

Ixekizumab (Taltz®)

Ixekizumab (Taltz) is a humanized IgG4 monoclonal antibody that selectively binds with the 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. Ixekizumab inhibits the release of proinflammatory cytokines and chemokines.

Resources from Manufacturer

[Patient Medication Guide](#)

[Full Prescribing Information](#)

[Taltz Co-pay Card](#)

[LillyCares Patient Assistance Foundation](#)

FDA-Approved Indications and Dosing in Rheumatology

Ixekizumab is indicated for:

- Patients aged 6 years or older with moderate-to-severe plaque psoriasis who are candidates for systemic therapy or phototherapy
- Adults with active psoriatic arthritis
- Adults with active ankylosing spondylitis
- Adults with active non-radiographic axial spondyloarthritis with objective signs of inflammation

Subcutaneous Dosing

- Adult Plaque Psoriasis: 160 mg [two 80 mg injections] at Week 0, followed by 80 mg at Weeks 2, 4, 6, 8, 10, and 12, then 80 mg every 4 weeks.
- Pediatric Plaque Psoriasis:

Weight	Dosing
<25 kg	40 mg at Week 0, followed by 20 mg every 4 weeks
25-50kg	80mg at Week 0 followed by 40mg every 4 weeks
>50 kg	160 mg [two 80 mg injections] at Week 0, followed by 80 mg every 4 weeks

- Psoriatic Arthritis: 160 mg by subcutaneous injection [two 80 mg injections] at Week 0, followed by 80 mg every 4 weeks. For psoriatic arthritis patients with coexistent moderate-to-severe plaque psoriasis, use the dosing regimen for adult plaque psoriasis
- Ankylosing Spondylitis: 160 mg by subcutaneous injection [two 80 mg injections] at Week 0, followed by 80 mg every 4 weeks.
- Non-radiographic Axial Spondyloarthritis: Recommended dosage is 80 mg by subcutaneous injection every 4 weeks

Contraindications

Serious hypersensitivity reaction to ixekizumab or to any of the excipients

Warnings and Precautions

1. Serious Infections – do not administer ixekizumab during an active infection, including localized infections. If a serious infection develops, interrupt ixekizumab until the infection is controlled.
2. Tuberculosis: evaluate for TB prior to initiating treatment
3. Inflammatory Bowel Disease: Crohn's disease and ulcerative colitis, including exacerbations have occurred. Monitor patients for onset of exacerbation
4. Live vaccines—avoid use with ixekizumab.
5. Pregnancy—unknown

Adverse Reactions (≥1%)

- Injection site reactions
- Upper respiratory tract infections
- Nausea
- Tinea infections

Medication Strength and Preparations

- Autoinjector: 80 mg/mL prefilled autoinjector
- Prefilled Syringe: 80 mg/mL prefilled syringe

Medication Administration and Storage

- Should be stored between 2°C to 8°C and may be used if stored at room temperature for less than 5 days

Subcutaneous Administration

- Before injecting, allow injection to warm to room temperature for 30 – 90 minutes prior to administration
- Inject subcutaneously into front of thigh, lower abdomen (avoid injecting within 2 inches of navel), or outer area of upper arm
- Do not administer into tender, bruised, red or hard skin
- Rotate injection sites (≥ 1 inch apart)
- Safe at room temperature (defined as 20°C and 25°C [68°F and 77°F]) for up to 5 days

Updated June 2023—ARP Practice Committee

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