Medicine Management In Axial Spondyloarthritis (also known as axSpA or axial SpA)

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# Management Axial spondyloarthritis (also known as axSpA or axial SpA)

**NSAIDs** Education, exercise, Peripheral Axial physical disease disease therapy, rehabilitation, patient Sulfasalazine associations, Local corticosteroids self help groups **TNF Blockers** 

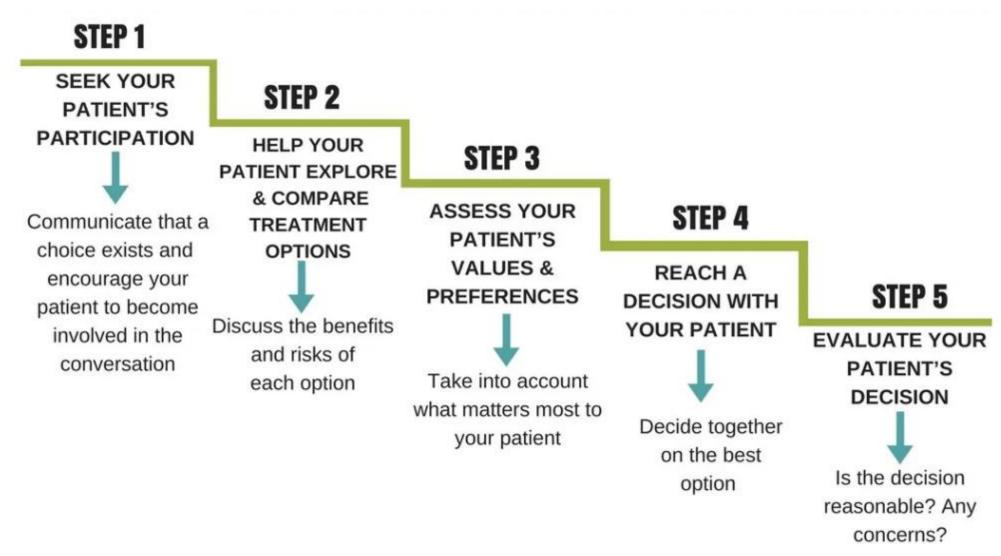
# Management Axial spondyloarthritis (also known as axSpA or axial SpA) - todays talk

**NSAIDs** Education, exercise, **Peripheral** Axial physical disease disease therapy, rehabilitation, patient Sulfasalazine associations, Local corticosteroids self help groups **TNF Blockers** 

# Treatment of axial SpA should be tailored according to:

- Current manifestations of the disease (axial, peripheral, entheseal, extraarticular symptoms and signs)
- Associated Comorbidities
  - Inflammatory Skin, Eyes, Bowel diseases disease related other long term comorbidities
- Level of current symptoms, clinical findings, and prognostic indicators
  - Disease activity/inflammation
  - Pain
  - Function, disability, handicap
  - Structural damage, hip involvement, spinal deformities
- General clinical status (age, sex, comorbidity, concomitant drugs)
- Wishes and expectations of the patient.

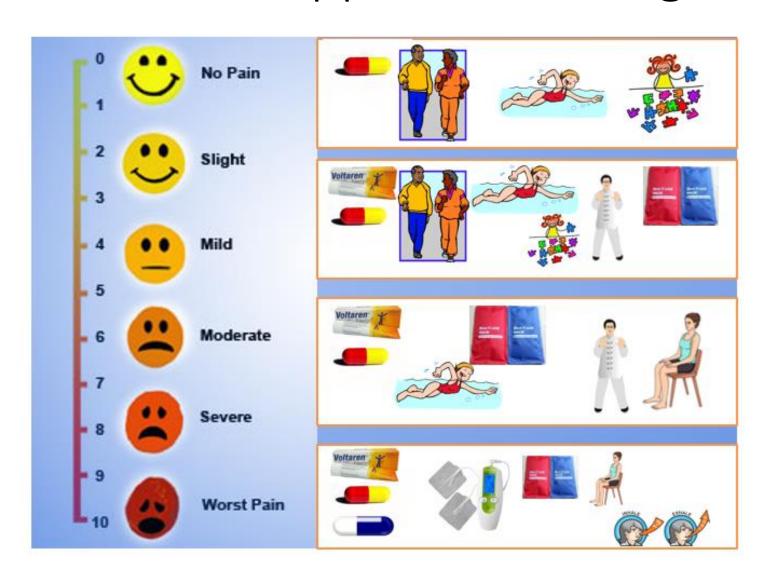
# Essential Steps of shared Decision Making



