Data Featured at ACR 2025

American College of Rheumatology

Chicago, Illinois
October 24-29, 2025

Johnson & Johnson sponsored TREMFYA® (guselkumab) studies

Abstract number	Title	Presentation time (CEST)
Psoriatic Arthritis		
APEX Study		
	Poster	
2368*	Inhibition of Structural Damage Progression With Guselkumab, a Selective IL-23i, in Participants With Active PsA: Results Through Week 24 of the Phase 3b, Randomized, Double-Blind, Placebo-Controlled APEX Study	Tuesday, October 28 10:30AM - 12:30PM
SOLSTICE Study		
	Posters	
0563*	Efficacy and Safety of Guselkumab in Patients with Active Psoriatic Arthritis and Inadequate Response and/or Intolerance to One Prior Tumor Necrosis Factor Inhibitor	Sunday, October 26 10:30AM - 12:30PM
0564*	Improvements in Patient-Reported Outcomes Through 24 Weeks of Guselkumab Treatment in Participants with Active Psoriatic Arthritis and Inadequate Response and/or Intolerance to One Prior Tumor Necrosis Factor Inhibitor	Sunday, October 26 10:30AM - 12:30PM
PsABIOnd Study		
	Posters	
0577	Persistence and Effectiveness Across PsA Patient Subgroups With Guselkumab and IL-17 Inhibitors: 6-Month Results of the PsABIOnd Observational Study	Sunday, October 26 10:30AM - 12:30PM
1460	Effect of Guselkumab and IL-17 Inhibitors on Work Productivity and Activity Impairment in Psoriatic Arthritis: 6-Month Results of the PsABIOnd Observational Study	Monday, October 27 10:30AM - 12:30PM
IQVIA Study		
	Posters	
1165*	Real-World On-Label Treatment Persistence Through 24 Months in Biologic-Naïve and Biologic-Experienced Patients With Psoriatic Arthritis: Comparison of Guselkumab Versus Subcutaneous Tumor Necrosis Factor Inhibitors	Monday, October 27 10:30AM - 12:30PM
2369*	Real-World On-Label Treatment Persistence Through 24 Months in Biologic-Naïve and Biologic-Experienced Patients With Psoriatic Arthritis: Comparison of Guselkumab versus Subcutaneous Interleukin-17A Inhibitors	Tuesday, October 28 10:30AM - 12:30PM
Manhattan Study		
	Poster	
2373	Effectiveness and Tolerability of Guselkumab or TNF inhibitors as Second-Line Treatment After Receiving a TNF inhibitor as First-Line Therapy to Treat Active Psoriatic Arthritis: 52-Week Interim Data from the Manhattan Study	Tuesday, October 28 10:30AM - 12:30PM

*Encore abstract

DISCOVER-2 Study		
Poster		
2345*	Biological Sex-Related Differences in Radiographic Progression and Relationship With Early Clinical Response: Post Hoc Analysis of a Phase 3, Randomized, Double-Blind, Placebo-Controlled Study in Biologic-Naive Participants with Active Psoriatic Arthritis Treated With Guselkumab	Tuesday, October 28 10:30AM - 12:30PM
GAIA Study		
Poster		
1448	Influence of Sex on the Therapeutic Persistence of Guselkumab in Psoriatic Disease: a Retrospective National Cohort Study	Monday, October 27 10:30AM - 12:30PM
Psoriasis		
SPECTREM Study		
Poster		
0523*	SPECTREM: Guselkumab Significantly Improves Patient Reported Outcomes at Week 16 in Participants With Low Body Surface Area, Moderate Psoriasis With Special Sites Involvement	Sunday, October 26 10:30AM - 12:30PM
VISIBLE Study		
Poster		
1176*	VISIBLE Post-Inflammatory Pigmentation Journeys: Exploring the Impact of Pigmentation	Monday, October 27 10:30AM - 12:30PM
Crohn's Disease and Ulcerative Colitis		
GALAXI, GRAVITI, QUASAR, VEGA Studies		
Poster		
0257*	Safety of Guselkumab in Inflammatory Bowel Disease Up to 1 Year: Integrated Safety Analysis of Phase 2 and 3 Studies in Crohn's Disease and Ulcerative Colitis	Sunday, October 26 10:30AM - 12:30PM

