



Adalimumab

Humira

This handout explains the drug adalimumab. It includes how to take it, what to expect, possible side effects, and cautions.

Adalimumab (brand name Humira) prevents the inflammation that occurs in *psoriasis* and other similar autoimmune diseases. It does this by blocking a protein called *tumor necrosis factor* (TNF).

How do I take it?

- Adalimumab must be injected under the skin (*subcutaneously*). It comes in a 40 mg prefilled syringe.
- Keep the syringe in the refrigerator. Do **not** freeze it.
- Remove the syringe from the refrigerator 15 minutes before you inject it to allow it to warm to room temperature.
- Inject adalimumab just under your skin, usually in your thigh, upper arm, or abdomen.
- Use different injection sites. Each injection should be at least 1 inch away from where you have injected adalimumab within the last 2 months.

Dose

Most people inject 40 mg adalimumab once every 2 weeks. But, your doctor may decide that weekly injections are best. Your doctor may also decide to give you 80 mg for the first dose, and then decrease the dose to 40 mg every week or 2 weeks.

What should I expect?

You should expect to see the best results after taking adalimumab for about 20 weeks.

When you start taking adalimumab, we may ask you to have a blood draw so that we can do some basic blood tests. We may check your blood again every 3 months while you are taking the drug.

Is it safe?

Adalimumab was approved for use in the United States by the Food and Drug Administration in 2008. Since then, it has been used safely in thousands of patients. But, there are some side effects and warning signs that you will need to watch for.

Injection Site Reactions

A few people (about 6%, or 6 out of 100) develop an area of redness and swelling around the skin where the adalimumab is injected. This occurs most often after the 2nd or 3rd injection. Old injection sites may start to swell at the same time.

This swelling usually goes away after about a month and does not happen again. If it bothers you, call your dermatologist. It can be treated with topical ointments or pills like Benadryl.

Allergic Reactions to Latex

The needle cover for the prefilled syringe and the pen for adalimumab contain natural rubber. If you know that you are allergic to latex or rubber, do not touch this cover with your bare hands or allow it to touch your skin.

Infection

Inflammation is one way our bodies fight off infections. Because adalimumab prevents inflammation, you are at higher risk for severe infection while on adalimumab.

Call us at **206-598-5065** if you have:

- Fever higher than 100.4°F (38°C)
- Sore throat
- Severe headache
- Any other symptoms that you are concerned about

We may ask you to visit your doctor, or we may be able to take care of the problem over the phone. Most of the time, these symptoms are not serious. But, we will want to be sure.

Lymphoma

Early studies suggested that people who were taking adalimumab had a slightly higher risk of *lymphoma* (cancer in the lymph system). This issue is still being studied, but it appears that people with psoriasis who are taking adalimumab have about the same risk of lymphoma as people with psoriasis who are not taking it. More studies are being done to answer this question.

Questions?

Your questions are important. If you have any questions about your treatment, please call the number below to speak with a dermatology provider.

Dermatology Center:
206-598-5065

Autoimmune Disease

Rarely, people on adalimumab develop an autoimmune disease called *lupus*. This usually goes away after adalimumab is stopped.

Tuberculosis

Adalimumab can activate tuberculosis (TB) in people who have been exposed to the disease in the past. We will give you a TB skin test before you start taking adalimumab. If you keep taking the drug, you will have a TB skin test once a year.

Multiple Sclerosis

People with multiple sclerosis (MS) have gotten worse after starting adalimumab. You should not take adalimumab if you or anyone in your family has or has had MS.

Congestive Heart Failure

People with congestive heart failure (CHF) should not take adalimumab. The drug can make this condition worse.

Vaccines

Because adalimumab suppresses the immune system, you should not receive live vaccines while you are taking the drug. Killed or recombinant protein vaccines are safe.

Always ask your doctor before you get **any** vaccination. These are the live vaccines you **must** avoid while taking adalimumab (as of 2011):

- Measles-mumps-rubella-varicella (MMR or MMRV)
- Nasal influenza (FluMist)
- Rotavirus (Rotarix, RotaTeq)
- Chicken pox or zoster/shingles (VZV Varivax or Zostavax)
- Smallpox (ACAM2000)
- Yellow fever (YF-Vax)
- Typhoid (Vivotif Berna)

Please note that the flu shot is OK. Only inhaled FluMist is live and must be avoided.

Please note that the Typhim Vi preparation of the typhoid vaccine is safe to use.

If you need one of the live vaccines listed above, you will need to stop adalimumab 10 days before you have the vaccine. You can resume adalimumab therapy 10 days after you have the vaccine.

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