## Patient Centred care



# Medicines and Supportive Management in



## Benefits of Shared Decision Making

- Improved patient education and understanding Axial spondyloarthritis
- Decreased patient anxiety- side effects day to day and long term
- Decreased decisional conflict
- Improves self management
- Appropriate patient expectations
- Improved patient satisfaction/ confidence in clinician patient relationship
- Improved patient outcomes

# Non Steroidal Anti Inflammatory Drugs-NSAIDS

The main types of NSAIDs include:

- Ibuprofen
- Naproxen
- Diclofenac
- Celecoxib
- Mefenamic acid
- Meloxicam
- Etoricoxib
- Indomethacin
- High-dose aspirin (low-dose aspirin is not normally considered to be an NSAID)

## **NSAIDS**

Nonsteroidal antiinflammatory drugs (NSAIDs) are the most-frequently used drugs to ease the pain, inflammation and stiffness that come with Axial spondyloarthritis pain-relieving effects of NSAIDs begin quickly -- within a few hours. However, swelling and warmth in joints may take longer to get better; it can take up to two weeks before you see full benefits Improving mobility and quality of life



https://cks.nice.org.uk/topics/nsaids-prescribing-issues/

https://www.nhs.uk/conditions/nsaids/

https://nass.co.uk/managing-my-as/medication/nsaids/

Risks - Possible side-effects of NSAIDs include:

- stomach upsets
- •heartburn
- •indigestion
- •rashes
- headaches
- wheeziness
- •fluid retention
- •Gastric Bleeds
- Cardiovascular risk

**Cautions** 

Asthma

Alcohol increases the risk of gastro-intestinal haemorrhage associated with NSAIDs.
Known kidney impairment
In combination with Steroids
Heart Failure and Hypertension

### NICE and NSAIDS

If an NSAID is indicated, the lowest effective dose should be used for the shortest possible duration.



https://cks.nice.org.uk/topics/nsaids-prescribing-issues/

https://bnf.nice.org.uk/treatment-summaries/non-steroidal-anti-inflammatory-drugs/

# Oral or Topical Non Steroidal Anti Inflammatory

Oral- multiple joint pain and stiffness-Skin sensitivity





Topical- Single joint pain Gastric irritation

# Capsaicin

- Capsaicin cream (Axsain) is licensed for the symptomatic relief osteoarthritis pain, localized neuropathic pain who wish to avoid, or cannot tolerate, oral treatments
- Advise the person to apply a small amount of cream (pea size) to the affected area 3–4 times a day (not more often than every 4 hours)
- Review treatment after 8 weeks.

# Painkillers- Analgesia

### **Routine Pain Killers**

Paracetamol is a medicine on its own.

Paracetamol is often found in a combination with weak opioid medicines:-

- Co-codamol: 8/500mg (8mg of codeine and 500mg of paracetamol) can be bought over the counter
- 30/500 (30mg of codeine and 500mg of paracetamol.

### **Opioids (weak):**

- Tramadol
- Codeine
- Dihydrocodeine

### **Opioids**

Morphine - this may be slow release tablets or normal release tablets/liquids.

Oxycodone - this may be slow release tablets or normal release tablets/liquid.

Buprenorphine - this may be a slow release skin patch or a normal release tablet (under the tongue). 

