

# Nemolizumab

Nemolizumab, also known as Nemluvio® is a treatment for moderate to severe atopic eczema (also known as atopic dermatitis) in adults and children aged 12 years and older.

It was approved for use by the NHS in February 2025. Nemolizumab targets specific proteins or receptors in the body that regulate the immune system.

It is given by injection just below the skin using a pre-filled syringe. Nemolizumab works by calming the immune system, dampening down inflammation (red or darker areas of active eczema) and reducing itch.

## How does it work?

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Nemolizumab is a type of biologic drug called a monoclonal antibody. This targets specific proteins or receptors in the body, to regulate the immune response and reduce eczema itch and inflammation. Monoclonal antibody medicines are produced by cloning immune cells to create identical copies of a particular antibody. These work in a similar way to our natural antibodies. Nemolizumab blocks a specific receptor (signal) in the immune system called IL-31, which plays a major role in atopic eczema, as well as a related skin condition called nodular prurigo.

IL-31 causes eczema flares and itching, and can also weaken and disrupt the skin barrier. This means our skin loses moisture faster, and is more susceptible to irritants and allergens that can trigger eczema flares. Nemolizumab blocks IL-31, which helps reduce itching and inflammation, calms the skin and improves skin barrier health.

Nemolizumab can be used along with topical eczema treatments, such as topical steroids and topical calcineurin inhibitors.

## What has the research shown?

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Clinical trials showed Nemolizumab is effective and well tolerated, achieving expected patient outcomes in clearing eczema, reducing itch and enhancing sleep quality. The studies included both adults and children (aged 12 years and over) who had moderate to severe atopic eczema.

The safety profile for Nemolizumab was the same as the placebo (dummy drug used in clinical trials to compare) and there were no significant concerns. Patients taking part in the clinical trials continued using topical steroids or topical calcineurin inhibitors on active areas of eczema as needed.

## Is it available on the NHS?

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Yes. Nemolizumab has been approved by the National Institute for Health and Care Excellence (NICE) for routine use on NHS prescription in England and Wales, and by the Scottish Medicines Consortium for use by the NHS in Scotland.

The healthcare system in Northern Ireland usually implements NICE guidance. Only a dermatologist can start you on this treatment, so you would need to be referred to a dermatologist if you're not already under the care of dermatology team.

## Who is it for?

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Nemolizumab is approved for treating adults and children aged 12 years and over (and body weight of >30kg) with moderate to severe atopic eczema, who are being considered for systemic eczema medication. Systemic medications affect the whole body, rather than being localised to a specific area or organ. The more severe the eczema, the more likely you are to be considered by your doctor for a newer therapy such as Nemolizumab.

To be eligible for Nemolizumab, you will usually need to have tried at least one systemic immunosuppressive medication (azathioprine, ciclosporin, methotrexate or mycophenolate mofetil) or a newer treatment, and for this not to have worked effectively for you. You may also be eligible for Nemolizumab if you are unable to have an immunosuppressive treatment because they are not medically suitable for you.

## How do I go about getting it?

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If you think you might be eligible for Nemolizumab, speak to your dermatologist about the possibility of trying it. If you're not currently under the care of a dermatologist, ask your GP for a dermatology referral.

You will need to see a specialist dermatologist in a hospital to access this treatment.

## How do I take Nemolizumab?

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Nemolizumab is given by injection under the skin, using a pre-filled syringe that delivers one dose. Patients and caregivers can administer Nemolizumab themselves, after receiving appropriate training from a healthcare professional. The medicine should be stored in a refrigerator in its original packaging to protect from light. After removing from the fridge, allow the pre-filled injection syringe to reach room temperature for 45 minutes before injecting. The medicine cannot be refrigerated again once it has reached room temperature.

The dose is reduced to 30 mg after 16 weeks of treatment, and taken every eight weeks. Injections should be given in the front upper thigh or abdomen (tummy) – avoiding 5 cm around the navel. For the initial 60 mg dose, you will need to have two 30 mg injections and these can be given one after another in different injection sites. You should rotate the areas of the body you use for routine injections and do not inject into tender, inflamed, swollen, damaged or bruised skin or into scars or open wounds.

Both adults and children (aged 12 years and older) usually start with an initial dose of 60 mg of Nemolizumab taken every four weeks.

## How long do I take it for?

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Nemolizumab is an ongoing treatment, rather than a treatment used for a fixed period of time. Patients are reviewed by their doctor after 16 weeks of starting treatment, to see how effectively Nemolizumab is working for them. If a patient's eczema has not responded adequately after 16 weeks, then the treatment may be stopped. It may also be stopped if patients' experience side effects or if Nemolizumab stops working well at some time after the initial 16 weeks.

Usually, an alternative treatment will be considered if this happens. Patients should expect to see a significant reduction in their eczema symptoms and an improvement in quality of life after taking Nemolizumab for 16 weeks and ongoing.

## Can people taking Nemolizumab still use emollients and topical steroids?

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Yes, patients being treated with Nemolizumab will be expected to continue using emollients. You will usually be advised by your doctor or nurse to use topical steroids

to manage eczema flare-ups as needed, alongside taking Nemolizumab.

## Can I take it while pregnant or breastfeeding?

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Due to limited research data, Nemolizumab is not recommended if you're planning a baby, pregnant or breastfeeding. It's important to speak to your dermatologist

about your specific situation. Nemolizumab has no effect on female or male fertility.

## What are the risks of nemolizumab?

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Nemolizumab is a biologic medicine, which has fewer side effects and a better safety profile than conventional systemic immunosuppressive drugs (like methotrexate and cyclosporin), which suppress the whole immune system. Biologic drugs target specific parts of the immune system that drive inflammation. Around 50% of people taking Nemolizumab in the clinical trials experienced no side effects.

Common side effects of Nemolizumab include urticaria and headaches (including tension headaches). Rarer side effects include reactions in the skin where the injections are made and sometimes swelling. The frequency of these side effects is similar for both adults and children. Let your doctor or nurse know if you experience any side effects. Do not take if you are allergic to Nemolizumab or any of the other ingredients of this medicine.

## Can I have vaccinations while taking Nemolizumab?

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It's best to discuss vaccination, including any vaccines you may need if you're planning to travel abroad, with your dermatology team.

If possible, have any vaccines you may need for travelling abroad, or that you're due to have, before starting Nemolizumab.

It's recommended that people taking Nemolizumab avoid live vaccines. These include measles, mumps and rubella (MMR), influenza, chickenpox (varicella) and shingles. Patients taking Nemolizumab can have inactivated (non-live) vaccines, but always check with your healthcare professional first.

## Further information

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The patient information leaflet supplied with the Nemolizumab medicine can be viewed here: <https://www.medicines.org.uk/emc/files/pil.100635.pdf>.

This contains detailed information and a pictorial guide showing how to use the pre-filled injection pen.

## Disclaimer

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Our publications contain information and general advice about eczema. They are written and reviewed by dermatology experts, with input from people with eczema.

We hope you find the information helpful, although it should not be relied upon as a substitute for personalised advice from a qualified healthcare professional. While we strive to ensure the information is accurate and up-to-date, Eczema UK does not accept any liability arising from its use.

We welcome reader feedback on our publications, please email us at [info@eczema.org](mailto:info@eczema.org)

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