Adalimumab

**Indication**
Axial spondyloarthritis  
ICD11 code: FA92.0Z

**INN**
Adalimumab

**Medicine type**
Biological agent

**List type**
Complementary (EML) (EMLc)

**Additional notes**
EML: certolizumab pegol, etanercept, golimumab and infliximab are alternatives, including quality-assured biosimilars. EMLc: etanercept and infliximab are alternatives, including quality-assured biosimilars.

**Formulations**
Parenteral > General injections > SC: 40 mg per 0.8 mL; 40 mg per 0.4 mL; 10 mg per 0.2 mL (EMLc); 20 mg per 0.4 mL (EMLc)

**EML status history**
First added in 2019 (TRS 1021)  
Changed in 2023 (TRS 1049)

**Sex**
All

**Age**
Also recommended for children

**Therapeutic alternatives**
certolizumab pegol (ATC codes: L04AB05)  
etanercept (ATC codes: L04AB01)  
golimumab (ATC codes: L04AB06)  
infliximab (ATC codes: L04AB02)

**Patent information**
Main patents have expired but secondary patents might remain active in some jurisdictions. For more information on specific patents and license status for developing countries visit www.MedsPal.org  
Read more about patents.

**Tags**
Biological

**Wikipedia**
Adalimumab

**DrugBank**
Adalimumab

---

**Summary of evidence and Expert Committee recommendations**

Following the review of the age-appropriateness of formulations on the EMLc, the Expert Committee recommended the addition of new strength formulations of adalimumab (injection 10 mg/0.2 mL and 20 mg/0.4 mL) to the EMLc.