Fentanyl - this will be a slow release skin patch

https://www.versusarthritis.org/about-arthritis/treatments/drugs/painkillers-and-nsaids/

Painkillers- Analgesia

Pain Killers – Analgesia are the most-frequently used drugs to ease the pain



https://cks.nice.org.uk/topics/nsaids-prescribing-issues/

https://www.nhs.uk/conditions/nsaids/

https://nass.co.uk/managing-my-as/medication/nsaids/

Side effects

Drowsiness and dizziness

Nausea (feeling sick)

Vomiting (being sick)

Constipation or diarrhoea - useful laxatives are senna or sodium docusate

Headache.

Itching.

Contact NHS119 if you experience any of the

following:

Fast/racing heartbeat

Confusion/hallucinations

Fainting

Skin rash (severe)

Blurred vision

Vomiting blood

Passing blood when opening your bowels.

Acute Abdominal Pain

Caution

Drinking alcohol while taking tablets is best avoided as it may increase side effects

# Painkiller- analgesia addiction

 Dependence is most likely to happen if a person takes a higher dose of an addictive pain medication than they were prescribed or if the medication was improperly prescribed.

# Disease Modifying Anti Rheumatic Drugs

- Axial Disease
   Sulfasalazine
- Comorbidities

Psoriasis- Methotrexate / Leflunomide

Iritis- Methotrexate

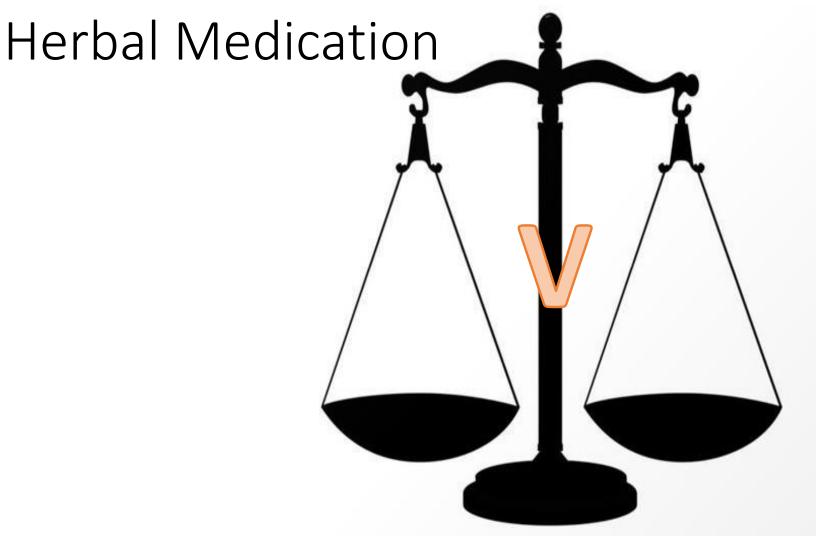
Inflammatory Bowel – Methotrexate

## Herbal Medicines

 Herbal medicines are those with active ingredients made from plant parts, such as leaves, roots or flowers

## Herbal Medicines – Remember

- They may cause problems if you're taking other medicines. They could result in reduced or enhanced effects of the medicine, including potential side effects.
- You may experience a bad reaction or side effects after taking a herbal medicine.
- Not all herbal medicines are regulated. Remedies specially prepared for individuals don't need a licence, and those manufactured outside the UK may not be subject to regulation.
- Evidence for the effectiveness of herbal medicines is generally very limited. Although some people find them helpful, in many cases their use tends to be based on traditional use rather than scientific research.



Taking a herbal medicine may not be suitable for:

- people taking other medicines
- people with serious health conditions, such as liver or kidney
- •pregnant or breastfeeding women
- the elderly

## Turmeric

- is believed to have anti-inflammatory properties
- Possible side effects that included:
  - headache
  - diarrhoea
  - skin rash

Studies have shown that turmeric can have strong anticoagulant effects, which could affect how blood-thinning drugs work in the body.

https://www.versusarthritis.org/about-arthritis/complementary-and-alternative-treatments/types-of-complementary-treatments/turmeric/

