

allergy/asthma specialty product guide

Medication	Administration	Class of Drug	Generic/ Biosimilar Available?	FDA Approved Indications	Manufacturer	Manufacturer Sponsored Financial Assistance?
ADBRY™ (tralokinumab-ldm)	Injectable	IL-13	No	Atopic Dermatitis	Leo Pharma	Yes
CIBINQO™ (abrocitinib)	Oral	JAK inhibitor	No	Atopic Dermatitis	Pfizer	Yes
DUPIXENT® (dupilumab)	Injectable	IL-4; IL-13	No	Asthma, Atopic Dermatitis, Chronic Rhinosinusitis with Nasal Polyps, Eosinophilic Esophagitis	Regeneron/ Sanofi	Yes
EBGLYSS™ (lebrikizumab-lbkz)	Injectable	IL-13	No	Atopic Dermatitis	Lilly	Yes
NUCALA® (mepolizumab)	Injectable	IL-5	No	Asthma, Chronic Rhinosinusitis with Nasal Polyps, Eosinophilic Granulomatosis with Polyangiitis, Hypereosinophilic Syndrome	GSK	Yes
RINVOQ™ (upadacitinib)	Oral	JAK inhibitor	No	Atopic dermatitis	AbbVie	Yes
XOLAIR® (omalizumab)	Injectable	Anti-IgE antibody	No	Asthma, Chronic Rhinosinusitis with Nasal Polyps, Chronic Spontaneous Urticaria, Food Allergy	Genentech	Yes