Patients on treatment with secukinumab 2x150mg/month who changed presentation to 300mg/month during November-December 2021 were included. Patients who hadn’t taken both presentations for at least 4 months and patients impossible to locate were excluded. Those who gave their verbal consent underwent a telephone survey.

Qualitative variables were expressed as frequency and percentage and quantitative ones as mean and standard deviation. Statistical analysis was performed with Excel (v.12.0).

### RESULTS

**24 (72.2%) PATIENTS INCLUDED**

- Nine (42.9%) women; age: 49 (13.9) years old
- Treatment duration: 38.7 (22.6) months
- Patients who self-administered medication: 23 (95.8%)
- Two (8.3%) had to discontinue the 300mg presentation due to severe pain during administration

<table>
<thead>
<tr>
<th>150 MG PRESENTATION</th>
<th>300 MG PRESENTATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>VAS 1.8 (1.2)</td>
<td>VAS 2.2 (1.9)</td>
</tr>
<tr>
<td>2 (8.3%) patients reported having bruises at the injection site</td>
<td>3 (12.5%) reported having suffered swelling that reverted spontaneously</td>
</tr>
</tbody>
</table>

Regarding change satisfaction: 21 (87.5%) referred to the change as satisfactory, 2 (8.3%) as not satisfactory and 1 (4.1%) as indifferent, with the average satisfaction being 8.0 (2.2).

### CONCLUSIONS

- Changing from 150mg to 300mg secukinumab pen presentation was considered satisfactory for 87.5% of patients.
- Two patients suffered greater pain during administration, leading to a return to the previous presentation.
- It would be advisable to carry out additional follow-up in order to detect possible reactions at the administration site or greater pain after the change of presentation.