

Infliximab

Patient information

What is Infliximab?

Infliximab belongs to a group of medicines called biologic disease modifying anti-rheumatic drugs (biological DMARDs).

Infliximab targets an inflammatory protein in the body called the TNF- alpha (tumour necrosis factor alpha). Your body produces TNF- alpha to help fight infections. In patients with uveitis and arthritis, too much TNF- alpha is made which increases inflammation and can damage your joints and/or eyes. Infliximab 'turns off' TNF-alpha, and therefore reduces this inflammation and damage.

Why is Infliximab being prescribed for my child?

Infliximab is used to reduce inflammation and associated pain and/or damage in conditions like Juvenile Idiopathic arthritis (JIA) and uveitis. It may be prescribed when other medicines have not worked or have started to cause side effects.

How do I use Infliximab?

Infliximab needs to be given in hospital by intravenous infusion (through a drip into your vein). This is usually done as a day admission and takes about 4-5 hours.

What checks are needed while taking Infliximab?

Before starting on Infliximab your child should have a blood test to screen for any existing serious infections. They should also have a chest x-ray to check for tuberculosis. Regular blood tests are needed while on Infliximab.

How long does it take for Infliximab to work?

This can vary between patients but improvement is usually seen in 2-12 weeks.

Are there any side effects?

As with all medicines, Infliximab can have side effects. These should be discussed with you in more detail before starting to allow you to consider the benefits and risks.

The more common side effects are respiratory infections (that may include sinus infections and sore throat), headache, rash, coughing and stomach pain. These are generally mild. Please notify your doctor if they become a problem.

Rare side effects include:

- Increased risk of serious infection: see below for more information
- As with all medications, there is a risk of allergic reaction (fever, chills, chest pain, shortness of breath and/or change in blood pressure): every infusion your child will be given medicines to help prevent this
- Heartburn, diarrhoea, constipation, inflammation of the liver, gallbladder, pancreas and stomach.
- When receiving infliximab there may be a small risk of developing tumours, such as lymphomas in later life.

What should I do about the increased infection risk?

Infliximab reduces the body's defence against infections, so your child may be at increased risk for serious infections, although this is rare. Extra attention to basic hygiene and avoiding contact with contagious illnesses are advised. It is a good idea to speak to your child's pre-school or school and ask them to notify you of any contagious illnesses that may occur.

Chicken Pox, measles and Tuberculosis are of serious concern for children taking Infliximab. Please notify your doctor as soon as possible if your child has come into contact with these conditions.

Can I have vaccinations while on Infliximab?

Infliximab may reduce the ability of your child's immune system to respond to vaccines, so 'live' vaccines such as MMR (Measles, Mumps and Rubella), oral Polio, and Varicella (Chickenpox) should not be given while on Infliximab or for 6 months afterward. Close family members can have these vaccines as normal, and we recommend this to give added protection to your child.

Yearly flu vaccines, and other vaccines such as Tdap (tetanus, diphtheria and pertussis), IPV (inactivated polio vaccine) and HPV (human papilloma virus) are safe and we recommend having these.

What other precautions are necessary?

- Regular blood tests are needed to pick up side effects early.
- Do not take any other medications without informing your doctor. This includes over the counter and herbal medicines.
- Although unlikely in our patient group, your child should not become pregnant while on treatment with infliximab and for six months after the last dose.

Please contact your doctor or nurse for advice if:

- Your child has contact with chickenpox or shingles—please notify immediately as your child may need treatment as soon as possible
- Is unwell and/or has a high fever and you don't know why
- If your teenager may be pregnant

How long will I need to take infliximab for?

This varies for each child and is difficult to predict. If Infliximab is effective, we would expect your child to need it for a minimum of 6 months. Your Rheumatology doctor will see you regularly while you are on Infliximab and discuss whether your child needs to continue taking it.

Do I have to start the infliximab medication?

Your doctor has recommended Infliximab because there is a good chance of it treating your child's arthritis or uveitis. As with any treatment you can choose not to have the medicine. If you decide to stop Infliximab after starting it is important that you tell your doctor. Stopping or giving Infliximab at intervals longer than recommended may mean that it is less effective. Read the information provided and discuss any questions or concerns you have with your healthcare team.

Please note that this information sheet does not list all the uses and side effects associated with this drug. For full details please see the drug information available at:

<http://medsafe.govt.nz/profs/Datasheet/r/Remicadeinj.pdf>

If you have any further questions, please contact your paediatric rheumatology team.

Last updated February 2016. Authors JYan, ROlding, AMacleod-Smith