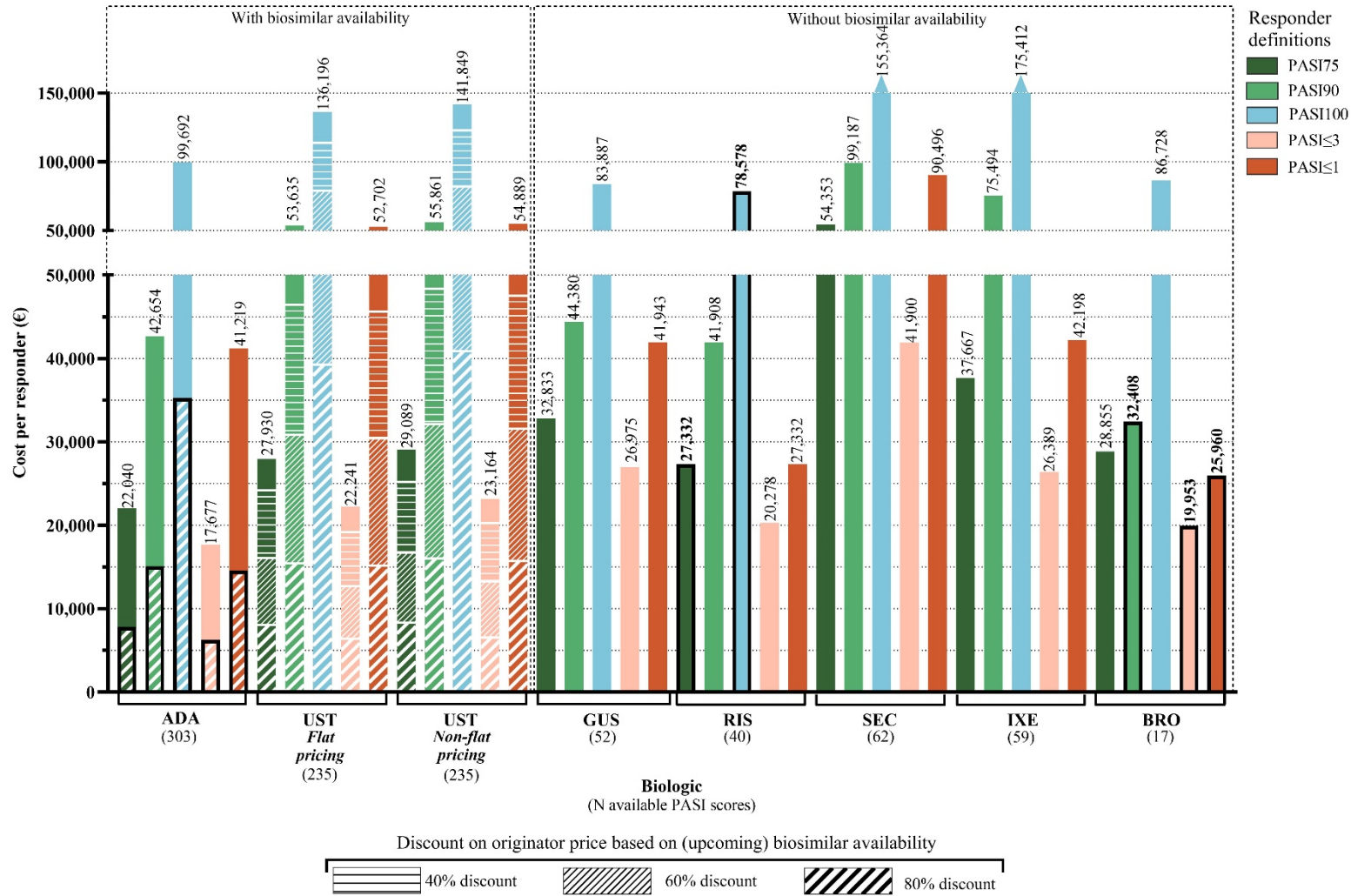


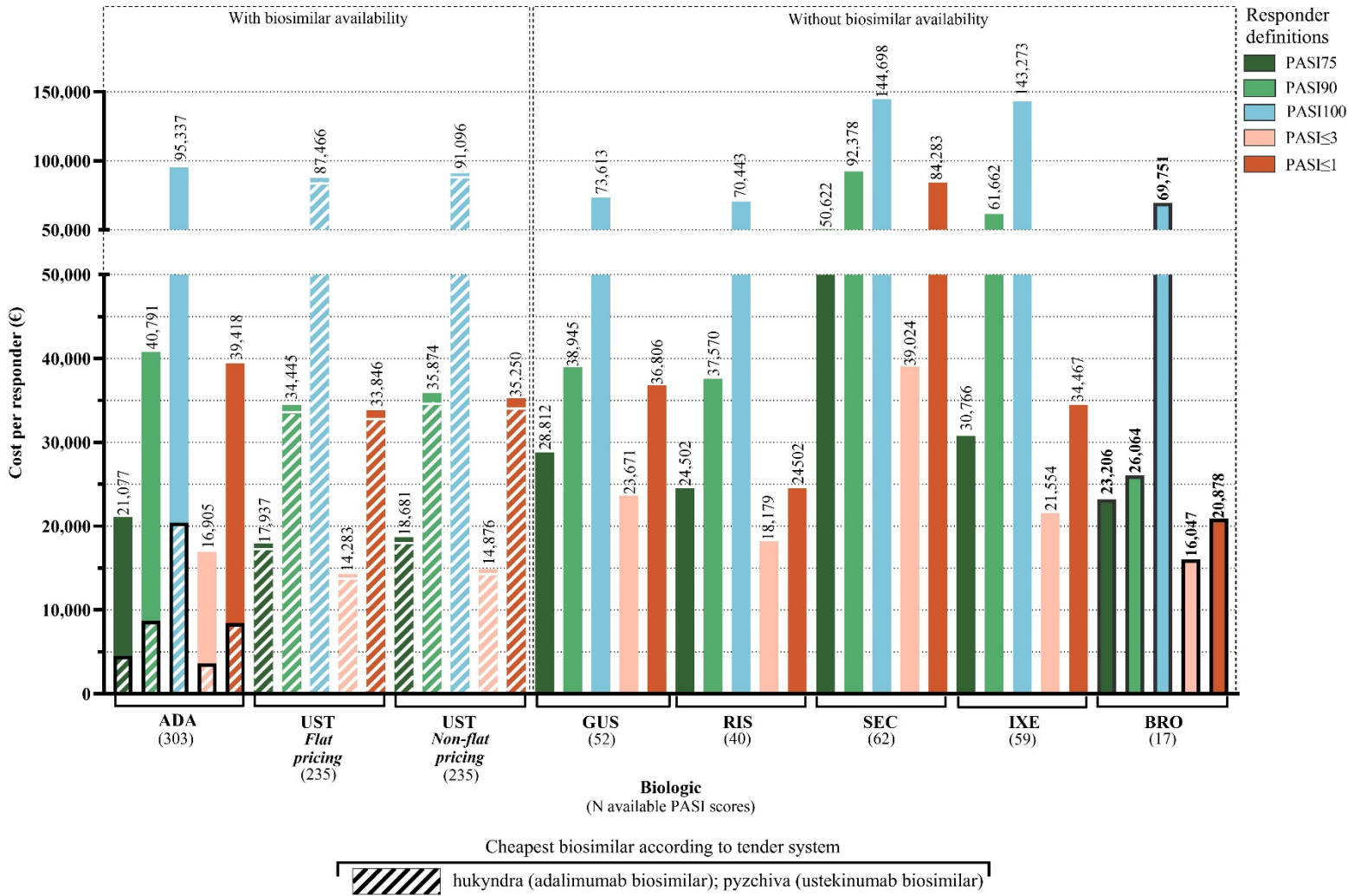
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Fig. S1. Cost-per-PASI75/90/100/≤3/≤1 responder at week 52 based on Dutch list prices and discounts; incorporating non-responder imputation



ADA, adalimumab; BRO, brodalumab; GUS, guselkumab; IXE, ixekizumab; PASI, Psoriasis Area and Severity Index; RIS, risankizumab; SEC, secukinumab; UST, ustekinumab

Fig. S2. Cost-per-PASI75/90/100/≤3/≤1 responder at week 52 based on Swedish list prices; incorporating non-responder imputation

