

TOFACITINIB Patient information

Tofacitinib is used to treat rheumatoid arthritis, psoriatic arthritis and axial spondyloarthritis. It is a type of drug called a Janus kinase (JAK) inhibitor, and it works by blocking the inflammation in the body.

How long does this treatment take to work?

Most people using this drug will notice an improvement within a few weeks of starting treatment. If you haven't noticed any improvement in your symptoms after six months, discuss it with your doctor, who may decide to stop the tofacitinib treatment. Because it's a long-term treatment, it's important to keep taking tofacitinib, unless you have severe side effects:

- even if it doesn't seem to be working at first
- even when your symptoms improve (to help keep your arthritis under control).

How do I take tofacitinib?

Tofacitinib is taken as tablets that can be taken with or without food. The usual dose is two tablets a day – one in the morning and one in the evening. However, in some circumstances, your doctor may suggest taking just one tablet a day.

Are there side effects?

Like any medicine, tofacitinib can cause side effects but most people won't have any problems. Speak to your rheumatology team if you have any side effects.

Infections

Because this medicine that affects your immune system, it can lower the ability of your body to fight infections such as tuberculosis, shingles (herpes zoster) and infections caused by other bacteria, fungi, or viruses that can spread throughout the body.

Shingles (herpes zoster)

Shingles is a painful, blistering skin rash caused by the varicella-zoster virus (VZV), the same virus that causes chickenpox. After a chickenpox infection, the VZV virus can remain dormant in the body and later reactivate as shingles, especially in people with weakened immune systems (for example people taking tofacitinib) or those over 50yrs. The rash usually appears on one side of the body, forming a stripe of blisters, and by itching, tingling, or pain.

Unfortunately, the shingles vaccine (recombinant zoster vaccine, *Shingrix*) is not available in South Africa. [The live varicella vaccine, *Zostavax* is also no longer available in SA]. Antiviral medications (Acyclovir) can treat the infection, and should be started early – as soon as blisters appear – to control the infection and reduce the complications of shingles (such long-term pain and tingling). Please call our clinic to discuss this if you are worried that you may have shingles.

Tuberculosis

Your doctor will check if you've previously been exposed to TB, or have a high risk of getting TB. Even if you don't have symptoms, the TB bacteria that cause TB may still be present in

the body and you may TB treatment (usually a tablet called INH) to deal with this while using tofacitinib.

Other infections

Fever, chest pain, cough, shortness of breath, swollen lymph glands, burning urine or flank pain might be signs of infection. If you are concerned that you have an infection, contact your healthcare professional right away (GP, Day Hospital or call the rheumatology clinic). Pneumococcal vaccines, which help to protect against pneumonia, and yearly flu vaccines are usually recommended.

Can I take this treatment if I am pregnant or planning pregnancy?

This is not a safe treatment if you're pregnant, planning to try for a baby, or breastfeeding

Blood tests

Your rheumatology team will also monitor your immune system and liver once you start treatment. If your red or white blood cell count gets too low, your treatment may be stopped until it improves. You may have to be monitored for other conditions as well, for example if you have liver problems or high cholesterol. Tofacitinib raises cholesterol levels in some people.

Cancer

Lymphoma, lung cancer, and other cancers have been reported in patients treated with tofacitinib. This is not common. Your healthcare professional will closely monitor you for signs and symptoms of cancer and other serious conditions during treatment

Blood Clots

tofacitinib may increase the risk of blood clots (deep vein thrombosis and pulmonary embolism and heart attack). The risk seems higher if you've had these problems before, or if you smoke cigarettes. Seek urgent medical care if you develop swelling of the legs or breathlessness.

Stomach Problems

Tofacitinib can sometimes cause stomach or bowel problems. These are more common in people who also take NSAIDs or corticosteroids. You should also tell your doctor straight away if you notice any signs of stomach or abdominal problems, such as pain, a change in bowel habits or passing blood.

Having an operation

If you're thinking about having surgery, talk this over with your specialists. They may advise you to stop tofacitinib for a time before and after surgery.

Talk to us:

- Talk to your rheumatologist and rheumatology nurse at your next appointment or phone during clinic times: (021) 404 5394 (Monday) or (021) 404 5313 (Thursday/Friday)
- The SA arthritis foundation (www.arthritis.org.za, 021 425 2344) is the charity leading the fight against arthritis, and offers online or telephone advice.