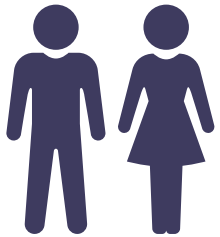
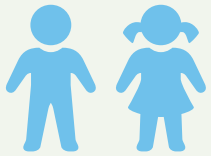
Dosing of Systemic Biologic Therapies

ADULTS



Medication	Initial & Subsequent Dosing	Notes
Dupilumab	600 mg (two 300 mg SC) then 300 mg SC Q2W	Pediatric and adolescent dosing also available, which differs
Tralokinumab	600 mg (four 150 mg SC) then 300 mg (two 150 mg SC) Q2W	Dose reduction to 300 mg Q4W may be considered after 16 weeks if an adequate response is achieved
Lebrikizumab†	--	In clinical trials, patients were randomized 2 : 2 : 1 ratio to receive lebrikizumab 250 mg Q2W, lebrikizumab 250 mg Q4W or placebo Q2W
Nemolizumab†	--	In clinical trials, patients were randomized 2 : 1 to nemolizumab 60 mg Q4W or placebo

PEDIATRICS



Medication	Initial & Subsequent Dosing	Notes
Dupilumab 6 mos – 5 yrs	200 mg (one 200 mg SC) Q4W 300 mg (one 300 mg SC) Q4W	Body weight of 5 to less than 15 kg Body weight of 15 to less than 30 kg
Dupilumab 6 yrs – 17 yrs	600 mg (two 300 mg SC) then 300 mg Q4W 400 mg (two 200 mg SC) then 200 mg Q2W 600 mg (two 300 mg SC) then 300 mg Q2W	Body weight of 15 to less than 30 kg Body weight of 30 to less than 60 kg Body weight of 60 kg or more
Tralokinumab 12 – 17 yrs	300 mg (two 150 mg SC) then 150 mg (one 150 mg SC) Q2W	--
Lebrikizumab†	--	Evaluated in clinical trials is adolescents at least 12 years of age
Nemolizumab†	--	Evaluated in clinical trials at least 13 years of age and body weight ≥ 30.0 kg

†Dosing information based on clinical trial data.
Note: Resource to be updated if FDA updates are provided during activity duration.
BID, twice a day; PO, oral; Q2W, every other week; Q4W, every 4 weeks; SC, subcutaneous.