# Amitriptyline

- Amitriptyline were first created to treat anxiety and depression. But when taken at a low dose, it's also good for treating pain, especially pain caused by damage to your nerves
- Amitriptyline works by increasing the amount of serotonin your brain makes.
- Serotonin is a chemical, called a neurotransmitter, that the brain sends out to nerves in the body.
- Serotonin is thought to improve your mood, sleep and the way your body responds to pain
- low dose of amitriptyline won't treat depression, but it should reduce your pain, relax your muscles and improve your sleep

https://www.versusarthritis.org/about-arthritis/treatments/drugs/amitriptyline/https://www.nhs.uk/medicines/amitriptyline-for-pain/

Amitriptyline

Improves quality of sleep, which can improve experienced of pain / quality of life



#### Common side effects include:

- constipation
- dizziness
- dry mouth
- feeling sleepy
- difficulty peeing
- •headaches.

Speak to your GP or ring NHS119 if you experience

- •a fast or irregular heartbeat
- yellowing of the skin or the whites of your
   eyes these can be signs of liver problems
- •a headache, confusion, muscle cramps, generally feeling weak or experiencing a seizure these can be signs of low sodium levels in your blood
- •low blood pressure
- •eye pain, changes in your sight, swelling or redness in or around your eye
- •very bad constipation or you feel unable to pee and you're in pain
- weakness on one side of your body
- •trouble speaking, thinking or balancing.

# Amitriptyline

- It's best to take your amitriptyline in the evening or before you go to bed. This is because it can make you feel sleepy.
- You may start to feel better after 1 or 2 weeks, but it can take 6 weeks for amitriptyline to work as a painkiller.
- Amitriptyline can cause extra side effects if you stop taking it suddenly. Talk to your doctor if you want to stop taking it.
- Amitriptyline is also used to treat depression, but at lower doses it's very good for treating pain.

# Gabapentin

Gabapentin is used to treat epilepsy.

It's also taken for nerve pain, which can be caused by different conditions, including diabetes and shingles. Nerve pain can also happen after an injury.

With nerve pain, it's thought to block pain by affecting the pain messages travelling through the brain and down the spine

- •you'll usually take gabapentin 3 times a day. You can take it with or without food.
- •Most people who take gabapentin do not get any side effects. But some people may feel sleepy, tired and dizzy. Common side effects are usually mild and go away by themselves.
- •It takes at least a few weeks for gabapentin to work.
- •Some people can become addicted to gabapentin after taking it for a long time. When stopping gabapentin you'll need to reduce your dose gradually to avoid withdrawal symptoms.

Gabapentin

With nerve pain, it's thought to block pain by affecting the pain messages travelling through the brain and down the spine



#### Common side effects include:

Feeling sleepy, tired or dizzy Feeling / being sick (nausea)

Diarrhoea

Mood changes

Swollen arms and legs

Blurred vision

Dry mouth

Difficulty getting an erection

Weight gain

Memory problems

Headaches

Getting more infections than usual

#### Serious side effects

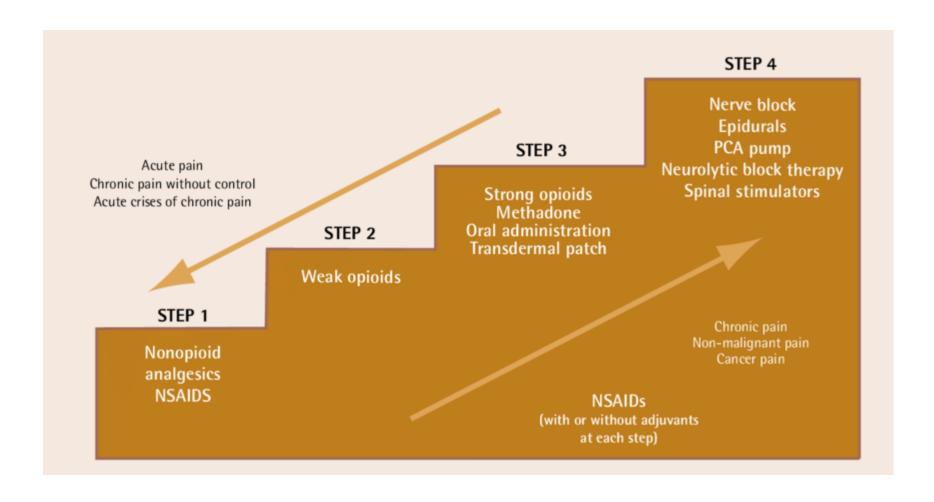
Call a doctor or contact 111 straight away if you have a serious side effect, including:

