

[Rituximab](#)

Essential medicine status

Section:

[8. Immunomodulators and antineoplastics](#) [8.2. Antineoplastics and supportive medicines](#) [8.2.2. Targeted therapies](#)

ATC codes: [L01FA01](#)

Indication

Chronic lymphocytic leukaemia or small lymphocytic lymphoma ICD11 code: [2A82.0](#)

INN

Rituximab

Medicine type

Biological agent

List type

Complementary

Additional notes

Including quality-assured biosimilars

Formulations

Parenteral > General injections > IV: 100 mg per 10 mL in 10 mL vial ; 500 mg per 50 mL in 50 mL vial

EML status history

First added in 2015 ([TRS 994](#))

Changed in 2019 ([TRS 1021](#))

Sex

All

Age

Adolescents and adults

Therapeutic alternatives

The recommendation is for this specific medicine

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

Cancer Biological

Wikipedia

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Summary of evidence and Expert Committee recommendations

The Committee noted the correspondence from the European Society for Medical Oncology (ESMO) requesting recognition of biosimilars of rituximab and trastuzumab on the EML. The Committee agreed that quality-assured biosimilars of these monoclonal antibodies represent an opportunity for expanding affordable access to cancer medicines for health systems. To help improve access, the Committee recommended the current listing for intravenous rituximab on the EML should indicate that quality-assured biosimilars of rituximab should also be considered as essential medicines. In addition, the Expert Committee recommended that WHO continue to facilitate access to biosimilars through the Prequalification programme and WHO Collaborative Registration Procedure.