

PSORIASIS TREATMENTS

These medications are not recommended for children and should be used for adults that are ≥ 18 yrs.

Generic	Brand	Adult Dose
INTERLEUKIN-12 AND INTERLEUKIN-23 ANTAGONIST¹		
ustekinumab	Stelara	12–17yrs: give SC at Weeks 0 and 4, then every 12wks thereafter. (<60kg): 0.75mg/kg; (60–100kg): 45mg; (>100kg): 90mg. ≥ 18yrs (≤ 100 kg): initially 45mg SC once, then 4wks later, and then once every 12wks; (>100kg): initially 90mg once, then 4wks later, and then once every 12wks.
INTERLEUKIN-17A ANTAGONIST		
brodalumab	Siliq	210mg SC at Weeks 0, 1, and 2, then 210mg every 2wks.
ixekizumab	Taltz	160mg (given as two 80mg SC injections) at Week 0, then 80mg at Weeks 2, 4, 6, 8, 10, and 12, then 80mg every 4wks.
secukinumab	Cosentyx	300mg (given as two 150mg SC injections) at Weeks 0, 1, 2, 3, and 4 then 300mg every 4wks. For some patients, 150mg dose may be acceptable.
INTERLEUKIN-23 ANTAGONIST		
guselkumab	Tremfya	100mg SC at Weeks 0 and 4, then give every 8wks.
PSORALEN²		
methoxsalen	8-MOP Oxsoralen-Ultra	Take Oxsoralen-Ultra 1½–2hrs or 8-MOP 2hrs before UVA exposure with low fat food or milk. (<30kg): 10mg; (30–50kg): 20mg; (51–65kg): 30mg; (66–80kg): 40mg; (81–90kg): 50mg; (91–115kg): 60mg; (>115kg): 70mg.
TUMOR NECROSIS FACTOR (TNF) BLOCKERS¹		
adalimumab	Humira	Initially 80mg SC, followed by 40mg every other week 1wk after initial dose.
etanercept	Enbrel	Initially 50mg SC twice weekly for 3mos (also: initial doses of 25mg or 50mg per week were shown to be efficacious). Maintenance: 50mg once weekly.
infliximab	Remicade	5mg/kg IV infusion at Weeks 0, 2 and 6; then give every 8wks.
OTHERS		
acitretin	Soriatane	25–50mg once daily with main meal; may discontinue when lesions resolve. May repeat if relapse occurs.
apremilast	Otezla	Starting on Day 1: 10mg in the AM. Day 2: 10mg in AM and 10mg in PM. Day 3: 10mg in AM and 20mg in PM. Day 4: 20mg in AM and 20mg in PM. Day 5: 20mg in AM and 30mg in PM. Following on Day 6 and thereafter: 30mg twice daily (AM & PM).
betamethasone dipropionate	Sernivo	Apply twice daily for up to max 4wks; discontinue when control is achieved.
calcipotriene + betamethasone dipropionate	Enstilar	Apply once daily for up to 4wks; discontinue when control is achieved; max 60g every 4 days.
cyclosporine	Gengraf³	1.25mg/kg twice daily; may increase after 4wks by 0.5mg/kg/day, then adjust at 2-week intervals; max 4mg/kg/day.
	Neoral³	1.25mg/kg twice daily; may increase after 4wks by 0.5mg/kg/day, then adjust at 2-week intervals; max 4mg/kg/day.
methotrexate	Otrexup	10–25mg once weekly using an oral, IM, SC, or IV form; max 30mg/wk. Use alternative MTX form in patients requiring oral, IM, IV, intra-arterial, or intrathecal dosing, doses <7.5mg/week or >30mg/week, high-dose regimens, or dose adjustments <2.5mg increments.
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NOTES

¹ These medications should only be used under the guidance and supervision of a physician.

² Intended to be administered only in conjunction with a schedule of controlled doses of long wave UV radiation. See full labeling for UVA exposure schedule.

³ Not bioequivalent to all other forms of cyclosporine; do not interchange without physician supervision.

Not an inclusive list of medications and/or official indications. Please see drug monograph at www.eMPR.com and/or contact company for full drug labeling.