

## Rheumatology Biologic Drug Monitoring Recommendations

Testing for infliximab and adalimumab drug levels and neutralising antibodies will be available from November 2017 via QEUH, Glasgow. This includes biosimilar drugs.

### Indications for testing include:

- 3-6/12 after initiation of therapy to guide drug dose/infusion time interval
- Anti-TNF failure of response to determine if primary or secondary failure due to immunogenicity
- To guide dose/interval changes for patients where drug tapering is being considered (or escalation where inadequate dosing is suspected)

### Practicalities of testing

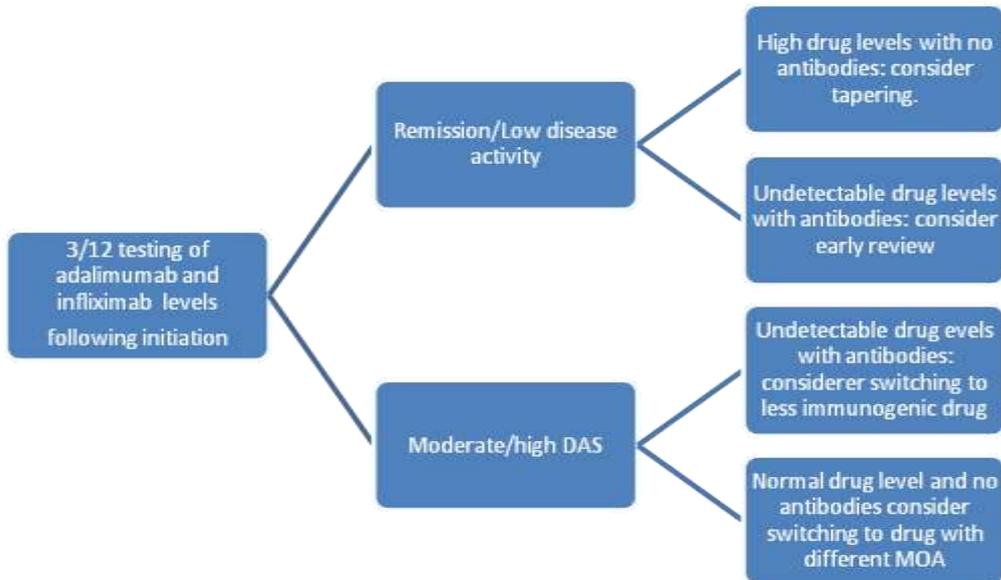
- Serum sample required ideally for trough level: pre-infusion for infliximab and no earlier than 3-5 days prior to injection date for adalimumab
- No special preparation required for samples which should be sent to biochemistry at QEUH.
- TRAK request forms have been designed, but require local Board implementation
- Sample turnaround anticipated 2 weeks.

### Interpretation

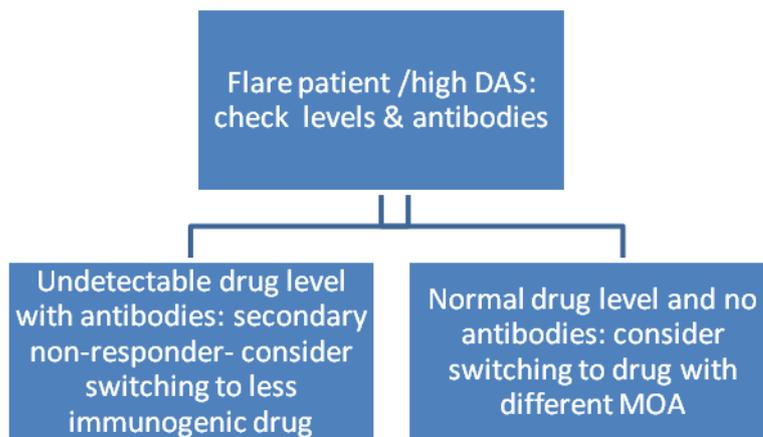
| Analyte    | Lower limit of assay | Upper limit of measurement | Units |
|------------|----------------------|----------------------------|-------|
| Adalimumab | 0.4                  | 14                         | ug/mL |
| Infliximab | 0.3                  | 14                         | ug/mL |

- Levels below the lower limit suggest secondary failure of response or poor compliance. Presence of neutralising antibody may be present in the former.
- Levels above the upper limit suggest overtreatment.

**Interpretation: 3-6/12 after initiation of therapy to guide drug dose/infusion time interval**



**Interpretation: anti-TNF failure of response**



**Interpretation: considering dose reduction**

High/normal drug levels confer favourable likelihood of success.  
Undetectable drug levels with presence of antibodies suggest drug is not required for the patients remission. Consider stopping therapy.