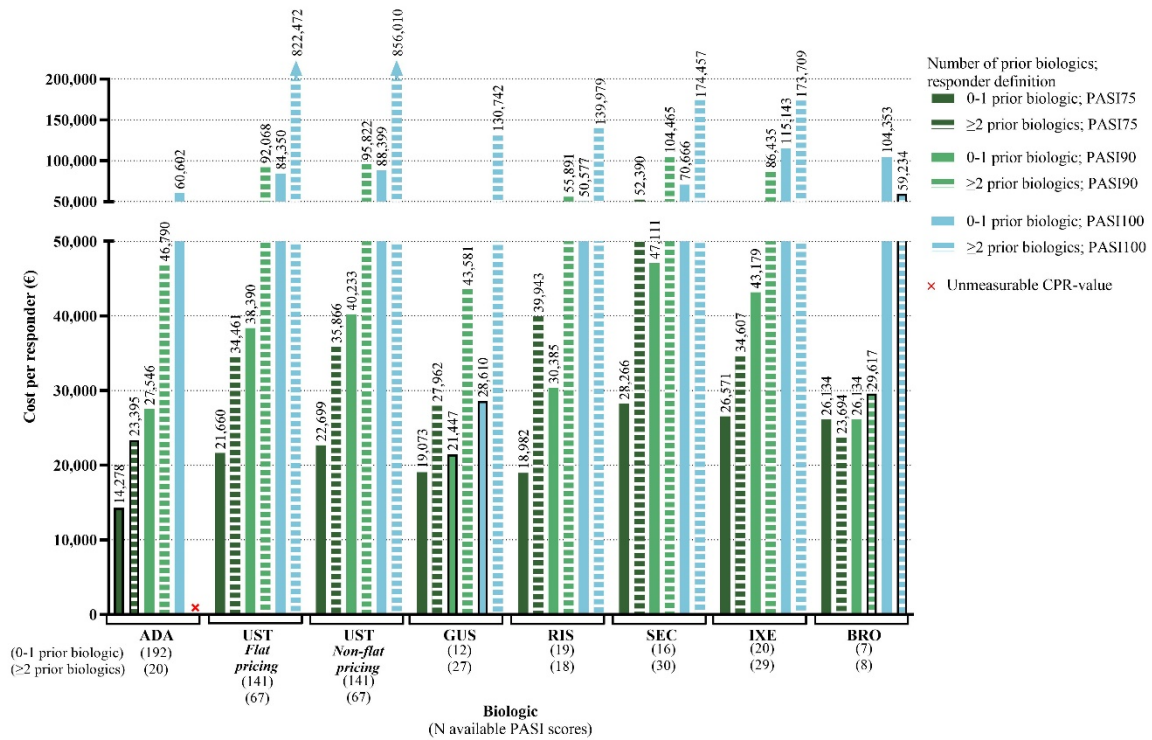


ADA, adalimumab; BRO, brodalumab; GUS, guselkumab; IXE, ixekizumab; PASI, Psoriasis Area and Severity Index; RIS, risankizumab; SEC, secukinumab; UST, ustekinumab

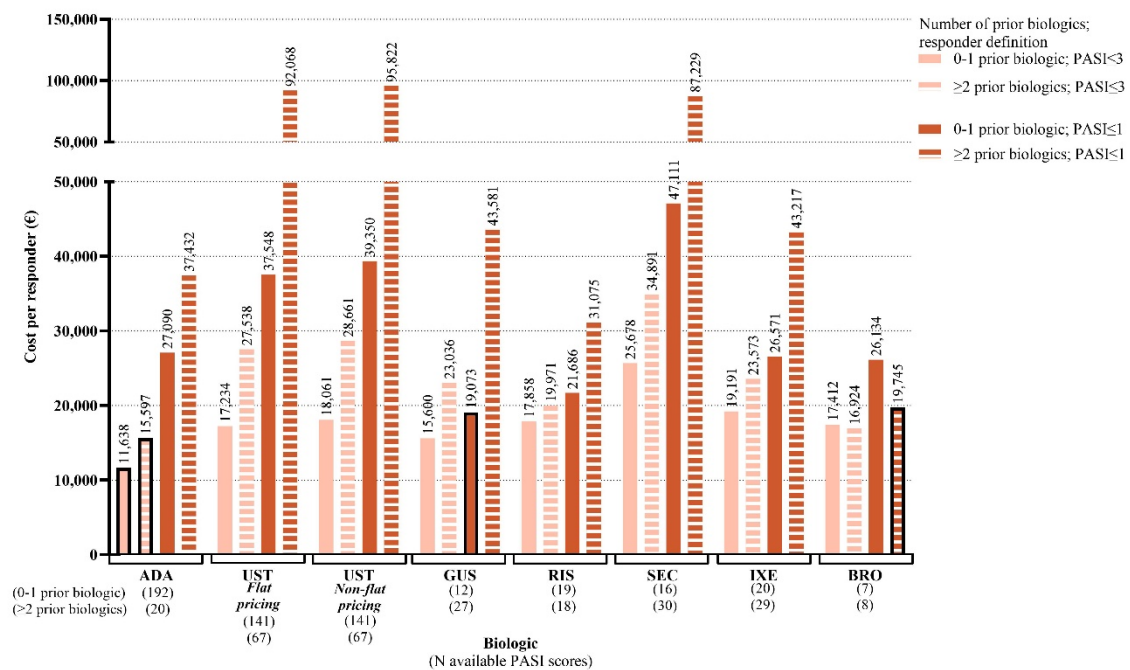
Cost per responder at week 52 based on number of prior biologics – Dutch list prices

