

EADV 2026

DO NOT MISS HIGHLIGHTS IN PSORIATIC DISEASE

SEPTEMBER 2026



NEWSLETTER

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Y-GRAPPA members prepared this Newsletter. It highlights some of the very interesting abstracts on psoriatic disease that will be presented at the 2026 EADV congress.



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BASIC SCIENCE HIGHLIGHTS



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TDRKH-MEDIATED PIRNA REGULATION SUSTAINS PRO-INFLAMMATORY M1 MACROPHAGE POLARIZATION IN PSORIASIS

Yulin Zou
FC05.1B

Friday 2 October, 08:40–08:50 Free Communication 5: Psoriasis Hall N



Why important?

This work links genetic susceptibility to a previously underappreciated post-transcriptional mechanism sustaining inflammatory macrophage states in psoriasis. By connecting altered TDRKH expression and piRNA regulation with IL-23-producing macrophages, it identifies a potential upstream mechanism that may perpetuate the IL-23/IL-17 inflammatory circuit beyond conventional cytokine-centric models.

Poll question

Do pathogenic macrophage programs represent an independent mechanism of disease persistence despite effective IL-23/IL-17 blockade?

SPATIOTEMPORAL NANODRUG DELIVERY MICRONEEDLES TARGETING PATHOGENIC COX2-POSITIVE ENDOTHELIAL CELL-MEDIATED GLYCOCALYX DEGRADATION TO AMELIORATE PSORIATIC INFLAMMATION

Xiaoyan Luo
P1128

ePoster Psoriasis-Part 2



Why important?

This study reframes the psoriatic vasculature from a passive bystander to an active driver of inflammation, identifying COX2-high endothelial cells and glycocalyx loss as a mechanism facilitating immune-cell entry into skin. The combination of vascular targeting with inflammation-responsive microneedle delivery is particularly compelling because it addresses both an upstream pathogenic process and the practical challenge of delivering therapy through hyperkeratotic psoriatic skin.

Poll question

If pathogenic endothelial programs persist despite cytokine blockade, should vascular barrier restoration become a complementary treatment strategy in psoriasis?

BASIC SCIENCE HIGHLIGHTS

SPATIAL DYNAMICS OF REGULATORY T CELLS AND TISSUE-RESIDENT MEMORY T CELLS DURING IL-23 INHIBITION WITH TILDRAKIZUMAB IN PSORIASIS

Tatiana Sezin
P2540
ePoster Psoriasis-Part 2



Why important?

This study addresses a central question in psoriasis disease modification: whether IL-23 inhibition merely suppresses active inflammation or remodels the tissue immune memory that predisposes previously affected skin to relapse. Spatial tracking of pathogenic Trm cells and protective Tregs in resolved lesions may help explain the unusually durable responses seen with IL-23 inhibitors and could ultimately provide biomarkers for treatment de-escalation or withdrawal.



Poll question

Would you use a validated Trm:Treg tissue signature to help decide whether a patient could stop biologic therapy?

CLINICAL HIGHLIGHTS



Yusuf Can Edek, MD
Specialist Physician (Dermatology & Venereology),
Aksaray Training and Research Hospital, Türkiye
GRAPPA Global Mentee (2026–2027), Y-GRAPPA DNM
Contributor



[Yusuf Can Edek](#)

CLINICAL AND THERAPEUTIC DIFFERENCES BETWEEN EARLY-ONSET AND LONG-STANDING PSORIASIS: EXPERIENCE FROM BIOBADADERM (SPANISH NATIONAL REGISTRY)

Elena Porres López

P1096

Wednesday, 30 September • 07:00 – 07:00 CEST Psoriasis – Part II
ePoster Area



Why important?

Leveraging a large national registry, this research highlights distinct clinical phenotypes and treatment responses based on disease duration, emphasizing the need for tailored therapeutic approaches.

Poll question

Do you notice a significant difference in biologic survival rates between your patients with early-onset versus long-standing psoriasis?



