BRING THIS TO YOUR DOCTOR · GREY PEPTIDES

Icotrokinra

Also called: Icotyde; JNJ-77242113; JNJ-2113

What it is

A 13-amino-acid peptide taken as a daily tablet that binds the IL-23 receptor (dissociation constant 7 pM) and blocks IL-23 signalling; FDA-approved March 17, 2026 as Icotyde (Janssen Biotech, NDA 220149) for moderate-to-severe plaque psoriasis in adults and in children 12 and older weighing at least 40 kg; authorised in the EU on September 18, 2026.

Approval status

FDA Approved. FDA: ICOTYDE (icotrokinra) tablets, NDA 220149 (Janssen Biotech), approved March 17, 2026 for moderate-to-severe plaque psoriasis in adults and pediatric patients 12 years and older weighing at least 40 kg who are candidates for systemic therapy or phototherapy (Drugs@FDA; FDA Novel Drug Approvals for 2026). EU: Icotyde authorised September 18, 2026 (EMA register).

Dosing, as printed in the page's Recommended Dosing box

Manufacturer's recommended dosing (FDA label)

From the prescribing information. Other doses studied, if any, are in the full dosing data below.

Protocol and source	Dose	Frequency	Duration	Route
Label: moderate-to-severe plaque psoriasis, adults and children 12+ weighing at least 40 kg **[Approved label]** ICOTYDE (icotrokinra) tablets Prescribing Information, sections 1, 2, 5, 6 and 12 (DailyMed version 2, effective March 17, 2026)	200 mg	Once daily, on waking, 30 minutes before food	Ongoing	Oral

Educational information, not medical advice. Each dose above is tagged with its source: an approved label, a published human study, animal data, or amounts reported by users. None is a recommendation for you. An unapproved compound has no established safe or effective human dose, and products sold for "research use only" are not made or tested for people. Talk to a doctor before acting on anything on this site, including before you start, stop or change any medicine or dose.

Key human evidence

The first 3 of the 10 human studies carded on the page (13 study cards in all):

- **ICONIC-ADVANCE 1 and 2: 1,505 adults** (Human, 2025). Clear or almost clear skin (IGA 0 or 1) at week 16 was reached by 68% and 70% on icotrokinra against 11% and 9% on placebo; PASI 90 by 55% against 4% in the first trial. **PMID 40976249**
- **One-year durability** (Human, 2026). Among those randomised to icotrokinra, about 70% to 75% had clear or almost clear skin and about 50% completely clear skin during weeks 24 to 52; 85% to 90% of week-16 responders maintained their response at week 52. **PMID 42397072**
- **Safety through one year** (Human, 2026). Across 1,840 participant-years, adverse events, serious adverse events, infections and discontinuations through week 16 were comparable to placebo. **PMID 42663861**

Interactions

A PubMed search for interaction studies of this compound with any drug (September 30, 2026, 1 record) found none in people. That is not evidence that it is safe to combine with anything.

Side effects and cautions

Reported side effects	Contraindications and cautions
• Infections — the label advises against starting it during an important active infection • Adverse event rates comparable to placebo through week 16 in the pooled trials • No contraindications listed on the label	• Active, clinically important infection — treat it first • Tuberculosis — consider testing before starting • Live vaccines — avoid during treatment

Five questions to ask

1. Is Icotrokinra right for me, and is the labelled dose on this sheet right for my weight, age, kidney and liver function?
2. Here are the medicines and supplements I take. Do any of them interact with Icotrokinra? This sheet records none published, which does not mean none exist.
3. Which side effects should make me stop and call you, for example infections — the label advises against starting it during an important active infection?
4. Do any of the cautions on this sheet apply to me, such as: Active, clinically important infection — treat it first?
5. What should we check before I start and while I am on it (blood tests, blood pressure, weight), and how often?

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