



ABROCITINIB

Information leaflet

1. What is abrocitinib and how does it work?

Abrocitinib is a type of drug known as a Janus kinase (JAK) inhibitor. It works by blocking some of the pathways that cause inflammation.

2. What skin conditions are treated with abrocitinib?

·Moderate-to-severe atopic eczema

3. How long will I need to take abrocitinib before it has an effect?

Itch is usually reduced within days of starting treatment. You may require 4 months to see any improvement. If there is no improvement after several months, your doctor may consider an alternative treatment. Abrocitinib is an ongoing treatment to control eczema. It is not a cure for atopic eczema.

4. How do I take abrocitinib?

Abrocitinib is a tablet taken by mouth once daily with or without food and at any time of the day. Swallow the tablet whole with water. The starting dose of abrocitinib is usually 100 mg or 200 mg once a day and the dose may be increased or decreased depending how well the medicine is working and whether there are any side effects.

5. What are the side effects of abrocitinib?

a. Common

- Acne
- Herpes simplex recurrence
- Shingles
- Headache
- Nausea
- High cholesterol
- Low red blood cells
- Low white blood cells
- Increase in creatine kinase (enzyme)

b. Rare

- Reduced platelets
- Low lymphocyte count
- Heart attack
- Stroke
- Blood clots in the lungs or legs
- Lymphoma or cancers

6. How will I be monitored for the side effects of abrocitinib treatment?

a. Before starting treatment

Your dermatologist will ask if you have any current or past infections (e.g. HIV infection, viral hepatitis, tuberculosis, frequent cold sores, and shingles) and whether you have a history of cancer, blood clots, heart disease or stroke. Blood tests will be performed before starting. Please tell your dermatologist if you are or planning to become pregnant and if you are breastfeeding.

It is recommended to have up-to-date immunisations before starting abrocitinib e.g. pneumonia, influenza, shingles, COVID-19)

b. During treatment

You will have regular blood test monitoring to check your full blood count, and lipid profile.



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Information leaflet

7. What precautions should I take?

- a. Do not take abrocitinib during pregnancy. If you are planning for a child or if you become pregnant while taking abrocitinib, please discuss with your doctor as soon as possible.
- b. Women who can get pregnant should use effective contraception while taking abrocitinib and for up to 1 month after stopping.
- c. Keep alcohol consumption to a minimum.
- d. Avoid medications that prevent blood clots during the first 3 months of treatment. You can take aspirin during this time if prescribed by your doctor.
- e. As some drugs interact with abrocitinib, please tell any doctor, nurse or pharmacist treating you that you are taking this tablet.
- f. Do not take live vaccines while on baricitinib (e.g. polio, rubella, yellow fever).



ABROCITINIB (阿布昔替尼)

Information leaflet

1. 什么是阿布昔替尼及其如何运作？

阿布昔替尼是一种被称为Janus激酶（JAK）抑制剂的药物。它通过阻断引发炎症的一些通路来发挥作用。

2. 阿布昔替尼可以治疗哪些皮肤疾病？

中度至重度特应性皮炎（湿疹）

3. 服用阿布昔替尼多久后会见效？

通常在开始治疗后的几天内瘙痒就会减轻。您可能需要4个月的时间才能看到改善效果。如果几个月后仍无改善，您的医生可能会考虑替代治疗方案。阿布昔替尼是一种控制湿疹的长期治疗方法，但它不是特应性皮炎的治愈药物。

4. 我该如何服用阿布昔替尼？

阿布昔替尼是每日口服一次的药片，可以在饭前或饭后服用，并且一天中的任何时候都可以服用。配水整片吞服。阿布昔替尼的起始剂量通常为每日100毫克或200毫克，剂量可根据药物效果和是否有副作用增加或减少。

5. 阿布昔替尼的副作用有哪些？

a. 常见副作用

- 痤疮（青春痘）
- 单纯疱疹复发
- 带状疱疹
- 头痛
- 恶心
- 高胆固醇
- 红细胞减少
- 白细胞减少
- 肌酸激酶升高

b. 罕见副作用

- 血小板减少
- 淋巴细胞计数减少
- 心脏病发作
- 中风
- 肺部或腿部血栓
- 淋巴瘤或癌症

6. 我将如何接受阿布昔替尼治疗的副作用监测？

a. 在开始治疗之前

您的皮肤科医生会询问您是否有任何当前或过去的感染（如HIV艾滋病毒感染、病毒性肝炎、结核病、频繁的唇疱疹和带状疱疹），以及您是否有癌症、血栓、心脏病或中风的病史。开始治疗前将进行血液检查。如果你正在或计划怀孕，或正在母乳喂养，请告诉您的皮肤科医生。

建议在开始阿布昔替尼治疗前接种最新的疫苗（如肺炎、流感、带状疱疹、新型冠状病毒）。

b. 在治疗期间

您将定期进行血液检查，以监测全血细胞计数和血脂水平。

7. 我应该采取哪些预防措施？

- a. 怀孕期间不要服用阿布昔替尼。如果您计划怀孕或在服用阿布昔替尼期间怀孕，请尽快与您的医生讨论。
- b. 育龄妇女在服用阿布昔替尼期间及停止服用后的一个月内应使用有效的避孕措施。
- c. 将酒精摄入量保持在最低限度。
- d. 避免在治疗的前三个月内服用预防血栓的药物。如果您的医生开了阿司匹林，您可以在在此期间服用。
- e. 由于某些药物与阿布昔替尼有相互作用，请告知为您治疗的医生、护士或药剂师您正在服用该药片。
- f. 在服用阿布昔替尼期间不要接种活疫苗（如脊髓灰质炎、风疹、黄热病）。