Supplementary materials for

Comparative effectiveness and durability of biologics in clinical practice: Month 12 outcomes from the international, observational Psoriasis Study of Health Outcomes (PSoHO)

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Supplementary Tables:

Tables S1-S3: Confidence intervals corresponding to the unadjusted response rates for all patients presented in Figures 1-4 with non-responder imputation applied for missing data.

Tables S4-S6: Confidence intervals corresponding to the unadjusted response rates for patients who received the EMA-approved on label dosing with non-responder imputation applied for missing data.

Supplementary Figures:

Figures S1-S4: Sensitivity analyses of months 6 and 12 data for all patients applying multiple imputation for missing data.

Figures S5-S8: Months 6 and 12 data for patients who received the EMA-approved on label dosing. Non-responder imputation applied for missing data.

Supplementary Tables

Supplementary Table 1: Month 6 primary and key secondary unadjusted response rates and confidence intervals across treatments for all patients. Non-responder imputation applied for missing outcome data.

Month 6 outcomes	**Anti-IL-17A** (N=773)	**Other Biologics** (N=1208)	**IXE** (N=532)	**SEC** (N=241)	**BROD** (N=64)	**TILD** (N=95)	**GUS** (N=303)	**RIS** (N=259)	**ADA** (N=284)	**UST** (N=127)
PASI90 and/or sPGA 0 or 1	**73.4%** (70.1, 76.4)	**65.2%** (62.5, 67.9)	**74.6%** (70.7, 78.3)	**70.5%** (64.3, 76.2)	**60.9%** (47.9, 72.9)	**67.4%** (57.0, 76.6)	**66.0%** (60.4, 71.3)	**73.0%** (67.1, 78.3)	**59.2%** (53.2, 64.9)	**62.2%** (53.2, 70.7)
PASI100	**43.3%** (39.8, 46.9)	**31.5%** (28.9, 34.2)	**44.9%** (40.6, 49.3)	**39.8%** (33.6, 46.3)	**37.5%** (25.7, 50.5)	**24.2%** (16.0, 34.1)	**32.3 %** (27.1, 37.9)	**40.2%** (34.1, 46.4)	**27.1%** (22.0, 32.7)	**25.2%** (17.9, 33.7)
PASI90	**61.6%** (58.0, 65.0)	**50.2%** (47.3, 53.0)	**64.3%** (60.0, 68.4)	**55.6%** (49.1, 62.0)	**54.7%** (41.7, 67.2)	**51.6%** (41.1, 62.0)	**51.5%** (45.7, 57.2)	**60.2%** (54.0, 66.2)	**40.5%** (34.7, 46.5)	**44.1%** (35.3, 53.2)
DLQI score 0 or 1[a]	**38.3%** (34.4, 42.3)	**33.2%** (30.2, 36.3)	**38.6%** (33.9, 43.5)	**37.5%** (30.6, 44.8)	**40.0%** (27.0, 54.1)	**33.9%** (22.1, 47.4)	**29.9%** (24.1, 36.2)	**38.6%** (32.0, 45.6)	**30.2%** (24.3, 36.7)	**33.0%** (23.6, 43.4)

Data reported as unadjusted 95% CIs for percentage response rates. Missing outcome data are reported as non-responder imputation (NRI). Unadjusted CIs were calculated using the normal approximation. [a]DLQI outcome includes only patients with an available DLQI score of 2 or greater at baseline. Number of patients are provided in Figures 1 and 3. ADA, adalimumab; BROD, brodalumab; CI, confidence Interval; DLQI, Dermatology Life Quality Index; GUS, guselkumab; IL, interleukin; IXE, ixekizumab; NRI, non-responder imputation; PASI, Psoriasis Area and Severity Index; RIS, risankizumab; SEC, secukinumab; sPGA, Static Physician Global Assessment; TILD, tildrakizumab; UST, ustekinumab.

Supplementary Table 2: Month 12 primary and key secondary outcomes unadjusted response rates and confidence intervals across treatments for all patients. Non-responder imputation applied for missing outcome data.

Month 12 outcomes	**Anti-IL-17A** (N=773)	**Other Biologics** (N=1208)	**IXE** (N=532)	**SEC** (N=241)	**BROD** (N=64)	**TILD** (N=95)	**GUS** (N=303)	**RIS** (N=259)	**ADA** (N=284)	**UST** (N=127)
PASI90 and/or sPGA 0 or 1	**68.0%** (64.6, 71.3)	**65.1%** (62.3, 67.8)	**68.8%** (64.7, 72.7)	**66.4%** (60.0, 72.3)	**56.3%** (43.3, 68.6)	**68.4%** (58.1, 77.6)	**66.3%** (60.7, 71.6)	**72.6%** (66.7, 77.9)	**60.9%** (55.0, 66.6)	**53.5%** (44.5, 62.4)
PASI100	**40.5%** (37.0, 44.0)	**37.1%** (34.4, 39.9)	**41.5%** (37.3, 45.9)	**38.2%** (32.0, 44.6)	**35.9%** (24.3, 48.9)	**32.6%** (23.4, 43.0)	**37.0%** (31.5, 42.7)	**48.3%** (42.0, 54.5)	**32.0%** (26.7, 37.8)	**27.6%** (20.0, 36.2)
PASI90	**53.9%** (50.4, 57.5)	**51.7%** (48.9, 54.6)	**55.6%** (51.3, 59.9)	**50.2%** (43.7, 56.7)	**50.0%** (37.2, 62.8)	**51.6%** (41.1, 62.0)	**52.5%** (46.7, 58.2)	**61.4%** (55.2, 67.4)	**46.1%** (40.2, 52.1)	**41.7%** (33.0, 50.8)
DLQI score 0 or 1[a]	**31.9%** (28.2, 35.7)	**32.4%** (29.4, 35.5)	**33.8%** (29.3, 38.6)	**27.6%** (21.4, 34.5)	**30.9%** (19.1, 44.8)	**28.8%** (17.8, 42.1)	**29.9%** (24.1, 36.2)	**37.7%** (31.1, 44.7)	**30.7%** (24.7, 37.1)	**31.9%** (22.7, 42.3)

Data reported as unadjusted 95% CIs for percentage response rates. Missing outcome data are reported as non-responder imputation (NRI). Unadjusted CIs were calculated using the normal approximation. [a]DLQI outcome includes only patients with an available DLQI score of 2 or greater at baseline. Number of patients are provided in Figures 1 and 3. ADA, adalimumab; BROD, brodalumab; CI, confidence Interval; DLQI, Dermatology Life Quality Index; GUS, guselkumab; IL, interleukin; IXE, ixekizumab; NRI, non-responder imputation; PASI, Psoriasis Area and Severity Index; RIS, risankizumab; SEC, secukinumab; sPGA, Static Physician Global Assessment; TILD, tildrakizumab; UST, ustekinumab.