DEVELOPMENT AND VALIDATION OF A DISEASE-SPECIFIC SCREENING QUESTIONNAIRE FOR INFLAMMATORY BOWEL DISEASE IN PATIENTS WITH PSORIASIS AND/OR PSORIATIC ARTHRITIS (IBD- SCREEN)

Brigitte Stephan

P1134

Wednesday, 30 September • 07:00 – 07:00 CEST Psoriasis – Part II ePoster Area



Why important?

Inflammatory bowel disease is a critical comorbidity that limits the use of certain biologics (such as IL-17 inhibitors); validating a disease-specific screening tool may enhance safe prescribing practices.

Poll question

Do you routinely use a standardized questionnaire to screen for IBD before initiating biologic therapy in your psoriasis clinic?



CLINICAL HIGHLIGHTS

THE ADOPTABILITY OF AN AI-SUPPORTED DYNAMIC TREATMENT DECISION AID FOR ADULTS WITH PSORIASIS

Vivienne Nguyen

PO373

Wednesday, 30 September • 07:00 – 07:00 CEST Biologics, immunotherapy, targeted therapy
ePoster Area



Why important?

As digital health tools rapidly transform dermatology, this study provides essential insights into the real-world adoptability of AI-supported decision aids designed to optimize personalized treatment pathways for patients with psoriasis.

Poll question

How comfortable are you with integrating AI-supported dynamic treatment decision aids into your routine clinical management of psoriasis?

TREATMENT HIGHLIGHTS



Yelitza Cecilia Velarde Mejía — MD, PhD
Rheumatologist, Hospital Nacional Carlos Alberto Seguí
Escobedo (HNCASE) Arequipa, Peru; Faculty member at
Universidad Nacional de San Agustín (UNSA) and
Universidad Católica de Santa María
Member, Young GRAPPA



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CHARACTERISTICS INFLUENCING THE PREVENTION OF PSORIATIC ARTHRITIS WITH SECUKINUMAB IN PATIENTS WITH MODERATE TO SEVERE PLAQUE PSORIASIS: 5-YEAR REAL-WORLD RESULTS FROM THE SERENA STUDY

Matthias Augustin (Hamburg, Germany)

P0362

Wednesday, 30 September 07:00–07:00 CEST

Poster session ePoster Area



Why important?

Five-year real-world data identifying which patients on secukinumab are less likely to progress to PsA — useful for guiding early treatment escalation decisions in cutaneous psoriasis.

Poll question

In patients with moderate-to-severe psoriasis and no joint symptoms, how likely are you to start a biologic specifically to prevent the development of psoriatic arthritis?



BIMEKIZUMAB EFFICACY AND SAFETY VERSUS RISANKIZUMAB IN PATIENTS WITH ACTIVE PSORIATIC ARTHRITIS: 24-WEEK RESULTS FROM A HEAD-TO-HEAD, MULTICENTRE, RANDOMISED, PHASE 3B STUDY (BE BOLD)

Diamant Thaçi (Luebeck, Germany)

P2807

Wednesday, 30 September 07:00–07:00 CEST

Poster session ePoster Area



Why important?

One of few randomized head-to-head trials in PsA; at 16 weeks bimekizumab outperformed risankizumab on ACR50 (49.1% vs 38.4%, $p=0.0058$) — the strongest comparative evidence currently available in PsA. This 24-week readout tests durability of that effect.

Poll question

Given the head-to-head results from BE BOLD, would you change your first-line treatment choice in a patient with active PsA and predominant joint involvement?



TREATMENT HIGHLIGHTS



Dr. Daniel Barquero Orias, MD
Dermatologist
Hospital Rafael Ángel Calderón Guardia, Costa Rica
Contributor, GRAPPA Psoriasis Slide Library Spanish



[Daniel Barquero Orias](#)

DURABILITY OF ICOTROKINRA EFFECT IN PARTICIPANTS WITH MODERATE-TO-SEVERE PLAQUE PSORIASIS AND PSORIATIC ARTHRITIS: POOLED ANALYSIS OF ONE-YEAR OUTCOMES FROM THE PHASE 3 ICONIC-ADVANCE 1 AND ICONIC-ADVANCE 2 TRIALS

April W. Armstrong

P2900

Wednesday, 30 September • 07:00 – 07:00 CEST
Poster Area



Why important?

