New Phase 3b data on Lilly's Taltz (ixekizumab) and Zepbound (tirzepatide) used together showed improved and durable efficacy, patient-reported and metabolic outcomes at one year in adults with psoriatic arthritis and obesity

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Nearly three times as many patients taking Taltz and Zepbound achieved ≥50% reduction in psoriatic arthritis disease activity (ACR50) at one year compared to Taltz alone in first-of-its-kind TOGETHER-PsA study

Improvements in disease activity at one year follow statistically superior outcomes observed with Taltz and Zepbound vs. Taltz alone at Week 36 primary endpoint

Detailed data were featured as an oral presentation at ACR Convergence 2026 and simultaneously published in Arthritis & Rheumatology

INDIANAPOLIS, Nov. 11, 2026 /PRNewswire/ -- Eli Lilly and Company (NYSE: LLY) today announced detailed 52-week results showing improved and durable efficacy from the TOGETHER-PsA Phase 3b open-label clinical trial evaluating the concomitant use of Taltz (ixekizumab) and Zepbound (tirzepatide) compared to Taltz alone in adults with active psoriatic arthritis (PsA) and obesity or overweight with at least one additional weight-related comorbid condition. New detailed exploratory analyses showed treatment with Taltz and Zepbound used together maintained or further improved outcomes across disease activity, patient-reported and metabolic measures through Week 52. As previously reported, treatment with Taltz and Zepbound met the primary and all key secondary endpoints for statistically significant superiority to Taltz alone at 36 Weeks. The 52-week findings were presented at the American College of Rheumatology (ACR) Convergence 2026 and simultaneously published in *Arthritis & Rheumatology*.

At one year, nearly three times as many patients taking Taltz and Zepbound achieved ACR50, a measure reflecting at least a 50% reduction in PsA disease activity, compared to Taltz alone (43.7% of patients taking Taltz and Zepbound vs. 15.7% for Taltz alone). A greater proportion of patients achieving ACR50 was seen in the Taltz and Zepbound treatment arm as early as Week 4, before clinically meaningful weight loss was observed. Patient-reported outcomes, including physical function and fatigue, were maintained or further improved from Week 36 to Week 52 with Taltz and Zepbound vs. Taltz alone. In addition, Taltz and Zepbound were associated with improvements in body mass index (BMI), body weight, systolic blood pressure, glucose, HbA1c, triglycerides and total cholesterol vs. Taltz monotherapy.

"It's remarkable to see the durability of efficacy and breadth of outcomes with Taltz and Zepbound at one year in measures that matter most to patients with psoriatic arthritis and obesity or overweight, from improvements in disease control to physical function and fatigue," said Mark Genovese, M.D., senior vice president of Lilly Immunology development. "Data from TOGETHER-PsA continue to evolve our understanding of immunometabolic health and show what may be possible for patients when these chronic conditions are treated together to address the combined disease burden."

PsA is an immune-mediated disease that is often linked with metabolic dysfunction, including obesity. Approximately 65% of people with PsA in the U.S. also have obesity or overweight with at least one weight-related comorbidity[1] and patients in TOGETHER-PsA had a mean BMI of 37.6 at baseline. The combined disease burden can lead to poorer treatment outcomes,[2,3] and major PsA treatment guidelines recommend management of obesity.

"For people living with psoriatic arthritis and obesity or overweight, achieving meaningful disease control can be especially challenging," said Philip Mease, M.D., Director of Rheumatology Research, Swedish Medical Center and Clinical Professor at the University of Washington, Seattle and TOGETHER-PsA study author. "This makes the improvements seen in rigorous measures of PsA disease activity through Week 52 in the Taltz and Zepbound treatment arm particularly notable. When paired with metabolic improvements and other outcomes impacting patients' daily lives, these findings reinforce why considering the combined disease burden of PsA and obesity matters when caring for patients with both conditions."

