Clinical Drug Investigation

PEER-REVIEWED FEATURE

Tralokinumab: Adis Evaluation

Clinical Considerations

- First-in-class, fully human IgG4 monoclonal antibody that binds to and neutralizes the effects of IL-13
- As monotherapy or in combination with TCS, improves clinical signs and symptoms as well as QOL
- Provides consistent symptom control over the longer term (up to 2 years)
- Generally well tolerated

Plain Language Summary

Background and rationale

- Atopic dermatitis is an ongoing inflammatory skin condition that causes dryness, itching and redness. Standard first-line treatments include moisturizers and medical ointments that are applied directly to the skin. However, topical treatments often fail to adequately control symptoms in patients with moderate to severe disease.
- More recently, biological therapies have been developed that target the different inflammatory proteins involved in atopic dermatitis. Tralokinumab [Adbry™ (USA); Adtralza® (EU)] is a human monoclonal antibody that targets interleukin (IL)-13, a key protein involved in driving the signs and symptoms of atopic dermatitis.

Clinical findings

- When given alone or together with topical corticosteroids (TCS), subcutaneous tralokinumab improves the signs and symptoms of atopic dermatitis in adults with moderate to severe disease and provides consistent long-term disease control.
- Patients treated with tralokinumab also report improvements in health-related quality of life (QOL).
- Adverse events seen with tralokinumab are generally mild or moderate in severity.

Conclusion

Subcutaneous tralokinumab offers a new effective and generally well-tolerated treatment option for adults with moderate to severe atopic dermatitis who require systemic therapy.