

PSORIASIS TREATMENTS

These medications are not recommended for children and should be used for adults ≥18yrs old, unless otherwise specified.

Generic	Brand	Form	Adult Dose
TOPICAL			
Corticosteroids			
betamethasone dipropionate	Sernivo	spray	Apply twice daily for up to max 4wks. Discontinue when control is achieved.
clobetasol propionate	Impoyz	crm	Apply twice daily; max 50g/week and 2 consecutive weeks' treatment per course. Discontinue when control is achieved.
	Olux	foam	Apply twice daily; max 50g/week or 21 capfuls/week and 2 consecutive weeks' treatment per course. Discontinue when control is achieved.
halobetasol propionate	Bryhali	lotion	Apply once daily for up to 8wks; max 50g/week. Discontinue when control is achieved.
	Lexette	foam	Apply twice daily for up to 2wks; max 50g/week. Discontinue when control is achieved.
Others			
calcipotriene	Dovonex	crm	Apply twice daily; gently rub in completely.
	Sorilux	foam	≥ 12yrs : apply twice daily; gently rub in completely. Apply to scalp when hair is dry.
calcipotriene + betamethasone dipropionate	Enstilar	foam	≥ 12yrs : apply once daily for up to 4wks; max 60g every 4 days. Discontinue when control is achieved.
	Taclonex	oint, topical susp	Apply once daily for up to 4wks (oint) or 8wks (susp). 12–17yrs : max 60g/week. ≥ 18yrs : max 100g/week. Discontinue when control is achieved. Oint: limit to max 30% body surface area.
calcitriol	Vectical	oint	Apply twice daily in AM & PM; max 200g/week.
halobetasol propionate + tazarotene	Duobrii	lotion	Apply once daily; max 50g/week. Discontinue when control is achieved.
tazarotene	Tazorac	gel, crm	Apply once daily in the PM. Gel: limit to max 20% body surface area. Initiate with 0.05% strength; may increase to 0.1% as tolerated and clinically indicated.
SYSTEMIC			
Interleukin-12 and interleukin-23 antagonist¹			
ustekinumab	Stelara	soln for SC inj	12–17yrs : give SC at Weeks 0 and 4, then every 12wks thereafter. (<60kg): 0.75mg/kg; (60–100kg): 45mg; (>100kg): 90mg. ≥ 18yrs (≤100kg): 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 antagonist¹			
brodalumab	Siliq	soln for SC inj	210mg SC at Weeks 0, 1, and 2, then 210mg every 2wks.
ixekizumab	Taltz	soln for SC inj	160mg (given as two 80mg SC injs) at Week 0, then 80mg at Weeks 2, 4, 6, 8, 10, and 12, then 80mg every 4wks.
secukinumab	Cosentyx	soln or lyophilized pwd for SC inj	300mg (given as two 150mg SC injs) at Weeks 0, 1, 2, 3, and 4 then 300mg every 4wks. For some patients, 150mg dose may be acceptable.
Interleukin-23 antagonist¹			
guselkumab	Tremfya	soln for SC inj	100mg SC at Weeks 0 and 4, then every 8wks thereafter.
risankizumab-rzaa	Skyrizi	soln for SC inj	150mg (two 75mg SC injs) at Weeks 0 and 4, then every 12wks thereafter.
tildrakizumab-asmn	Ilumya	soln for SC inj	100mg SC at Weeks 0 and 4, then every 12wks thereafter.
Psoralen¹			
methoxsalen ²	8-MOP	hard gel caps	Take 8-MOP 2hrs before or Oxsoresalen-Ultra 1.5–2hrs 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.
	Oxsoresalen-Ultra	soft gel caps	
Tumor necrosis factor (TNF) blockers¹			
adalimumab	Humira	soln for SC inj	Initially 80mg SC, followed by 40mg every other week 1wk after initial dose.
certolizumab pegol	Cimzia	soln or pwd for SC inj	400mg (two 200mg inj at separate sites) SC every other week. ≤90kg: may consider 400mg on Day 1, then at Weeks 2 and 4, followed by 200mg every other week.
etanercept	Enbrel	soln or pwd for SC inj; soln for autoinjector	Give by SC inj. ≥ 4yrs : (<63kg): 0.8mg/kg (max 50mg) weekly; (≥63kg): 50mg weekly. ≥ 18yrs : initially 50mg SC twice weekly for 3mos (initial doses of 25mg or 50mg per week were shown to be efficacious). Maintenance: 50mg once weekly.
infliximab	Remicade	lyophilized pwd for IV infusion	5mg/kg IV over ≥2hrs at Weeks 0, 2, 6, then once every 8wks.
infliximab-abda	Renflexis		
infliximab-dyyb	Inflectra		
Others			
acitretin	Soriatane	caps	25–50mg once daily with main meal; may discontinue when lesions resolve. May repeat if relapse occurs.
apremilast	Otezla	tabs	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).
cyclosporine	Gengraf³	caps, oral	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	soln	
methotrexate	Otrexup	soln for SC inj	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 <10mg/wk or >25mg/wk, high-dose regimens, or dose adjustments <5mg increments.
	Rasuvo		

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.

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