In general, the CPR was higher when the biologic was initiated in patients with ≥ 2 prior biologics compared to biologics initiated in patients with 0-1 prior biologic (Fig. S3). As none of the included 20 patients with ≥ 2 prior biologics treated with adalimumab achieved a PASI100 at week 52, the cost-per-PASI100-responder was unmeasurable. Nevertheless, the cost-per-PASI ≤ 1 -responder for adalimumab was even lower than for ustekinumab, guselkumab and secukinumab. Caution must be applied when interpreting these results as the breakdown resulted in small numbers of PASI scores.

Fig. S3. Cost-per-PASI75/90/100/≤3/≤1 responder at week 52 based on Dutch list prices; with a breakdown on number of prior biologics
Relative PASI responder definitions



Absolute PASI responder definitions

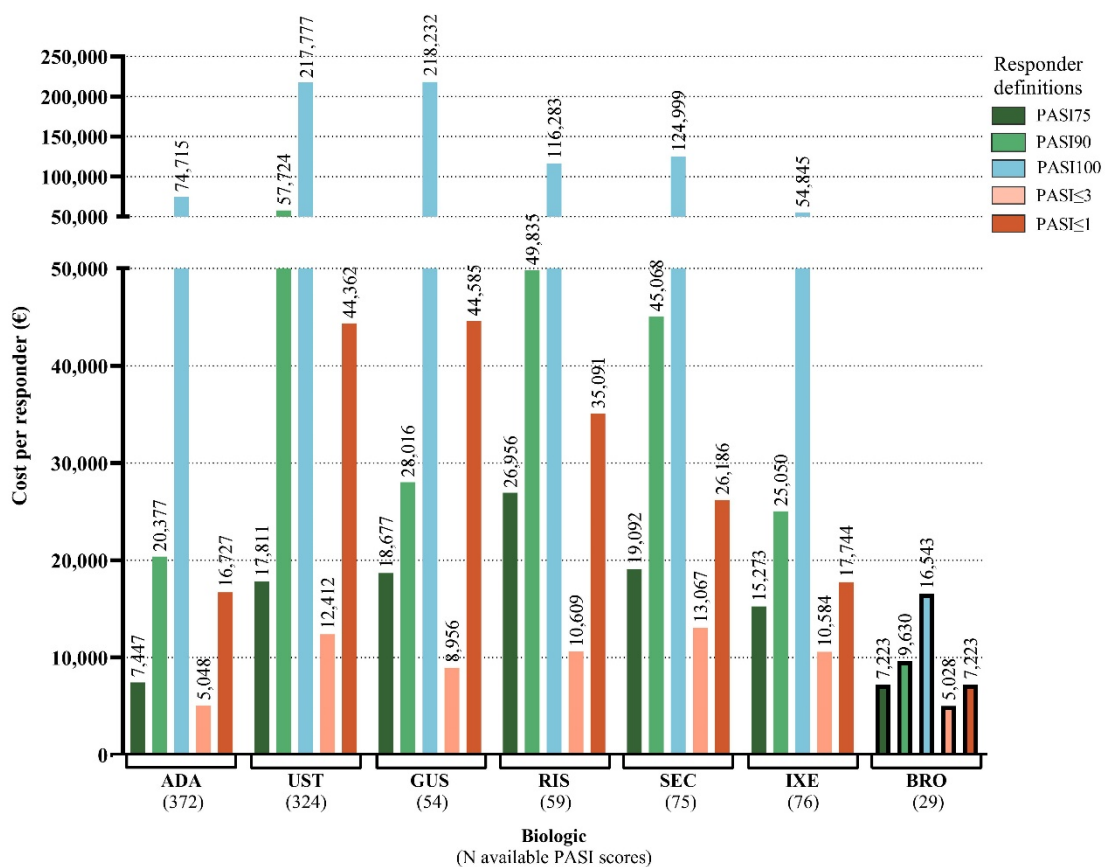


ADA, adalimumab; BRO, brodalumab; CPR, cost per responder; GUS, guselkumab; IXE, ixekizumab; PASI, Psoriasis Area and Severity Index; RIS, risankizumab; SEC, secukinumab; UST, ustekinumab