Supplementary Table 3: Durability of effectiveness unadjusted response rates and confidence intervals across treatments for all patients. Non-responder imputation applied for missing outcome data.

Durability of effectiveness outcomes	**Anti-IL-17A** (N=773)	**Other Biologics** (N=1208)	**IXE** (N=532)	**SEC** (N=241)	**BROD** (N=64)	**TILD** (N=95)	**GUS** (N=303)	**RIS** (N=259)	**ADA** (N=284)	**UST** (N=127)
Durability of effectiveness outcome PASI90 and/or sPGA 0 or 1 at week 12 and PASI75 and/or improvement of 2 or more in sPGA score at months 6 and 12	**53.6%** (50.0, 57.1)	**41.4%** (38.6, 44.2)	**55.8%** (51.5, 60.1)	**48.5%** (42.1, 55.0)	**40.6%** (28.5, 53.6)	**43.2%** (33.0, 53.7)	**41.9%** (36.3, 47.7)	**50.2%** (43.9, 56.4)	**35.6%** (30.0, 41.4)	**34.6%** (26.4, 43.6)
PASI100 durability outcome PASI100 at week 12, month 6 and month 12	**18.2%** (15.6, 21.1)	**11.5%** (9.8, 13.4)	**19.7%** (16.4, 23.4)	**14.9%** (10.7, 20.1)	**18.8%** (10.1, 30.5)	**4.2%** (1.2, 10.4)	**12.9%** (9.3, 17.2)	**17.8%** (13.3, 23.0)	**6.3%** (3.8, 9.8)	**8.7%** (4.4, 15.0)
PASI90 durability outcome PASI90 at week 12, month 6 and month 12	**35.3%** (31.9, 38.8)	**24.7%** (22.3, 27.2)	**37.2%** (33.1, 41.5)	**31.1%** (25.3, 37.4)	**34.4%** (22.9, 47.3)	**22.1%** (14.2, 31.8)	**28.1%** (23.1, 33.5)	**35.1%** (29.3, 41.3)	**14.1%** (10.3, 18.7)	**17.3%** (11.2, 25.0)

Data reported as unadjusted 95% CIs for percentage response rates. Missing outcome data are reported as non-responder imputation (NRI). Unadjusted CIs were calculated using the normal approximation. Proportions of patients are provided in Figures 2 and 4. ADA, adalimumab; BROD, brodalumab; CI, confidence Interval; DLQI, Dermatology

Life Quality Index; GUS, guselkumab; IL, interleukin; IXE, ixekizumab; NRI, non-responder imputation; PASI, Psoriasis Area and Severity Index; RIS, risankizumab; SEC, secukinumab; sPGA, Static Physician Global Assessment; TILD, tildrakizumab; UST, ustekinumab.

Supplementary Table 4: Month 6 unadjusted response rates and confidence intervals across treatments for patients who received EMA-approved on label dosing. Non-responder imputation applied for missing outcome data.

Month 6 outcomes	**Anti-IL-17A** (N=653)	**Other Biologics** (N=1025)	**IXE** (N=443)	**SEC** (N=210)	**BROD** (N=60)	**TILD** (N=82)	**GUS** (N=266)	**RIS** (N=226)	**ADA** (N=223)	**UST** (N=99)
PASI90 and/or sPGA 0 or 1	**75.3%** (71.9, 78.6)	**67.1%** (64.2, 70.0)	**77.2%** (73.0, 81.0)	**71.4%** (64.8, 77.4)	**61.7%** (48.2, 73.9)	**70.7%** (59.6, 80.3)	**66.5%** (60.5, 72.2)	**73.0%** (66.7, 78.7)	**61.4%** (54.7, 67.9)	**68.7%** (58.6, 77.6)
PASI100	**47.5%** (43.6, 51.4)	**33.0%** (30.1, 35.9)	**49.2%** (44.5, 54.0)	**43.8%** (37.0, 50.8)	**38.3%** (26.1, 51.8)	**25.6%** (16.6, 36.4)	**33.8%** (28.2, 39.9)	**40.3%** (33.8, 47.0)	**27.4%** (21.6, 33.7)	**29.3%** (20.6, 39.3)
PASI90	**63.9%** (60.0, 67.6)	**52.5%** (49.4, 55.6)	**66.4%** (61.8, 70.8)	**58.6%** (51.6, 65.3)	**55.0%** (41.6, 67.9)	**54.9%** (43.5, 65.9)	**53.4%** (47.2, 59.5)	**60.2%** (53.5, 66.6)	**42.2%** (35.6, 48.9)	**51.5%** (41.3, 61.7)
DLQI score 0 or 1[a]	**41.2%** (36.9, 45.6)	**34.0%** (30.7, 37.4)	**41.3%** (36.0, 46.6)	**41.0%** (33.4, 48.9)	**41.2%** (27.6, 55.8)	**36.5%** (23.6, 51.0)	**30.9%** (24.6, 37.7)	**37.3%** (30.3, 44.7)	**30.6%** (23.9, 37.8)	**36.0%** (25.2, 47.9)

Data reported as unadjusted 95% CIs for percentage response rates. Missing outcome data are reported as non-responder imputation (NRI). Unadjusted CIs were calculated using the normal approximation. [a]DLQI outcome includes only patients with an available DLQI score of 2 or greater at baseline. Number of patients are provided in supplementary figures S5 and S7. ADA, adalimumab; BROD, brodalumab; CI, confidence Interval; DLQI, Dermatology Life Quality Index; GUS, guselkumab; IL, interleukin; IXE, ixekizumab; NRI, non-responder imputation; PASI, Psoriasis Area and Severity Index; RIS, risankizumab; SEC, secukinumab; sPGA, Static Physician Global Assessment; TILD, tildrakizumab; UST, ustekinumab.

Supplementary Table 5: Month 12 primary and key secondary unadjusted response rates and confidence intervals across treatments for patients who received EMA-approved on label dosing. Non-responder imputation applied for missing outcome data.

