

## ABSTRACT

### Calcipotriol in Combination Therapy

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Calcipotriol has proved to be an effective monotherapy for mild and moderate psoriasis. The purpose of this presentation is to demonstrate its application in combination therapy for patients with more severe forms of the disease.

In an open study of 20 patients, the efficacy of and tolerability to Calcipotriol ointment alone or with UVB radiation were compared.

After 8 weeks' treatment with Calcipotriol alone, 66% showed marked improvement and 17% showed clearance.

In the group treated with the combination of UVB with Calcipotriol ointment, 50% showed marked improvement and 39% showed clearance.

Although the study was too small to show statistical significance between the two groups, the results were encouraging.

In a double-blind study, comparing Calcipotriol ointment with PUVA and vehicle control with PUVA, 104 patients were studied.

PUVA was given in stepwise increments up to a maximum dose of 8.5 joules/cm<sup>2</sup> for skin type II and 9 joules/cm<sup>2</sup> for skin type III, or until adverse events appeared or until a target treatment response was reached. A target of >90% reduction in

PASI score was aimed for 71.7% of the Calcipotriol treated group and 55.6% placebo treated group achieved the target. In the Calcipotriol treated group there was a 26% reduction in total UVA dose (this did not reach significance). There was however, a statistically significant reduction of 37% in the cumulative UVA dose in the total Calcipotriol treated group analysed compared with the vehicle treated group. Combined treatment with PUVA and Calcipotriol is thus a highly effective and well tolerated treatment of extensive plaque psoriasis.

In a double-blind comparative study of Calcipotriol ointment with cyclosporin A and vehicle ointment with cyclosporin A in severe psoriasis (PASI  $\geq$  20), 69 patients were studied. Cyclosporin was given at a dosage of 2 mg/kg/day. The primary response criterion was clearance, or >90% reduction from baseline in PASI score in the 6-week treatment period. 53.3% Calcipotriol-treated compared with 12.5% of vehicle-treated patients achieved this primary target.

Calcipotriol thus appears to potentiate the effect of cyclosporin A in the treatment of psoriasis and allows better response rates which would only be achievable using cyclosporin A alone at higher doses and for longer periods of treatment.