- thoughts of harming or killing yourself
- •high temperature, swollen glands that do not go away, your eyes or skin turn yellow
- •unusual bruises or bleeding, severe tiredness or weakness, unexpected muscle pain or weakness, with or without a rash these may be symptoms of a serious reaction
- •long-lasting stomach pain, feeling sick or being sick these may be warning signs of an inflamed pancreas
- •muscle pain or weakness and you're having dialysis treatment because of kidney failure
- seeing things that are not there (hallucinations)

### **Serious allergic reaction**

In rare cases, it's possible to have a serious allergic reaction (anaphylaxis) to gabapentin.

## Painkiller- Where Next



# Drug Interactions

Interactions View paracetamol drug monograph Paracetamol has the following interaction information: Filter by drug name Sorted by: Name | Sort by: Severity Enter drug name 53 interactions Acenocoumarol Paracetamol increases the anticoagulant effect of Acenocoumarol. Manufacturer Severity: Moderate Evidence: Study Alcohol (in those who drink heavily) causes severe liver damage when given with Paracetamol. Manufacturer makes no recommendation. Severity: Severe Evidence: Study Both Paracetamol and Alcohol can increase the risk of hepatotoxicity. Alectinib Both Paracetamol and Alectinib can increase the risk of hepatotoxicity. Asparaginase Both Paracetamol and Asparaginase can increase the risk of hepatotoxicity. Atorvastatin Both Paracetamol and Atorvastatin can increase the risk of hepatotoxicity. Bedaquiline Both Paracetamol and Bedaquiline can increase the risk of hepatotoxicity. Busulfan Paracetamol is predicted to decrease the clearance of Busulfan, Manufacturer advises Severity: Moderate Evidence: Theoretical

Paracetamol

Drug interaction information

Severe interactions are highlighted with a red

Find out more about BNF interactions information

https://bnf.nice.org.uk/interactions/

# Side Effect V Intolerance/ sensitivity V Allergic Reaction

Most of the unwanted symptoms you might experience from taking a prescription drug are not caused by an allergic reaction.

- Side Effect are know and you can find the possible side effects on the drug's label or package insert
- Drug intolerance and drug sensitivity can both manifest in multiple forms including dizziness, nausea, headaches, and muscle or joint pain- drug intolerance typically develops over a few days or weeks.
- Drug allergies that usually manifest within a few minutes or hours after drug intake

