

Biologic medications for dermatological conditions

Dermatology Resource Unit, Christchurch Hospital

Advice Line telephone number: **0300 019 5476** available Mon-Fri 9-5pm

This leaflet explains how biologic medication works, the treatment regime of biologics and the potential associated side effects of using biologic medications.

You will be given this leaflet if you are about to start or switch biologic medication or as an update if you are currently on biologic medication.

We currently have eight different biologic medications plus two biosimilar medications. Your medical team will choose which are best for you according to diagnosis, your individual requirements, other medical problems and the National Institute of Clinical Excellence (NICE) guidelines. These drugs can work extremely well in about eight out of ten patients.

What is a biologic medicine?

Biologic medicine or biologics, are an injectable medication. They are proteins that are made by or extracted from living cells like plant, fungal, or animal cells. Biologics are complex large molecules they target specific parts of the immune system and block the action of particular cells.

What is a biosimilar medicine?

Biosimilar medicine are also derived from living cells, and compared with chemically produced medicines, are very large molecules. A biosimilar medication is highly similar to biologic medicines that are already marketed in the European Union (EU) and are of the same quality, safety and efficacy of biologic medication. Biosimilar medication gives greater access to important treatments for patients living with chronic conditions and provides increased value for the National Health Service (NHS).

Biologic medication treatment regimes

Humira (Adalimumab) biosimilar name - Imraldi

Humira/Imraldi is used in dermatology to treat plaque psoriasis. It is given by subcutaneous (a very short needle, which goes just under the skin) injection. The dose is initially 80 mg, then 40 mg every two weeks, to be started one week after initial dose. Humira/Imraldi comes as a disposable pen or a prefilled syringe.

Enbrel (Etanercept) biosimilar name - Beneparli

Enbrel/Beneparli is used in dermatology to treat moderate-to-severe plaque psoriasis, and can also be used to treat arthritis, combined these conditions are known as psoriatic arthritis.

It is given by subcutaneous (a very short needle, which goes just under the skin) injection. The dose is 50mg once weekly. It comes as a prefilled syringe or as a pen.

Cosentyx (Secukinumab)

Cosentyx is used in dermatology to treat plaque psoriasis and can also be used to treat arthritis, combined these conditions are known as psoriatic arthritis. It is given by subcutaneous (a very short needle, which goes just under the skin) injection. The dose is weekly 300mg from 0-4 weeks (five weeks in total) then monthly thereafter. It comes as a disposable pen or a prefilled syringe.

Taltz (Ixekizumab)

Taltz is used in dermatology to treat moderate-to-severe plaque psoriasis, and can also be used to treat arthritis, combined these conditions are known as psoriatic arthritis. Taltz is given by subcutaneous (a very short needle, which goes just under the skin) injection. It comes as a prefilled syringe or as a pen. The dose is initially 160 mg for one dose, followed by 80 mg after two weeks, then 80 mg every two weeks for a further five doses (at weeks four, six, eight, ten and twelve), then maintenance 80 mg every four weeks.

Kyntheum (Brodalumab)

Kyntheum is used in dermatology to treat moderate-to-severe plaque psoriasis, and can also be used to treat arthritis, combined these conditions are known as psoriatic arthritis. Kyntheum is given by subcutaneous (a very short needle, which goes just under the skin) injection. The dosing is 210 mg every week for three doses, followed by 210 mg every two weeks. It comes as a prefilled syringe only.

Stelara (Ustekinumab)

Stelara is used in dermatology to treat moderate-to-severe plaque psoriasis, and can also be used to treat arthritis, combined these conditions are known as psoriatic arthritis. Stelara is given by subcutaneous (a very short needle, which goes just under the skin) injection.

The dosing is initially 45 mg, then 45 mg after four weeks, then 45 mg every twelve weeks (body-weight up to 100 kg). With a body weight over 100kg, it is the same regime but 90mg dose may be prescribed. It comes as a prefilled syringe only.

Tremfya (Guselkumab)

Tremfya is used in dermatology to treat moderate-to-severe plaque psoriasis. Tremfya is given by subcutaneous (a very short needle, which goes just under the skin) injection. The dosing is initially 100 mg, then 100 mg after four weeks, then maintenance of 100 mg every eight weeks. It comes as a prefilled syringe or as a pen.

Dupixent (Dupilumab)

Dupixent is used to treat atopic dermatitis and asthma. Dupixent is given by subcutaneous (a very short needle, which goes just under the skin) injection. The dose is initially 600 mg, followed by 300 mg every two weeks, the initial dose should be administered as two consecutive 300 mg injections at different injection sites. It comes as a prefilled syringe or as a pen.

Side effects and complications - what should I look out for?

Infections

The main complication with biologic medication is the increased infection risk. This risk is increased for both trivial and serious infections. They also have a masking effect similar to steroids which means you may not notice an infection is present until later than normal. Please contact our helpline if you think you may have an infection. We will advise you to continue, with your injections, see your GP or hold off your injection until you are well again. If in doubt please visit your GP.

Signs of an infection may be:

- 'Flu like' feelings, going hot and then cold shivers.
- cough with or without sputum.
- sore throat.
- burning or stinging when you pass urine.
- diarrhoea / vomiting.
- a cut in the skin or inflamed skin

Lung Problems

Extremely rarely biologic medication can cause complications in the lungs such as alveolitis. This may also be due to the other medication we use alongside the biologics, such as methotrexate. If you get any shortness of breath which does not clear with antibiotics or other conventional treatment, please phone the helpline and let us know. We may organise a scan to check on your lungs.

