



Efficacy and Safety of Roflumilast Foam 0.3% in Patients with Seborrheic Dermatitis in a Randomized, Double-blind, Vehicle-controlled Phase 2 Study

Matthew Zirwas¹, Zoe D. Draelos², Janet DuBois³, Leon Kircik⁴, Angela Moore⁵, Linda Stein Gold⁶, Robert C. Higham⁷, Lynn Navale⁷, Patrick Burnett⁷, David R. Berk⁷

¹Dermatologists of the Central States, Probitry Medical Research, and Ohio University, Bexley, OH, USA; ²Dermatology Consulting Services, High Point, NC, USA; ³DermResearch, Inc., Austin, TX, USA; ⁴Icahn School of Medicine at Mount Sinai, NY, Indiana Medical Center, Indianapolis, IN, Physicians Skin Care, PLLC, Louisville, KY, and Skin Sciences, PLLC, Louisville, KY, USA; ⁵Arlington Center for Dermatology, Arlington, TX, USA; ⁶Henry Ford Medical Center, Detroit, MI, USA; ⁷Arcutis Biotherapeutics, Inc., Westlake Village, CA, USA

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Introduction and Study Design

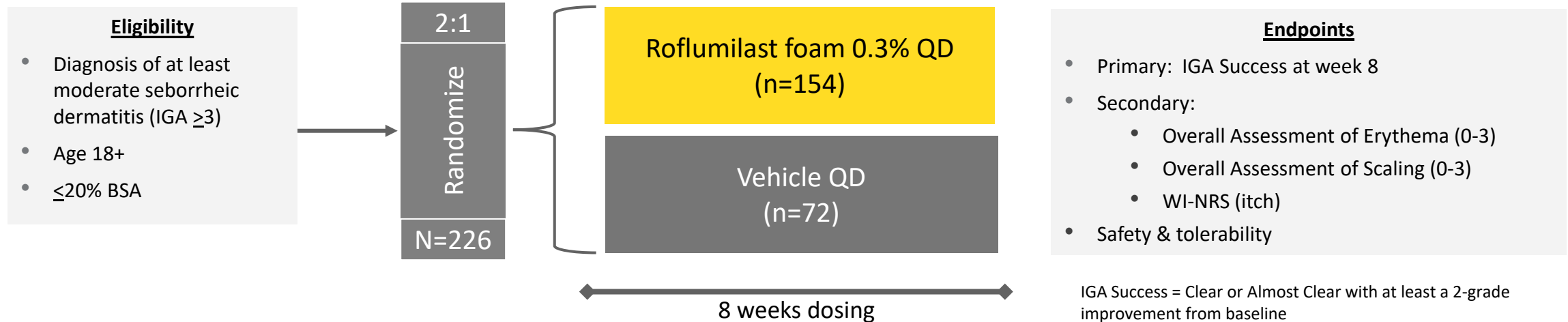
Seborrheic dermatitis (SD) is a chronic inflammatory skin condition that may cause physical discomfort and emotional burden for patients^{1,2}

- SD is characterized by erythematous, scaly plaques, with a yellowish, oily, moist, and/or greasy appearance and affects areas with abundant sebaceous glands^{3,4}

Topical treatments include antifungals, steroids, immunomodulators, and dandruff shampoos,^{3,4} but efficacious and safe options are needed, especially for long-term use

Roflumilast is a potent, nonsteroidal, PDE-4 inhibitor being investigated for once-daily treatment of several dermatologic conditions,⁵ including SD

A phase 2, 8-week study investigated using roflumilast foam 0.3% once-daily for the treatment of SD.



BSA: Body Surface Area; IGA: Investigator's Global Assessment; QD: once daily; WI-NRS: Worst Itch-Numeric Rating Scale