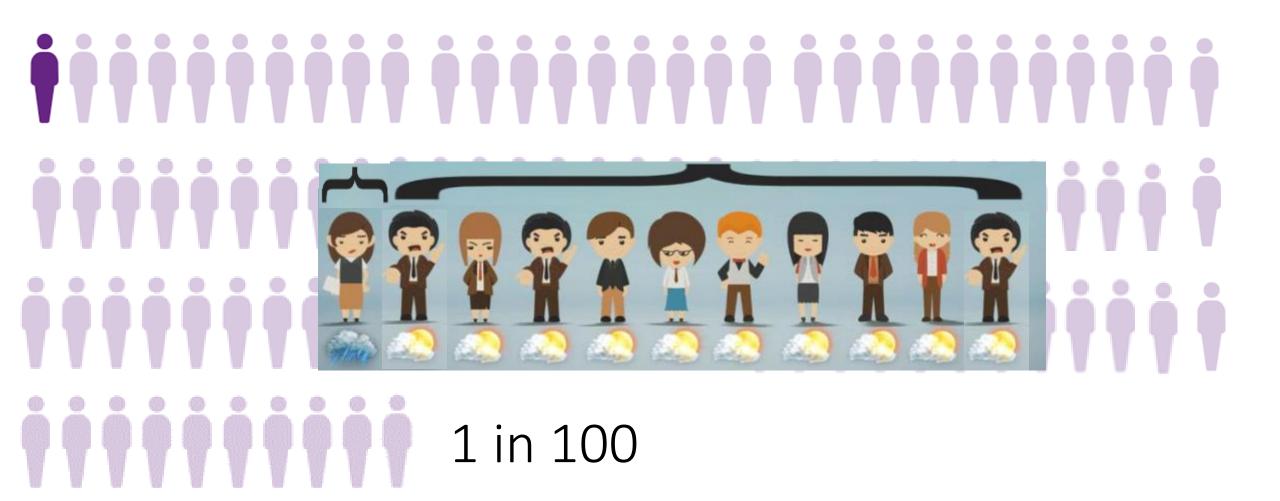
# Frequency of adverse drug reactions

- Very common 1 in 10
- Common (frequent) 1 in 100 + < 1 in 10
- Uncommon (infrequent) 1 in 1000 + < 1 in 100</li>
- Rare 1 in 10,000 and < 1 in 1000</li>
- Very rare< 1 in 10,000</li>

# 1 in 10- Very Common

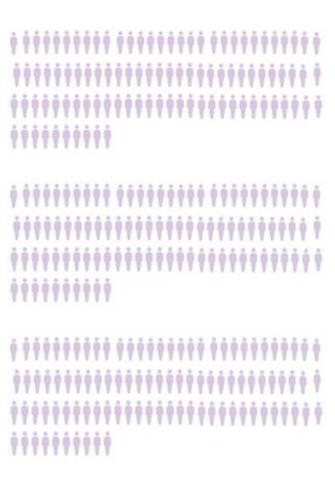


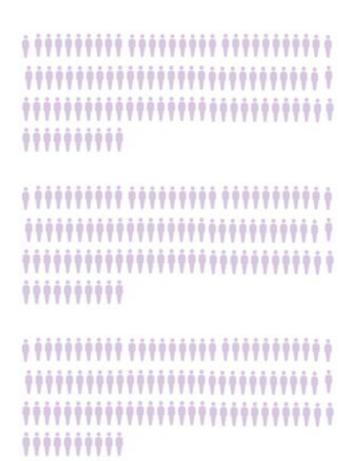
## 1 in 100-common

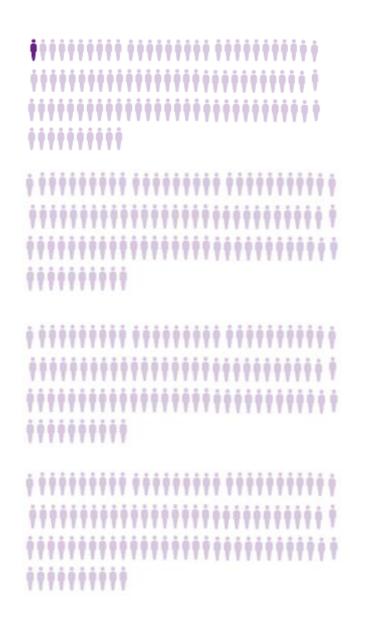


## ••••••• \* \* \*\*\*\*\*\*\*\* \*\*\*\*\*\*\*\*\*\*\* 999999999 \*\*\*\*\*\*\*\*\*\* 999999999 \*\*\*\*\*\*\*\*\*\*

## 1 in 1000- uncommon







# > 1 in 1,000 Rare





### Call 999 or go to A&E now if:

- · you get a skin rash that may include itchy, red, swollen, blistered or peeling skin
- · you're wheezing
- · you get tightness in the chest or throat
- · you have trouble breathing or talking
- · your mouth, face, lips, tongue or throat start swelling

You could be having a serious allergic reaction and may need immediate treatment in hospital.

