

PATIENT INFORMATION ON SECUKINUMAB

[Sec-you-KIN-you-mab]

(Brand name: Cosentyx®)

This information sheet has been produced by the Australian Rheumatology Association to help you understand the medicine that has been prescribed for you. It includes important information about:

- **how you should take your medicine**
- **the possible side effects**
- **what tests you will have to monitor your condition and to detect unwanted effects, and**
- **other precautions you should take.**

Please read it carefully and discuss it with your rheumatologist.

IMPORTANT THINGS TO REMEMBER

- You must see your rheumatologist regularly to make sure the treatment is working and check for possible side effects.
- You should have regular blood tests as suggested by your rheumatologist.
- It is important to tell your rheumatologist if you have a new serious illness such as a serious infection, cancer or heart failure etc.
- If you are worried about any side effects, you should contact your rheumatologist as soon as possible.
- If you stop secukinumab for any reason, you must contact your rheumatologist. Failure to do so may mean that your treatment may no longer be funded.
- If you plan to become pregnant, you must discuss the timing with your rheumatologist.
- Remember to change the injection site each time secukinumab is injected.
- If you need a vaccination, tell your doctor you are being treated with secukinumab *before* you have the vaccination. Some vaccines cannot be given while on secukinumab.

For more information about **PSORIATIC ARTHRITIS** and other inflammatory conditions associated with arthritis, see Arthritis Australia's website:

www.arthritisaustralia.com.au

What is secukinumab?

Secukinumab (brand name: Cosentyx®) is a medicine used to treat adults with psoriatic arthritis, an inflammatory disease of the joints that is often accompanied by psoriasis. Secukinumab is also used to treat adults with moderate to severe plaque psoriasis that is chronic (lasts for a long time).

Secukinumab may also be used to treat adults with axial spondyloarthritis, an inflammatory disease which primarily affects the spine, causing inflammation and pain in the spinal joints.

Secukinumab is a monoclonal antibody which is a protein that recognises and binds to an inflammatory protein called Interleukin 17A (IL-17A). In patients with psoriatic arthritis and axial spondyloarthritis, the body's immune system produces an increased amount of IL-17A which causes the symptoms such as swollen and painful joints. Secukinumab blocks the action of IL-17A in the body, reducing the inflammation and other symptoms caused by the increased amount of IL-17A.

What benefit can you expect from your treatment?

It may take a number of weeks for you to notice some relief of joint swelling, pain and stiffness.

Stopping secukinumab

If secukinumab treatment is stopped or delayed there is a risk that your condition will get worse again. Continue with your treatment unless advised by your rheumatologist or unless side effects develop (see Side effects).

If you stop secukinumab for any reason, you **must** contact your rheumatologist. Failure to do so may mean that your treatment may no longer be funded.

How will you be checked while on secukinumab?

Medicines like secukinumab are very expensive and funded by Medicare. Certain conditions must be met to receive it.

- Secukinumab will only be given if your disease is active and if standard treatments have not worked.



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- It will only be kept going if it helps your condition. This must be checked between 12 and 16 weeks after the start of treatment.
- Blood tests are needed during your treatment to watch for side effects and decide if the treatment is working.
- How often you have blood tests will depend on what other medicines you are taking and what other illnesses you have. Your rheumatologist will advise on this.

How is secukinumab given?

Secukinumab is injected just under the skin of the thigh or abdomen. It is best to avoid (if possible) any areas of skin involved with psoriasis. The prefilled autoinjector or syringe should be taken out of refrigerator 15-30 minutes before injecting to allow it to reach room temperature. Do not shake or freeze it. It can be injected by your doctor, nurse, carer, or by you. If injecting yourself, be sure to follow the detailed instructions carefully to ensure the best response. It is important to change the injection site each time.

If you miss an injection

Administer the next injection as soon as you remember and continue to use it as you normally would. Do not inject a double dose to make up for a missed dose. If you have missed more than one dose or are not sure what to do, check with your doctor or pharmacist.

If you have used too much (overdose)

Let your doctor know as soon as possible if you accidentally use more than your prescribed dose. The risk of adverse events is higher with larger doses.

What is the dosage?

Secukinumab is a solution for injection that comes in a pre-filled syringe or pen. Each pre-filled pen contains 150mg of secukinumab. In psoriatic arthritis and axial spondyloarthritis, the usual dose of secukinumab is 150mg (the contents of one pre-filled pen) or 300mg (two pens at a time) injected each week for the first 5 weeks of treatment, then once a month after that.

Can other arthritis medicines be taken with secukinumab?

This medicine may be used alone or with other arthritis medicines including:

- Other Disease Modifying Anti Rheumatic Drugs (DMARDs) such as methotrexate.
- Steroid medicines such as prednisolone or cortisone injections into the joint.
- Anti-inflammatory medicines (NSAIDs) such as naproxen (Naprosyn®) or ibuprofen (Brufen®, Nurofen®).
- Simple pain medicines such as paracetamol.

Are there any side effects?

You might experience side effects with your treatment. Tell your doctor if you notice side effects that you think are caused by this medicine. Many side effects disappear when secukinumab treatment is stopped.