Month 12 outcomes	**Anti-IL-17A** (N=653)	**Other Biologics** (N=1025)	**IXE** (N=443)	**SEC** (N=210)	**BROD** (N=60)	**TILD** (N=82)	**GUS** (N=266)	**RIS** (N=226)	**ADA** (N=223)	**UST** (N=99)
PASI90 and/or sPGA 0 or 1	**70.6%** (66.9, 74.1)	**66.3%** (63.4, 69.2)	**72.2%** (67.8, 76.4)	**67.1%** (60.3, 73.5)	**55.0%** (41.6, 67.9)	**68.3%** (57.1, 78.1)	**68.0%** (62.1, 73.6)	**73.0%** (66.7, 78.7)	**61.9%** (55.2, 68.3)	**58.6%** (48.2, 68.4)
PASI100	**44.6%** (40.7, 48.5)	**38.7%** (35.7, 41.8)	**46.3%** (41.6, 51.0)	**41.0%** (34.2, 47.9)	**36.7%** (24.6, 50.1)	**32.9%** (22.9, 44.2)	**39.8%** (33.9, 46.0)	**48.7%** (42.0, 55.4)	**32.3%** (26.2, 38.9)	**32.3%** (23.3, 42.5)
PASI90	**57.1%** (53.2, 61.0)	**53.1%** (50.0, 56.2)	**60.0%** (55.3, 64.6)	**51.0%** (44.0, 57.9)	**48.3%** (35.2, 61.6)	**52.4%** (41.1, 63.6)	**54.9%** (48.7, 61.0)	**61.9%** (55.3, 68.3)	**46.2%** (39.5, 53.0)	**46.5%** (36.4, 56.8)
DLQI score 0 or 1[a]	**33.4%** (29.3 37.7)	**33.1%** (29.8, 36.5)	**35.5%** (30.5, 40.8)	**28.9%** (22.2, 36.4)	**33.3%** (20.8, 47.9)	**28.8%** (17.1, 43.1)	**30.4%** (24.2, 37.2)	**36.2%** (29.3, 43.6)	**31.1%** (24.4, 38.4)	**38.7%** (27.6, 50.6)

Data reported as unadjusted 95% CIs for percentage response rates. Missing outcome data are reported as non-responder imputation (NRI). Unadjusted CIs were calculated using the normal approximation. [a]DLQI outcome includes only patients with an available DLQI score of 2 or greater at baseline. Number of patients are provided in supplementary figures S5 and S7. ADA, adalimumab; BROD, brodalumab; CI, confidence Interval; DLQI, Dermatology Life Quality Index; GUS, guselkumab; IL, interleukin; IXE, ixekizumab; NRI, non-responder imputation; PASI, Psoriasis Area and Severity Index; RIS, risankizumab; SEC, secukinumab; sPGA, Static Physician Global Assessment; TILD, tildrakizumab; UST, ustekinumab.

Supplementary Table 6: Durability of effectiveness unadjusted response rates and confidence intervals across treatments for patients who received EMA-approved on label dosing. Non-responder imputation applied for missing outcome data.

	Anti-IL-17A (N=653)	**Other Biologics** (N=1025)	**IXE** (N=443)	**SEC** (N=210)	**BROD** (N=60)	**TILD** (N=82)	**GUS** (N=266)	**RIS** (N=226)	**ADA** (N=223)	**UST** (N=99)
Durability of effectiveness outcome PASI90 and/or sPGA 0 or 1 at week 12 and PASI75 and/or improvement in sPGA score of 2 or more at months 6 and 12	**55.4%** (51.5, 59.3)	**42.9%** (39.9, 46.0)	**58.5%** (53.7, 63.1)	**49.0%** (42.1, 56.0)	**41.7%** (29.1, 55.1)	**45.1%** (34.1, 56.5)	**43.2%** (37.2, 49.4)	**50.0%** (43.3, 56.7)	**36.3%** (30.0, 43.0)	**40.4%** (30.7, 50.7)
PASI100 durability outcome PASI100 at week 12, month 6 and month 12	**20.2%** (17.2, 23.5)	**12.1%** (10.2, 14.3)	**21.9%** (18.1, 26.0)	**16.7%** (11.9, 22.4)	**18.3%** (9.5, 30.4)	**4.9%** (1.3, 12.0)	**13.9%** (10.0, 18.7)	**17.3%** (12.6, 22.8)	**6.7%** (3.8, 10.9)	**9.1%** (4.2, 16.6)
PASI90 durability outcome PASI90 at week 12, month 6 and month 12	**37.8%** (34.1, 41.7)	**26.0%** (23.4, 28.9)	**40.4%** (35.8, 45.1)	**32.4%** (26.1, 39.2)	**35.0%** (23.1, 48.4)	**22.0%** (13.6, 32.5)	**29.7%** (24.3, 35.6)	**35.4%** (29.2, 42.0)	**14.8%** (10.4, 20.1)	**19.2%** (12.0, 28.3)

Data reported as unadjusted 95% CIs for percentage response rates. Missing outcome data are reported as non-responder imputation (NRI). Unadjusted CIs were calculated using the normal approximation. Number of patients are provided in Supplementary Figures S6 and S8. ADA, adalimumab; BROD, brodalumab; CI, confidence Interval; DLQI,

Dermatology Life Quality Index; GUS, guselkumab; IL, interleukin; IXE, ixekizumab; NRI, non-responder imputation; PASI, Psoriasis Area and Severity Index; RIS, risankizumab; SEC, secukinumab; sPGA, Static Physician Global Assessment; TILD, tildrakizumab; UST, ustekinumab.

