Table S1. List of 76 drugs considered amenable to titration.

Drug Name	Titrated in	Biomarker or	Phase 3	Dosing Information ³
	Labeling	Measure of	Dosing	
		Response ¹	Strategy ²	
Cardiovascular &				
Angiotensin II	Yes	Blood pressure	Response- guided titration	Start GIAPREZA intravenously at 20 nanograms (ng)/kg/min. Titrate as frequently as every 5 minutes by increments of up to 15 ng/kg/min as needed.
Droxidopa	Yes	Symptoms	Response- guided titration	The recommended starting dose of NORTHERA is 100 mg, taken orally three times daily: upon arising in the morning, at midday, and in the late afternoon at least 3 hours prior to bedtime. Titrate to symptomatic response, in increments of 100 mg three times daily every 24 to 48 hours up to a maximum dose of 600 mg three times daily (i.e., a maximum total daily dose of 1,800 mg).
Patiromer sorbite calcium	Yes	Potassium	Response- guided titration	The recommended starting dose of Veltassa is 8.4 grams patiromer once daily. Monitor serum potassium and adjust the dose of Veltassa based on the serum potassium level and the desired target range.
Dermatology & I	Dental Drugs			
Apremilast	No	Psoriasis Area Severity Index (PASI)	Not applicable	The recommended initial dosage titration of OTEZLA from Day 1 to Day 5 is shown in Table 1. Following the 5-day titration, the recommended maintenance dosage is 30 mg twice daily taken orally starting on Day 6. This titration is intended to reduce the gastrointestinal symptoms associated with initial therapy.
Brodalumab	No	PASI	Not applicable	The recommended SILIQ dose is 210 mg administered by subcutaneous injection at Weeks 0, 1, and 2 followed by 210 mg every 2 weeks.
Dupilumab	No	Investigator's Global Assessment (IGA) score, Eczema Area and Severity Index (EASI)	Not applicable	The recommended dose of DUPIXENT for adult patients is an initial dose of 600 mg (two 300 mg injections), followed by 300 mg given every other week.
Guselkumab	No	PASI	Not applicable	The recommended dose is 100 mg at Week 0, Week 4, and every 8 weeks thereafter.

Ixekizumab	No	PASI	Not applicable	TALTZ is administered by subcutaneous injection. The recommended dose is 160 mg (two 80 mg injections) at Week 0, followed by 80 mg at Weeks 2, 4, 6, 8, 10, and 12, then 80 mg every 4 weeks.
Secukinumab	Yes	PASI	Fixed dose	Plaque Psoriasis The recommended dosage is 300 mg by subcutaneous injection at Weeks 0, 1, 2, 3, and 4 followed by 300 mg every 4 weeks. Each 300 mg dosage is given as 2 subcutaneous injections of 150 mg. *For some patients, a dosage of 150 mg may be acceptable.
				Psoriatic Arthritis With a loading dosage is 150 mg at weeks 0, 1, 2, 3, and 4 and every 4 weeks thereafter. Without a loading dosage is 150 mg every 4 weeks. If a patient continues to have active psoriatic arthritis, consider a dosage of 300 mg.
Gastroenterology	and Inborn I	Error Drugs		
Eliglustat	No	Spleen volume, hemoglobin, liver volume	Not applicable	The recommended dosage of CERDELGA is 84 mg twice daily in CYP2D6 extensive metabolizers (EMs) and intermeditate metabolizers (IMs). The recommended dosage in CYP2D6 poor metabolizers (PMs) is 84 mg once daily; appropriate adverse event monitoring is recommended.
Elosulfase alfa	No	6-minute walk test, 3-minute stair climb test, urinary glycosaminoglycans keratan sulfate	Not applicable	The recommended dose is 2 mg per kg given intravenously over a minimum range of 3.5 to 4.5 hours, based on infusion volume, once every week.
Eluxadoline	No	Symptoms	Not applicable	The recommended dosage of VIBERZI is 100 mg taken orally twice daily with food.
Naldemedine	No	Symptoms	Not applicable	The recommended dosage of SYMPROIC is 0.2 mg orally once daily with or without food.
Naloxegol	No	Symptoms	Not applicable	The recommended MOVANTIK dosage is 25 mg once daily in the morning.
Netupitant; palonosetron	No	Symptoms	Not applicable	The recommended dosage in adults is one capsule of AKYNZEO administered approximately 1 hour prior to the start of chemotherapy.
Plecanatide	No	Symptoms	Not applicable	The recommended dosage of TRULANCE is 3 mg taken orally once daily.
Rolapitant	No	Symptoms	Not applicable	The recommended dosage of VARUBI in adults in combination with

