

Drug information

Secukinumab

SECUKINUMAB

is used to treat psoriatic arthritis and
ankylosing spondylitis

VERSUS
ARTHRITIS

What is secukinumab?

Secukinumab is a type of drug known as a biological therapy. Your doctor may give it to you if you have:

- psoriatic arthritis
- ankylosing spondylitis.

It can also be used to treat psoriasis if it's severe and other treatments haven't worked.

In some conditions, including psoriatic arthritis and ankylosing spondylitis, the protein IL-17A can cause inflammation, pain and damage to parts of your body, such as the joints.

Secukinumab works by blocking the effects of this protein, to reduce inflammation and the problems it can cause, such as joint pain and stiffness.

It's a long-term treatment. Depending on your condition, it may take between three weeks and a year of taking secukinumab before you start to see the benefits.

Who can take secukinumab?

There are guidelines about when secukinumab can be used. It varies depending on which condition you have.

Secukinumab won't be started if:

- your condition isn't active
- you haven't tried other treatments for your condition first
- you have an infection.

Before you're given secukinumab, doctors sometimes use a scoring system to assess how many of your joints are painful or swollen, and how it makes you feel. This helps them work out how active your arthritis is.

You'll also need blood tests and a chest x-ray before treatment to see whether secukinumab is right for you.

Your doctor may also decide not to prescribe secukinumab if:

- you have had repeated or serious infections in the past
- you have an inflammatory bowel disease, such as Crohn's disease or ulcerative colitis
- you're pregnant, planning to become pregnant, or breastfeeding
- you're having treatment with ultraviolet light for psoriasis, also known as phototherapy.

If secukinumab isn't suitable, your doctor will discuss other treatment options with you.

Your doctor will check to see if you've had tuberculosis (TB). Even if you don't have symptoms, the bacteria that causes TB may still be present in your body. So, you may need treatment for this before starting secukinumab.

Your doctor might also check if you've had hepatitis before. If you have, you may be offered a treatment to reduce the risk of the hepatitis restarting.

Your doctor may assess your risk of HIV infection and may suggest a test. If you have HIV, your doctor may want to make sure it's well controlled before starting secukinumab.

How is it taken?

Secukinumab is given as an injection under the skin. This is known as a subcutaneous injection.

For the first four weeks of taking secukinumab, you will need to have one injection a week. After that, you will only need to take secukinumab once a month.

Secukinumab is available in a pre-filled syringe or pen so that you, your partner, or another family member can learn to give you these injections at home.

If you miss a dose or take one too soon, ask your rheumatology team for advice on when to take your next dose.

If you have a latex allergy, you should mention this to your doctor. The needle cover on some pre-filled syringes may contain latex and could cause a reaction.

Because it's a long-term treatment, it's important to keep taking secukinumab:

- even if it doesn't seem to be working at first
- even when your symptoms start to improve.

But if you have severe side effects or symptoms of an infection, tell your healthcare team. They may recommend that you delay or stop your treatment.

Side effects and risks

Like all drugs, secukinumab can sometimes cause side effects. Some common side effects include:

- a sore throat or a dry cough
- fatigue
- a runny nose
- feeling sick
- diarrhoea.

Some people may have a skin reaction at the injection site. This is usually mild and symptoms include redness, a rash, swelling, itching, or bruising.

Very rarely, some people may have a more severe allergic reaction. The symptoms of an allergic reaction include sudden swelling, a rash or breathlessness. If you develop these symptoms during or soon after a dose of secukinumab, you should get medical advice immediately.

Because secukinumab affects your immune system you may be more likely to pick up infections.

If you have any symptoms of infection, or if you're unsure, speak to your rheumatology team immediately. They may recommend that you delay your next dose until you're better. Some symptoms of an infection include:

- a fever
- feeling tired
- shortness of breath
- a constant cough
- diarrhoea
- burning when peeing.

You should also speak to your healthcare team if you develop chickenpox or shingles, or come into contact with someone who has chickenpox or shingles.

These infections can be severe if you're taking secukinumab. You may need antiviral treatment, and your secukinumab treatment may be stopped until you're better.

Tips to reduce your risk of infection

- Try to avoid close contact with people you know have an infection.
- Wash your hands regularly and carry around a small bottle of antibacterial hand gel.
- Keep your mouth clean by brushing your teeth regularly.
- Stop smoking if you're a smoker.
- Make sure your food is stored and prepared properly.
- Try to keep your house clean and hygienic, especially the kitchen, bathrooms and toilets.

Carrying an alert card

It's recommended that you carry a biological therapy alert card so anyone treating you will know that you're on secukinumab. Ask your rheumatology team for a card.

Effects on other treatments

You may be taking other drugs as well as secukinumab. Check with your doctor before starting any new medicines. Remember to mention you're on secukinumab if you're treated by anyone other than your usual rheumatology team.

Don't use complementary treatments, such as herbal remedies, without discussing it first with your doctor or pharmacist. Some of them could react with secukinumab.

Vaccinations

It's best to discuss vaccinations with your healthcare team before starting secukinumab.

It's usually recommended that people on secukinumab avoid live vaccines such as measles, mumps and rubella (MMR), chickenpox and yellow fever. But sometimes a live vaccine may be necessary, so you should discuss this with your rheumatology team.

If you've never had chickenpox, it's good to get a vaccination against it before starting secukinumab. But discuss this with your rheumatology team first.

It's also a good idea to get any family or household members vaccinated against chickenpox before you start taking secukinumab.

If you're offered shingles vaccination (Zostavax), it's best to have this before starting secukinumab. The Zostavax shingles vaccine is a live vaccine and isn't recommended for people who are on secukinumab. But a non-live shingles vaccine (Shingrix) is available so you may be able to have this instead.

It's recommended that you have the vaccination against COVID-19. It's also recommended that you have the pneumonia vaccine and your yearly flu vaccine injection while taking secukinumab. These vaccines are not live, so you are able to have them whilst on biologic therapy.

Having an operation

If you're going to have an operation or dental surgery, you should talk this over with your doctor or surgeon.

Depending on the type of surgery, your doctor may recommend that you stop secukinumab for a while before and after the operation.

This is because secukinumab affects your immune system. So, you may have an increased risk of getting an infection after the surgery.

Alcohol

There's no need to avoid alcohol while taking secukinumab.

Guidelines state that adults shouldn't have more than 14 units a week, and that they should spread them out over the course of the week. In some circumstances your doctor may advise lower limits.

Fertility, pregnancy and breastfeeding

Secukinumab currently isn't recommended if you're pregnant.

Because secukinumab is a relatively new drug, we don't yet know how it might affect pregnancy or an unborn baby. Tell your rheumatology team immediately if you become pregnant whilst taking secukinumab.

If you're a woman of childbearing age, it's a good idea to use contraception while taking secukinumab and for five months after you finish your treatment.

Some guidelines say that secukinumab is safe to use by men who want to father a child. But research is in the early stages. If you are worried or want to know more, talk to your healthcare team.

We don't yet know whether secukinumab can pass into breastmilk, so current advice is not to breastfeed while taking this drug.



For more information, check our pregnancy booklet or visit [versusarthritis.org/about-arthritis/living-with-arthritis/pregnancy/](https://www.versusarthritis.org/about-arthritis/living-with-arthritis/pregnancy/)

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