TOGETHER-PsA 36-Week and 52-Week Results

	36-Week Results		**52-Week Results***	
	Taltz	**Taltz + Zepbound**	**Taltz**	**Taltz + Zepbound**
Primary Endpoint				
Percentage of patients achieving ACR50[i] + ≥10% weight reduction	0.8 %	31.7 %	1.7 %	39.2 %
Key Secondary Endpoints				
Percentage of patients achieving ACR50[i]	20.4 %	33.5 %	15.7 %	43.7 %
Percentage of patients achieving ≥10% weight reduction	4.5 %	84.5 %	6.7 %	85.7 %
Additional Secondary Endpoints and Patient Reported Outcomes				
Percentage of patients achieving Minimal Disease Activity (MDA)[ii]	15.3 %	26.3 %	13.6 %	28.2 %
DAPSA change from baseline[iii]	-23.7	-32.4	-20.3	-32.2
hsCRP, mg/L change from baseline[iv]	-0.4	-1.8	-0.4	-2.2
Physical function (HAQ-DI), total score change from baseline[v]	-0.3	-0.5	-0.3	-0.6
Fatigue (FACIT-F), change from baseline[vi]	4.8	8.6	4.8	9.7

SF-36 mental component score, change from baseline[vii]	0.4	3.1	0.2	3.4

**Week 52 analyses are pre-specified, exploratory objectives without multiplicity control. Comparisons between timepoints are descriptive and not tested or controlled for multiplicity.*

[i] *ACR50 requires at least a 50% improvement in the number of tender joints and swollen joints, plus at least a 50% improvement in three of the five other core disease activity measures.*

[ii] *MDA is a validated treatment target indicating low disease activity across the key measures of PsA.*

[iii] *Disease Activity Index for Psoriatic Arthritis (DAPSA). Negative values indicate reductions in disease activity from baseline.*

[iv] *hsCRP (high-sensitivity C-reactive protein) is a blood marker of systemic inflammation.*

[v] *HAQ-DI (Health Assessment Questionnaire–Disability Index) is a patient-reported measure of physical function and disability.*

[vi] *FACIT-Fatigue (Functional Assessment of Chronic Illness Therapy–Fatigue) is a patient-reported measure of fatigue severity; higher scores indicate less fatigue.*

[vii] *Higher SF-36 mental component scores indicate better health-related quality of life.*

Adverse events in participants treated with Taltz and Zepbound used together were generally mild to moderate, and the types of adverse events were consistent with the known safety profile of each medicine. The most common adverse events occurring in ≥5% of participants were nausea, diarrhea, constipation, injection site reactions, vomiting, urinary tract infections, sinusitis, dizziness and headache in the concomitant treatment arm, and injection site reactions, upper respiratory tract infections, arthralgia and diarrhea in the Taltz monotherapy arm.

About the TOGETHER-PsA trial

TOGETHER-PsA (NCT06588296) is a 52-week Phase 3b, randomized, multicenter, assessor-blinded, open-label study assessing the efficacy and safety of concomitant administration of Taltz and Zepbound compared with Taltz alone in adult participants with active psoriatic arthritis and obesity or overweight (BMI ≥30 kg/m², or ≥27 to <30 kg/m²) with at least one additional weight-related comorbid condition. A total of 271 participants were randomized 1:1 to receive either Taltz alone or concomitantly with Zepbound, both administered subcutaneously. Patients in both arms received counseling on a reduced-calorie diet and increased physical activity. The primary endpoint is to assess the proportion of participants achieving both an ACR50 response and ≥10% weight reduction at Week 36.

About Taltz (ixekizumab)[4]

Taltz is a monoclonal antibody that selectively binds with interleukin 17A (IL-17A) cytokine and inhibits its interaction with the IL-17 receptor. IL-17A is a naturally occurring cytokine that is involved in normal inflammatory and immune responses. Taltz inhibits the release of pro-inflammatory cytokines and chemokines. Taltz is approved to treat adults with active psoriatic arthritis and adults and children 6 years and older with moderate-to-severe plaque psoriasis who are candidates for systemic therapy or phototherapy. Additionally, Taltz is approved for adults with active ankylosing spondylitis, and adults with active non-radiographic axial spondyloarthritis with objective signs of inflammation.

About Zepbound (tirzepatide) injection[5]

Zepbound (tirzepatide) is the first and only dual GIP (glucose-dependent insulinotropic polypeptide) and GLP-1 (glucagon-like peptide-1) receptor agonist obesity medication. Zepbound tackles an underlying cause of excess weight. It reduces appetite and how much you eat. Zepbound is indicated for adults with obesity, or some adults who are overweight and also have at least one weight-related medical problem, to lose weight and keep it off. Additionally, Zepbound is FDA-approved to treat adults with moderate-to-severe obstructive sleep apnea and obesity. Zepbound should be used with a reduced calorie diet and increased physical activity.