				a 5-HT3 receptor antagonist and dexamethasone is180 mg 1-2 hours prior to chemotherapy.
Telotristat	No	Symptoms	Not applicable	The recommended dosage of Xermelo in adult patients is 250 mg three times daily for patients whose diarrhea is inadequately controlled by somatostatin analog (SSA) therapy.
Vedolizumab	No	Crohn's disease activity index (CDAI)	Not applicable	The recommended dosage of ENTYVIO in adults with ulcerative colitis or Crohn's disease is 300 mg administered by intravenous infusion at zero, two and six weeks and then every eight weeks thereafter.
Asfotase alfa	Yes	Phosphorus, respiratory status, growth, radiographic findings	Response-guided titration	The recommended dosage regimen of STRENSIQ for the treatment of perinatal/infantile onset hypophosphatasia (HPP) is 6 mg/kg per week administered subcutaneously as either 2 mg/kg three times per week, or 1 mg/kg six times per week. The dose of STRENSIQ may be increased for lack of efficacy (e.g., no improvement in respiratory status, growth, or radiographic findings) up to 9 mg/kg per week administered subcutaneously as 3 mg/kg three times per week.
Cholic acid	Yes	Alanine aminotransferase (ALT), aspartate aminotransferase (AST), total bilirubin	Response- guided titration	The recommended dosage of CHOLBAM is 10 to 15 mg/kg administered orally once daily, or in two divided doses, in pediatric patients and in adults.
Obeticholic acid	Yes	Alkaline phosphatase and bilirubin	Response- guided titration	The recommended starting dosage of OCALIVA is 5 mg orally once daily. If an adequate reduction in ALP and/or total bilirubin has not been achieved after 3 months of OCALIVA 5 mg once daily, and the patient is tolerating OCALIVA, increase the dosage of OCALIVA to 10 mg once daily.
Sebelipase alfa	Yes	Low-density lipoprotein (LDL) cholesterol, other disease phenotypes	Response- guided titration	The recommended starting dosage is 1 mg/kg administered once weekly as an intravenous infusion. For patients who do not achieve an optimal clinical response, increase to 3 mg/kg once weekly.
Uridine triacetate	Yes	Uric acid	Response- guided titration	The recommended starting dosage of oral XURIDEN is 60 mg/kg once daily. Increase the dosage of XURIDEN to 120 mg/kg (not to exceed 8 grams) once daily for insufficient efficacy.
Hematology				
Emicizumab	No	Bleeding episodes	Not applicable	The recommended dose is 3 mg/kg by subcutaneous injection once

				weekly for the first 4 weeks, followed by 1.5 mg/kg once weekly.
Metabolism & I	Endocrinolog	39		
Alogliptin	No	Hemoglobin A1C (HbA1c)	Not applicable	The recommended dose of NESINA is 25 mg once daily.
Evolocumab	No	LDL Cholesterol	Not applicable	The recommended subcutaneous dosage of REPATHA in adults with established cardiovascular disease or in adults with primary hyperlipidemia (including heterozygous familial hypercholesterolemia [HeFH]) is either 140 mg every 2 weeks OR 420 mg once monthly, based on patient preference for dosing frequency and injection volume. The recommended subcutaneous dosage of REPATHA in patients with homozygous familial hypercholesterolemia [HoFH] is 420 mg once monthly.
Lixisenatide	No	HbA1c	Not applicable	The starting dose of ADLYXIN is 10 mcg subcutaneously once daily for 14 days. Increase the dose to the maintenance dose of 20 mcg once daily starting on Day 15.
Mipomersen	No	LDL cholesterol	Not applicable	The recommended dose of KYNAMRO is 200 milligrams (mg) once weekly as a subcutaneous injection.
Albiglutide	Yes	HbA1c	Forced titration (at a specific time-point)	The recommended dosage of TANZEUM is 30 mg once weekly given as a subcutaneous injection in the abdomen, thigh, or upper arm region. The dosage may be increased to 50 mg once weekly if the glycemic response is inadequate.
Alirocumab	Yes	LDL cholesterol	Response- guided titration	The recommended starting dose of PRALUENT is 75 mg once every 2 weeks administered subcutaneously, since the majority of patients achieve sufficient LDL-C reduction with this dosage. For patients receiving PRALUENT 75 mg every 2 weeks, measure LDL-C levels within 4 to 8 weeks of initiating PRALUENT. If the LDL-C response is inadequate, the dosage may be adjusted to the maximum dosage of 150 mg administered every 2 weeks. Reassess LDL-C within 4 to 8 weeks.
Canagliflozin	Yes	HbA1c	Fixed dose	The recommended starting dose of INVOKANA (canagliflozin) is 100 mg once daily, taken before the first meal of the day. In patients tolerating INVOKANA 100 mg once daily who have an estimated glomerular filtration rate (eGFR) of 60 mL/min/1.73 m2 or greater and require additional glycemic control, the dose can be increased to 300 mg once daily.
Dapagliflozin	Yes	HbA1c	Fixed dose	The recommended starting dose is 5 mg once daily, taken in the

