**Duke**Health



#### Introduction

- Pemphigus poses challenges in healthcare delivery.
- Previous cross-sectional studies of hospitalized pemphigus patients in the United States have demonstrated that Latino ethnicity, lower socioeconomic status, and high comorbidity burden are significantly associated with hospital admission (1).
- Differences in clinical outcomes and therapeutic management amongst pemphigus patients remain largely unexplored.

#### Purpose

The purpose of this study is to compare demographics, insurance status, disease severity, and hospitalization rates in Latino versus Caucasian, non-Hispanic/Latino pemphigus patients seen at Duke University Hospitals 2012-2021.

## Methods

•Demographic and clinical data were collected retrospectively from electronic medical records of pemphigus patients seen at Duke Dermatology between 2012 and 2021.

•Insurance status was determined based on documented coverage, including Medicaid, Medicare, private insurance, or uninsured status. •Disease severity was assessed using physician-graded criteria, categorizing patients as having severe disease based on predefined clinical indicators.

•Hospitalization rates were determined by reviewing records of emergency department visits and admissions related to pemphigus disease flares.

•Odds ratios were calculated using Caucasian, non-Hispanic/Latino patients as the reference group for comparison.

### References

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#### Comparing clinical outcomes in pemphigus patients, a retrospective analysis of Latino versus Caucasian patients seen at Duke University Hospital

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	Tables					
Table 1. Demo	graphic data for Latin	no vs Caucasian patients	Table 2. Clinical outcomes in Latino vs Caucasian patients			
Variable	Latino Patients (Number (%)) N=10	*Caucasian Patients (Number (%)) N=54	Variable	Latino Patients (Number (%)) N=10	*Caucasian Patients (Number (%))	
Age			<b>Charlson Comorbidity</b>		N=54	
18-40			Index <sup>5</sup>			
10-40	4 (40.0)	3 (5.6)	0	6 (60.0)	41 (75.9)	
41+	6 (60.0)	51 (44.4)	1-2	1 (10.0)	5 (9.3)	
Sex			3+	3 (30.0)	8 (14.8)	
Male	7 (70.0)	28 (51.9)	Physician-gradedAssessment $\Psi$			
Female	3 (30.0)	26 (48.1)	Clear to Almost Clear	1 (10.0)	12 (27.9)	
Pemphigus Type			Mild to Moderate	4 (40.0)	20 (46.5)	
Pemphigus Vulgaris	7 (70.0)	37 (68.2)	Moderate to Severe	1 (10.0)	6 (14.0)	
Pemphigus Foliaceus	3 (30.0)	10 (18.5)	Severe Medications	4 (40.0)	5 (11.6)	
Pemphigus Paraneoplastic	0 (0)	2 (3.8)	Topical Steroids Only	0 (0)	11 (20.4)	
IgA Pemphigus	1 (2.9)	1 (1.9)	Oral Prednisone < 10mg Daily or NSAIDs**	1 (10.0)	8 (14.8)	
Pemphigus Vegetates	0 (0)	1 (1.9)	Or NSAIDS $\sim$ Oral Prednisone $\geq$ 10mg Daily,	8 (80.0)	27 (50.0)	
Pemphigus Herpetiformis	0 (0)	1 (1.9)	Conventional Steroid-Sparing Agents ***			
Pemphigus Unspecified	1 (2.9)	2 (3.8)	Rituximab, Other Biologics	1 (10.0)	8 (14.8)	
Drug-Induced	1 (2.9)	0 (0)	<b>ED Visit</b>			
Pemphigus			Yes No	6 (17.1) 29 (82.9)	0 (0) 54 (100)	
Insurance			Hospital Admission		54 (100)	
Medicaid	0 (0)	0 (0)	Yes	4 (40.0)	1 (1.9)	
Medicare	5 (50.0)	25 (46.3)	No	6 (60.0)	53 (98.1)	
Private	2 (20.0)	25 (46.3)		All data from initial clinical visit with Duke Dermatology. Medications refer to any medications prescribed to patients during initial clinic visit. *Caucasian specifically refers to Caucasian, non-		
Underinsured*	3 (30.0)	4 (7.4)	Hispanic/Latino patients. **Oral non-ste dapsone. ***Conventional steroid-sparin	eroidal anti-inflammatories includes	s doxycycline, and	
*Caucasian specifically refers to Caucasian, non-Hispanic/Latino			methotrexate, cyclosporine, and cyclophosphamide. $^{\Psi}$ Physician-graded assessment (PGA) percentages are based on total number of patients who had a documented PGA (n=43 for Caucasian			

Caucasian specifically refers to Caucasian, non-inspanie/Latino patients

#### Tablas

percentages are based on total number of patients who had a documented PGA (n=43 for Caucasian patients)



## Results

•A total of 10 Latino patients and 54 Caucasian, non-Hispanic/Latino patients were diagnosed with pemphigus as their primary condition.

• 80% of Latino patients had Medicaid, Medicare, or no insurance, compared to 53.7% of Caucasian, non-Hispanic/Latino patients.

•40% of Latino patients versus 11.6% of Caucasian, non-Hispanic/Latino patients were graded as having severe disease •30% of Latino patients had a CCI of 3 or greater compared to only 14.8% of Caucasian, non-Hispanic/Latino patients, indicating a ten-year mortality relative risk of 4.2 compared to those with a CCI of zero<sup>2</sup>.

•40% of Latino patients visited the emergency department (ED) for pemphigus flares, compared to 0% for Caucasian, non-Hispanic/Latino patients. OR = 75.5.

•40% of Latino patients were admitted to the hospital for pemphigus flares, compared to 1.9% for Caucasian, non-Hispanic/Latino patients. OR = 35.3.

### Discussion

• A higher proportion of Latino patients in our study were underinsured compared to Caucasian, non-Hispanic/Latino patients.

•Physician-graded disease severity and comorbidity burden as indicated by the Charlson Comorbidity Index (CCI) are both higher for Latino patients as compared to Caucasian, non-Hispanic/Latino patients.

•Disease severity and comorbidity burden are associated with higher rates of hospitalization for pemphigus patients in the U.S.

•Latino patients exhibit elevated rates of emergency department visits and hospitalizations for disease flares.

•Odds ratios emphasize the heightened risk of ED visits and hospitalizations for Latino pemphigus patients.

•The small sample size of Latino patients is a **limitation** that may introduce bias, limiting the generalizability of the findings.

•Future research should explore targeted interventions to improve disease outcomes and mitigate healthcare disparities among pemphigus patients, particularly those from high-risk ethnic and racial backgrounds.

# Disclosures

• Anne Marano, M.D. Biogen

# Consultant for Immunovant, Inc.

# Principal Investigator of clinical trials for Bristol Myers Squibb and No other authors have any disclosures