Blood problems

Occasionally neutrophil and platelet counts will drop while you are taking biologics. If your neutrophil count drops you will be more susceptible to infection. If your platelet count drops then you are more likely to bruise. If you are having regular blood tests these 'dips' will be picked up quickly and you will be phoned to either stop or delay your next injection. The practitioner who phones will want to know whether you are well and if you have started any other medication. You may be asked to have a blood test more frequently until counts have stabilised.

Skin cancer

There is a slightly increased risk of non-melanoma skin cancers, such as basal cell carcinomas and squamous cell carcinomas with immunosuppressive treatment including biologics. This does not include malignant melanoma (spreading skin cancers). We ask that you are sensible in the sun, take precautions not to burn and keep a regular check of your skin. If you have any skin changes such as bleeding or changing moles please see your GP.

Tuberculosis (TB)

There is a very slight risk of reactivating tuberculosis. You will have been screened prior to starting your new treatment. Please inform us promptly via the advice line if you have any of the following symptoms within three months of starting treatment:

- productive cough
- night sweats
- weight loss
- anorexia

Demyelination (relating to Humeria/Imraldi and Enbrell/Beneparli only)

Demyelination is a very rare adverse event of biologic/biosimilar medication. Myelin is the sheath that surrounds nerves. Nerves control everything that we do and symptoms can be numerous and non specific. They may include; numbness, tingling, muscle weakness, visual problems, and continence problems. If you have any symptoms that are continuous or worsening, please contact us via the advice line.

Inflammatory Bowel Disease (relating to Cosentyx only)

Occasionally new cases of inflammatory bowel disease or “flare-ups” can happen with Cosentyx, and can sometimes be serious. Please tell your dermatologist if you have inflammatory bowel disease including ulcerative colitis or Crohn’s disease or if you have worsening disease symptoms during treatment with Cosentyx or develop new symptoms of stomach pain or diarrhoea.

Food and infections

When on biologic/biosimilar medication you may be more susceptible to food-borne infections such as salmonella and listeria, which may result in food poisoning and other serious illnesses. You can minimise this risk by avoiding foods such as:

- raw eggs or products made from raw eggs (such as mayonnaise, although many commercially available products are safe)
- unpasteurised milk
- mould-ripened soft cheeses (e.g. brie and camembert) and blue cheeses (whether pasteurised or unpasteurised), feta and goat’s cheese
- undercooked meat and poultry
- all types of pâté

You should also wash all raw fruit and vegetables and ensure that chilled ready meals are thoroughly cooked before eating. For further advice see the Food Standards Agency website: <https://www.food.gov.uk/food-safety>

Helpful Information

Delivery

The medication needs to be stored in the refrigerator (2-8 degrees C). The company will contact you to organise your first delivery. They will also provide you with a sharps bin. When this is full please exchange for an empty one with the delivery driver. They will also organise for a nurse to come and assist you with your first injection. If you have missed a few injections for whatever reason, please do not ‘stock up’ at home. If you cancel a delivery, they will still be able to deliver at a later date, or the next expected date. If you are unsure or have been put on hold and are ready to restart, please contact us via the Advice Line.

Prescriptions

Prescriptions for your biologic/biosimilar medication come from your dermatology consultant, not your GP. It is important if you are asked to give a copy of your prescription list that you remember to add on your biologic/biosimilar medication. It is important that you let your GP know if you see a locum or a GP you do not normally see. An alert card may be provided within your biologic/biosimilar information packs, this can be shown at these appointments.

Vaccines

We recommend that you keep up to date with your flu and pneumonia vaccines. You should not receive a live vaccine such as Measles, Mumps and Rubella (MMR) or yellow fever (this may stop you travelling to Kenya unless you have been previously vaccinated in the previous ten years).

Blood tests

Please have a blood test four-six weeks into treatment or as directed by your practitioner. The frequency of blood tests will depend upon other medical conditions and medications that you are taking. Once we are happy that you are stable on your biologic/biosimilar medication we may reduce your blood tests to every three-six months. Unless you have had a blood test we are unable to reprint your prescription which is done every three or six months. This may delay your deliveries, so is important that these are kept up to date.

Stopping treatment prior to surgery

It is important to stop your biologic/biosimilar medication prior to surgery if it is possible. Your surgeon/dentist should be able to advise you on this further

If surgery is in an emergency situation, these plans will not be possible. It is important to let your surgeon know that you are taking this medication.

Injection technique

When using any of the injection devices or prefilled syringes there are a few simple points to remember:

- wash your hands prior to starting
- check the expiry date
- do not use if you have an infection or are unwell
- if using the alcohol wipe it is extremely important to allow the skin to dry before proceeding with the injection.
- although a slight angle can be appropriate, 90 degrees is preferable

Travelling with medication

If you are planning on travelling, your homecare provider will provide you with a small sharps bin. Your drug should be carried in your hand luggage in a cool pack and put into a fridge as soon as possible.

Pregnancy

Pregnancy should be avoided while on biologic medication and if you are male or female and planning to have children, please discuss this with your dermatologist.

We plan to review you twelve weeks after you have started biologic/biosimilar medication to assess your response. An appointment will be sent out in the post. If you have not heard from us please let us know.

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