Johnson & Johnson sponsored nipocalimab studies

Abstract number	Title	Presentation time (CEST)
Systemic Lupus Erythematosus		
GLADEL 2.0 Latin American Prospective Cohort Study		
Posters		
0621	Risk Factors for Pulmonary Manifestations in GLADEL 2.0, a Systemic Lupus Erythematosus Latin American Cohort	Sunday, October 26 10:30AM - 12:30PM
0623	Cluster Analysis of Socioeconomic and Environmental Determinants Modifying Activity, Chronicity and Clinical Manifestations of Systemic Lupus Erythematosus in the GLADEL 2.0 Cohort	Sunday, October 26 10:30AM - 12:30PM
0596*	Effect of Gender and Follow-up Time in Damage Accrual: Data From a Latin America Lupus Cohort	Sunday, October 26 10:30AM - 12:30PM
1491	Feasibility of Extrarenal Systemic Lupus Erythematosus Disease Modification in GLADEL 2.0, a Latin American Cohort	Monday, October 27 10:30AM - 12:30PM
1530*	The Renal Activity Index for Lupus Identifies and Predicts Complete Renal Remission or Absence of Kidney Involvement in Systemic Lupus Erythematosus	Monday, October 27 10:30AM - 12:30PM

*Encore abstract

1486	Systemic Lupus Erythematosus and Statins in GLADEL 2.0: Are Cardiovascular Risk Prevention Guidelines Being Followed?	Monday, October 27 10:30AM - 12:30PM
LupusNet Latin American Prospective Cohort Study		
Posters		
1899	Regional Variability in SLE Damage Accumulation by Disease Activity Across the Lupus Federated Data Network (LupusNet)	Tuesday, October 28 10:30AM - 12:30PM
1878	Customized Therapy for SLE: How Disease Severity Influences the Use of Corticosteroids and Biologics in Patients with SLE in the Lupus Federated Data Network (LupusNet) and a US Claims Database	Tuesday, October 28 10:30AM - 12:30PM
Sjögren's Disease		
Systematic Literature Review (SLR) Study		
Posters		
1377	Humanistic Burden of Sjögren's Disease: A Systematic Review of Treatment Efficacy on Health-Related Quality-of-Life	Monday, October 27 10:30AM - 12:30PM
1376	A Systematic Literature Review on the Economic Burden of Sjögren's Disease	Monday, October 27 10:30AM - 12:30PM
DAHLIAS Phase 2 Dose-Ranging Study		
Poster		
2297	Clinically Relevant Anti-Vaccine and Virus Antibodies in Patients with Sjogren's Disease Treated with Nipocalimab: Post-Hoc Analysis of the DAHLIAS Study	Tuesday, October 28 10:30AM - 12:30PM
Lupus Nephritis and Immunoglobulin A (IgA) Nephropathy		
LN vs IgAN Study		
Poster		
1839	Transcriptional Profiling of Whole Blood and Kidney Biopsy Samples from Lupus Nephritis and IgA Nephropathy Patients Suggests Different Disease Pathways	Tuesday, October 28 10:30AM - 12:30PM
Idiopathic Inflammatory Myopathies		
Swedish Cohort Study		
Poster		
2060	Treatment Patterns and Drug use in Idiopathic Inflammatory Myopathies. Description of the First Year After Diagnosis in a Swedish Myositis Cohort	Tuesday October 28 10:30AM - 12:30PM

Johnson & Johnson sponsored icotrokinra studies

Abstract number	Title	Presentation time (CEST)
Plaque Psoriasis		
ICONIC-LEAD Study		
Oral Presentation		
0875*	Efficacy and Safety of Icotrokinra, a Novel Targeted Oral Peptide (IL-23R-Inhibitor), in Adolescents With Moderate-to-Severe Plaque Psoriasis: Subgroup Analyses From a Phase 3, Randomized, Double-Blind, Placebo-Controlled Study (ICONIC-LEAD)	Monday, October 27 10:30AM - 12:30PM

