

IL-23 Inhibitors

Therapeutic Cheat Sheet

COMPILED BY: BLAIR ALLAIS, MD • REVIEWED BY: ADAM FRIEDMAN, MD

GENERIC AND TRADE NAME

- › Guselkumab (Tremfya)
- › Tildrakizumba (Ilumya)
- › Risankizumab (Skyrizi)

MECHANISM OF ACTION

Monoclonal antibodies that bind to the p19 subunit of IL-23A

FDA APPROVED FOR

Moderate-to-severe plaque psoriasis

DOSING

- › Guselkumab: 100mg at weeks 0, 4, then every 8 weeks
- › Tildrakizumab: 100mg at week 0, 4, then every 12 weeks
- › Risankizumab: 150mg at weeks 0, 4, then every 12 weeks

ADVERSE EFFECTS

- › Nasopharyngitis
- › Upper respiratory tract infections
- › Headache

EFFICACY

- › PASI 90 at 10-16 weeks:
 - › Guselkumab, 100mg: (62.5 – 71.9%)
 - › Tildrakizumab, 200mg: (33.3 – 44.7%)
 - › Tildrakizumab, 100mg: (31.4 – 42.5%)
 - › Risankizumab, 150mg: (67.5 – 75.4%)

PREGNANCY AND LACTATION

- › Safety during pregnancy is not known
- › The presence of IL-23 inhibitors in secreted human milk has not been studied. Antibodies are secreted during lactation and caution is recommended.

WARNINGS AND PRECAUTIONS

- › May increase risk of common infections: GI, URI, Tinea, HSV.
- › Immunizations should be up to date, avoid live vaccines

BASELINE SCREENING

- › CBC, CMP, PPD or Quantiferon Gold for latent TB.
- › Referral for chest radiograph for positive TB test.
- › Serologic tests for hepatitis B and C.
- › Pretreatment test for HIV at the treating practitioner's discretion.

FOLLOW UP

- › Quarterly to twice yearly on the basis of time of treatment, response and tolerability of medication.

TEMPORARY DISCONTINUATION AND REINITIATION OF THERAPY

- › Presence of febrile illness, especially illness requiring antibiotic treatment.
- › Restart after full resolution of symptoms/signs and completion of any antibiotic course.