Supplementary Figures

Sensitivity analyses using multiple imputation for missing outcome data

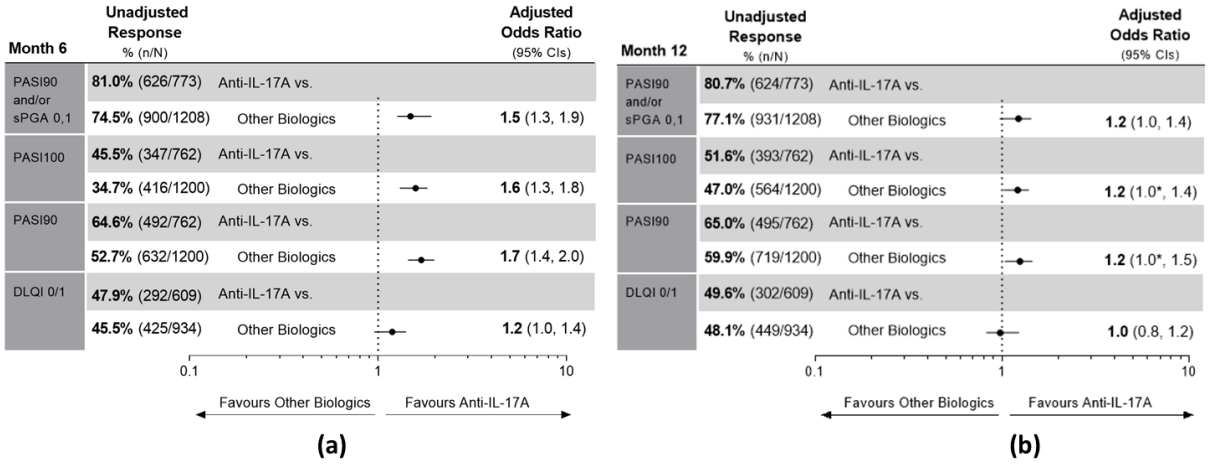

Figure S1: Unadjusted response rates and comparative adjusted odds ratio for primary and secondary outcomes for the anti-IL-17A and other biologics cohorts at (a) month 6 and (b) month 12. For unadjusted response rates and adjusted odds ratios, patients with missing data were handled using multiple imputation. PASI outcomes includes only patients without a baseline PASI score of zero. DLQI outcome includes only patients with an available DLQI score of 2 or greater at baseline. Results are statistically significant if 95% CIs of the odds ratios do not cross 1. For instances that lower CI shows 1.0, *denotes that the result is significant as lower CI is greater than 1. In (a) for DLQI outcome at month 6, the lower CI is 0.954. In (b) for primary outcome at month 12, the lower CI is 0.973. For PASI100 outcome at month 12, the lower CI is 1.024. For PASI90 outcome at month 12, the lower CI is 1.038. CI, confidence interval; DLQI, Dermatology Life Quality Index; IL, interleukin; n, number of patients who achieved the outcome; N, total number of patients in treatment cohort; PASI, Psoriasis Area and Severity Index; sPGA, Static Physician Global Assessment.

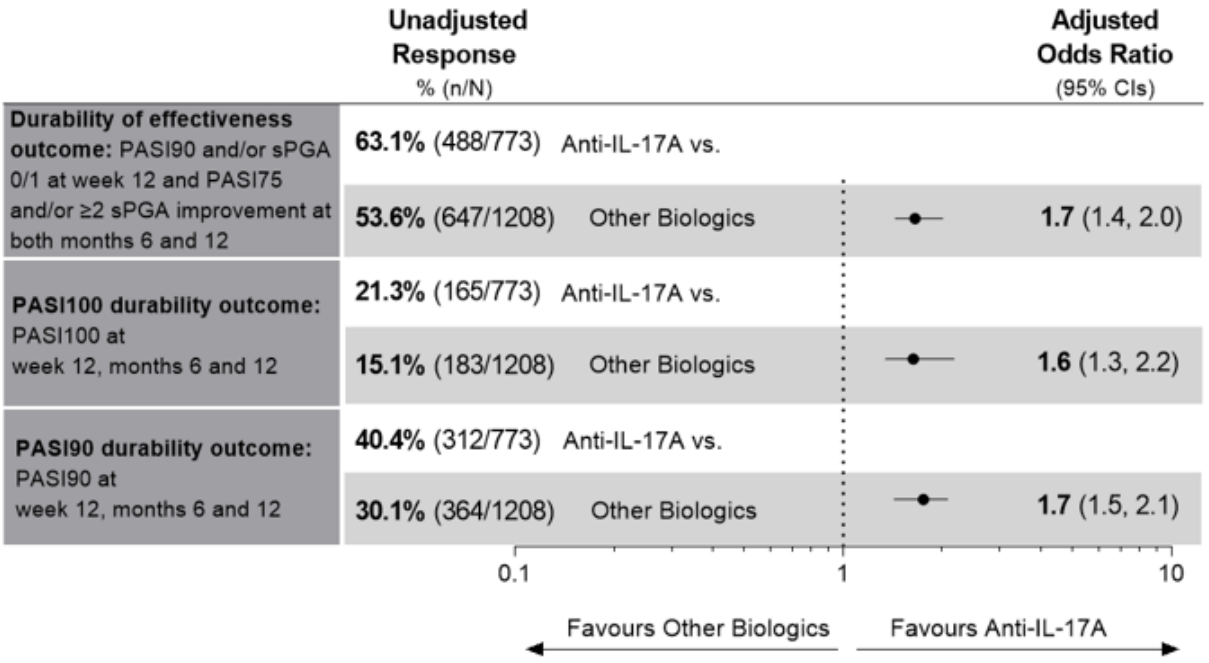

Figure S2: Unadjusted response rates and comparative adjusted odds ratio for durability of effectiveness outcomes for the anti-IL-17A and other biologics cohorts. Outcomes include (i)

Durability of effectiveness outcome, whereby patients achieve at least PASI90 and/or sPGA score of 0 or 1 at week 12 and subsequently achieve either or both of the following outcomes at months 6 and 12: at least PASI75 or an improvement in sPGA of 2 or more points from baseline, ii) PASI100 durability outcome, whereby patients achieve a PASI100 score at week 12 and subsequently at both months 6 and 12, iii) PASI90 durability outcome, whereby patients achieve a PASI90 score at week 12 and subsequently at both months 6 and 12. For unadjusted response rates and adjusted odds ratios, patients with missing data were handled using multiple imputation. Results are statistically significant if 95% CIs of the odds ratios do not cross 1. CI, confidence interval; DLQI, Dermatology Life Quality Index; IL, interleukin; n, number of patients who achieved the outcome; N, total number of patients in treatment cohort; PASI, Psoriasis Area and Severity Index; sPGA, Static Physician Global Assessment.