It is important because it addresses a key question in psoriasis treatment: not only whether icotrokinra works, but whether its efficacy is maintained over time, including in patients with PsA.

Why important?

Icotrokinra is an oral IL-23R-targeted peptide; 1-year pooled phase 3 data in patients with concurrent psoriasis and PsA is notable as a potential non-injectable alternative with durability approaching biologics.



Poll question

Do you think pooling the ICONIC-ADVANCE 1 and 2 trials provides stronger evidence for the durability of icotrokinra?

Poll question

If available, how much weight would you give to an oral therapy like icotrokinra versus an injectable biologic in a patient with concurrent psoriasis and PsA?



TREATMENT HIGHLIGHTS

CONCOMITANT THERAPY WITH IXEKIZUMAB PLUS TIRZEPATIDE IN OVERWEIGHT/OBESE ADULTS WITH PSORIATIC ARTHRITIS: SUPERIOR DISEASE CONTROL VERSUS IXEKIZUMAB ALONE — RESULTS FROM THE PHASE 3B TOGETHER-PSA TRIAL

Joseph F. Merola (Dallas, United States)

P1112

Wednesday, 30 September 07:00–07:00 CEST

Poster session ePoster Area



Why important?

The TOGETHER-PsA trial is important because it tests a different way of thinking about PsA: treating the inflammatory disease and its metabolic comorbidity simultaneously, rather than treating PsA in isolation.

Poll question

In a patient with active PsA and obesity, should weight management be considered an integral part of PsA disease control?

Why important?

Randomized phase 3b trial with an active comparator testing a novel combination strategy (biologic + GLP-1/GIP agonist) in the obese/overweight PsA phenotype, a subgroup historically associated with poorer treatment response.

Poll question

In a patient with active PsA and overweight/obesity, would you consider combining a biologic with a GLP-1/GIP agonist as a primary treatment strategy?



Why important?

This pivotal trial addresses the complex management of patients with obesity and psoriatic arthritis, showing that adding a dual GIP/GLP-1 receptor agonist to IL-17 inhibition provides superior clinical outcomes compared to biologic monotherapy.

Poll question

In your practice, do you actively initiate or refer patients for GLP-1/GIP agonists as an adjunctive treatment for psoriatic arthritis patients with concurrent obesity?



TREATMENT HIGHLIGHTS



Yusuf Can Edek, MD
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- BIMEKIZUMAB INHIBITED RADIOGRAPHIC PROGRESSION ACROSS BASELINE SUBGROUPS IN BIOLOGIC-NAÏVE PATIENTS WITH ACTIVE PSORIATIC ARTHRITIS: 3-YEAR RESULTS FROM A PHASE 3 STUDY AND ITS OPEN-LABEL EXTENSION**

Philipp Sewerin
P1816

Wednesday, 30 September • 07:00 – 07:00 CEST Biologics, immunotherapy, targeted therapy ePoster Area



Why important?

Long-term structural preservation is a primary goal in psoriatic arthritis; this study offers robust 3-year evidence that dual IL-17A/F inhibition consistently halts radiographic progression across different patient subgroups.

Poll question

How heavily does the ability to halt radiographic progression influence your choice of first-line biologic for active psoriatic arthritis?

12-MONTH EFFECT OF SEMAGLUTIDE ON PSORIATIC LESIONS IN OBESE PATIENTS SUFFERING FROM DIABETES MELLITUS TYPE 2- A OPEN LABELED INTERVENTIONAL FOLLOW-UP STUDY

Jelena Petkovic– Dabic
P2797

Wednesday, 30 September • 07:00 – 07:00 CEST Autoimmune disorders – Part II
ePoster Area



Why important?

As the intersection of metabolic syndrome and psoriasis becomes increasingly relevant, this study provides important real-world data on how GLP-1 agonists directly affect psoriatic lesions in patients with diabetes and obesity over a 12-month period.

Poll question

Have you observed a direct clinical improvement in PASI scores among your patients with obesity and psoriasis after they started semaglutide for metabolic indications?

