

Adalimumab – Humira

What is Humira?

Humira is a biologic medication approved by the European Agency for the Evaluation of Medicinal Products (EMA) for the treatment of psoriatic arthritis. Humira is also being studied for the treatment of moderate to severe psoriasis.

Key Features

- Approved for treating psoriatic arthritis
- Patients give themselves an injection under the skin every other week
- Patients should be screened for latent (hidden) tuberculosis (TB) before taking Humira
- Long-term side effects are still being monitored

How does it work?

Humira blocks tumour necrosis factor-alpha (TNF- a), a chemical “messenger” in the immune system that signals other cells to cause inflammation. There is too much TNF- a in the skin of people with psoriasis and the joints of people with certain types of arthritis. TNF-a can also lead to increased immune system activity through the activation of T cells. T cells are a type of white blood cell in the body; in psoriasis once T cells are mistakenly activated, they can trigger inflammation and other immune responses and fuel the development of psoriasis lesions.

Humira helps lower the amount of TNF-a to more normal levels, thus interrupting the inflammatory cycle of psoriasis and psoriatic arthritis and leading to improvement in symptoms for many people who take it.

Who is it for?

Humira is indicated for the treatment of active and progressive psoriatic arthritis in adults when the response to previous disease modifying antirheumatic drug therapy has been inadequate.

Abbott Laboratories, Humira’s manufacturer is currently conducting studies of the medication for psoriasis.

Who should not take Humira?

- People with active serious infections, history of recurrent infections or a history of heart failure
- People with multiple sclerosis or other similar types of demyelinating neurological diseases
- Children – the medication has not been approved for children
- Caution is advised for the elderly, due to the already increased risk of infection for this age group
- Pregnant women should not be treated with Humira and women should not breastfeed during treatment with Humira

How is it used?

Patients take Humira at home every other week by giving themselves an injection under the skin, similar to diabetes patients.

Humira should be used in combination with methotrexate, but it may be given alone if methotrexate is inappropriate. It is also safe to take Humira with pain relievers, such as NSAIDs (e.g. ibuprofen) that are often taken for arthritis. Humira is designed to be taken continuously to maintain improvement.

What are the side effects?

Common side effects in psoriatic arthritis patients included upper respiratory tract infections, injection site reactions and high blood pressure.

In rheumatoid arthritis studies, the most common side effects reported were – upper respiratory infections, abdominal pain, headache, rash, injections site reactions and urinary tract infections. These side effects were generally mild and did not cause most patients to stop taking Humira. These events happened most often after the first dose of Humira and may decrease after additional doses.

The medication should not be started in someone with an active infection and it may not be recommended for someone with a history of recurring infections. If a serious infection occurs a doctor will most likely stop Humira.

People should be evaluated for latent (hidden) TB infections by getting a TB skin test prior to treatment with Humira. Hidden TB must be treated first, before people can begin taking Humira.

How do I get Humira?

Humira can only be prescribed by the hospital consultant (Dermatologist or Rheumatologist) who is responsible for your psoriatic arthritis care. It will only be prescribed for those patients for whom all other treatments have failed or are contraindicated.