Most common possible side effects

- You may experience more frequent mild upper respiratory tract infections (common cold, sinus infections), nausea, diarrhoea, cough, and fever.
- Infections may need treatment and secukinumab may need to be stopped for a while if you develop infection, so it is important to contact your doctor for advice.
- Menstrual disorders including period pain and period irregularity.

Less common or rare possible side effects

There are some rare but potentially serious side effects with secukinumab including:

- oral thrush, signs of low white cells (such as fever, sore throat or mouth ulcers due to infections), athlete's foot, ear infections, conjunctivitis or discharge from the eye with itching, redness and swelling.
- Serious allergic reaction: signs of a serious allergic reaction may include a skin rash, a swollen face, lips, mouth or throat, or wheezing, dizziness, trouble swallowing or breathing.
- Tell your doctor or go to the hospital immediately if you have an allergic reaction as you need urgent medical attention.
- Inflammatory bowel disease: while new cases of inflammatory bowel disease are rare, "flare ups" after periods of remission can occur while being treated with secukinumab. If you have inflammatory bowel disease, tell your doctor if you have worsening symptoms during treatment with secukinumab, or if you develop new symptoms of stomach pain or diarrhoea.

Other side effects not listed in this leaflet may also occur. Tell your doctor if you notice any other side effects that you think might be caused by secukinumab.

What precautions are necessary?

Infections

If you have an active infection of any kind, treatment with secukinumab will not be started until the infection is treated successfully.

Use with other medicines

Secukinumab can interact with other medicines. You should tell all your doctors about all medicines you are taking or plan to take. This includes over the counter or herbal/naturopathic medicines.

Use with phototherapy

Secukinumab should not be used while receiving light therapy (PUVA) for psoriasis.



Vaccines

- While being treated with secukinumab you should not be immunised with 'live' vaccines such as:
MMR (measles, mumps and rubella), Varicella vaccines (Chicken pox/Shingles), OPV (oral polio virus), BCG (Bacillus Calmette Guerin), Japanese Encephalitis or Yellow Fever. Talk with your rheumatologist before receiving any vaccines.
- Pneumococcal vaccines and the yearly seasonal flu vaccinations are encouraged.
- For more information on vaccination including the COVID-19 vaccination go to:
<https://rheumatology.org.au/For-Patients/COVID-Information/COVID-Vaccination-Information>

Surgery

If you require surgery for any reason, you should discuss this with your rheumatologist as some people need to stop taking secukinumab before surgery.

Alcohol

You may drink alcohol while taking secukinumab. However, if you are also taking methotrexate, you should be cautious about how much alcohol you drink.

Pregnancy, breastfeeding and fertility

- It is not known what effects secukinumab has on the unborn baby.
- If you are pregnant or plan to become pregnant it is important to discuss this with your rheumatologist before beginning this medication.
- Women of childbearing potential should use effective methods of contraception during treatment and for at least 19 weeks after treatment.
- If you have been treated with secukinumab during your pregnancy, you should check with your doctor before vaccinations are given to your baby. Some vaccines cannot be given to the newborn baby if you were treated with secukinumab while you were pregnant.
- It is not known whether secukinumab is excreted in the breastmilk of lactating women. Women who are breastfeeding should talk to their doctor about whether or not to use secukinumab.
- More detailed information is available at <https://rheumatology.org.au/For-Healthcare-Professionals/Clinical-Resources/Pregnancy-Prescribing-Info>

How to store secukinumab

- Store secukinumab in the refrigerator, between 2 and 8°C. Do not freeze. If necessary secukinumab may be stored unrefrigerated for a single period of up to 4 days at room temperature, not above 30°C. Do not return to refrigerator once it has reached room temperature. Keep the pens or syringes in the original carton to protect them from light until the time of use.
- Keep all medicines out of reach of children.

Disposal

- After injecting secukinumab, the used syringes or pens should be placed in a puncture-resistant container, like a sharps container. Dispose of your sharps container according to your state or local regulations. If unsure how to dispose of your sharps container, ask your pharmacist.
- If your doctor tells you to stop using secukinumab, or the expiry date has passed, ask your pharmacist what to do with the leftover medicine.

Questions?

If you have any questions or concerns write them down and discuss them with your doctor.

Your doctor's contact details

You should see your rheumatologist regularly to make sure the treatment is working and to minimise any possible side effects.

How to help us help you

Sign up to the ARAD project now!

The Australian Rheumatology Association collects information on how well these drugs work and how often they cause problems.

The best way to get this information is from you!

Contact us in any of the following ways:

Email: ARAD@monash.edu

Telephone: 03 9508 3424

Visit our website: www.ARAD.org.au

The information in this sheet has been obtained from various sources and has been reviewed by the Australian Rheumatology Association. It is intended as an educational aid and does not cover all possible uses, actions, precautions, side effects, or interactions of the medicines mentioned. This information is not intended as medical advice for individual problems nor for making an individual assessment of the risks and benefits of taking a particular medicine. It can be reproduced in its entirety but cannot be altered without permission from the ARA. The NHMRC publication: *How to present the evidence for consumers: preparation of consumer publications* (2000) was used as a guide in developing this publication.

