



Please join us for an insightful presentation featuring **Stephen D. Hess, MD, PhD, FAAD,** Dermatologist at Center City Dermatology Philadelphia, PA

# **ILUMYA®** (tildrakizumab-asmn):

An IL 23 Inhibitor for the Treatment of Moderate to Severe Plaque Psoriasis

Consistent Efficacy with a Durable Safety Profile Through 5 Years and a Growing Body of Real-World Evidence



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Medical Dermatology Therapy Update III

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#### INDICATION AND IMPORTANT SAFETY

ILUMYA® (tildrakizumab-asmn) is indicated for the treatment of adults with moderate-to-severe plaque psoriasis who are candidates for systemic therapy or phototherapy.

#### **CONTRAINDICATIONS**

ILUMYA is contraindicated in patients with a previous serious hypersensitivity reaction to tildrakizumab or to any of the excipients.

## **WARNINGS AND PRECAUTIONS**

#### **Hypersensitivity**

Cases of angioedema and urticaria occurred in ILUMYA-treated subjects in clinical trials. If a serious allergic reaction occurs, discontinue ILUMYA immediately and initiate appropriate therapy.

#### Infections

ILUMYA may increase the risk of infection. Treatment with ILUMYA should not be initiated in patients with a clinically important active infection until the infection resolves or is adequately treated.

Consider the risks and benefits of treatment prior to prescribing ILUMYA in patients with a chronic infection or a history of recurrent infection. Instruct patients receiving ILUMYA to seek medical help if signs or symptoms of clinically important chronic or acute infection occur. If a patient develops a clinically important or serious infection, or is not responding to standard therapy, closely monitor and consider discontinuation of ILUMYA until the infection resolves.

#### **Pretreatment Evaluation for Tuberculosis**

Evaluate patients for tuberculosis (TB) infection prior to initiating treatment with ILUMYA. Do not administer ILUMYA to patients with active TB infection. Initiate treatment of latent TB prior to administering ILUMYA. Consider anti-TB therapy prior to initiation of ILUMYA in patients with a past history of latent or active TB in whom an adequate course of treatment cannot be confirmed. Patients receiving ILUMYA should be monitored closely for signs and symptoms of active TB during and after treatment.

#### **Immunizations**

Prior to initiating therapy with ILUMYA, consider completion of all age-appropriate immunizations according to current immunization guidelines. Patients treated with ILUMYA should not receive live

### **Adverse Reactions**

The most common (≥1%) adverse reactions associated with ILUMYA treatment that were more frequent than in the placebo group are upper respiratory infections, injection-site reactions, and diarrhea.

For additional safety information, please see the full Prescribing Information and Medication Guide at https://www.ilumyapro.com.