TALTZ INDICATIONS AND SAFETY SUMMARY

Taltz® (tȯl-ts) is an injectable medicine used to treat:

- People 6 years of age and older with moderate to severe plaque psoriasis who may benefit from taking injections or pills (systemic therapy) or treatment using ultraviolet or UV light (phototherapy).
- Adults with active psoriatic arthritis.
- Adults with active ankylosing spondylitis.
- Adults with active non-radiographic axial spondyloarthritis with objective signs of inflammation.

It is not known if Taltz is safe and effective in children for conditions other than plaque psoriasis or in children under 6 years of age.

Warnings - Taltz affects the immune system. It may increase your risk of infections, some people have had serious infections, including tuberculosis (TB), and infections caused by bacteria, fungi, or viruses that can spread throughout the body. Some people have been hospitalized from these infections. Do not use Taltz if you have any symptoms of infection, unless your doctor tells you to. If you have a symptom after starting Taltz, call your doctor right away.

Your doctor should check you for TB before you start Taltz, and watch you closely for signs of TB during and after treatment with Taltz. If you have TB, or had it in the past, your doctor may treat you for it before you start Taltz.

Do not use Taltz if you have had a serious allergic reaction to ixekizumab or any other ingredient in Taltz, such as: swelling of your eyelids, lips, mouth, tongue or throat, trouble breathing, feeling faint, throat or chest tightness, or skin rash. Get emergency help right away if you have any of these reactions. See the Medication Guide that comes with Taltz for a list of ingredients.

Severe skin reactions that look like eczema can happen during treatment with Taltz from days to months after your first dose and can sometimes lead to hospitalization. Your doctor may temporarily stop treatment with Taltz if you develop severe skin reactions. Tell your doctor if you have any of the following: redness or rash, itching, patches, your skin is dry or feels like leather, blisters or abrasions that ooze or become crusty, small bumps or plaques with scale or crusting.

Crohn's disease or ulcerative colitis (inflammatory bowel disease) can start or get worse with Taltz use. Tell your doctor if you have any of these symptoms or if they get worse: stomach pain, diarrhea, and weight loss.

You should not get live vaccines while taking Taltz. You should get the vaccines you need before you start Taltz.

Common side effects
The most common side effects of Taltz include:

- Injection site reactions
- Nausea
- Upper respiratory infections
- Fungal skin infections

Tell your doctor if you have any side effects. **You can report side effects at 1-800-FDA-1088 or *www.fda.gov/medwatch*.**

Before using
Before you use Taltz, review these questions with your doctor:

- Are you being treated for an infection?
- Do you have an infection that does not go away or keeps coming back?
- Do you have TB or have you been in close contact with someone with TB?
- Do you have possible symptoms of an infection such as fever, cough, sores, diarrhea, or other symptoms? Ask your doctor about other possible symptoms.
- Do you have Crohn's disease or ulcerative colitis?

Tell your doctor if:

- You need any vaccines or have had one recently.
- You take prescription or over-the-counter medicines, vitamins, or herbal supplements.
- You are pregnant or planning to become pregnant. It is not known if Taltz can harm an unborn baby.
- **Pregnancy Exposure Registry:** There is a pregnancy registry to collect information about women who are exposed to Taltz during pregnancy. The purpose of this registry is to collect information about the health of you and your baby. If you become pregnant while taking Taltz, you are encouraged to enroll in the pregnancy registry by calling 1-800-284-1695 or by visiting online at http://www.pregnancyregistry.lilly.com.
- You are breastfeeding or planning to breastfeed. It is not known if Taltz passes into breastmilk.

How to take
See the instructions for use that come with Taltz. There you will find information about how to store, prepare, and inject Taltz. Adults may self-inject after receiving training from a healthcare provider.

For children 6 to 17 years of age:

- If your child's healthcare provider decides that you may give Taltz injections at home, you should receive training on the right way to prepare and inject Taltz. Do not try to give Taltz to your child until you have been shown how to inject Taltz. Children should not inject themselves with Taltz. You or an adult caregiver should prepare and give Taltz injections to your child.

Learn more
Taltz is a prescription medicine available as a 80 mg/mL, 40 mg/0.5mL, 20 mg/0.25mL injection. For more information, call 1-800-545-5979 or go to taltz.lilly.com.

This summary provides basic information about Taltz but does not include all information known about this medicine. Read the information that comes with your prescription each time your prescription is filled. This information does not take the place of talking with your doctor. Be sure to talk to your doctor or other healthcare provider about Taltz and how to take it. Your doctor is the best person to help you decide if Taltz is right for you.

