

# Biologic Treatment: Starting a new treatment

Rheumatology

## Introduction

This leaflet is for people who have been offered a new or alternative biologic drug to treat either Rheumatoid Arthritis (RA) or Psoriatic Arthritis (PSA). It provides information regarding what these treatments are, the pre-treatment screening tests required and how these are prescribed and accessed.

## What are biologic treatments?

Over the last 20 years, there have been significant improvements in the treatment of inflammatory conditions such as Rheumatoid Arthritis (RA) and Psoriatic Arthritis (PSA).

The greatest step forward has been the development and introduction of biologic drug treatments. These medications act on specific parts of the immune system that cause and drive the inflammation leading to joint swelling and pain (and other symptoms of these conditions i.e. fatigue). They are powerful and specific therapies and have changed the lives of millions of people with these conditions around the world.

There are several different types of biologic drugs that have been approved for use in people with these rheumatology conditions in the UK. All the following biologic drugs affect proteins or chemical molecules in the immune system that are involved in inflammation:

- Anti-tnf therapies – adalimumab, etanercept, golimumab, certolizumab pegol and infliximab (RA and PSA)
- Anti IL-6 therapy (RA only)
- Rituximab (RA only)
- Abatacept (RA only)
- JAK inhibitors (RA + PSA)
- Ustekinumab (PSA only)
- Anti IL-17 therapy (PSA only) – cosentyx and ixekizumab

We will provide additional information specific to the individual treatment we are prescribing.

These drugs are usually given by injection or by an infusion (drip) into your arm.

(For Note: except JAK inhibitors which are oral medications).

**The prevention of infection is a major priority in all healthcare and everyone has a part to play.**

- Please decontaminate your hands frequently for 20 seconds using soap and water or alcohol gel if available
- If you have symptoms of diarrhoea and/or vomiting, cough or other respiratory symptoms, a temperature or any loss of taste or smell please do not visit the hospital or any other care facility and seek advice from 111
- Keep the environment clean and tidy
- Let's work together to keep infections out of our hospitals and care homes.

These drug treatments can be very effective but there are some differences in the way they work and the side-effect profile. This may make one more suitable for specific conditions or individual patients.

## Side Effects

All drug treatments come with the risk of side-effects and these have been monitored via international registries for many years. The greatest risk is an increase in the incidence of infections.

For this reason, before starting any of these treatments, you will be required to complete screening tests. An education session is arranged to discuss your new treatment in more detail.

## Why do I need biologic therapy?

When standard Rheumatology therapy (DMARDs i.e. methotrexate, sulphasalazine, hydroxychloroquine) has not effectively been tolerated or stabilised your arthritis, your Rheumatology team think that one of these biologic therapies may be more suitable and effective.

## What screening tests are required?

In order to be eligible for treatment, in line with current, national guidance (NICE Guidelines) we have to complete standardised joint assessments to provide evidence of ongoing and active arthritis as follows:

- DAS 28 (Disease Activity Score) joint assessment for Rheumatoid Arthritis
- PsArc (Psoriatic Arthritis Activity Score) joint assessment for Psoriatic Arthritis

These are performed by your Rheumatology clinicians. For your safety, a Chest X-Ray and blood tests to include TB (Tuberculosis) and Hepatitis screening are also requested pre-treatment. The results may require further investigation prior to starting treatment but this will be discussed on an individual basis as and if required.

## What happens next?

The biologic team will review the application made following your last clinic visit and all the screening tests and discuss any other medical considerations (for example any other illnesses you may have).

If these are all satisfactory we will then contact you (please ensure we have an updated contact number/s for you to avoid further delay) and arrange a nurse education session.

You will have an opportunity to ask any questions. We will then arrange for the delivery of your new medication. We use various homecare companies and they will directly contact you to arrange a delivery date and time that suits you. (Please note that biologic injections will need to be placed directly in the fridge on delivery). They will also organise a nurse visit to ensure competency in administration of your new medication.

Alternatively, if your treatment is to be administered as an infusion (drip) we will organise for you to attend our Rheumatology Day Unit.

## Research & Development

One of the reasons we are able to prescribe these treatments is because patients in the past have contributed to research studies and national registers. For this reason we may invite you to help us with on-going research projects.

## Follow-up arrangements

Your Rheumatology team will monitor you closely and review you after 3 months of starting new biologic therapy. However, if you experience any problems before this review, please contact the Rheumatology Helpline on 01902 695491 (between 9.00am – 12.00pm).

**This is not an emergency service.**

**Further information regarding biologic therapies is available from the following:**

**National Rheumatoid Arthritis Society**

[www.nras.org/data/files/Publications/Biologics.pdf](http://www.nras.org/data/files/Publications/Biologics.pdf)

**Arthritis Research UK**

<http://www.arthritisresearchuk.org>

**NHS Choices**

<http://www.nhs.uk/Conditions/Rheumatoid-arthritis/Pages/Treatment.aspx>

## English

If you need information in another way like easy read or a different language please let us know.

If you need an interpreter or assistance please let us know.

## Lithuanian

Jeigu norėtumėte, kad informacija jums būtų pateikta kitu būdu, pavyzdžiui, supaprastinta forma ar kita kalba, prašome mums apie tai pranešti.

Jeigu jums reikia vertėjo ar kitos pagalbos, prašome mums apie tai pranešti.

## Polish

Jeżeli chcieliby Państwo otrzymać te informacje w innej postaci, na przykład w wersji łatwej do czytania lub w innym języku, prosimy powiedzieć nam o tym.

Prosimy poinformować nas również, jeżeli potrzebowaliby Państwo usługi tłumaczenia ustnego lub innej pomocy.

## Punjabi

ਜੇ ਤੁਹਾਨੂੰ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਰੂਪ ਵਿਚ, ਜਿਵੇਂ ਪੜ੍ਹਨ ਵਿਚ ਆਸਾਨ ਰੂਪ ਜਾਂ ਕਿਸੇ ਦੂਜੀ ਭਾਸ਼ਾ ਵਿਚ, ਚਾਹੀਦੀ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

ਜੇ ਤੁਹਾਨੂੰ ਦੁਭਾਸ਼ੀਏ ਦੀ ਜਾਂ ਸਹਾਇਤਾ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

## Romanian

Dacă aveți nevoie de informații în alt format, ca de exemplu caractere ușor de citit sau altă limbă, vă rugăm să ne informați.

Dacă aveți nevoie de un interpret sau de asistență, vă rugăm să ne informați.

## Traditional Chinese

如果您需要以其他方式了解信息，如易读或其他语种，请告诉我们。

如果您需要口译人员或帮助，请告诉我们。