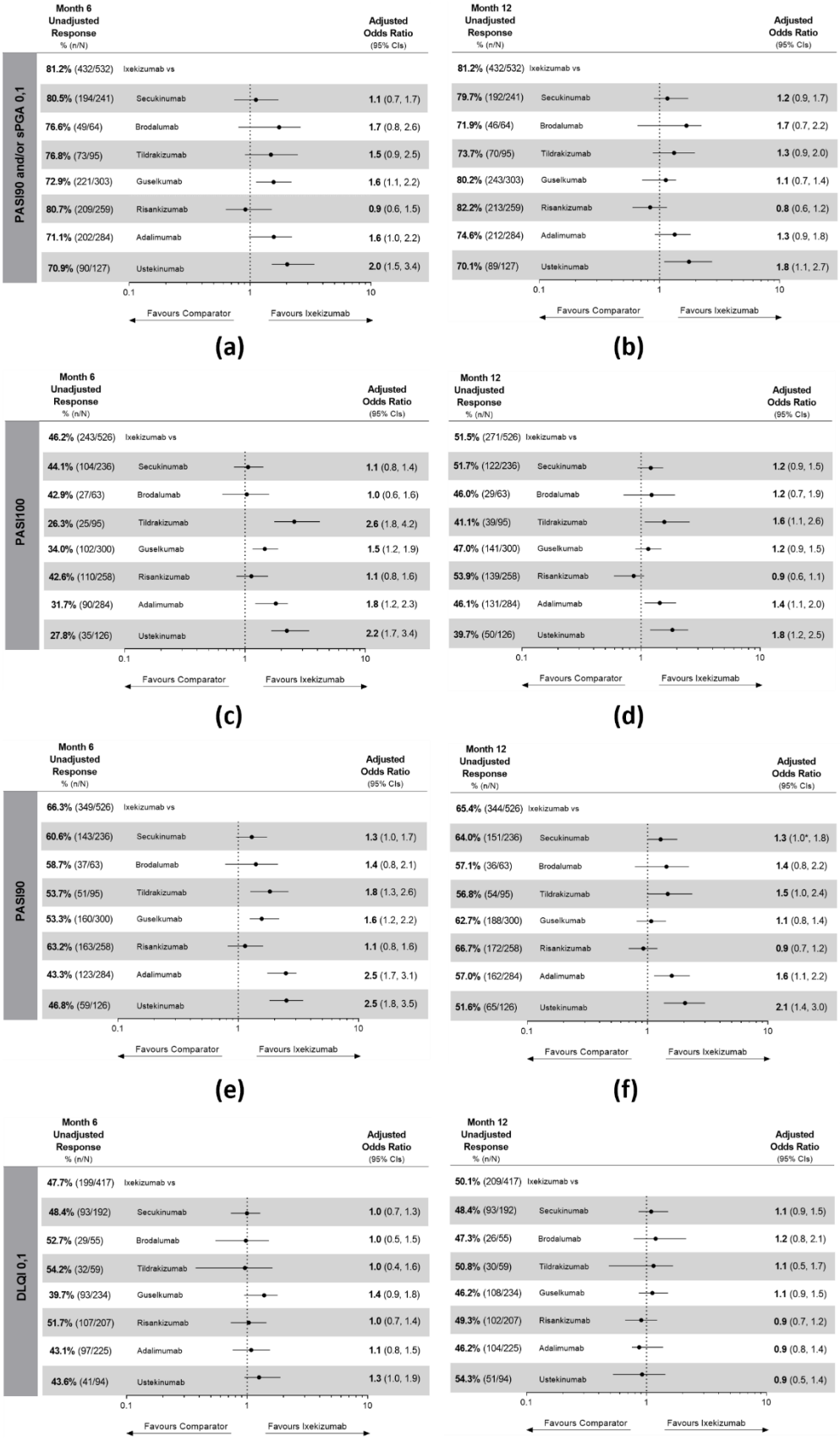

Figure S3: Unadjusted response rates and comparative adjusted odds ratios for primary and secondary outcomes for ixekizumab versus other individual biologics. First row: primary outcome of PASI90 or sPGA score of 0 or 1 or both at (a) month 6 and (b) month 12. Second row: PASI100 at

(c) month 6 and (d) month 12. Third row: PASI90 at (e) month 6 and (f) month 12. Fourth row: DLQI 0 or 1 at (g) month 6 and (h) month 12. For unadjusted response rates and adjusted odds ratios, patients with missing data were handled using multiple imputation. PASI outcomes includes only patients without a baseline PASI score of zero. DLQI outcome includes only patients with an available DLQI score of 2 or greater at baseline. Results are statistically significant if 95% CIs of the odds ratios do not cross 1. For instances that CI shows 1.0, *denotes that the result is significant as lower CI is greater than 1. In (a), lower CI of IXE vs. ADA OR is 0.978. In (e), lower CI of IXE vs. SEC OR is 0.960. In (f), lower CI of IXE vs. SEC OR is 1.012 and IXE vs. TILD OR is 0.991. In (g), lower CI of IXE vs. UST OR is 0.951. ADA, adalimumab; BROD, brodalumab; CI, confidence Interval; DLQI, Dermatology Life Quality Index; GUS, guselkumab; IL, interleukin; IXE, ixekizumab; n, number of patients who achieved the outcome; N, total number of patients in treatment group; NRI, non-responder imputation; PASI, Psoriasis Area and Severity Index; RIS, risankizumab; SEC, secukinumab; sPGA, Static Physician Global Assessment; TILD, tildrakizumab; UST, ustekinumab.