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U.S. ZEPBOUND INDICATIONS AND SAFETY SUMMARY WITH WARNINGS
Zepbound® (ZEHP-bownd) is an injectable prescription medicine used with a reduced-calorie diet and increased physical activity to help adults with:

- obesity, or some adults with overweight who also have weight-related medical problems, to lose excess body weight and keep the weight off.
- moderate-to-severe obstructive sleep apnea (OSA) and obesity to improve their OSA.

Zepbound contains tirzepatide and should not be used with other tirzepatide-containing products or any GLP-1 receptor agonist medicines. It is not known if Zepbound is safe and effective for use in children.

Warnings - Zepbound may cause tumors in the thyroid, including thyroid cancer. Watch for possible symptoms, such as a lump or swelling in the neck, hoarseness, trouble swallowing, or shortness of breath. If you have any of these symptoms, tell your healthcare provider.

- Do not use Zepbound if you or any of your family have ever had a type of thyroid cancer called medullary thyroid carcinoma (MTC).
- Do not use Zepbound if you have Multiple Endocrine Neoplasia syndrome type 2 (MEN 2).
- Do not use Zepbound if you have had a serious allergic reaction to tirzepatide or any of the ingredients in Zepbound.

KwikPen®: Do not share your KwikPen with other people, even if the pen needle has been changed. You may give other people a serious infection or get a serious infection from them.

Zepbound may cause serious side effects, including:

Severe stomach problems. Stomach problems, sometimes severe, have been reported in people who use Zepbound. Tell your healthcare provider if you have stomach problems that are severe or will not go away.

Dehydration leading to kidney problems. Diarrhea, nausea, and vomiting may cause a loss of fluids (dehydration), which may cause kidney problems. It is important for you to drink fluids to help reduce your chance of dehydration. Tell your healthcare provider right away if you have nausea, vomiting, or diarrhea that does not go away.

Gallbladder problems. Gallbladder problems have happened in some people who use Zepbound. Tell your healthcare provider right away if you get symptoms of gallbladder problems, which may include pain in your upper stomach (abdomen), fever, yellowing of skin or eyes (jaundice), or clay-colored stools.

Inflammation of the pancreas (pancreatitis). Stop using Zepbound and call your healthcare provider right away if you have severe pain in your stomach area (abdomen) that will not go away, with or without nausea or vomiting. You may feel the pain from your abdomen to your back.

Serious allergic reactions. Stop using Zepbound and get medical help right away if you have any symptoms of a serious allergic reaction, including swelling of your face, lips, tongue or throat, problems breathing or swallowing, severe rash or itching, fainting or feeling dizzy, or very rapid heartbeat.

Low blood sugar (hypoglycemia). Your risk for getting low blood sugar may be higher if you use Zepbound with medicines that can cause low blood sugar, such as a sulfonylurea or insulin.

Signs and symptoms of low blood sugar may include dizziness or light-headedness, sweating, confusion or drowsiness, headache, blurred vision, slurred speech, shakiness, fast heartbeat, anxiety, irritability, mood changes, hunger, weakness or feeling jittery.

Changes in vision in patients with type 2 diabetes. Tell your healthcare provider if you have changes in vision during treatment with Zepbound.

Food or liquid getting into the lungs during surgery or other procedures that use anesthesia or deep sleepiness (deep sedation). Zepbound may increase the chance of food getting into your lungs during surgery or other procedures. Tell all your healthcare providers that you are taking Zepbound before you are scheduled to have surgery or other procedures.

Common side effects
The most common side effects of Zepbound include nausea, diarrhea, vomiting, constipation, stomach (abdominal) pain, indigestion, injection site reactions, feeling tired, allergic reactions, belching, hair loss, and heartburn. These are not all the possible side effects of Zepbound. Talk to your healthcare provider about any side effect that bothers you or doesn't go away.

Tell your doctor if you have any side effects. **You can report side effects at 1-800-FDA-1088 or *www.fda.gov/medwatch***.

Before using Zepbound

- **Your healthcare provider should show you how to use Zepbound before you use it for the first time.**
- **Talk to your healthcare provider about low blood sugar and how to manage it. Tell your healthcare provider if you are taking medicines to treat diabetes including an insulin or sulfonylurea.**
- **If you take birth control pills by mouth, talk to your healthcare provider before you use Zepbound. Birth control pills may not work as well while using Zepbound.** Your healthcare provider may recommend another type of birth control for 4 weeks after you start Zepbound and for 4 weeks after each increase in your dose of Zepbound.

