

PATIENT INFORMATION ON

GOLD

(Examples of brand names: Myocrisin, Ridaura)

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**
- **what are the possible side effects**
- **what tests you must have to monitor your condition and to detect unwanted effects**
- **other precautions you should take.**

Please read it carefully and discuss it with your specialist/GP.

Important things to remember

- While taking gold you should see your rheumatologist regularly to make sure the treatment is working and to minimise any possible side effects.
- You should have regular blood and urine tests as directed by your rheumatologist.
- If you are concerned about any side effects you should contact your rheumatologist as soon as possible.

For more information about RHEUMATOID ARTHRITIS see the Arthritis Australia website

www.arthritisaustralia.com.au

What is gold therapy?

Gold medicines are used to treat rheumatoid arthritis. They may also be used occasionally to treat other diseases such as psoriatic arthritis. They are prepared from metallic gold and have been used to treat rheumatoid arthritis for over 70 years.

While gold can be very effective for some patients, it is used infrequently today as more effective medicines have become available.

It is not entirely clear how gold works but it is thought to have an effect on the activity of the immune system. In rheumatoid arthritis, this action helps to reduce inflammation and thus reduce pain and swelling. It also limits damage to the joints and helps to prevent disability in the long term.

Because gold acts to reduce the damage to the joints rather than just relieve the pain, it belongs to the group of medicines called **disease modifying antirheumatic drugs (DMARDs)**.

What benefit can you expect from your treatment?

Gold treatment does not work straight away.

Improvement in joint pain, swelling and stiffness is usually seen in 8 to 12 weeks. However, it may take up to 24 weeks in some people to show any benefits.

Other medicines may be given to improve your symptoms while waiting for gold treatment to work.

Treatment with gold may be continued indefinitely as long as it is effective and as long as no serious side effects occur.

It may be possible to reduce or even stop treatment but only on your specialist/GP's advice.

If you stop gold treatment for more than a few weeks there is a risk that your condition may worsen. Continue with your treatment unless advised by your specialist/GP or if side effects develop.

How is gold therapy taken?

One form of gold, sodium aurothiomalate (brand name Myocrisin) is a liquid, which is injected into a muscle. The other form, auranofin (brand name Ridaura) is taken as tablets.

Injectable gold is given into the large muscles such as the buttock or shoulder, not into the joints.

What is the dosage?

The first dose is usually a very small 'test' dose e.g. 10 mg to make sure that you are not allergic to the medicine.

The usual maintenance dose for adults is in the range of 25 to 50mg. This is given once a week for the first 4 to 6 months. After that, if there is an improvement in your condition, the frequency of injections may be reduced to fortnightly or even monthly intervals.

It is generally not a problem if you miss a single dose of gold, for example if you are on holidays. A change in the schedule of dosage can be worked out beforehand.

Gold tablets are used less frequently than injections, as they seem to be less effective. They are taken daily at a dose of between one and three of the 3 mg tablets.

Are other medicines taken with gold therapy?

Gold may be used with other arthritis medicines including:

- other 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 specialist/GP if you are concerned about possible side effects.

A reduction in dose may minimise side effects so that you can continue to take this treatment. Your specialist/GP will advise on any dose changes that are necessary.

Most common possible side effects

- The most common side effects include *skin itchiness*, a variety of *skin rashes* and *increased sensitivity to the sun*. It is a good idea to apply sunscreen and wear a hat when out in the sun. If a rash develops gold will be ceased.
- Other side effects such as *mouth ulcers*, *alterations in taste* (metallic taste), *hot flushes* and *diarrhoea*.
- Immediately following an injection, you may feel *dizzy*, *flushed* or *weak*. These feelings should go away if you lay down for a few minutes.
- *Joint pain* for one or two days after the injection may occur but should only happen with the first few injections.

Less common or rare possible side effects

There are some rare but potentially serious side effects with gold treatment.

- *Blood cells*: Gold may cause a drop in the numbers of white blood cells which fight infection. It may also cause a drop in the numbers of platelets which help to stop bleeding. If you develop a sore mouth, mouth ulcers, easy bruising, nosebleeds, bleeding gums, breathlessness, infection or fever tell your specialist/GP straight away.
- *Kidneys*: Infrequently, gold may affect the kidneys. This causes leakage of protein and blood into the urine. Traces of protein and/or blood in the urine are often not a problem; larger amounts usually mean that gold will be stopped. If protein leakage does occur, provided the gold is stopped, there is little chance of serious kidney damage developing.
- *Skin pigmentation* or chrysiasis can occur with prolonged treatment.
- Other side effects include *liver injury*, *lung disease* or *inflammation of the intestines*, (*enterocolitis*). Although serious, they are very rare.

What precautions are necessary?

Blood and urine tests

- Since the blood cells and kidneys may be affected by gold treatment, you **must** have regular blood and urine checks. At the start, these are checked before each gold injection. The interval between tests may be spaced out with long-term treatment. With tablets, monthly tests may be required.

- As well as monitoring for side effects, blood tests help to monitor your condition to check if the treatment is effective.
- Your general practitioner will be informed about the monitoring schedule. It is important to see your general practitioner if you have been asked to do so as they have an important role to play in monitoring your condition.

Use with other medicines

- Gold can interact with other medicines. You should tell your specialist/GP (including your general practitioner, rheumatologist and others) about all medicines you are taking or plan to take. This includes over the counter or herbal/ naturopathic medicines.
- You should also mention your treatment when you see other health professionals.
- Gold is often used together with other DMARDs to treat rheumatoid arthritis.

Use in pregnancy and breastfeeding

- If you are thinking of becoming pregnant, continuing gold may be an option as medical literature suggests there is no increase in risk of birth defects. Usually treatment is reduced or ceased in pregnant women but each person’s circumstances need to be taken into consideration.
- Women who want to breastfeed also should discuss this matter with their specialist/GP. Breastfeeding while taking injectable gold is not recommended. It is not yet known if the oral form of this medicine is passed into breast milk.
- More detailed information is available at <https://rheumatology.org.au/gps/documents/ARAPregnancyPrescribingGuidanceupdateApr19.pdf>

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How to store gold injections or tablets?

- Store gold injections or tablets in a cool, dry place, away from direct heat and light (e.g. not in the bathroom).
- Keep all medicines out of reach of children.

Questions?

If you have any questions or concerns write them down and discuss them with your specialist/GP.

Your specialist/GP’s contact details

If you are taking gold you should see your rheumatologist regularly to make sure the treatment is working and to minimise any possible side effects.

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.