Cost per responder at week 12 – Dutch list prices

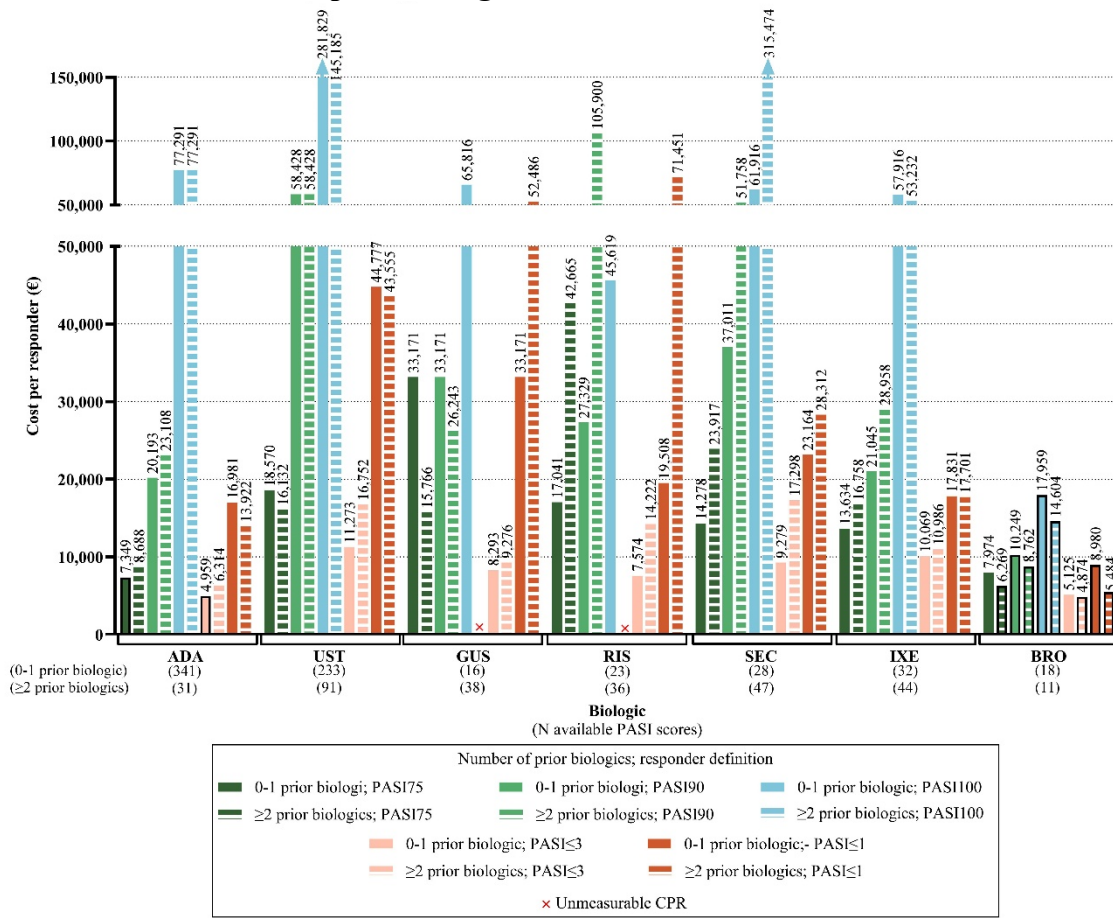
At week 12, the remarkable difference between the cost-per-PASI \leq 1-responder and the cost-per-PASI100-responder was already seen (Fig. S4). Across the biologics, differences in the cost-per-PASI \leq 3-responder were relatively small, whereas differences in CPR based on other PASI scores were quite large. Although secukinumab predominantly had the highest CPR in the primary analysis, this pattern was not yet evident by week 12. Additionally, the pattern of higher CPR-values among patients with \geq 2 prior biologics compared to 0-1 prior biologic was also not yet apparent at week 12 (Fig. S5).

Fig. S4. Cost-per-PASI75/90/100/ \leq 3/ \leq 1 responder at week 12 based on Dutch list prices



ADA, adalimumab; BRO, brodalumab; GUS, guselkumab; IXE, ixekizumab; PASI, Psoriasis Area and Severity Index; RIS, risankizumab; SEC, secukinumab; UST, ustekinumab

Fig. S5. Cost-per-PASI75/90/100/≤3/≤1 responder at week 12 based on Dutch list prices; with a breakdown on number of prior biologics



ADA, adalimumab; BRO, brodalumab; CPR, cost per responder; GUS, guselkumab; IXE, ixekizumab; PASI, Psoriasis Area and Severity Index; RIS, risankizumab; SEC, secukinumab; UST, ustekinumab