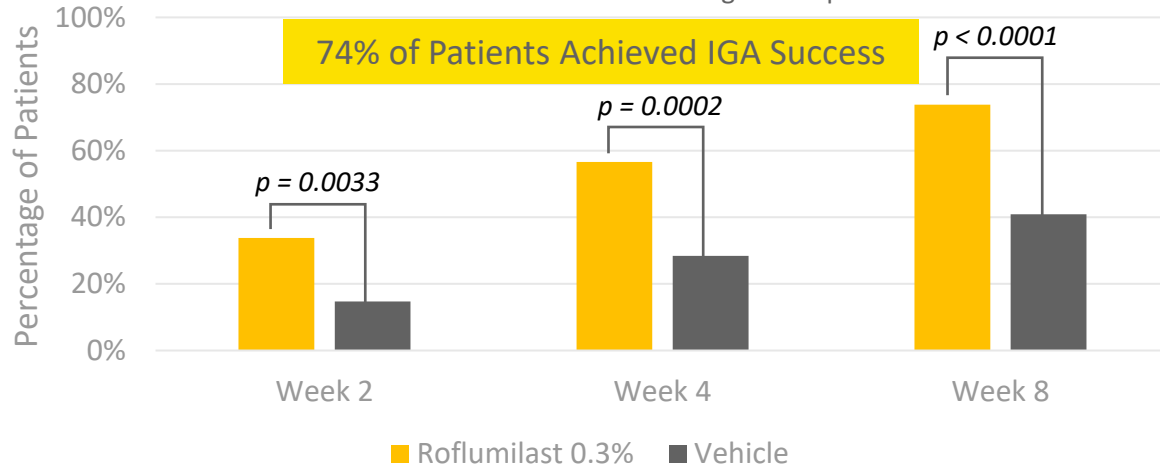
1. Araya M et al. Indian J Dermatol 2015;60:519; 2. Pärna, E., et al. Acta Derm Venereol 2015; 95:312-6; 3. Clark GW et al. Am Fam Physician 2015;91:185-90; 4. Kastarinen H et al. Cochrane Database Syst Rev 2014:Cd009446; 5. Lebwohl MG et al. NEJM 2020;383:229-39.

Roflumilast Foam 0.3% Demonstrated Significant and Rapid Improvement in SD, Redness, Scaling, and Itch

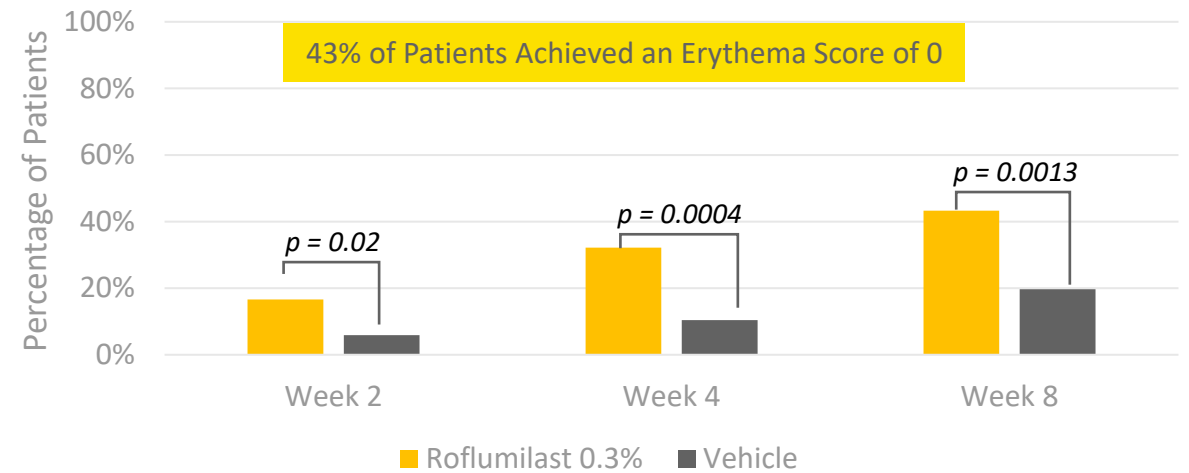
Primary Endpoint

Patients Achieving IGA Success at Each Visit (mITT)

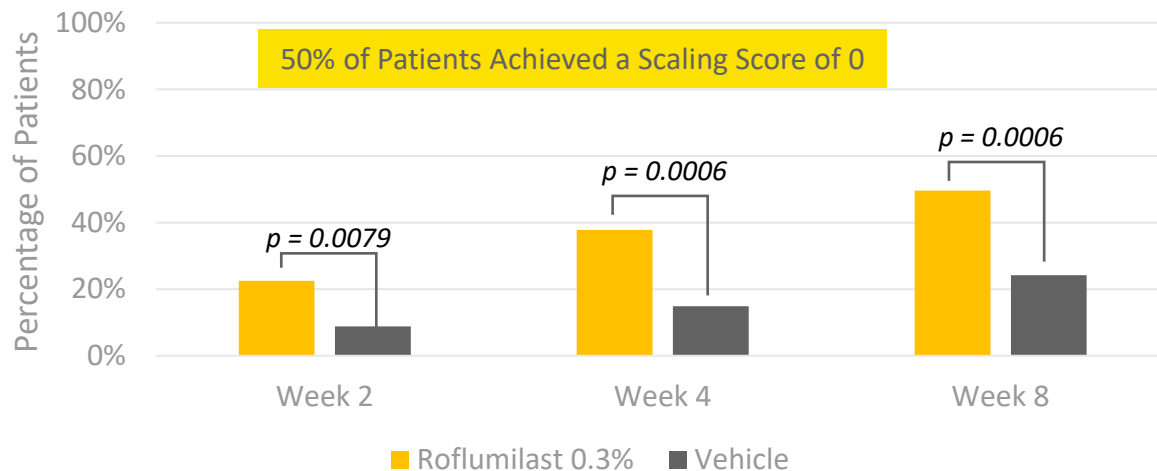
IGA Success = Clear or Almost Clear with at least a 2-grade improvement from baseline



