



WHERE CAN I GET HELP?

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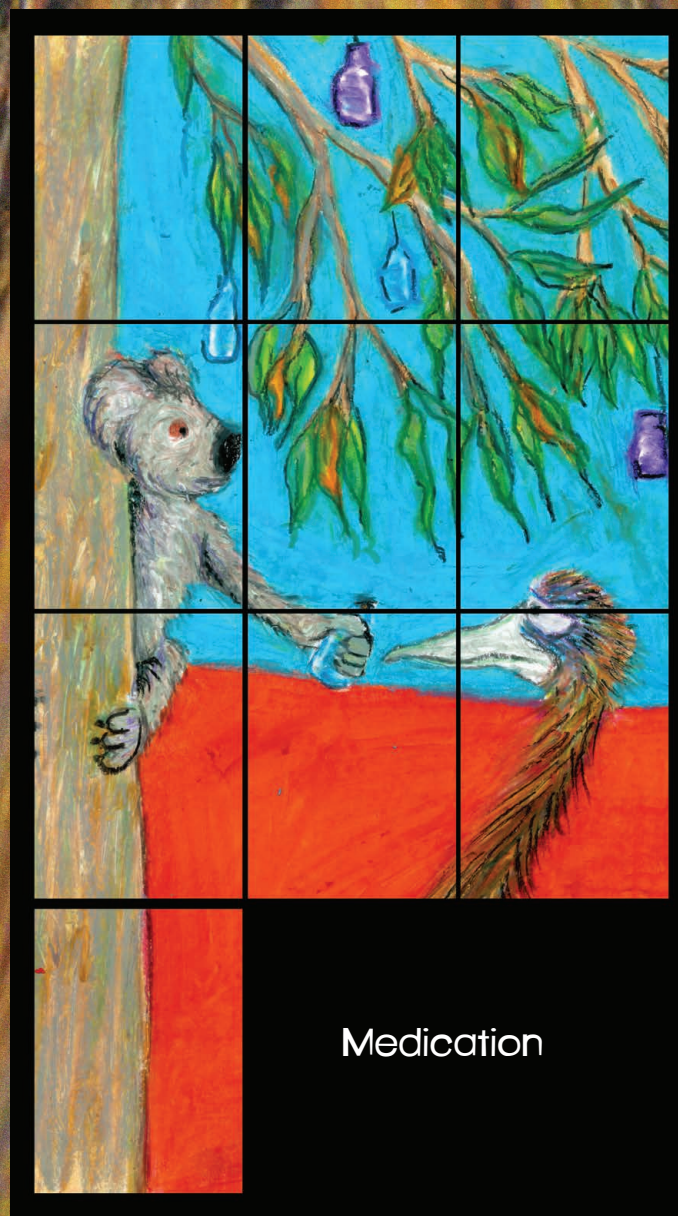
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Medication

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This Information Sheet is about some of the common medications (drugs) used to treat autoimmune illness. The drugs help control inflammation, reduce pain & can help to 'damp down' an overactive immune system to help it work better & to stop it destroying healthy tissue. Some medications do not work straight away & you may not see any effect for weeks or months. If one medication does not work well, there are others that may be more effective. Each person has a different response to the drugs they are given.

This Information Sheet gives a brief outline on what the medications are used for, how they work & some of the possible side effects. It does not provide full information about all the medications that can be used. For more information please talk to your doctor.

Main groups of drugs used to treat autoimmune illness:

- ➔ **Pain relievers (analgesics).**
- ➔ **Non-steroidal anti-inflammatory drugs (NSAIDs).**
- ➔ **Corticosteroids.**
- ➔ **Disease modifying anti-rheumatic drugs (DMARDs).**

Pain relievers (Analgesics)

Pain relievers are often the first medications that your doctor will suggest to help relieve pain & make you more comfortable, be more active & sleep better.

Types: Paracetamol (*Panadol*) is a simple pain reliever that is useful for mild to moderate pain. For more severe pain, there are stronger drugs available such as a panadol with codeine (*Panadeine*, *Panadeine Forte*, *Panalgesic*) or other opiate drugs, which should be prescribed by your doctor.

How do they work?

Pain relievers work by blocking pain signals either locally at the site of inflammation or in the brain. They do not relieve inflammation.

How are they used?

They can be taken as liquids, tablets, suppository, or by injection. They may be taken as needed, that is when you have pain, or your doctor may recommend that you take them at regular times each day. Always follow your doctor's advice.

What are some of the side effects?