# What questions to ask when starting a new medication

- 1. What is the medication for? ...
- 2. How am I supposed to take it? ...
- 3. How should I store the medication? ...
- 4. Why this medication? ...
- 5. How do I know if it's working? ...
- 6. What side effects can I expect? ...
- 7. Does this affect over-the-counter medications? ...
- 8. What do I do if I miss a dose?

# Know your medicines and keep your health care team updated

## Med List

- Levoxyl (00 mg ( per day
- Lisinopril 20 mg ( per day
- Sertraline (00 mg (1/2 per day
- Zyrtec (O mg ( per day
- Aspirin 8 ( mg ( per day
- Topamax 25 mg ( per day
- Vitamin C
- Vitamin B()
- Calcium
- St. John's Wort

#### Current

Prescribed Over the Counter Medication Herbal and Supplements

Vaccinations – current and previous

### **Allergies Known**

Medication but also food, animals, plasters, insect bites etc

### Methotrexate Alert Card

This Person is taking Methotrexate First Name: Hospital Number: Show this card at all medical/dental appointments including hospital admissions Please show to the Pharmacist when collecting any new medication-including over the counter medications







Where **not** to get more information about

your medication

My friend Sam has just started that medication today – he felt a bit sick My friend jacks friend Sam has just started that medication he was sick My friend Kelly's,
friend jacks
friend Sam has is
taking that
medication he
was sick
everyday

My friend Johns, friend Kelly's, friend Jacks friend Sam is taking that medication he was so sick he was admitted to hospital I think

My friend, Helen's friend
Johns, friend Kelly's, friend
Jacks friend Sam is taking
that medication he was so
sick he was admitted to
Intensive Care















# Where to get more information about your medication







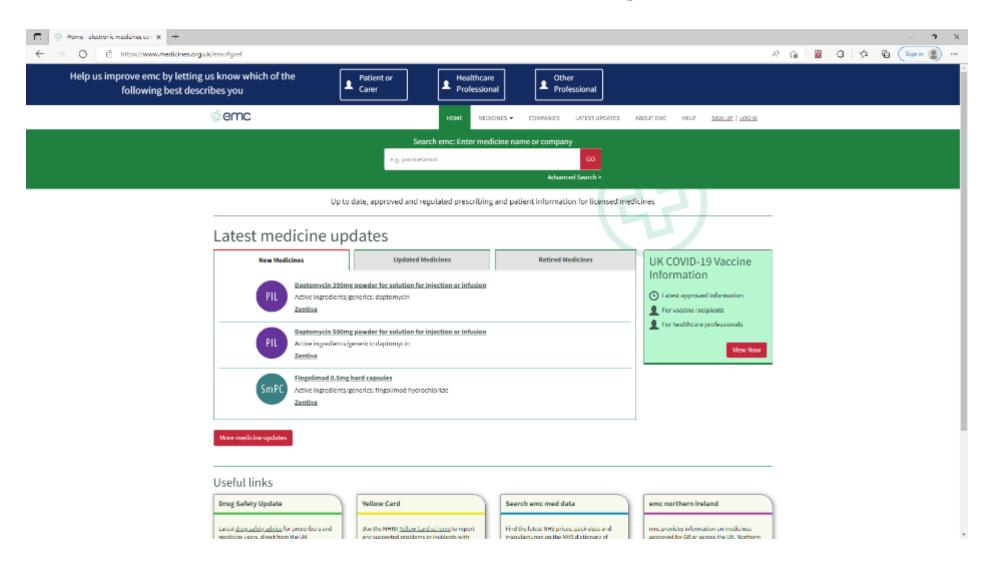
www.versusarthritis.org/aboutarthritis/treatments/drugs/



