

AZATHIOPRINE

Information leaflet

1. What is azathioprine and how does it work?

Azathioprine is an immunosuppressant which works by suppressing the body's own immune system. It can be used by itself or in combination with other drugs. Azathioprine is not a steroid and is considered safer for longer term use compared to high doses of steroid tablets.

2. Which skin conditions are treated with azathioprine?

Azathioprine can be used to treat some inflammatory skin conditions, including:

- ·Pemphigus vulgaris
- ·Systemic lupus erythematosus
- ·Dermatomyositis
- ·Atopic eczema
- ·Bullous pemphigoid
- ·Pyoderma gangrenosum
- ·Chronic actinic dermatitis
- ·Cutaneous vasculitis

3. How long will I need to take azathioprine?

Azathioprine is usually taken for months or years. A gradual improvement (over 2-3 months) can be seen after starting treatment. If there is no improvement after several months, your doctor may consider an alternative treatment.

4. How should azathioprine be taken?

Azathioprine is usually taken once or twice daily, with or after food. The dose prescribed will depend on your weight and blood test results before starting treatment. A smaller dose will be prescribed at first and adjusted according to your response and any side effects.

- 5. What are the possible side effects of azathioprine?
- ·Nausea
- ·Liver and bone marrow effects
- ·Allergy (flu-like symptoms, rash, muscle or joint pains)
- ·Increased risk of infection
- ·Long-term use: increased risk of skin cancer and lymphoma

6. How will I be monitored while I am taking azathioprine?

You will require regular blood tests to monitor liver and bone marrow function. Once you are stable on a fixed dose, the blood tests can be performed every 3 months.

7. What precautions should I take?

- a. Please see the doctor if you are unwell. If you have an infection, your doctor may stop azathioprine for a short period until the infection has cleared.
- b. If you develop flu-like symptoms, a rash, muscle or joint pains, unexplained bruising/bleeding or yellowing of the skin, stop azathioprine and contact your doctor as soon as possible.
- c. Protect yourself from sun exposure (use sunscreens with SPF of at least 30, wear long sleeves and a broad-brimmed hat)
- d. If you detect any new swellings or lumps in the skin which last more than two weeks, inform your doctor as soon as possible.
- e. For female patients, please discuss with your doctor before taking azathioprine if you are pregnant, planning to become pregnant or breastfeeding. Some studies have shown an association with premature birth and small-for-date babies.
- f. Keep alcohol consumption to a minimum.



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- g. Inform your doctor about all medications you are taking before starting azathioprine. If you are taking azathioprine, always tell any doctor treating you. Medications that can interact with azathioprine include:
- ·Allopurinol
- ·Febuxostat
- ·Warfarin
- ·Ribavirin
- ·Co-trimoxazole
- ·Angiotensin-converting enzyme inhibitors
- \cdot Trimethoprim



AZATHIOPRINE (硫唑嘌呤)

Information leaflet

1. 什么是硫唑嘌呤及其作用原理?

硫唑嘌呤是一种免疫抑制剂,通过抑制身体的免疫系统来发挥作用。它可以单独使用或与其他药物联合使用。硫唑嘌呤不是 类固醇,相比高剂量的类固醇片剂,长期使用更为安全。

2. 硫唑嘌呤用于治疗哪些皮肤病?

硫唑嘌呤可用于治疗一些炎症性皮肤病,包括:

- 寻常型天疱疮
- 系统性红斑狼疮
- 皮肌炎
- 特应性湿疹
- 大疱性类天疱疮
- 坏疽性脓皮病
- 慢性光化性皮炎
- 皮肤血管炎

3. 我需要服用硫唑嘌呤多久?

硫唑嘌呤通常需要服用数月或数年。开始治疗后,可以在2-3个月内逐渐看到改善。如果几个月后没有改善,医生可能会考虑 其他治疗方法。

4. 硫唑嘌呤应该如何服用?

硫唑嘌呤通常每天需服用一次或两次,与食物一起或饭后服用。处方剂量取决于您的体重和治疗前的血液检查结果。起初会 开较小的剂量,并根据您的反应和副作用进行调整。

- 5. 硫唑嘌呤可能会造成的副作用有什么?
- 恶心
- 肝脏和骨髓影响
- 过敏反应(类似流感的症状、皮疹、肌肉或关节疼痛)
- 感染风险增加
- 长期使用:皮肤癌和淋巴瘤的风险增加

6. 在服用硫唑嘌呤期间我将如何被监测?

您需要定期进行血液检查,以监测肝脏和骨髓功能。一旦您的剂量已稳定,血液检查则可每3个月进行一次。

- 7. 我应该采取哪些预防措施?
- a. 如果您感到不适,请看医生。如果您有感染,医生可能会暂时停止硫唑嘌呤,直到感染消除。
- b. 如果出现类似流感的症状、皮疹、肌肉或关节疼痛、原因不明的瘀伤/出血或皮肤黄染,停止服用硫唑嘌呤并尽快联系您的 医生。
- c. 保护自己免受阳光曝晒(使用至少SPF 30的防晒霜,穿长袖衣服和宽边帽子)。
- d. 如果发现皮肤上有任何持续超过两周的新肿胀或肿块,请尽快告知您的医生。
- e. 对于女性患者,如果您正怀孕、计划怀孕或正在哺乳,请在服用硫唑嘌呤前与医生讨论。一些研究表明硫唑嘌呤与早产和 小于预期体重的婴儿有关。
- f. 保持最低的酒精摄入量。



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- g. 在开始硫唑嘌呤治疗前,告知医生您正在服用的所有药物。如果您正在服用硫唑嘌呤,请告知任何治疗您的医生。可能与硫唑嘌呤产生相互作用的药物包括:
- 别嘌醇
- 非布司他
- 华法林
- 利巴韦林
- 复方新诺明
- 血管紧张素转换酶(ACE)抑制剂
- 甲氧苄啶