopic Dermatitis With the Option of Rescue Treatment in Flaring Subjects

[A Phase 3 Randomized Withdrawal, Double-Blind, Placebo-Controlled, Multi-Center Study Investigating the Efficacy and Safety of Abrocitinib (PF-04965842) in Subjects Aged 12 Years and Over, With Moderate to Severe Atopic Dermatitis With the Option of Rescue Treatment in Flaring Subjects]

**Date of this Report:** 05 Jan 2022

– *Thank You* –

Pfizer, the Sponsor, would like to thank you and/or your child for participating in this clinical trial and provide you a summary of results representing everyone who participated. If you have any questions about the study or results, please contact the doctor or staff at your study site.

## WHY WAS THIS STUDY DONE?

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Atopic dermatitis (or “AD”), which is also sometimes called atopic eczema, is a common skin disorder that causes patches of flaky, red, and very itchy skin. Some of the current medicines available for AD can only be used for short time periods, or can cause other health problems. Researchers are looking for new treatments for AD that can be taken for long periods of time.

While researchers think that many things cause AD, it is made worse by the body’s immune system (the body’s defense against infection) causing redness and swelling (inflammation). Cells in the immune system trigger inflammation by making special proteins called “cytokines”. Researchers think that medicines that modify the way these cytokines work could help treat patients with AD.

The drug tested in this study was PF-04965842, which now has the generic name abrocitinib. PF-04965842 is an experimental drug that has not been approved for sale. PF-04965842 blocks the activity of a protein called “Janus kinase 1”, which acts like an on/off switch for the cells of the immune system. By blocking Janus kinase 1 activity, the signal to the cells that triggers inflammation is modified.

Patients with AD can have “flare-ups”, which are times when AD symptoms are worse. The researchers in this study wanted to learn if patients who saw improvement in AD after beginning PF-04965842 would be able to maintain this improvement and have fewer flare-ups. The researchers asked this question:

- **How many patients who took PF-04965842 had a flare-up, compared to patients who took placebo?**

## WHAT HAPPENED DURING THE STUDY?

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This study compared 3 groups of patients who saw improvement in AD after first taking PF-04965842 200 mg for 12 weeks, to find out if patients who then took PF-04965842 for 40 weeks would have fewer flare-ups, compared to patients who then took placebo for 40 weeks. A placebo does not have any medicine in it, but

looks just like the medicine being tested. Using a placebo helps researchers learn if the study drug works better than no treatment at all.

The study included adult men and women, and boys and girls who were aged 12 years and older, and who weighed at least 40 kilograms (about 88 pounds). Patients included in the study:

- Had chronic (long-term) AD for at least 1 year, and had moderate to severe AD when they entered the study.
- Also had one of the following:
  - Had been treated up to 6 months earlier for AD with medicines applied to the skin, and their AD did not get better.
  - Needed to use medicines that reach all parts of the body to control their AD (for example, taking medicines by mouth).

