



Starting treatment with Adalimumab

Patient Information

INTRODUCTION

Your doctor has prescribed treatment with Adalimumab (Amgevita[®], Hulio[®], Humira[®], Hyrimoz[®], Idacio[®], Imraldi[®], Yuflima[®]). This brochure provides more information on this medication.

WHAT IS ADALIMUMAB?

Adalimumab consists of proteins or antibodies that inactivate excess tumour necrosis factor or TNF, thus reducing the inflammatory process that also causes Crohn's disease and ulcerative colitis.

PREPARATIONS FOR THE TREATMENT

Before the treatment starts a lung X-ray (RX thorax) and (intradermal) skin test will be performed in order to exclude any prior exposure to tuberculosis. The doctor or IBD nurse will then check your vaccinations with you.

CERTIFICATE

Submit your Adalimumab certificate to your health insurance fund as soon as possible to get it approved.

TREATMENT SCHEDULE

Ulcerative colitis and Crohn's disease are treated in the same way. You can opt for an injection or a pen. The IBD nurse will show you how to use it. If you don't want to administer the injections yourself, we can ask a family member or arrange home nursing care for you. A single injection contains 40 mg of Adalimumab.

The start-up schedule for Adalimumab is as follows:

Week 0	Week 2
INDUCTION	INDUCTION
160 mg or	80 mg or
4 injections	2 injections

Starting in week 4 maintenance therapy will be recommended based on 40 mg Adalimumab injections every two weeks.

It is possible to arrange weekly injections if there is little or no improvement, but only if your doctor recommends it.

Syringes or pens have to be stored in the refrigerator at home (2-8°C).

POTENTIAL SIDE EFFECTS

Similar to any other medication, side effects may occur.

Possible side effects include:

- a reaction at the injection site (redness, itching, pain and/or swelling);
- dry skin, skin rash;
- stomach/intestinal complaints such as nausea and vomiting;
- muscle problems;
- weight increase (rare).

Adalimumab may affect your immune system, putting you at increased risk of infection. Infections of the upper airways such as a cold, sinusitis and bronchitis are most common.

INTERACTION WITH OTHER MEDICATION

Always tell the doctor or IBD nurse which medications you are taking to prevent potential interactions between them.

PREGNANCY AND VACCINATIONS

Talk about your intention to become pregnant with your doctor in good time. Taking Adalimumab during pregnancy is safe, but in most cases it is no longer administered from the end of the second trimester. If you were treated with Adalimumab during pregnancy, it is important to notify your baby's doctor before they are given any vaccinations. During the first nine months after the birth your baby must not be given a 'live vaccine' such as the Rota vaccine.

Tips

- Always try to administer your medication correctly and as prescribed by your doctor. Your GP cannot prescribe Adalimumab.
- Preferably administer the injection on the same day of the week, e.g. always on a Thursday every two weeks. A diary can be a useful tool to monitor your schedule and record the injection sites.
- Hydrate you skin well with a moisturising cream every day.
- Check when your approval certificate for Adalimumab expires. It is advisable to keep a copy of it.
- Do you have an appointment with the doctor or dentist? Always mention that you are being treated with Adalimumab.
- Are you scheduled to have an operation or another specific intervention? Are you planning to go on a (long distance) trip? Remember to tell your doctor or nurse in good time.
- If you feel discomfort, have a fever or show signs of infection: always tell the IBD nurse or doctor.

CONTACT DATA

Do you have further questions?

If so, contact the IBD nursing team via

• e-mail: ibdnurse@uzleuven.be

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• tel.: +32 16 34 06 21 (Monday to Friday from 10.00 to 12.00 hrs)

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Comments or suggestions pertaining to this brochure can be submitted via communicatie@uzleuven.be.

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