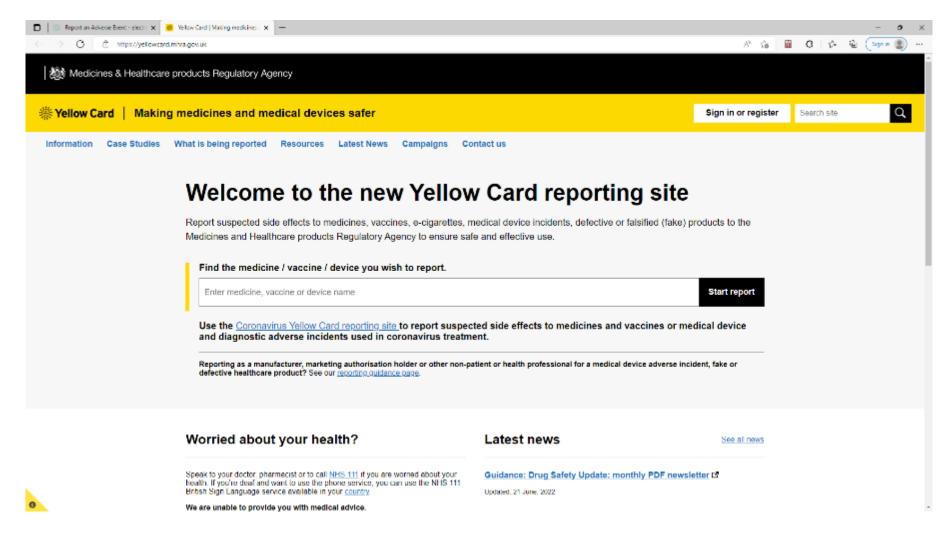
Hospital GP Community



# electronic medicines compendium (emc)



# Reporting side effects



https://yellowcard.mhra.gov.uk

## Medicine wastage

Unused prescription medicines cost the NHS in the UK an estimated £300million every year. This could pay for ...

11,778 MORE community nurses or

80,906 MORE hip replacements or

19,799 MORE drug treatment courses for breast cancer or

300,000 MORE drug treatment courses for Alzheimer's or

312,175 MORE cataract operations

Please let your GP or Pharmacist know if you've stopped taking any of your medicines

Check what medicines you still have at home before reordering

Discuss your medication with your GP or Pharmacist on a regular basis

Think carefully before ticking all the boxes on your repeat prescription forms and only tick those you really need If you don't need the medicine please don't order it! If you need the medicine in the future you can still request it. If you need to go into hospital, please remember to take all your medicines with you in a clearly marked bag.

Please also remember that your medicines are prescribed only for you; it's not safe to share them with anyone else.

## Medicine wastage

### Remember that unused medicines cannot be recycled

- Even if you never open them, once medicines have left the Pharmacy, they cannot be recycled or used by anyone else.
- ✓ Please bring your unused medicines to the Pharmacy for safe disposal.
- ✓ NEVER dispose of your unused or unwanted medicines down the toilet.



### Unused medicines are a safety risk

- Return out of date medicines to your pharmacy or dispensary for safe disposal
- ✓ If your medicines change return your old medicines to the pharmacy for safe disposal to avoid mixing them up with your new medicines
- Don't stockpile medication it is a safety risk for children and others who might take them
- Store medicines in an appropriate place out of reach of children

# Other support for Pain Management

Other Patient organisation Support groups/ resources
There's lots of self-help advice available from a variety
of organisations supporting people living with longterm pain, such as:

•Action on Pain www.action-on-pain.co.uk

British Pain Society www.britishpainsociety.org

•Pain Concern https://painconcern.org.uk

• <u>PainSupport</u> https://painsupport.co.uk

## NHS Pain Management Programmes

### **Pain-management programmes**

Some people receiving treatment at a pain clinic may be offered a pain management programme (PMP).

The aim of a PMP is to improve your quality of life, despite your pain, rather than reducing your pain. PMPs are usually delivered through a series of group sessions with other people with persistent pain, in a friendly environment.

### The sessions may include:

- •gentle exercise
- relaxation and mindfulness
- how to manage emotions related to long-term pain
- •group discussion
- •learning to pace yourself to avoid pain flare-ups

https://www.nhs.uk/live-well/pain/how-to-get-nhs-help-for-your-pain/