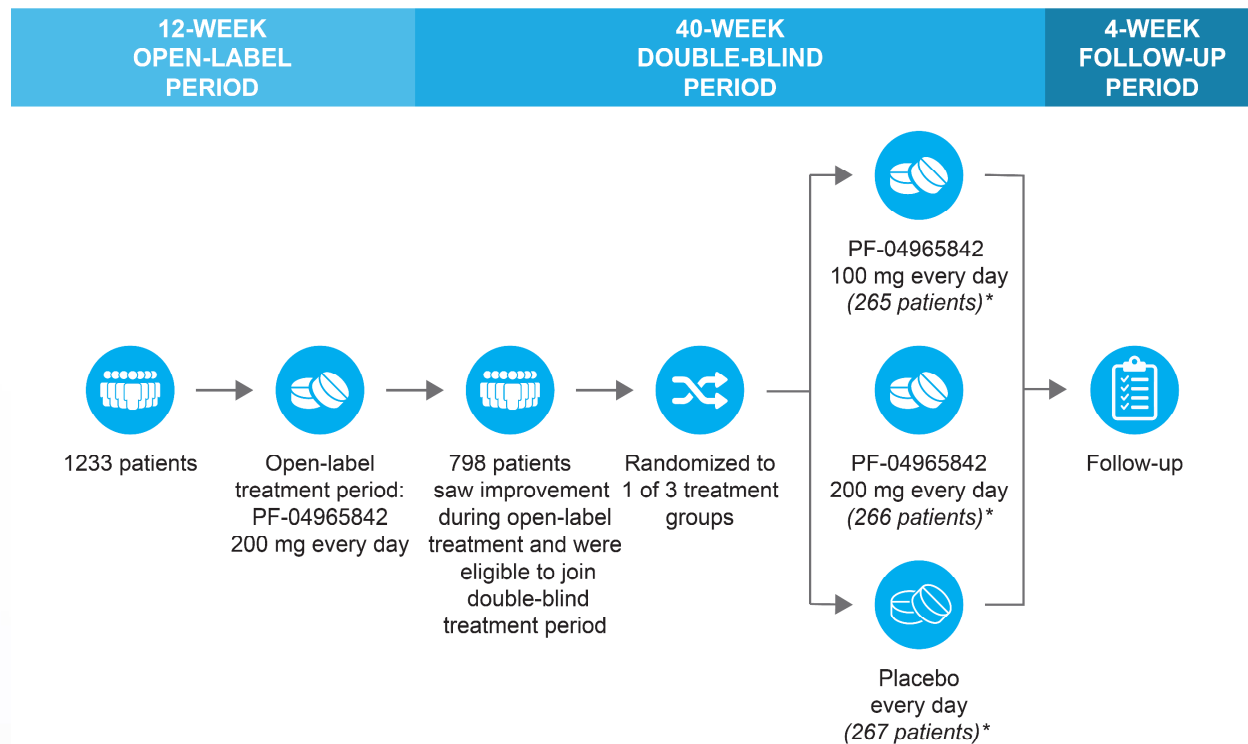
The first part of the study was “open-label”, which means that the patients and doctors knew what treatment was being given. During this open-label period, all patients received PF-04965842 at a dose of 200 mg every day for 12 weeks.

Next, those patients who saw improvement during the open-label period were assigned to 1 of 3 treatment groups by chance (like the flip of a coin or drawing straws) to receive either PF-04965842 at a dose of 100 mg, PF-04965842 at a dose of 200 mg, or placebo for 40 weeks. This is known as a “randomized” study. This is done so that every patient has an equal chance of getting 1 of the 3 treatments, and there is no bias or selection involved in assigning the treatments.

During this part of the study, the patients, doctors, and researchers did not know who took PF-04965842 and who took the placebo. This is known as a “double-blinded” period. This is done to make sure the results of the research study cannot be unfairly influenced by anyone.

Patients who had a flare-up during the double-blind period could start “rescue treatment” with PF-04965842 at a dose of 200 mg every day plus medicine applied to the skin for 12 weeks.

The figure below shows what happened during the study.



\* Patients who had a flare-up could receive rescue treatment (PF-04965842 200 mg every day for 12 weeks + medicine applied to skin)

Patients were expected to be in the study for about 56 weeks total (treatment plus follow-up), but the entire study took more than 2 years to complete. The Sponsor ran this study at 236 locations in Asia, Europe, North America, and South America. It began on 11 June 2018 and ended on 7 October 2020. A total of 684 boys/men (55%) and 549 girls/women (45%) participated. All patients were between the ages of 12 and 82 years.

Of the 1233 patients who started the 12-week open-label period and received treatment, 798 (65%) saw improvement and were therefore eligible to enter the double-blind period. During the 12-week open-label period, a total of 120 patients (10%) stopped taking study treatment or left the study early by their choice or because a doctor decided it was best for them to stop the study. A total of 315 patients (26%) completed the 12-week open-label period, but their response was not good enough to enter the double-blind period.