Paracetamol has few side effects when taken at the recommended dose. Stronger pain relievers can sometimes cause constipation, nausea, drowsiness, or vomiting. Always take these drugs at the recommended dose as damage to the liver can occur if you take more than the recommended daily dose.

Non-steroidal anti-inflammatory drugs (NSAIDs)

NSAIDs work by reducing inflammation, joint swelling, fever, pain & stiffness. Some are available without a prescription; others will need to be prescribed by your doctor.

Types: There are many different types available such as ibuprofen (*Nurofen*, *Brufen*), naproxen (*Naprosyn*) & COX-2 inhibitors.

How do they work?

NSAIDs work by stopping the body producing chemical (prostaglandins) that cause inflammation, pain & fever. When there are less prostaglandins around there is less inflammation, less swelling & pain.

How are they used?

NSAIDs come in tablet or liquid form & are available over the counter from your pharmacy. They should **ALWAYS** be taken with food to prevent side effects. Sometimes NSAIDs need only be taken occasionally to help with pain, but for many conditions they are taken regularly. Your doctor will advise you when & how you should take these medications to best control your symptoms. Do not take any additional NSAIDs other than those prescribed by your doctor.

What are some of the side effects?

The most common side effect with this group of drugs is nausea & stomach upset, which may be mild to severe. To minimise this side effect, they should **ALWAYS** be taken with food. Other possible side effects are stomach or gut bleeding. If you suffer from any of these side effects tell your doctor straight away.

Corticosteroids

Corticosteroids are naturally occurring hormones that the adrenal gland produces. When given as a medicine, they have a powerful anti-inflammatory action & work to slow the immune system down. Usually they are given for short periods of time & work to rapidly reduce inflammation. In some people, small doses may be advised for long periods or when an illness flare occurs.

Types: The most commonly used corticosteroids are prednisone (*Sone*, *Panafcort*, *Predsone*) or prednisolone (*Panafcortelone*, *Solone*, *Predsolone*).

How do they work?

In autoimmune conditions, the immune system is overactive & they work by suppressing the immune response & fight the inflammation which causes many of the symptoms.

What are some of the side effects?

Short term use (3-4 weeks) has few side effects. Some people will have an increased appetite, or mood changes (*sadder or happier, more or less energetic*). These stop once the medication is stopped or reduced to a low dose.

If corticosteroids are taken long term or in high doses, there are more side effects such as reduced growth, thinning of the bones (*osteoporosis*), increased weight, diabetes & greater chance of infections. Sometimes your doctor will prescribe other medications such as calcium & vitamin D to help keep bones strong. Because of the long term side effects, corticosteroids are prescribed as short courses wherever possible.

How are they used?

They are usually taken as tablets, liquid or intravenously & should be taken with food. High doses may be given for a short time, but the dose will then be lowered in steps to a minimum effective dose once symptoms improve. This slow reduction in dose is important as it stops side effects. Your doctor will prescribe corticosteroids for the shortest possible time to reduce side effects, however, during a 'flare' you may need to start taking this medication again. Sometimes corticosteroids are injected directly into an affected joint to reduce inflammation, pain & stiffness in that joint.

Disease modifying anti-rheumatic drugs (DMARDs)

DMARDs are used to treat inflammation, especially in the joints which leads to joint damage. They are usually prescribed as second line drugs to improve the effect of NSAIDs & corticosteroids.

Types: There are a range of drugs in this group – azathioprine (*Imuran*), cyclosporins (*Cicloral*, *Neoral*), adalimumab (*Humira*), abatacept (*Orencia*), methotrexate (*Methoblastin*) certolizumab (*Cimzia*)

How do they work?

DMARDs work by suppressing the immune response in such a way that activity causing the system to attack & damage healthy joints is reduced. Some types can block substances that cause white blood cells (which fight germs) to be overactive, causing inflammation in joints by releasing inflammatory chemicals. By reducing the over active white blood cells, these medications can stop inflammation from happening.

What are some of the side effects?

These vary depending on the DMARD. As they reduce the effect of the immune system, there is a greater risk of infections Children should not be given live vaccinations, e.g. polio, varicella (*chicken pox*), measles, mumps or rubella. Regular blood tests are important to check for effects on the liver or changes in blood counts.

DMARDs can increase the risk of infection, cancers, heart disease & bone thinning (*osteoporosis*), however many people benefit from their use. Becoming more sensitive to the sun is also common, so sun protection measures are important. Details of the possible side effects & benefits can be provided by your doctor. Becoming sensitive to the sun is also common, so sun protection measures are important.

How are they used?

DMARDs are given as a tablet, a liquid taken by mouth or an injection under the skin. They may be given daily or once per week, depending on the type of DMARD prescribed.