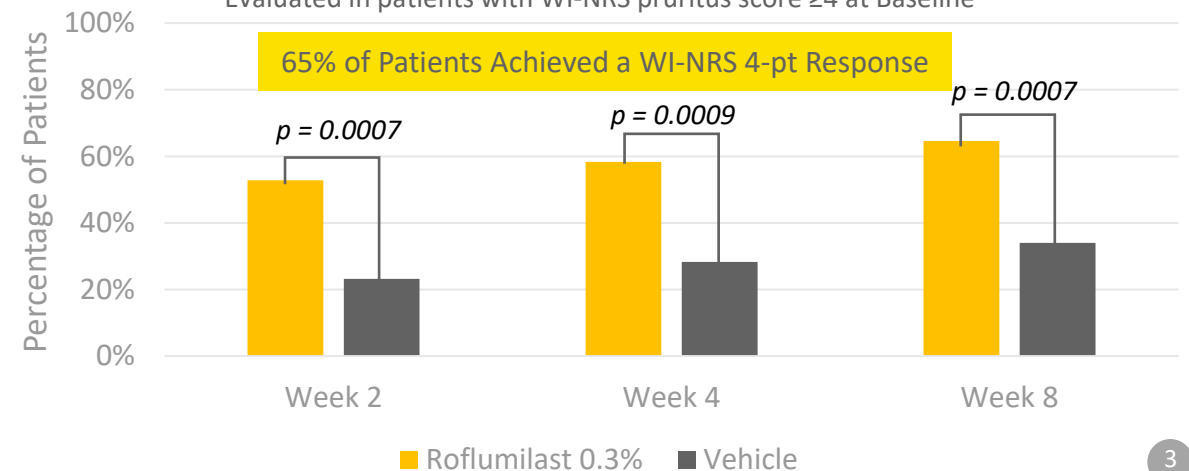
Patients Achieving Erythema Score of 0 ("None") at Each Visit (mITT)



Patients Achieving Scaling Score of 0 ("None") at Each Visit (mITT)



Patients Achieving WI-NRS 4-pt Response at Each Visit Evaluated in patients with WI-NRS pruritus score ≥ 4 at Baseline



mITT: all randomized patients except those who missed the week 8 IGA assessment specifically due to COVID-19 disruption

Results: Safety

- Rates of AEs were low
- Few treatment-related AEs were reported
- Very few AEs lead to study discontinuation
 - Rates of discontinuation were similar between roflumilast and vehicle groups
- No patients had a SAE
- ≥99% of roflumilast-treated and ≥98% of vehicle-treated patients had no evidence of irritation on the investigator-rating of local tolerability

N (%)	Roflumilast 0.3% foam (n=154)	Vehicle foam (n=72)
Patients with any TEAE	37 (24.0)	13 (18.1)
Patients with any treatment-related TEAE	3 (1.9)	3 (4.2)
Patients with any SAE	0 (0.0)	0 (0.0)
Patients who discontinued study due to AE^a	2 (1.3)	1 (1.4)
Most common TEAE (>2% in any group), preferred term		
Contact Dermatitis ^b	3 (1.9)	2 (2.8)
Insomnia	3 (1.9)	1 (1.4)
Nasopharyngitis	3 (1.9)	0 (0.0)

^aAEs leading to discontinuation for roflumilast were application site pain, migraine, dyspnea. In the vehicle group: application site dysesthesia

^bContact dermatitis was reported to be unrelated to treatment in all cases; 2 cases were reported as poison ivy rash

Summary and Conclusions

- Roflumilast foam 0.3% demonstrated significant improvement in IGA Success, erythema, scaling, and itch
 - The improvements in IGA Success were statistically significant at the first post-baseline visit (Week 2) and continued through Week 8
 - Roflumilast foam resulted in significant improvements in itch by Week 2
 - ~80% of patients reported notable itch at baseline (WI-NRS ≥ 4)
- Rates of treatment-related adverse events, discontinuations due to adverse events, and application-site pain were low and similar to vehicle
- Once-daily roflumilast foam 0.3% provided safe, well-tolerated, and effective treatment of erythema, scaling, and itch caused by seborrheic dermatitis, and represents a promising novel treatment with early onset of action