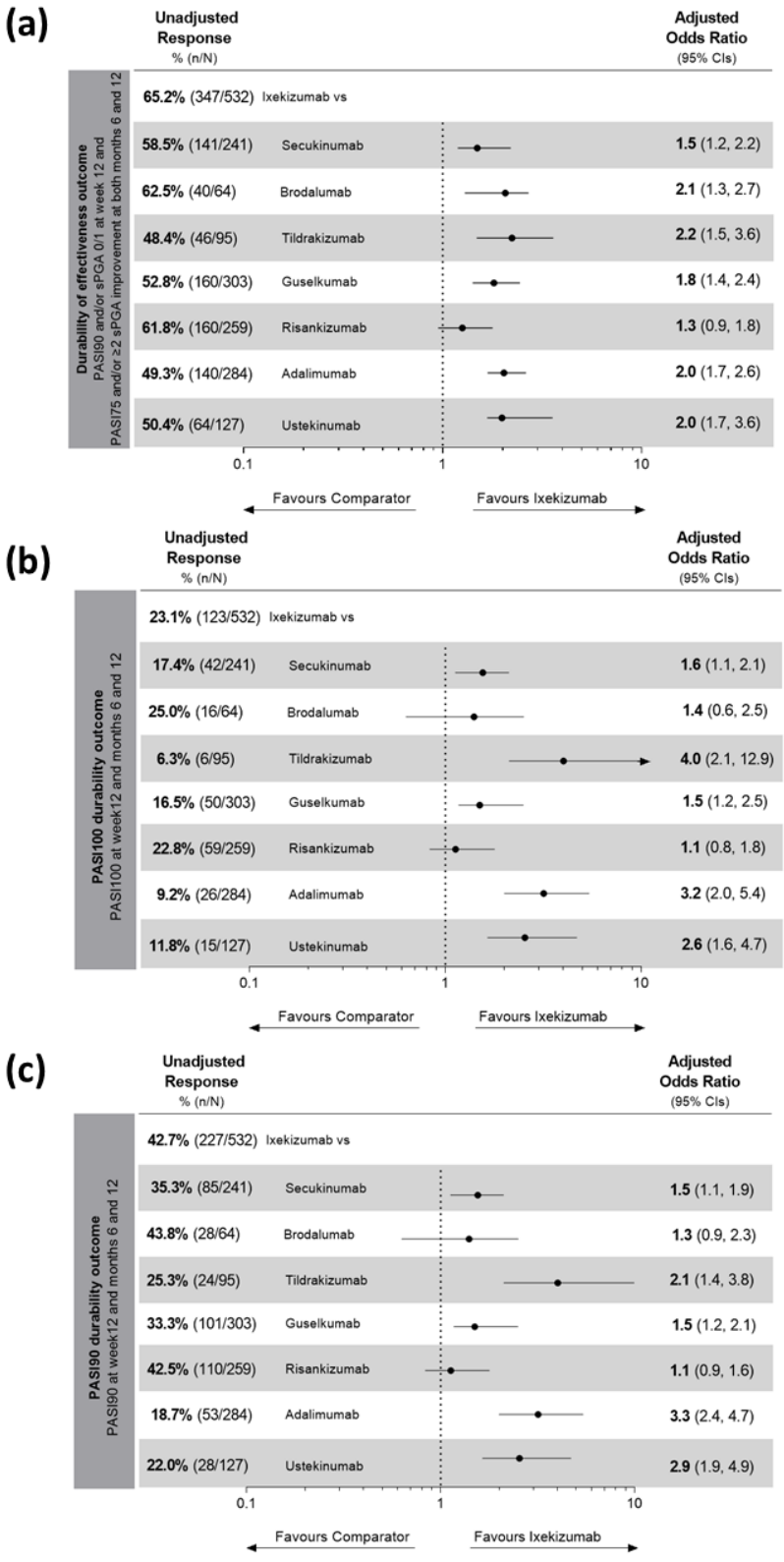

Figure S4: Unadjusted response rates and comparative adjusted odds ratios for durability of effectiveness outcomes for ixekizumab versus other individual biologics. Outcomes include (a) Durability of effectiveness outcome, whereby patients achieve at least PASI90 and/or sPGA score of 0 or 1 at week 12 and subsequently achieve either or both of the following outcomes at months 6 and 12: at least PASI75 or achieving an improvement in sPGA of 2 or more points from baseline, (b) PASI100 durabilty outcome, whereby patients achieve a PASI100 score at week 12 and subsequently at both months 6 and 12, (c) PASI90 durabilty outcome, whereby patients achieve a PASI90 score at week 12

and subsequently at both months 6 and 12. For unadjusted response rates and adjusted odds ratios, patients with missing data were handled using multiple imputation. Results are statistically significant if 95% CIs of the odds ratios do not cross 1. For instances that lower CI shows 1.0, *denotes that the result is significant as lower CI is greater than 1. ADA, adalimumab; BROD, brodalumab; CI, confidence Interval; DLQI, Dermatology Life Quality Index; GUS, guselkumab; IL, interleukin; IXE, ixekizumab; n, number of patients who achieved the outcome; N, total number of patients in treatment group; NRI, non-responder imputation; PASI, Psoriasis Area and Severity Index; RIS, risankizumab; SEC, secukinumab; sPGA, Static Physician Global Assessment; TILD, tildrakizumab; UST, ustekinumab.

Data for patients who received the EMA-approved on-label dosing

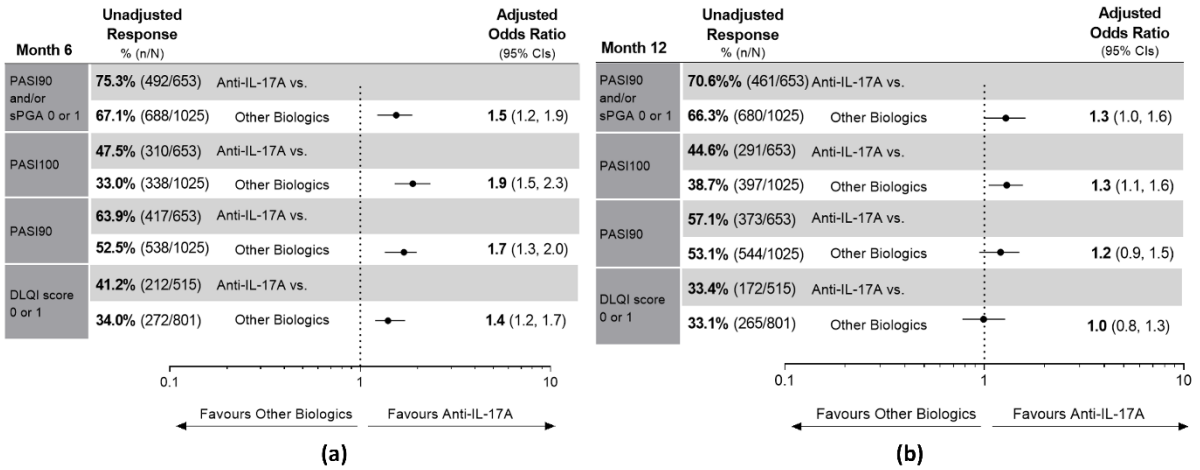

Figure S5: Unadjusted response rates and comparative adjusted odds ratio for primary and secondary outcomes for patients who received the EMA-approved on label dosing in the anti-IL-17A and other biologics cohorts at (a) month 6 and (b) month 12. DLQI outcome only included patients with an available DLQI score of 2 or greater at baseline. For unadjusted and adjusted response rates, patients with missing outcomes were imputed as non-responder imputation (NRI). Results are statistically significant if 95% CIs of the odds ratios do not cross 1. For instances that lower CI shows 1.0, *denotes that the result is significant as lower CI is greater than 1. In (b), the lower CI for the PASI90 and/or sPGA 0,1 outcome is 0.997. CI, confidence interval; DLQI, Dermatology Life Quality Index; IL, interleukin; n, number of patients who achieved the outcome; N, total number of patients in treatment cohort; PASI, Psoriasis Area and Severity Index; sPGA, Static Physician Global Assessment.

