



RITUXIMAB

Information leaflet

1. What is rituximab and how does it work?

Rituximab is a biologic medicine which reduces a type of immune cells known as B cells and hence reduces autoantibody levels and inflammation. Rituximab binds to a protein called CD20 on the surface of the B cells.

2. What skin conditions are treated with rituximab?

- Pemphigus vulgaris
- Pemphigus foliaceus
- Bullous pemphigoid
- Mucous membrane pemphigoid
- Linear IgA disease
- Lupus
- Dermatomyositis

3. Who should not have rituximab?

Rituximab is unsuitable for you if you have any of the following:

- Infections, particularly viral hepatitis or tuberculosis
- Severe heart problems e.g. heart failure
- Get breathless easily
- A suppressed immune system e.g. cancer, HIV infection, AIDS
- Pregnant, trying to become pregnant or breast feeding
- Brain and nerve conditions or symptoms e.g. multiple sclerosis or Guillain-Barre syndrome or seizures; pins and needles in your hands and feet
- Need any vaccinations, including those for travel abroad
- Scheduled for major surgery

4. How long will I need to take rituximab before it has an effect?

If you respond to treatment, you will begin to feel better in 2-16 weeks.

5. How do I take rituximab?

Rituximab is given through a drip into a vein (intravenous infusion) in hospital. The first infusion will take a few hours and further infusions would usually be quicker. Each course of rituximab is given as two infusions two weeks apart. Treatment may be repeated when the effect is wearing off e.g. 12-18 months after the first infusion. Rituximab is not a cure but will help to control the symptoms. You might still need to continue other medications to treat your condition. Medications such as antihistamines and paracetamol may be given before the infusion to reduce the risk of infusion reaction (see 6a).

6. What are the possible side effects of rituximab?

a. Common

- Infusion reactions: itch, rash, flushing, fever, chills, wheezing, shortness of breath, drop in blood pressure
- Serious infections
- Hair loss

b. Rare

- Progressive multifocal leukoencephalopathy (viral brain infection): confusion, memory loss, mood changes, tingling sensation, weakness, unsteadiness, blurred vision, speech issues, difficulty moving face or arms or legs

7. What happens before starting treatment?

You will have a physical examination, blood tests and chest X-ray. Inform your doctor if you have any symptoms of tuberculosis (e.g. a persistent dry cough, weight loss, fever, night sweats) as you will need to be examined and tested for tuberculosis.

8. How will I be monitored while I am taking rituximab?

Blood tests will be done 3 months after starting rituximab and every 6 months after. You will have to attend clinic visits regularly to monitor your response and look out for side effects. Contact your dermatologist if you have side effects that develop in between clinic appointments.

RITUXIMAB

Information leaflet

9. What precautions should I take?

- a. Avoid close contact with anyone who has a bad cold, influenza or chest infection.
 - b. Wash hands frequently while on rituximab.
 - c. Avoid dairy foods and eggs that are not pasteurised. Avoid meat or poultry that is not adequately cooked
 - d. Inform your doctor if:
 - You develop swelling of the feet, shortness of breath on exertion, or on lying flat
 - You notice new skin lesions
 - You develop a sore throat, fever, burning sensation on passing urine, dental problems, red or painful skin, open sores on your body or a persistent cough
 - e. See your dermatologist or GP if you develop shingles or chicken pox, or if you come into contact with someone who has these. You may need anti-viral medication.
 - f. Discuss with your doctor if you are planning to travel abroad. Depending on where you are travelling, precautions may be needed against infections.
 - g. Planned operations should be scheduled at least one month after the last infusion of rituximab.
 - h. Inform your surgeon or dentist that you have been on rituximab or planning to receive it prior to any operations or dental work.
 - i. Pregnancy should be avoided at least 12 months after treatment and effective contraception should be used in women who are of childbearing potential. Women who have had rituximab should not breastfeed. Inform your doctor if you are pregnant or planning to become pregnant.
 - j. Babies who have been exposed to rituximab during pregnancy should not receive live vaccines until 6 months old.
 - k. Discuss with your dermatologist before you take over the counter preparations or herbal remedies. All your doctors need to be informed that you are on rituximab.
- #### l. Vaccinations
- Give all vaccinations 4 weeks or more before rituximab. The pneumococcal vaccine and annual flu vaccination is recommended before rituximab treatment.
 - Live vaccines (e.g. oral polio, rubella, BCG, measles, oral typhoid, yellow fever, nasal flu vaccine) should be avoided after rituximab. If a live vaccine (e.g. shingles vaccine) is needed, this should be given before starting rituximab or when the B-cell levels have returned to normal.
 - Inactivated vaccines are safe but may be less effective after rituximab treatment.