				morning, with or without food. Dose can be increased to 10 mg once daily in patients tolerating FARXIGA who require additional glycemic control.
Deoxycholic acid	Yes	Area measurement	Response- guided titration (dosed based on area of submental fat)	KYBELLA is injected into subcutaneous fat tissue in the submental area using an area-adjusted dose of 2 mg/cm ² . A single treatment consists of up to a maximum of 50 injections, 0.2 mL each (up to a total of 10 mL), spaced 1-cm apart.
Dulaglutide	Yes	HbA1c	Fixed dose	The recommended initiating dose of TRULICITY is 0.75 mg once weekly. The dose may be increased to 1.5 mg once weekly for additional glycemic control.
Empagliflozin	Yes	HbA1c	Fixed dose	The recommended dose of JARDIANCE is 10 mg once daily in the morning, taken with or without food. In patients tolerating JARDIANCE, the dose may be increased to 25 mg.
Ertugliflozin	Yes	HbA1c	Fixed dose	The recommended starting dose of STEGLATRO is 5 mg once daily, taken in the morning, with or without food. In patients tolerating STEGLATRO 5 mg once daily, the dose may be increased to a maximum recommended dose of 15 mg once daily if additional glycemic control is needed.
Etelcalcetide	Yes	Parathyroid hormone, calcium	Response- guided titration	The recommended starting dose of PARSABIV is 5 mg administered by intravenous (IV) bolus injection three times per week at the end of hemodialysis treatment. The maintenance dose of PARSABIV is individualized and determined by titration based on parathyroid hormone (PTH) and corrected serum calcium response.
Insulin degludec	Yes	HbA1c, blood glucose	Response- guided titration	Individualize and titrate the dose of TRESIBA based on the patient's metabolic needs, blood glucose monitoring results, and glycemic control goal.
Metreleptin	Yes	HbA1c, fasting glucose, and triglycerides	Response- guided titration	Based on clinical response (e.g., inadequate metabolic control) or other considerations (e.g., tolerability issues, excessive weight loss [especially in pediatric patients]), MYALEPT dosage may be decreased or increased.
Parathyroid hormone	Yes	Serum calcium	Response- guided titration	The dose of NATPARA should be individualized based on total serum calcium (albumin-corrected) and 24-hour urinary calcium excretion.
Semaglutide	Yes	HbA1c	Fixed dose	Start OZEMPIC with a 0.25 mg subcutaneous injection once weekly for 4 weeks. The 0.25 mg dose is intended for treatment initiation and

