

Atopic Dermatitis Treatment Made Simple: A Clinician's Pocket Guide to Biologics for Moderate to Severe Cases

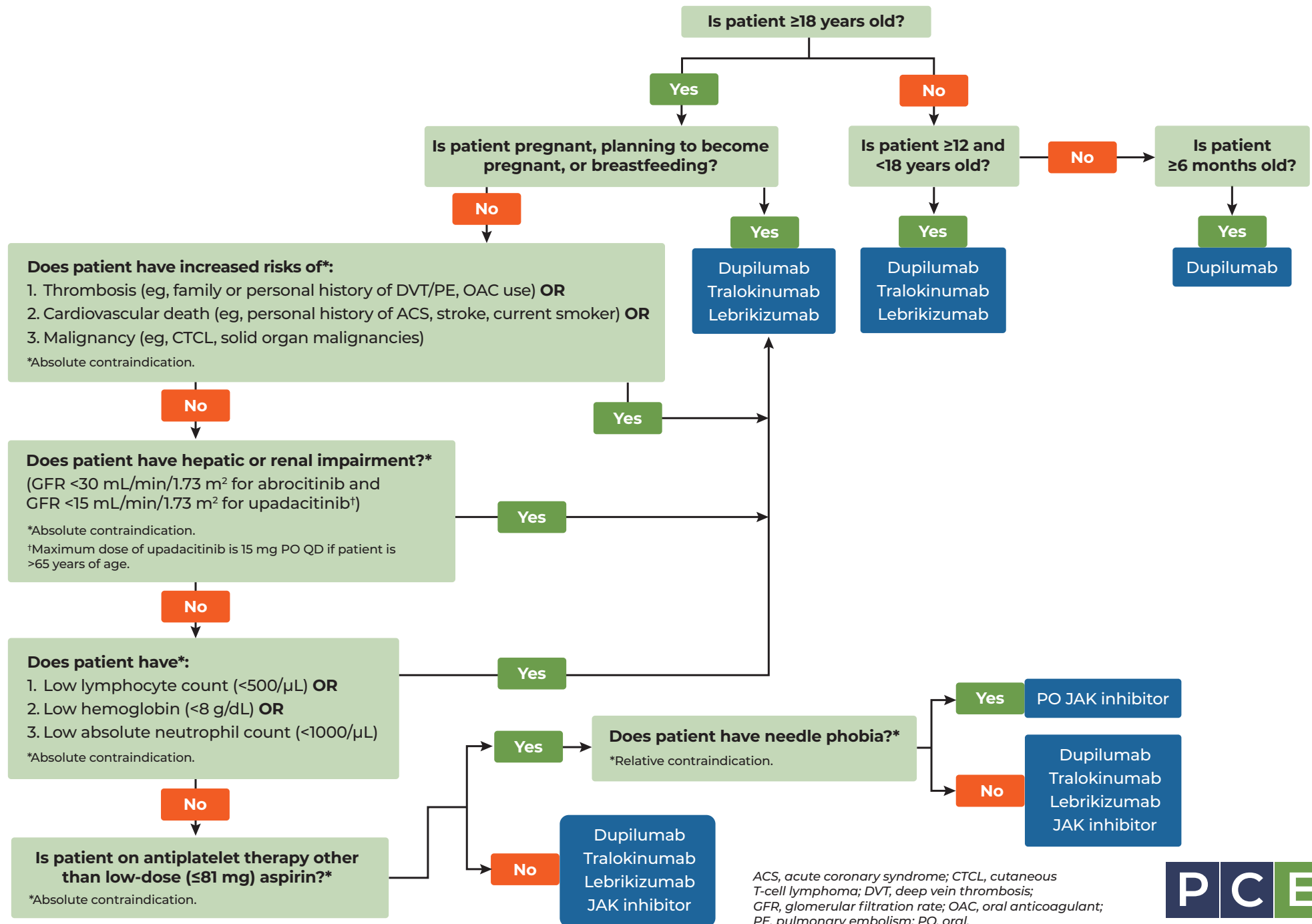
Available Biologics for Atopic Dermatitis

	Dupilumab	Tralokinumab	Lebrikizumab
Classification	IL-4 receptor α inhibitor	IL-13 inhibitor	IL-13 inhibitor
Age	≥ 6 mo	≥ 12 yr	≥ 12 yr (≥ 40 kg)
Administration	Subcutaneous Q2-4W	Subcutaneous Q2-4W	Subcutaneous Q2-4W
Pediatric Dosing	6 mo to 5 yr, 5 to <15 kg: 200 mg Q4W 6 mo to 5 yr, 15 to <30 kg: 300 mg Q4W 6-17 yr, 5 to <30 kg: 600 mg x1, 300 mg Q4W 6-17 yr, 30 to <60 kg: 400 mg x1, 200 mg Q2W 6-17 yr, ≥ 60 kg: 600 mg x1, 300 mg Q2W	300 mg x1, 150 mg Q2W	500 mg on W0 and W2, 250 mg Q2W for 16 wk or later to achieve clinical response, 250 mg Q4W
Adult Dosing	600 mg x1, 300 mg Q2W	600 mg x1, 300 mg Q2W 300 mg Q4W may be considered in adults <100 kg who achieve clear or almost clear skin after 16 wk	500 mg on W0 and W2, 250 mg Q2W for 16 wk or later to achieve clinical response, 250 mg Q4W
Additional FDA Indications	Asthma, chronic rhinosinusitis with nasal polyposis, EoE, prurigo nodularis, COPD	NA	NA
Contraindications	Hypersensitivity	Hypersensitivity	Hypersensitivity
Common Adverse Events	Injection-site reactions, conjunctivitis, blepharitis, oral herpes, keratitis, eye pruritus, other herpes simplex virus infection, dry eye, eosinophilia	Upper respiratory tract infections, conjunctivitis, injection-site reactions, eosinophilia	Conjunctivitis, injection-site reactions, herpes zoster

COPD, chronic obstructive pulmonary disease; EoE, eosinophilic esophagitis; IL, interleukin.

Dupilumab PI. Tralokinumab PI. Lebrikizumab PI.

Selecting Biologic Therapy for Moderate to Severe Atopic Dermatitis



ACS, acute coronary syndrome; CTCL, cutaneous T-cell lymphoma; DVT, deep vein thrombosis; GFR, glomerular filtration rate; OAC, oral anticoagulant; PE, pulmonary embolism; PO, oral.