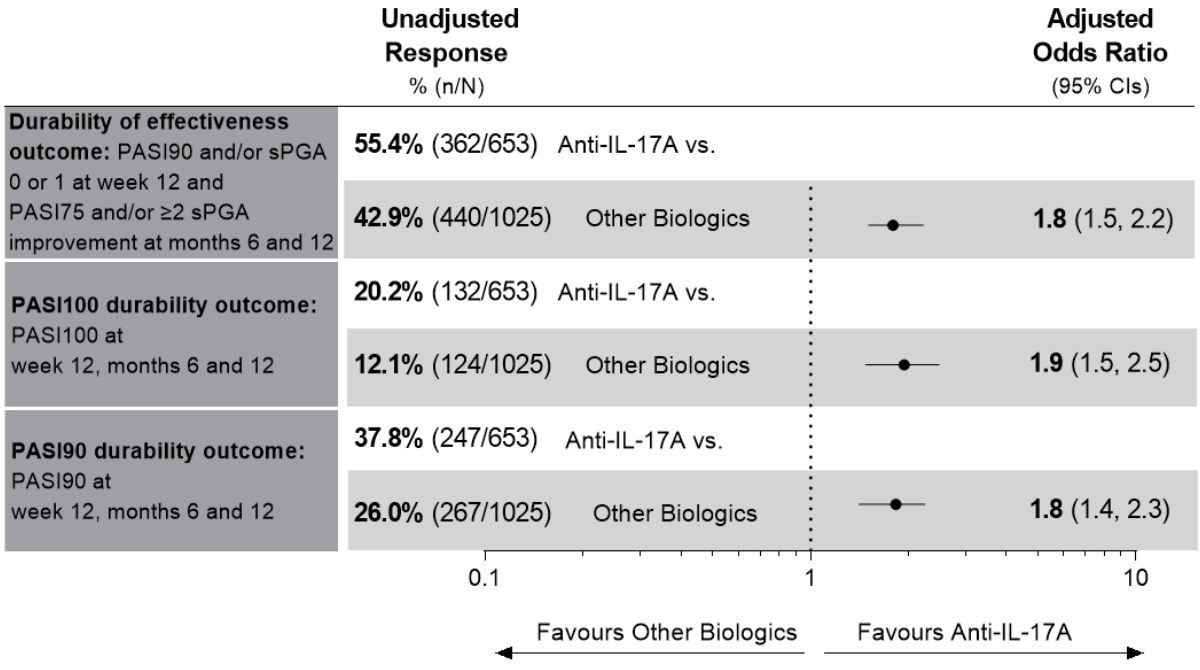

Figure S6: Unadjusted response rates and comparative adjusted odds ratio for durability of effectiveness outcomes for patients who received the EMA-approved on label dosing in the anti-IL-17A and other biologics cohorts. Outcomes include (i) Durability of effectiveness outcome, whereby patients achieve at least PASI90 and/or sPGA score of 0 or 1 at week 12 and subsequently achieve either or both of the following outcomes at months 6 and 12: at least PASI75 or an improvement

in sPGA of 2 or more points from baseline, ii) PASI100 durability outcome, whereby patients achieve a PASI100 score at week 12 and subsequently at both months 6 and 12, iii) PASI90 durability outcome, whereby patients achieve a PASI90 score at week 12 and subsequently at both months 6 and 12. For unadjusted and adjusted response rates, patients with missing outcomes were imputed as non-responder imputation (NRI). Results are statistically significant if 95% CIs of the odds ratios do not cross 1. For instances that lower CI shows 1.0, *denotes that the result is significant as lower CI is greater than 1. CI, confidence interval; DLQI, Dermatology Life Quality Index; IL, interleukin; n, number of patients who achieved the outcome; N, total number of patients in treatment cohort; PASI, Psoriasis Area and Severity Index; sPGA, Static Physician Global Assessment.

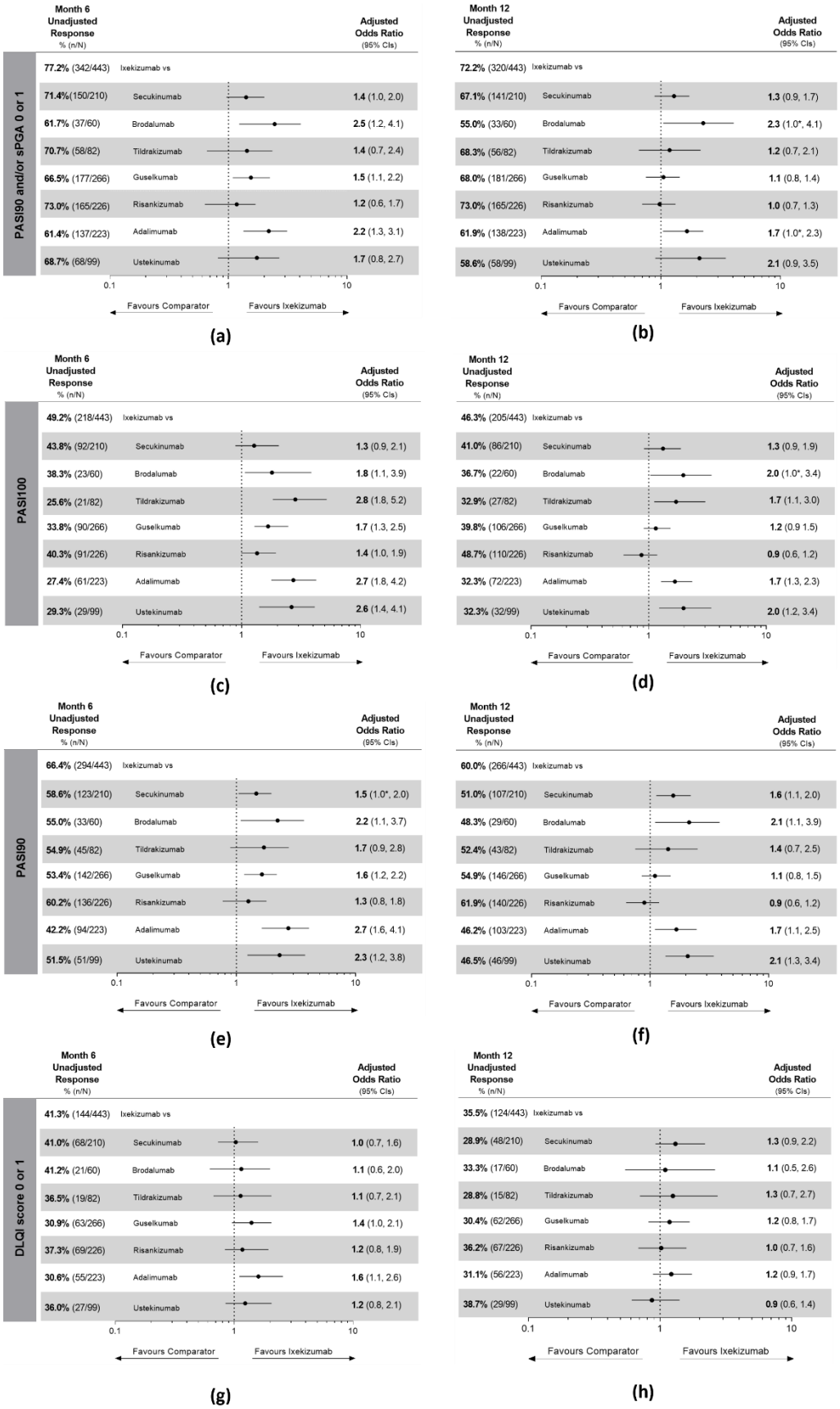

Figure S7: Unadjusted response rates and comparative adjusted odds ratios for primary and secondary outcomes for patients who received the EMA-approved on label dosing and treated

