

Table 2. US Food and Drug Administration–Approved Biologic and Oral Systemic Treatments for Psoriasis (continued)

Systemic treatment	Structure of biologic or target of oral systemic	Dosing for plaque psoriasis <sup>a</sup>	Efficacy at primary end point <sup>b</sup>	Safety considerations
Anti-IL-12/23				
Ustekinumab	Human monoclonal antibody against the p40 subunit, shared by IL-12/23	<p>Loading/induction dose for patients ≤100 kg: 45 mg at weeks 0 and 4; for patients &gt;100 kg: 90 mg at weeks 0 and 4</p> <p>Maintenance dose for patients ≤100 kg: 45 mg every 12 weeks; for patients &gt;100 kg: 90 mg every 12 weeks</p> <p>Recommended escalated maintenance dose for patients ≤100 kg: 90 mg every 8-12 weeks; for patients &gt;100 kg: 90 mg every 8-12 weeks</p> <p>Pediatric loading/induction dose for patients &lt;60 kg: 0.75 mg/kg at weeks 0 and 4; for patients ≥60-100 kg: 45 mg at weeks 0 and 4; for patients &gt;100 kg: 90 mg at weeks 0 and 4</p> <p>Pediatric maintenance dose for patients &lt;60 kg: 0.75 mg/kg every 12 weeks; for patients ≥60-100 kg: 45 mg every 12 weeks; for patients &gt;100 kg: 90 mg every 12 weeks</p>	<p>Adults: 67% (45 mg) and 76% (90 mg) achieve PASI 75 at week 12 (placebo, 4%)<sup>77</sup></p> <p>Children (aged 12-17 years): 78% (45 mg) and 81% (90 mg) achieve PASI 75 at week 12 (placebo, 11%)<sup>78</sup></p> <p>Superior to etanercept at 12 weeks<sup>79</sup></p>	<p>Lower risk of basal cell carcinoma compared with methotrexate</p> <p>Discontinue during serious infection until the infection resolves</p>