RITUXIMAB (利妥昔单抗)

Information leaflet

1. 什么是利妥昔单抗，它是如何起作用的？

利妥昔单抗是一种生物制剂药物，通过减少一种称为B细胞的免疫细胞，从而降低自身抗体水平和减缓炎症。利妥昔单抗与B细胞表面的CD20蛋白结合。

2. 利妥昔单抗用于治疗哪些皮肤病？

- 寻常型天疱疮
- 落叶型天疱疮
- 大疱性类天疱疮
- 粘膜类天疱疮
- 线状IgA病
- 狼疮
- 皮炎炎

3. 谁不适合使用利妥昔单抗？

如果您有以下任何情况，则不适合使用利妥昔单抗：

- 感染，特别是病毒性肝炎或结核病
- 严重的心脏问题，如心脏衰竭
- 容易呼吸困难
- 免疫系统受抑制，如癌症、艾滋病毒感染、艾滋病
- 怀孕、试图怀孕或正在哺乳
- 大脑和神经系统疾病或症状，如多发性硬化症或格林-巴利综合征或癫痫发作；手脚麻木
- 需要接种任何疫苗，包括出国旅行的疫苗
- 计划进行重大手术

4. 在服用利妥昔单抗多久后会见效？

如果您对治疗有反应，通常会在2至16周内开始感觉好转。

5. 我该如何使用利妥昔单抗？

利妥昔单抗是一种通过静脉输注给药的药物，需在医院内进行。第一次输注需要几个小时，随后的输注通常会比较快速。每个疗程的利妥昔单抗是在间隔两周进行两次输注。当疗效减退时，例如第一次输注后12至18个月，可能会重复治疗。利妥昔单抗不能治愈，但有助于控制症状。您可能仍需继续服用其他药物以治疗您的病情。在输注前您可能会被给予抗组胺药和扑热息痛以降低输注反应的风险（见6a）。

6. 利妥昔单抗可能带来的副作用有哪些？

- a. 常见
- 输注反应：瘙痒、皮疹、潮红、发烧、发冷、喘息、呼吸困难、血压下降
 - 严重的感染
 - 脱发
- b. 罕见
- 进行性多灶性脑白质病（病毒性脑部感染）：混乱、失忆、情绪变化、刺痛感、虚弱、步态不稳、视力模糊、言语问题、面部或四肢运动困难

7. 开始治疗前会发生什么？

您将会接受身体检查、血液测试和胸部X光检查。如果您有任何结核病的症状（例如持续干咳、体重减轻、发烧、夜间盗汗），请告知您的医生，因为您需要接受结核病的检查和测试。

8. 在使用利妥昔单抗期间，我将如何接受监测？

血液测试将在开始使用利妥昔单抗3个月后进行，随后每6个月进行一次。您需要定期前往诊所让医生评估治疗效果和监测潜在副作用。如在预约间隔期出现任何副作用，请及时联系您的皮肤科医生。



RITUXIMAB (利妥昔单抗)

Information leaflet

9. 我应该采取哪些预防措施？

- a. 避免与有重感冒、流感或胸腔感染的人密切接触。
- b. 在使用利妥昔单抗期间频繁洗手。
- c. 避免食用未经过巴氏杀菌的乳制品和鸡蛋。避免食用未充分烹煮的肉类。
- d. 如果出现以下情况，请告知您的医生：
 - 脚部肿胀、运动或平卧时呼吸困难
 - 注意到新的皮肤病变
 - 出现喉咙痛、发烧、排尿灼痛、牙科问题、皮肤红肿或疼痛、身体上的开放性溃疡或持续咳嗽
- e. 如果出现带状疱疹或水痘，或与这些疾病的患者接触，请立即就医。您可能需要服用抗病毒药物。
- f. 计划出国旅行前，请与您的医生讨论。根据您的旅行的地点，可能需要采取预防感染的措施。
- g. 计划的手术应在利妥昔单抗最后一次输注的至少一个月后进行。
- h. 在任何手术或牙科工作之前，请告知您的外科医生或牙医您已经使用或计划接受利妥昔单抗治疗。
- i. 治疗结束后的至少12个月内应避孕，并且有生育能力的女性应采取有效的避孕措施。接受过利妥昔单抗治疗的女性不应母乳喂养。如果您正怀孕或计划怀孕，请告知您的医生。
- j. 在怀孕期间接触过利妥昔单抗的婴儿在6个月大之前都不应接种活疫苗。
- k. 在使用非处方制剂或草药补品之前，请与您的皮肤科医生讨论。您的所有医生都需要知道您正在使用利妥昔单抗。
- l. 疫苗接种
 - 您应在利妥昔单抗治疗前4周或更早接种所有疫苗。建议在开始利妥昔单抗治疗前接种肺炎球菌疫苗和年度流感疫苗。
 - 在接受利妥昔单抗疗程后应避免接种活疫苗（例如口服脊髓灰质炎疫苗、风疹、卡介苗、麻疹、口服伤寒疫苗、黄热病、鼻喷流感疫苗）。如果需要接种活疫苗（例如带状疱疹疫苗），应在开始利妥昔单抗治疗前或B细胞水平恢复正常后接种。
 - 灭活疫苗是安全的，但在利妥昔单抗治疗后可能效果会较差。