Of the 798 patients who entered the 40-week double-blind period, 705 patients (88%) completed it. A total of 93 patients (12%) stopped taking study treatment or left the

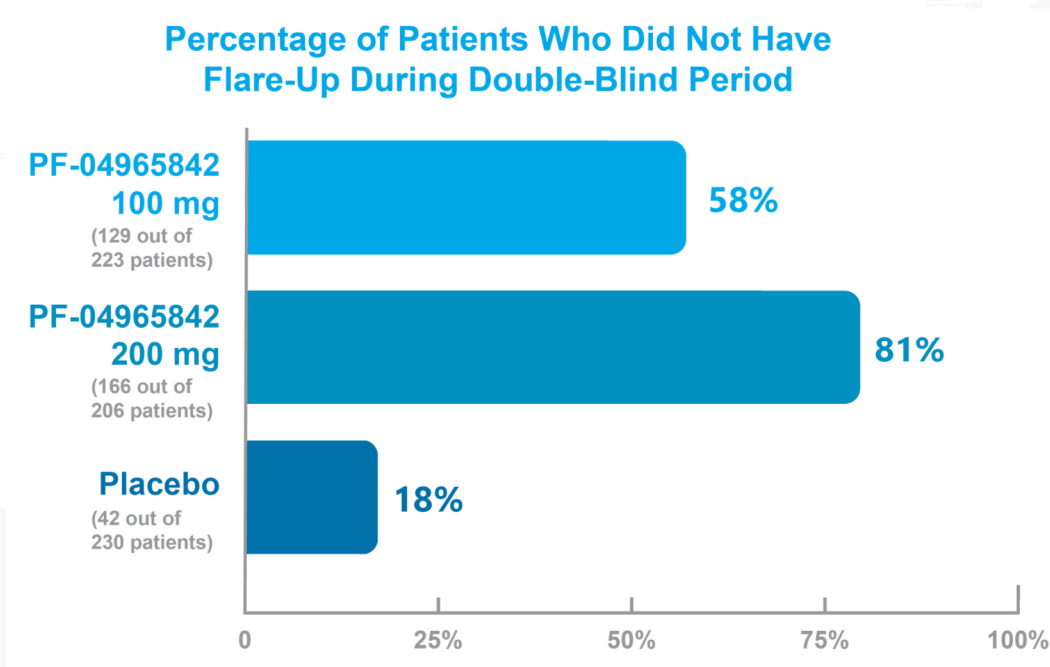
study early by their choice or because a doctor decided it was best for them to stop the study.

When the study ended in October 2020, the Sponsor began reviewing the information collected. The Sponsor then created a report of the results. This is a summary of that report.

## WHAT WERE THE RESULTS OF THE STUDY?

### How many patients who took PF-04965842 had a flare-up, compared to patients who took placebo?

In this study, patients who took PF-04965842 during the double-blind period were less likely to have a flare-up than patients who took placebo during the double-blind period. At Week 52 of the study, 129 out of 223 patients (58%) in the PF-04965842 100 mg group had not had a flare-up. 166 out of 206 patients (81%) in the PF-04965842 200 mg group had not had a flare-up. 42 out of 230 patients (18%) in the placebo group had not had a flare-up. The figure below shows these results.



Based on these results, the researchers have decided that the results are not likely the result of chance. PF-04965842 may be an option for treating AD in adults and children 12 years and older.

This does not mean that everyone in this study had these results. Other studies may produce different results, as well. These are just some of the main findings of the study, and more information may be available at the websites listed at the end of this summary.

## **WHAT MEDICAL PROBLEMS DID PATIENTS HAVE DURING THE STUDY?**

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The researchers recorded any medical problems the participants had during the study. Participants could have had medical problems for reasons not related to the study (for example, caused by an underlying disease or by chance). Or, medical problems could also have been caused by a study treatment or by another medicine the participant was taking. Sometimes the cause of a medical problem is unknown. By comparing medical problems across many treatment groups in many studies, doctors try to understand what the side effects of an experimental drug might be.