TREATMENT HIGHLIGHTS

PRO-INFLAMMATORY CYTOKINE REDUCTION IN PSORIASIS PATIENTS TREATED WITH TILDRAKIZUMAB, BRODALUMAB AND METHOTREXATE: A PROSPECTIVE STUDY.

Antonio Martinez Lopez

P1156

Wednesday, 30 September • 07:00 – 07:00 CEST Psoriasis – Part I
ePoster Area



Why important?

This prospective study provides valuable comparative insights into the systemic anti-inflammatory effects of different therapeutic classes (IL-23, IL-17 receptor, and traditional systemic) beyond just skin clearance.



Poll question

Which mechanism of action do you find most effective in reducing systemic pro-inflammatory cytokines in your patients with psoriasis?

GRAPPA SYMPOSIUM AT EADV 2026 REGISTER NOW



**WEDNESDAY
SEPTEMBER 30**

10:15 – 11:45 AM CEST
THE AUSTRIA CENTER, VIENNA
HALL C (LEVEL 2)

grappanetwork.org



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DO NOT MISS

GRAPPA

VIRTUAL CONGRESS HIGHLIGHTS OF PSORIATIC DISEASE

EADV 2026

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ONLINE EVENT



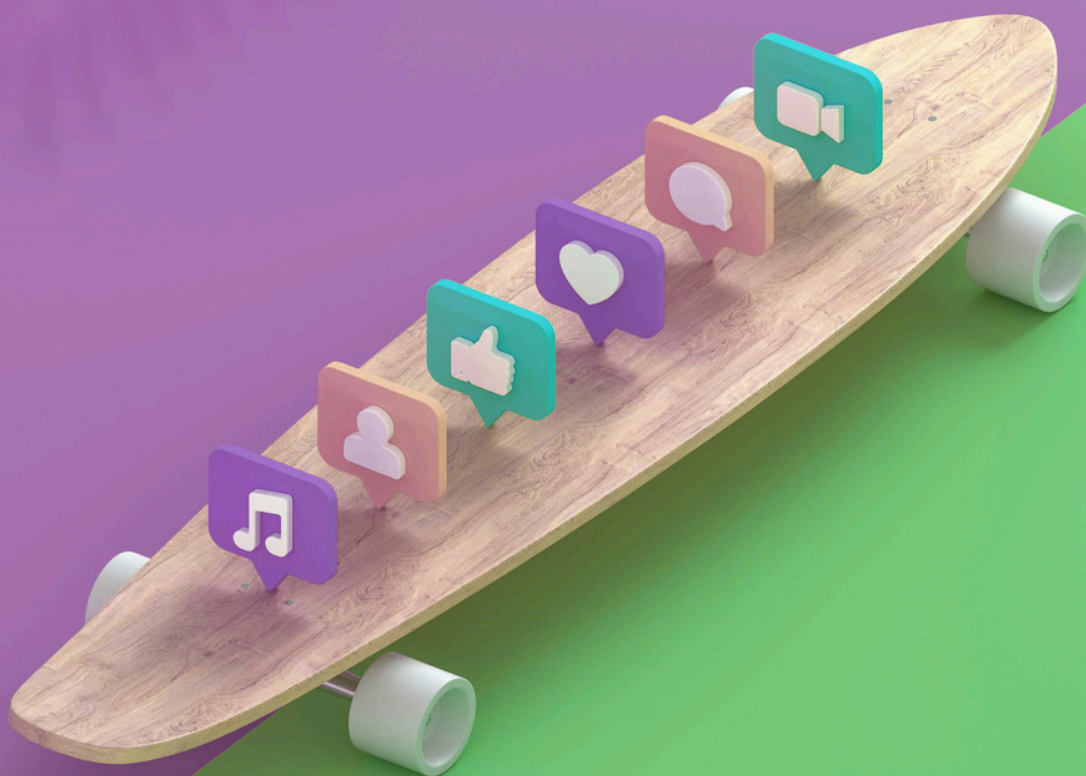
October 14



10:00-11:30 AM EST
4:00-5:30 PM CEST

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