



Patient & Family Guide  
2016

# Adalimumab (Humira<sup>®</sup>) Therapy



[www.nshealth.ca](http://www.nshealth.ca)

# Adalimumab (Humira®) Therapy

Your healthcare provider feels that treatment with adalimumab may be helpful in managing your inflammatory bowel disease (IBD). The brand name for adalimumab is Humira®.

This pamphlet gives information about adalimumab, to help you choose whether or not you want to use this treatment.

This pamphlet will give you some basic information. It does not take the place of any information or instructions that your healthcare provider or pharmacist gives you.

**If you have any questions, please ask.**

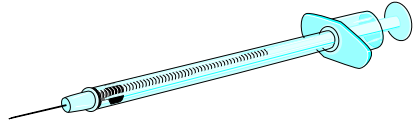
**We are here to help you.**

## What is adalimumab?

- One part of the immune system is called “tumour necrosis factor” (TNF). TNF is involved in chronic inflammation (swelling), which is a major factor in causing your IBD symptoms.
- Adalimumab is an anti-TNF drug which suppresses (slows down) the immune system, lessens the inflammation in your bowel, and improves your symptoms.
- IBD is known for inflammation and ulceration (pus formation) of the bowel. In IBD, your immune system cannot tell the difference between foreign (from outside your body) substances and your body’s own tissues. This causes inflammation of the bowel and many of the other symptoms you may have (like diarrhea or pain).
- IBD is usually treated with medications to lower inflammation and/or infection. It can also be treated with medications which suppress the immune system.

## How do I use adalimumab?

- Adalimumab is given by subcutaneous (under the skin) injection, usually in the front of the thigh or abdomen (belly). It cannot be taken by mouth because your digestive system would destroy the drug.
- Your healthcare provider will help you inject your first dose.
- **Do not try to inject this medication on your own until you completely understand how to do it.**
- Injection instructions are in the medication guide that comes with your adalimumab.



This pamphlet is just a guide. If you have questions, please talk to your healthcare provider. We are here to help you.

## Precautions before you start adalimumab

Before starting adalimumab treatment, precautions can be taken to lower risks. Taking these precautions often results in successful treatment with very few downsides.

- You will have some routine blood tests, a tuberculosis (TB) skin test, and a chest X-ray.
- Your healthcare provider may want you to get your immunizations (shots) updated for tetanus, varicella (chickenpox), and pneumonia.
- Be sure to tell your healthcare provider about any other health problems you have because they may get worse when using adalimumab. This includes any allergies, chronic (long-term) or recurrent infections, blood conditions, history of or exposure to TB, chronic obstructive pulmonary disease (COPD), active cancer or a history of cancer, or diabetes.
- Because of increased infection risk, avoid live vaccines (vaccines that have a weakened form of a virus in them) while being treated with adalimumab. If you are due for vaccinations or plan to be vaccinated, tell your healthcare provider.

- Do not start any new drug treatments. Interactions between drugs may increase the risk of serious side effects. Ask your healthcare provider about possible complications before starting a new drug.
- Have regular blood testing and regular check-ups with your healthcare provider.
- **It is also important to tell your healthcare provider if you are, or plan on getting pregnant.** Tests have shown no harmful effects during pregnancy while taking adalimumab. Your last dose is usually planned early in your 3rd trimester of pregnancy. Adalimumab is started again shortly after you give birth. As it is a large molecule, it does not pass into your breast milk, so you can safely breastfeed your baby.

**In the 1st year after birth, your baby should not get any live vaccines. It is very important to talk about this with your healthcare provider.**

A very small number of cases of lymphomas and other cancers have been reported, including a fatal cancer called hepatosplenic T-cell lymphoma.

## **What are the possible side effects of adalimumab?**

Like any medication, adalimumab has some possible side effects, such as:

- Redness at the injection site
- Rash
- Swelling
- Itching
- Bruising
- Sinus infections
- Headaches
- Nausea (feeling sick to your stomach)

## **Tell your healthcare provider about any of these side effects:**

- Stomach (belly) fullness
- Body and/or muscle aches or pains
- Cough or hoarseness
- Ear and/or nasal congestion (stuffy nose)
- Light-headedness
- Fast, shallow breathing
- Chills
- Fever
- Weight loss
- Loss of body fat and/or muscle

**Tell your healthcare provider right away if you have any of these symptoms related to congestive heart failure:**

- Shortness of breath
- Sudden weight gain
- Swelling of the face, fingers, feet, or lower legs

**Very serious life-threatening allergic reactions such as anaphylaxis (a sudden and severe allergic reaction where you stop breathing) may also happen. If you have a severe allergic reaction, go to the closest Emergency Department.**

**Call 911 or go to the closest Emergency Department if you have any of these symptoms that come on all of a sudden:**

- Rash
  - Itching
  - Trouble breathing
  - Chest pain
  - Swelling in your face, throat, legs, or feet
- Side effects can usually be helped with medication. However, if they cannot be taken care of, or if the symptoms get worse, you may have to stop taking adalimumab.



## Higher risk of infection

- Anti-TNF drugs such as adalimumab work by stopping the immune responses which cause your IBD symptoms, but they also lessen other immune responses. This means you may have a higher risk of infection.

**There is a very small chance of getting a life-threatening infection which may cause death.**

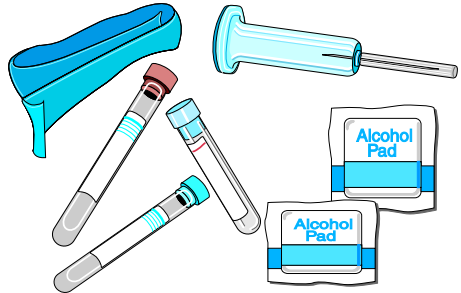
- **Some patients on adalimumab have had problems ranging from the common cold to more serious and potentially life-threatening infections like:**
  - › Pneumonia
  - › TB
  - › Other bacterial, fungal, and viral infections throughout the body
- If you get an infection while on adalimumab, you will be checked closely and treated if needed. If the infection becomes serious, treatment may be stopped.

# Systemic lupus erythematosus (SLE)

Some patients treated with adalimumab have had abnormal blood test results where auto-antibodies (antibodies directed against your own body) were found.

This is called systemic lupus erythematosus (SLE) and it is caused

by taking adalimumab. In these patients, as soon as they stopped taking adalimumab, their blood tests went back to normal.



- **Tell your healthcare provider if you have any of these symptoms of SLE:**
  - › Chest discomfort or pain
  - › Shortness of breath
  - › Joint pain
  - › Rash on cheeks or arms that gets worse after being in the sun

# Talk with your healthcare provider

- If you notice any serious side effects, or side effects that do not go away, it is important to tell your healthcare provider so changes can be made.
- Usually symptoms of side effects can be taken care of with other medications, but you may have to lower your adalimumab dose (the amount you take) or stop your treatment.
- Talking with your healthcare provider when you notice any changes in side effects will help you pick the treatment which will work best for you.

## Looking for more health information?

This pamphlet and all our active patient pamphlets are searchable here:

<http://bit.ly/NSHApamphlets>

Contact your local public library for books, videos, magazines, and other resources.

For more information go to <http://library.novascotia.ca>

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**Nova Scotia Health Authority**

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The information is not intended to be and does not constitute healthcare or medical advice.

If you have any questions, please ask your healthcare provider.

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The information in this pamphlet is to be updated every 3 years or as needed.