Association of several variables with pain reduction was checked through median regression models.

**Results** Injection pain reduction (VASPOST–VASPRE) was statistically significant for all pathologies (p<0.001).

Statistically significant differences observed for:

- VASPRE: RA vs psoriasis (p=0.0403): IBD vs psoriasis (p=0.0207).
- Injection pain reduction (VASPOST–VASPRE): IBD vs psoriasis (p=0.0117).

For IBD, antidepressants treatment (four patients, 10.81% of IBD cases) was the variable associated with the pain injection reduction (MD = -4.0; 95% CI: -7.26 to -0.74; p=0.018). No variables were identified for the other pathologies.

**Conclusion**

- Most patients reported better tolerance to the new formulation of adalimumab, independently of the pathology.
- Pain with the ancient formulation was higher in IBD and RA than in psoriasis patients, and pain reduction was higher in IBD than in psoriasis ones.
- In IBD patients, those receiving antidepressant had a lower perception of pain maybe due to the analgesic action of these drugs.
- It would be interesting to consider these pain reduction results when developing biosimilar adalimumab formulations.

**REFERENCES AND/OR ACKNOWLEDGEMENTS**

None.

No conflict of interest.