N. I.				is not effective for glycemic control. After 4 weeks on the 0.25 mg dose, increase the dosage to 0.5 mg once weekly. If additional glycemic control is needed after at least 4 weeks on the 0.5 mg dose, the dosage may be increased to 1 mg once weekly.
Neurology	T	T	T	I
Daclizumab	No	Magnetic resonance imaging (MRI) and clinical relapse	Not applicable	The recommended dosage of ZINBRYTA is 150 milligrams injected subcutaneously once monthly.
Demethyl fumarate	No	MRI and clinical relapse	Not applicable	The starting dose for TECFIDERA is 120 mg twice a day orally. After 7 days, the dose should be increased to the maintenance dose of 240 mg twice a day orally.
Ocrelizumab	No	MRI and clinical relapse	Not applicable	Initial dose: 300 mg intravenous infusion, followed two weeks later by a second 300 mg intravenous infusion. Subsequent doses: single 600 mg intravenous infusion every 6 months.
Peginterferon beta-1A	No	MRI and clinical relapse	Not applicable	The recommended dosage of PLEGRIDY is 125 micrograms injected subcutaneously every 14 days.
Pimavanserin	No	Scale for the Assessment of Positive Symptoms (SAPS-PD)	Not applicable	The recommended dose of NUPLAZID is 34 mg, taken orally as two 17 mg strength tablets once daily.
Valbenazine	No	Abnormal involuntary movement scale (AIMS) Dyskinesia	Not applicable	The initial dose for INGREZZA is 40 mg once daily. After one week, increase the dose to the recommended dose of 80 mg once daily. Continuation of 40 mg once daily may be considered for some patients.
Brivaracetam	Yes	Seizure frequency	Fixed dose	The recommended starting dosage is 50 mg twice daily (100 mg per day). Based on individual patient tolerability and therapeutic response, the dosage may be adjusted down to 25 mg twice daily (50 mg per day) or up to 100 mg twice daily (200 mg per day).
Deutetrabenazine	Yes	Total chorea score	Response- guided titration	The dose of AUSTEDO is determined individually for each patient based on reduction of chorea and tolerability. When first prescribed to patients who are not being switched from tetrabenazine (a related vesicular monoamine transporter-2 (VMAT2) inhibitor), the recommended starting dose of USTEDO is 6 mg administered orally once daily.
Eslicarbazepine	Yes	Seizure frequency	Fixed dose	Start treatment at 400 mg once daily. After one week, increase dosage to 800 mg once daily, which is the recommended maintenance

				dosage. Some patients may benefit from the maximum recommended maintenance dosage of 1200 mg once daily.
Safinamide	Yes	Symptoms, Uniform Parkinson's Disease Rating Scale	Fixed dose	The recommended starting dosage of XADAGO is 50 mg administered orally once daily (at the same time of day), without regard to meals. After two weeks, the dosage may be increased to 100 mg once daily, based on individual need and tolerability.
Ophthalmology .	Drugs			
Latanoprostene	No	Intraocular pressure	Not applicable	The recommended dosage is one drop in the conjunctival sac of the affected eye(s) once daily in the evening.
Lifitegrast	No	Symptoms	Not applicable	Instill one drop of Xiidra twice daily (approximately 12 hours apart) into each eye using a single-use container.
Netarsudil	No	Intraocular pressure	Not applicable	The recommended dosage is one drop in the affected eye(s) once daily in the evening.
Psychiatry Drug	?S			
Tasimelteon	No	Sleep	Not applicable	The recommended dosage of HETLIOZ is 20 mg per day taken before bedtime.
Vortioxetine	No	Hamilton Depression Scale	Not applicable	The recommended starting dose is 10 mg administered orally once daily without regard to meals. Dosage should then be increased to 20 mg/day, as tolerated, because higher doses demonstrated better treatment effects in trials conducted in the United States.
Aripiprazole lauroxil	Yes	Positive and negative syndrome scale (PANSS)	Fixed dose	Depending on individual patient's needs, treatment with ARISTADA can be initiated at a dose of 441 mg, 662 mg or 882 mg administered monthly, 882 mg administered every 6 weeks or 1064 mg administered every 2 months. Dose may be adjusted as needed.
Brexpiprazole	Yes	Hamilton Depression Scale	Fixed dose	The recommended starting dosage for REXULTI is 1 mg once daily on Days 1 to 4, taken orally with or without food. The recommended target REXULTI dosage is 2 mg to 4 mg once daily. Titrate to 2 mg once daily on Day 5 through Day 7, then to 4 mg on Day 8 based on the patient's clinical response and tolerability.
Cariprazine	Yes	PANSS	Response- guided titration	The recommended dose range is 1.5 mg to 6 mg once daily. The starting dose of VRAYLAR is 1.5 mg. The dosage can be increased to 3 mg on Day 2. Depending upon clinical response and tolerability, further dose adjustments can be made in 1.5 mg or 3 mg increments.
Suvorexant	Yes	Sleep	Fixed dose	The recommended dose for BELSOMRA is 10 mg, taken no more than once per night and within 30 minutes of going to bed, with at least 7 hours remaining before the planned time of awakening. If the

