


Various factors affect the pharmacokinetic of the biotherapies, in particular the heterogeneity of patients, their pathology, the use of other medications, and more importantly ADAb appearance. The presence of ADAb has a direct impact on the treatment efficacy by blocking the action of the drug. Furthermore, ADAb increase the clearance and reduce the drug concentration, leading to loss of clinical efficacy [5,6].

Drug trough levels and ADAb production appear to be two parameters that enable, based on patient’s clinical status, to make rational therapeutic decisions in different clinical situations:

- Predict clinical response [1,7,10,11,12,14,15,16,17,25].
- Guide therapy after a treatment failure [8,14,16].
- Therapeutic switch follow-up [9].
- Prevent postoperative complications [22].
- Guide treatment downscaling for patients in remission [21,24].
- Reduce treatment costs by implementing a rational decision-making patient care management [18,19,20].
- Decrease the risk of allergic reactions during the infusion or other adverse effects.

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