with ixekizumab versus other individual biologics. First row: primary outcome of PASI90 or sPGA 0 or 1 or both at (a) month 6 and (b) month 12. Second row: PASI100 at (c) month 6 and (d) month 12. Third row: PASI90 at (e) month 6 and (f) month 12. Fourth row: DLQI score of 0 or 1 at (g) month 6 and (h) month 12. DLQI outcome only included patients with an available DLQI score of 2 or greater at baseline. For unadjusted and adjusted response rates, patients with missing outcomes were imputed as non-responder imputation (NRI). Results are statistically significant if 95% CIs of the odds ratios do not cross 1. For instances that lower CI shows 1.0, *denotes that the result is significant as lower CI is greater than 1. For PASI90 and/or sPGA 0,1 at month 6 odds ratio, the lower CI for IXE vs. SEC is 0.961. For PASI90 and/or sPGA 0,1 at month 12 odds ratio, the lower CI for IXE vs. BROD is 1.046 and IXE vs. ADA is 1.044. For the PASI100 at month 6 odds ratio, the lower CI for IXE vs. RIS is 0.997. For the PASI100 month 12 odds ratio, the lower CI for IXE vs. BROD is 1.034. For the PASI90 at month 6 odds ratio, the lower CI for IXE vs. SEC is 1.043. For the DLQI outcome at month 6 odds ratio, the lower CI for IXE vs. GUS is 0.96. ADA, adalimumab; BROD, brodalumab; CI, confidence Interval; DLQI, Dermatology Life Quality Index; GUS, guselkumab; IL, interleukin; IXE, ixekizumab; n, number of patients who achieved the outcome; N, total number of patients in treatment group; NRI, non-responder imputation; PASI, Psoriasis Area and Severity Index; RIS, risankizumab; SEC, secukinumab; sPGA, Static Physician Global Assessment; TILD, tildrakizumab; UST, ustekinumab.

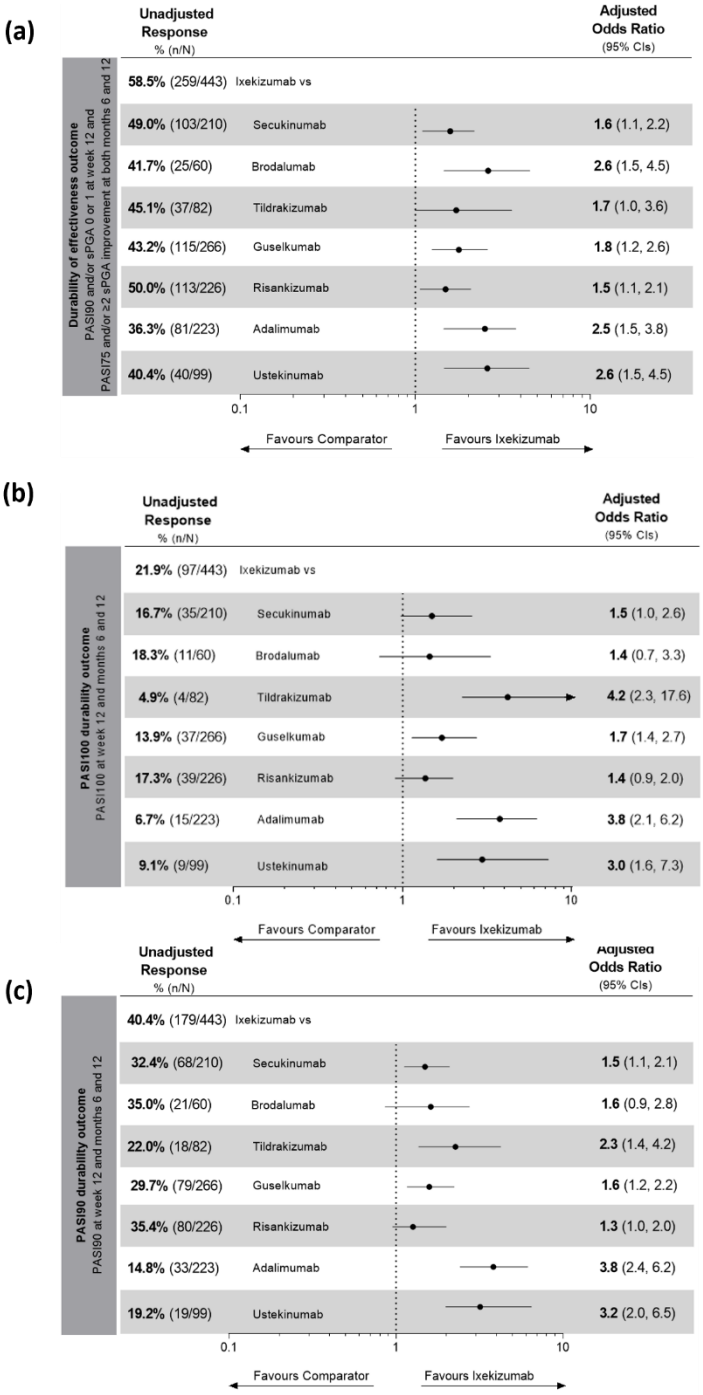

Figure S8: Unadjusted response rates and comparative adjusted odds ratios for durability of effectiveness outcomes for patients who received the EMA-approved on label dosing and treated with ixekizumab versus other individual biologics. Outcomes include (a) Durability of effectiveness outcome, whereby patients achieve at least PASI90 and/or sPGA score of 0 or 1 at week 12 and subsequently achieve either or both of the following outcomes at months 6 and 12: at least PASI75 or achieving an improvement in sPGA of 2 or more points from baseline, (b) PASI100 durabilty outcome, whereby patients achieve a PASI100 score at week 12 and subsequently at both months 6 and 12, (c) PASI90 durabilty outcome, whereby patients achieve a PASI90 score at week 12 and subsequently at both months 6 and 12. For unadjusted and adjusted response rates, patients with missing outcomes were imputed as non-responder imputation (NRI). Results are statistically significant if 95% CIs of the odds ratios do not cross 1. For instances that lower CI shows 1.0, *denotes that the result is significant as lower CI is greater than 1. In (a), the lower CI for IXE vs. TILD OR is 0.997. In (b), the lower CI for IXE vs. SEC OR is 0.979. In (c), the lower CI for IXE vs. RIS OR is 0.955. ADA, adalimumab; BROD,

brodalumab; CI, confidence Interval; DLQI, Dermatology Life Quality Index; GUS, guselkumab; IL, interleukin; IXE, ixekizumab; n, number of patients who achieved the outcome; N, total number of patients in treatment group; NRI, non-responder imputation; PASI, Psoriasis Area and Severity Index; RIS, risankizumab; SEC, secukinumab; sPGA, Static Physician Global Assessment; TILD, tildrakizumab; UST, ustekinumab.