				10 mg dose is well-tolerated but not effective, the dose can be increased. The maximum recommended dose of BELSOMRA is 20
				mg once daily.
Pulmonary, Alle	rgy & Rheum	atology Drugs		
Benralizumab	No	FEV1, exacerbations	Not applicable	The recommended dose of FASENRA is 30 mg administered once every 4 weeks for the first 3 doses, and then once every 8 weeks thereafter by subcutaneous injection into the upper arm, thigh, or abdomen.
Fluticasone; vilanterol	No	FEV1	Not applicable	BREO ELLIPTA should be administered as 1 inhalation once daily by the orally inhaled route only.
Ivacaftor; lumacaftor	No	FEV1	Not applicable	Total Daily Dose 6 through 11 years: Take two lumacaftor 100 mg/ivacaftor 125 mg tablets every 12 hours with fat-containing food. 12 years and older: Take two lumacaftor 200 mg/ivacaftor 125 mg tablets every 12 hours with fat-containing food.
Lesinurad	No	Uric acid	Not applicable	ZURAMPIC is recommended at 200 mg once daily.
Mepolizumab	No	FEV1, exacerbations	Not applicable	The recommended dosage of NUCALA is 100 mg administered once every 4 weeks by SC injection into the upper arm, thigh, or abdomen.
Nintedanib	No	Forced vital capacity (FVC)	Not applicable	The recommended dosage of OFEV is 150 mg twice daily administered approximately 12 hours apart.
Olodaterol	No	FEV1	Not applicable	The recommended dose of STRIVERDI RESPIMAT is two inhalations once-daily at the same time of the day.
Pirfenidone	No	FVC	Not applicable	The recommended daily maintenance dosage of ESBRIET is 801 mg three times daily for a total of 2403 mg/day.
Reslizumab	No	FEV1, exacerbations	Not applicable	The recommended dosage regimen is 3 mg/kg once every 4 weeks administered by intravenous infusion over 20-50 minutes
Sarilumab	No	Disease activity score 28 (DAS28)	Not applicable	The recommended dosage of KEVZARA is 200 mg once every two weeks given as a subcutaneous injection.
Umeclidinium; vilanterol	No	Forced expiratory volume in 1 second (FEV1)	Not applicable	ANORO ELLIPTA (umeclidinium/vilanterol 62.5 mcg/25 mcg) should be administered as 1 inhalation once daily by the orally inhaled route only.
Reproductive &	Urology Drug	gs		
Abaloparatide	No	Bone mineral density (BMD)	Not applicable	The recommended dosage of TYMLOS is 80 mcg subcutaneously once daily.
Conjugtated estrogens and	No	Vasomotor symptoms, BMD	Not applicable	The recommended dosage is one DUAVEE tablet daily.

bazedoxifene				
Flibanserin	No	Symptoms	Not applicable	The recommended dosage of ADDYI is 100 mg administered orally once per day at bedtime.
Ospemifene	No	Symptoms	Not applicable	Take one 60 mg tablet with food once daily.

¹Biomarker or measure of response that could be evaluated clinically. Note that a biomarker or measure of response did not need to be a standard measure used in the routine clinical care of patients, but could be any assessment that could feasibly be measured in the clinical setting to assess response to an intervention. "Symptoms" was used for any therapeutic product indicated for the treatment of symptomatic conditions (e.g., nausea).

²Describes the dosing strategy used in phase 3 clinical trial(s). If response-guided titration was used in one or more phase 3 clinical trials the program was categorized as evaluating response-guided titration, even if it was not evaluated in all phase 3 trials. This column was considered not applicable for programs that do not have response-guided titration information in labeling.

³A brief summary of the dosing information in labeling is provided. The text provided does not include all dosing information in the drug labeling. Drugs may have different dosing instructions for different indications or also describe dose adjustments in response to adverse events that are not included here.

⁴Therapeutic areas correspond to FDA review divisions that initially approved the new molecular entity. The therapeutic product may be approved for additional indications in other therapeutic areas.