*Encore abstract

Poster		
0558*	Early Systemic and Skin Pharmacodynamic Effects of Icotrokinra in Participants With Moderate-to-Severe Plaque Psoriasis: Results Through Week 24 of the Phase 3, ICONIC-LEAD Study	Sunday, October 26 10:30AM - 12:30PM
ICONIC-TOTAL Study		
Poster		
0555*	Phase 3 Results From an Innovative Trial Design of Treating Plaque Psoriasis Involving Difficult-to-Treat, High-Impact Sites With Icotrokinra, a Targeted Oral Peptide That Selectively Inhibits the IL-23–Receptor	Sunday, October 26 10:30AM - 12:30PM
Psoriatic Arthritis		
ICONIC PSA Studies		
Poster		
0562*	Icotrokinra, a Novel Targeted Oral Peptide, in Patients with Psoriatic Disease: Exploratory Assessments From a Phase 2 Psoriasis Study Informing a Phase 3 Clinical Program in Psoriatic Arthritis	Sunday, October 26 10:30AM - 12:30PM

Information about pipeline products or investigational uses of products does not imply FDA approval for these products or uses, nor does it establish the safety or efficacy of these products or uses. There is no guarantee that the pipeline products or investigational uses will receive FDA approval. Johnson & Johnson does not recommend or suggest use of its medicines in a manner inconsistent with FDA-approved labeling.

*Encore abstract

WHAT IS TREMFYA® (guselkumab)?

TREMFYA® is a prescription medicine used to treat adults and children 6 years and older who also weigh at least 88 pounds (40 kg) with moderate to severe plaque psoriasis who may benefit from taking injections or pills (systemic therapy) or phototherapy (treatment using ultraviolet or UV light).

TREMFYA® is a prescription medicine used to treat adults and children 6 years and older who also weigh at least 88 pounds (40 kg) with active psoriatic arthritis.

TREMFYA® is a prescription medicine used to treat adults with moderately to severely active ulcerative colitis.

TREMFYA® is a prescription medicine used to treat adults with moderately to severely active Crohn's disease.

TREMFYA® IMPORTANT SAFETY INFORMATION

What is the most important information I should know about TREMFYA®?

TREMFYA® is a prescription medicine that may cause serious side effects, including:

- **Serious Allergic Reactions.** Stop using TREMFYA® and get emergency medical help right away if you develop any of the following symptoms of a serious allergic reaction:
  - fainting, dizziness, feeling lightheaded (low blood pressure)
  - swelling of your face, eyelids, lips, mouth, tongue or throat
  - trouble breathing or throat tightness
  - chest tightness
  - skin rash, hives
  - Itching
- **Infections.** TREMFYA® may lower the ability of your immune system to fight infections and may increase your risk of infections. Your healthcare provider should check you for infections and tuberculosis (TB) before starting treatment with TREMFYA® and may treat you for TB before you begin treatment with TREMFYA® if you have a history of TB or have active TB. Your healthcare provider should watch you closely for signs and symptoms of TB during and after treatment with TREMFYA®.

  Tell your healthcare provider right away if you have an infection or have symptoms of an infection, including:
  - fever, sweats, or chills
  - muscle aches
  - weight loss
  - cough
  - warm, red, or painful skin or sores on your body different from your psoriasis
  - diarrhea or stomach pain
  - shortness of breath
  - blood in your phlegm (mucus)
  - burning when you urinate or urinating more often than normal

- **Liver Problems.** With the treatment of Crohn's disease or ulcerative colitis, your healthcare provider will do blood tests to check your liver before and during treatment with TREMFYA®. With the treatment of plaque psoriasis or psoriatic arthritis, your healthcare provider may do blood tests to check your liver before and as necessary during treatment with TREMFYA®. Your healthcare provider may stop treatment with TREMFYA® if you develop liver problems. Tell your healthcare provider right away if you notice any of the following symptoms:
  - unexplained rash
  - vomiting
  - tiredness (fatigue)
  - yellowing of the skin or the whites of your eyes
  - nausea
  - stomach pain (abdominal)
  - loss of appetite
  - dark urine

Do not use TREMFYA® if you have had a serious allergic reaction to guselkumab or any of the ingredients in TREMFYA®.

Before using TREMFYA®, tell your healthcare provider about all of your medical conditions, including if you:

- have any of the conditions or symptoms listed in the section "What is the most important information I should know about TREMFYA®?"
- have an infection that does not go away or that keeps coming back.
- have TB or have been in close contact with someone with TB.
- have recently received or are scheduled to receive an immunization (vaccine). You should avoid receiving live vaccines during treatment with TREMFYA®. Children should be brought up to date with all vaccines before starting TREMFYA®.
- are pregnant or plan to become pregnant. It is not known if TREMFYA® can harm your unborn baby.