555 out of 1233 patients (45%) in this study had at least 1 medical problem. Of the patients who were randomized to the double-blind period, 89 out of 265 patients (34%) in the PF-04965842 100 mg group, 101 out of 266 patients (38%) in the PF-04965842 200 mg group, and 94 out of 267 patients (35%) in the placebo group had at least 1 medical problem.

43 out of 1233 patients (3%) left the study because of a medical problem. Of the patients who were randomized to the double-blind period, 5 out of 265 patients (2%) in the PF-04965842 100 mg group, 16 out of 266 patients (6%) in the PF-04965842 200 mg group, and 4 out of 267 patients (1%) in the placebo group left the study because of a medical problem.

The most common medical problems are listed below.

## Most Common Medical Problems (Reported by At Least 5% of Patients)

Medical Problem	All Patients Treated: Open-Label and Double-Blind (1233 Patients Treated)	Double-Blind Period: PF-04965842 100 mg (265 Patients Treated)	Double-Blind Period: PF-04965842 200 mg (266 Patients Treated)	Double-Blind Period: Placebo (267 Patients Treated)
Nausea	199 (16%)	2 (1%)	8 (3%)	1 (less than 1%)
Headache	119 (10%)	1 (less than 1%)	7 (3%)	1 (less than 1%)
Common cold	77 (6%)	10 (4%)	18 (7%)	5 (2%)
Acne	68 (6%)	5 (2%)	8 (3%)	0 (0%)
Infection of the nose, throat, or upper airways	63 (5%)	8 (3%)	8 (3%)	6 (2%)
Atopic dermatitis	47 (4%)	51 (19%)	33 (12%)	83 (31%)
Increased muscle protein in the blood (creatine phosphokinase)	43 (4%)	6 (2%)	14 (5%)	1 (less than 1%)

## WERE THERE ANY SERIOUS MEDICAL PROBLEMS?

A medical problem is considered “serious” when it is life-threatening, needs hospital care, or causes lasting problems.

43 out of 1233 patients (3%) had serious medical problems. One patient (less than 1%) died during the open-label period, and the death was not considered to be related to study treatment. The serious medical problems that happened in more than 1 patient are listed below.

### Most Common Serious Medical Problems (Reported by More Than 1 Patient)

Serious Medical Problem	All Patients Treated: Open-Label and Double-Blind (1233 Patients Treated)	Double-Blind Period: PF-04965842 100 mg (265 Patients Treated)	Double-Blind Period: PF-04965842 200 mg (266 Patients Treated)	Double-Blind Period: Placebo (267 Patients Treated)
Atopic dermatitis	3 (less than 1%)	0 (0%)	0 (0%)	0 (0%)
Skin infection (cellulitis)	2 (less than 1%)	0 (0%)	0 (0%)	0 (0%)
Lung infection (pneumonia)	1 (less than 1%)	1 (less than 1%)	0 (0%)	1 (less than 1%)
Viral infection of atopic dermatitis	0 (0%)	1 (less than 1%)	1 (less than 1%)	0 (0%)



## WHERE CAN I LEARN MORE ABOUT THIS STUDY?

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If you have questions about the results of your study, please speak with the doctor or staff at your study site.

For more details on your study protocol, please visit:

[www.clinicaltrials.gov](http://www.clinicaltrials.gov)

Use the study identifier **NCT03627767**

[www.clinicaltrialsregister.eu](http://www.clinicaltrialsregister.eu)

Use the study identifier **2018-000501-23**

Please remember that researchers look at the results of many studies to find out which medicines can work and are safe for patients. Findings from this trial, along with other trials, will be used to seek approval for using PF-04965842 to treat patients with moderate to severe AD.

**Again, thank you for volunteering.**  
**We do research to try to find the  
best ways to help patients, and you  
helped us to do that!**