Review these questions with your healthcare provider:
❑ Do you have other medical conditions, including problems with your pancreas, or severe problems with your stomach, such as slowed emptying of your stomach (gastroparesis) or problems digesting food?
❑ Do you take diabetes medicines, such as insulin or sulfonylureas?
❑ Do you have a history of diabetic retinopathy?
❑ Are you scheduled to have surgery or other procedures that use anesthesia or deep sleepiness (deep sedation)?
❑ Do you take any other prescription medicines or over-the-counter drugs, vitamins, or herbal supplements?
❑ Are you pregnant, plan to become pregnant, breastfeeding, or plan to breastfeed? Zepbound may harm your unborn baby. Tell your healthcare provider if you become pregnant while using Zepbound. Zepbound may pass into your breast milk. You should talk with your healthcare provider about the best way to feed your baby while using Zepbound.

- **Pregnancy Exposure Registry:** There is a pregnancy exposure registry for women who have taken Zepbound during pregnancy. The purpose of this registry is to collect information about the health of you and your baby. Talk to your healthcare provider about how you can take part in this registry, or you may call 1-844-524-0039 or email at MILEregistry@thermofisher.com or visit https://pregnancyregistry.lilly.com/zepbound.

How to take

- Read the Instructions for Use that come with Zepbound.
- Use Zepbound exactly as your healthcare provider says.
- Use Zepbound with a reduced-calorie diet and increased physical activity.
- Inject Zepbound under the skin (subcutaneously) of your stomach (abdomen), thigh, or have another person inject in the back of the upper arm. **Do not** inject ZEPBOUND into a muscle (intramuscularly) or vein (intravenously).
- **Use Zepbound 1 time each week, at any time of the day.**
- Change (rotate) your injection site with each weekly injection. Do not use the same site for each injection.

If you take too much Zepbound, call your healthcare provider, call the Poison Help line at 1-800-222-1222 or go to the nearest hospital emergency room right away.

Zepbound is approved as a 2.5 mg, 5 mg, 7.5 mg, 10 mg, 12.5 mg, and 15 mg injection.

Learn more
Zepbound is a prescription medicine. For more information, call 1-800-LillyRx (1-800-545-5979) or go to www.zepbound.lilly.com.

This summary provides basic information about Zepbound but does not include all information known about this medicine. Read the information that comes with your prescription each time your prescription is filled. This information does not take the place of talking with your healthcare provider. Be sure to talk to your healthcare provider about Zepbound and how to take it. Your healthcare provider is the best person to help you decide if Zepbound is right for you.

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Cautionary Statement Regarding Forward-Looking Statements
This press release contains forward-looking statements (as that term is defined in the Private Securities Litigation Reform Act of 1995) about Taltz (ixekizumab) as a treatment for psoriatic arthritis and Zepbound (tirzepatide) as a treatment for adults with obesity or overweight, and potential comprehensive treatment strategies for patients with psoriatic arthritis and obesity, and reflects Lilly's current beliefs and expectations. However, as with any pharmaceutical product, there are substantial risks and uncertainties in the process of drug research, development and commercialization. Among other things, there is no guarantee that future study results will be consistent with the results to date, or that Lilly will execute its strategies as planned. For further discussion of these and other risks and uncertainties that could cause actual results to differ from Lilly's expectations, see Lilly's Form 10-K and Form 10-Q filings with the United States Securities and Exchange Commission. Except as required by law, Lilly undertakes no duty to update forward-looking statements to reflect events after the date of this release.

References and endnotes
[1] Estimated from a large real-world population of care-seeking adults in the US in 2024, Truveta (data on file). Comorbidities include atherosclerotic cardiovascular disease (ASCVD), type 2 diabetes mellitus (T2DM), dyslipidemia, hypertension, obstructive sleep apnea (OSA).
[2] Proft F, et al. Nat Rev Rheumatol. 2026 Feb;22(2):132-144.
[3] di Minno MN, et al. Arthritis Care Res (Hoboken). 2013;65(1):141-147.
[4]Taltz. Prescribing Information. Lilly USA, LLC.
[5] Zepbound. Prescribing Information. Lilly USA, LLC.

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