日薬連発第 054 号
2025 年 1 月 23 日

加盟団体 殿

日本製薬団体連合会

掌蹠膿疱症の治療薬の有効性評価の考え方について（Early consideration）

標記について，令和 7 年 1 月 23 日付け事務連絡にて（独）医薬品医療機器総合機構 新薬審査第四部より通知がありました.

つきましては，本件につき貴会会員に周知徹底いただきたく，ご配慮の程よろしくお願い申しあげます.

事　　務　　連　　絡
令　和　7 年　1 月　2 3 日

（別記）　御中

独立行政法人医薬品医療機器総合機構
新薬審査第四部

掌蹠膿疱症の治療薬の有効性評価の考え方について
（Early consideration）

日頃より、独立行政法人医薬品医療機器総合機構が行う審査等業務に対し、ご理解とご協力を賜り厚く御礼申し上げます。

令和6年3月に開催された、一般社団法人日本臨床試験学会の学術集会総会において、掌蹠膿疱症の治療薬の有効性評価について、審査側の現在の見解を紹介し、関係者と意見交換を行いました。「薬理と治療」誌で取りまとめられたこれらの概要（*Jpn Pharmacol Ther*. 2024; 52(s1): s22-25.）をEarly considerationとして当機構のウェブサイトに掲載しましたのでお知らせします。

URL:　https://www.pmda.go.jp/rs-std-jp/standards-development/guidance-guideline/0003.html

なお、Early considerationとは、科学的知見や情報等が必ずしも十分に集積されていない段階ではあるものの、新たな技術等のイノベーションの実用化と革新的な医薬品等の開発を促進するための参考情報として、その時点における考え方を示したものです。今後、新たに得られる知見や科学の進歩等により、変わり得るものであることにご留意ください。

（別記）

日本製薬団体連合会

日本製薬工業協会

米国研究製薬工業協会在日執行委員会

一般社団法人欧州製薬団体連合会

Provisional Translation (as of January 2025) *

Administrative Notice
January 23, 2025

(To industry groups)

Office of New Drug IV,
Pharmaceuticals and Medical Devices Agency

EARLY CONSIDERATION: Points to Consider for Clinical Efficacy Evaluation of Drugs for Palmoplantar Pustulosis

The Pharmaceuticals and Medical Devices Agency (PMDA) had explained the reviewer's current thinking about clinical efficacy assessment of drugs for treatment of palmoplantar pustulosis (PPP) and exchanged views with relevant parties including academia and industry at the annual meeting of the Japan Society of Clinical Trials and Research (JSCTR) in March 2024. The summary of the discussion was published in an article in *The Japanese Pharmacology & Therapeutics* (*). We are pleased to inform you that a copy of the article was posted on the PMDA website as early regulatory considerations for PPP drug development.

URL: https://www.pmda.go.jp/english/review-services/regulatory-info/0005.html

Early Consideration is reference information and point of view at this time for promoting the practical application of new technologies and the development of innovative pharmaceuticals, although scientific knowledge and information have not yet been fully accumulated. Please note that those reference information and point of view may change in the future based on new knowledge and scientific advances.

* Hata T, Tanese K, Kobayashi S, Jibiki M, Yoshimura A, Koike H. Discussion about Endpoints in Clinical Trials in Patients with Palmoplantar Pustulosis. *Jpn Pharmacol Ther*. 2024; 52(s1): s22-25.

* This English version of the Japanese Notification is provided for reference purposes only. In the event of any inconsistency between the Japanese original and the English translation, the former shall prevail.

The brief summary of reviewer's current thinking shown in the article is as follows.
Note: *This is a provisional summary for reference purpose.*

- Palmoplantar pustulosis (PPP) is a disease characterized by recurrent and multiple aseptic pustules on the palms and soles.

- Different pathological conditions are handled under the same disease name “PPP” in Japan and Europe/the U.S. PPP in Europe/the U.S. generally refers to the palmoplantar-localized form of pustular psoriasis, which is rare. On the other hand, PPP in Japan is not necessarily a rare disease, which is primarily due to focal infections and smoking habit. The lesions begin as vesicles, which rapidly become pustules.

- PPP Area and Severity Index (PPPASI) total score (*) was used as the assessment scale in regulatory submissions. The primary endpoint in those submissions was "the change from baseline in PPPASI total score at Week 16." While the Pharmaceuticals and Medical Devices Agency (PMDA) has generally accepted the applicant's explanation of the primary endpoint, the PMDA pointed out that there is no consensus on the least clinically meaningful changes in the PPPASI total score.
  (* Bhushan M *et al*., *Br J Dermatol*. 2001; 145(4): 546-53.)

- The PMDA acknowledges that the percentage of patients who achieved a certain improvement in the PPPASI total score (e.g., percentage of patients whose PPPASI total score improved by 50% or more from baseline (PPPASI 50 achievement rate)) and the evaluation of quality of life (DLQI) are important in interpreting the efficacy of a drug for PPP. Therefore, the PMDA has expressed its view that the efficacy of a drug for PPP should be evaluated comprehensively by including the results of these endpoints as secondary endpoints.

- As for the timing of efficacy assessment, in view of the fluctuations in symptoms in PPP and generally slow onset of the effect of biologics on PPP, the primary endpoint may be evaluated at Week 24 and the efficacy of long-term treatment such as Week 52 may also be considered as an important endpoint.

- Endpoints that are closer to clinical remission such as PPPASI 75 achievement rate may be desirable in the future from the clinical practice perspective.

- Although QOL assessment of patients such as DLQI is important in assessing efficacy for PPP, it is currently considered appropriate to primarily evaluate the PPPASI Total Score to assess the severity of skin findings and lesion area.