  Pregnancy Registry: If you become pregnant during treatment with TREMFYA®, talk to your healthcare provider about registering in the pregnancy exposure registry for TREMFYA®. You can enroll by visiting **www.mothertobaby.org/ongoing-study/tremfya-guselkumab**, by calling 1-877-311-8972, or emailing **MotherToBaby@health.ucsd.edu**. The purpose of this registry is to collect information about the safety of TREMFYA® during pregnancy.
- are breastfeeding or plan to breastfeed. It is not known if TREMFYA® passes into your breast milk.

Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements.

What are the possible side effects of TREMFYA®?
TREMFYA® may cause serious side effects. See "What is the most important information I should know about TREMFYA®?"

The most common side effects of TREMFYA® include: respiratory tract infections, headache, injection site reactions, joint pain (arthralgia), diarrhea, stomach flu (gastroenteritis), fungal skin infections, herpes simplex infections, stomach pain, bronchitis, feeling very tired (fatigue), fever (pyrexia), and skin rash (rash).

These are not all the possible side effects of TREMFYA®. Call your doctor for medical advice about side effects.

Use TREMFYA® exactly as your healthcare provider tells you to use it.

Please read the full Prescribing Information, including Medication Guide, for TREMFYA® and discuss any questions that you have with your doctor.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit **www.fda.gov/medwatch**, or call 1-800-FDA-1088.

Dosage Forms and Strengths: TREMFYA® is available as 100 mg/mL and 200 mg/2 mL for subcutaneous injection and as a 200 mg/20 mL (10 mg/mL) single dose vial for intravenous infusion.

IMAAVY™ (NIPOCALIMAB-AAHU) IMPORTANT SAFETY INFORMATION

What is the most important information I should know about IMAAVY™?

IMAAVY™ is a prescription medicine that may cause serious side effects, including:

- **Infections** are a common side effect of IMAAVY™ that can be serious. Receiving IMAAVY™ may increase your risk of infection. Tell your healthcare provider right away if you have any of the following infection symptoms:
    - fever
    - chills
    - shivering
    - cough
    - sore throat
    - fever blisters
    - burning when you urinate
- **Allergic (hypersensitivity) reactions** may happen during or up to a few weeks after your IMAAVY™ infusion. Get emergency medical help right away if you get any of these symptoms during or after your IMAAVY™ infusion:
    - a swollen face, lips, mouth, tongue, or throat
    - difficulty swallowing or breathing
    - itchy rash (hives)
    - chest pain or tightness
- **Infusion-related reactions** are possible. Tell your healthcare provider right away if you get any of these symptoms during or a few days after your IMAAVY™ infusion:
    - headache
    - rash
    - nausea
    - fatigue
    - dizziness
    - chills
    - flu-like symptoms
    - redness of skin

Do not receive IMAAVY™ if you have a severe allergic reaction to nipocalimab-aahu or any of the ingredients in IMAAVY™. Reactions have included angioedema and anaphylaxis.

Before using IMAAVY™, tell your healthcare provider about all of your medical conditions, including if you:

- ever had an allergic reaction to IMAAVY™.
- have or had any recent infections or symptoms of infection.
- have recently received or are scheduled to receive an immunization (vaccine).

People who take IMAAVY™ should not receive live vaccines.

- are pregnant, plan to become pregnant, or are breastfeeding. It is not known whether IMAAVY™ will harm your baby.

Pregnancy Safety Study. There is a pregnancy safety study for IMAAVY™ if IMAAVY™ is given during pregnancy or you become pregnant while receiving IMAAVY™. Your healthcare provider should report IMAAVY™ exposure by contacting Janssen at 1-800-526-7736 or www.IMAAVY.com.

Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements.

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What are the possible side effects of IMAAVY™?
IMAAVY™ may cause serious side effects. See "What is the most important information I should know about IMAAVY™?"

The most common side effects of IMAAVY™ include: respiratory tract infection, peripheral edema (swelling in your hands, ankles, or feet), and muscle spasms.

These are not all the possible side effects of IMAAVY™. Call your doctor for medical advice about side effects. **You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.**

Please see the full Prescribing Information and Medication Guide for IMAAVY™ and discuss any questions you have with your doctor.

Dosage Form and Strengths: IMAAVY™ is supplied as a 300 mg/1.62 mL and a 1,200 mg/6.5 mL (185 mg/mL) single-dose vial per carton for intravenous injection.