Introduction

- Primary biliary cholangitis (PBC) is a chronic cholestatic liver disease with debilitating symptoms including pruritus and fatigue.
- Understanding of the real-world experience of pruritus in PBC is limited; this study characterizes the population with pruritus in the TARGET-PBC cohort and describes management of pruritus.

Methods

- TARGET-PBC is a longitudinal observational study of patients (n=667) enrolled at 38 US academic and community sites.
- Data are obtained from medical records and patients are requested to complete patient reported outcome (PRO) surveys.
- Responses to PBC-40 were used to grade pruritus: clinically significant (CS) itch was defined as ≥7 points on the itch domain and mild itch as ≥1 and <7.
- Patient characteristics, disease severity and treatment patterns were compared according to the presence and severity of itching.

Results

- 170 (81%) of the 211 patients who completed the PBC-40 reported itching; of those who reported any itch, 107 (63%) had mild itch and 63 (37%) clinically significant itch.
- The population in this analysis was 92% female, 35% cirrhotic.
- Patients with CS itch were younger (Figure 1), more frequently had cirrhosis (48 vs 27 and 36%, p = 0.03) and had higher alkaline phosphatase (177 vs. 143 and 153, p=0.002) compared to those with mild or no itch, respectively.

Figure 1: Patient Characteristics by PBC-40 Itch Severity

- Patients with CS itch were more likely to be receiving treatment for itch than those with mild itch (51% vs 28%), however 33% of patients with CS itch had never received any treatment for itch.
- Patients with CS itch were more likely to be taking multiple treatments for PBC than those with mild itch (32% vs 22%) and to be taking fenofibrate (16% vs 1%).
- Amongst those currently receiving treatment, the most common ongoing treatment for mild itch was antihistamines (73%, 22/30), primarily OTC antihistamines (18/22) and 23% (7/30) were taking bile acid binding resins; CS itch patients had a wider range of treatments with a similar proportion taking bile acid binding resins (25%, 8/32).

Figure 2. Current Pruritus Treatment % of All Patients

Conclusion

Pruritus in PBC is under-treated in clinical practice and many patients with significant itch never receive treatment.

References:


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Table 1: Differences in Co-Med Prescriptions CS vs. Mild Itch

- It appears that there may be an additional medication burden for those patients with more significant itch; there is more polypharmacy associated with CS itch as compared to no itch and mild itch.
- Although the indication for the prescriptions is not available it is possible that the increase in medication burden may be due to more advanced disease in this group (Figure 1).