Kyntheum (brodalumab)

What is Kyntheum?
Kyntheum (also referred to by its generic name, brodalumab) is a biologic medication that is used to treat severe psoriasis. Biologics are modern medications that are made using living cells, designed to change or mimic processes within the human body. Kyntheum is taken by an injection under the skin.

You can read more about who Kyntheum is suitable for in the ‘Who is it for?’ section on this sheet.

How does Kyntheum work?
Kyntheum blocks the activity of interleukin 17A (IL-17A), a chemical ‘messenger’ in the immune system that signals other cells to cause inflammation. In people with psoriasis or psoriatic arthritis, the immune system is overactive and creates too much inflammation, which leads to the development of psoriasis symptoms. By blocking IL-17A, Kyntheum aims to prevent some of that inflammation from occurring, leading to an improvement in psoriasis for some people who take it.

Who is Kyntheum for?
Kyntheum is for people with severe psoriasis who have not had a good response from, or cannot take or tolerate other systemic treatments including ciclosporin, methotrexate or PUVA. You will usually need to have tried these treatments before you can be offered Kyntheum. Kyntheum is currently not available in Scotland.

Who should not take Kyntheum?
- People with active infections should not start Kyntheum. You will be tested to check for infections before starting treatment.
- In most cases, pregnant women should not be treated with Kyntheum and women should not breastfeed during treatment with Kyntheum. Women should not fall pregnant for twelve weeks after treatment has stopped.
• Kyntheum should be used with caution in people with Crohn’s Disease, as Kyntheum has been shown to exacerbate (make worse) Crohn’s Disease in some cases. Your Dermatologist should discuss this with you, if relevant.

• Thoughts of suicide and suicidal behaviour occurred in a small number of people taking Kyntheum in clinical trials. Most of these people had a history of depression or suicidal behavior before the trial, and no evidence has been found to suggest Kyntheum caused this. Despite this, Kyntheum should be used with caution in people with a history of depression or other psychological conditions, and you should let a healthcare professional know if these get worse while taking Kyntheum. Your Dermatologist should discuss this with you, if relevant.

How is Kyntheum used?
Individually, people take Kyntheum at home by giving themselves an injection under the skin via a pre-filled syringe. Most people will be trained by a nurse to give the injection to themselves. The first doses are taken once a week for the first three weeks, but after that Kyntheum is usually taken every two weeks.

People taking Kyntheum will have regular blood tests every three to six months- usually carried out by Dermatology Nurses, or by their own GP- to monitor for infections or other possible effects of the treatment. People taking Kyntheum are more at risk of infections and so should be vaccinated against pneumonia and have an annual flu vaccination. However, not all vaccinations are safe in people taking Kyntheum; ‘live’ vaccinations should be avoided. Check with a doctor or nurse before having any vaccinations or taking other medication if you are not sure.

What are the side effects?
As with all medications, some side effects are possible when taking Kyntheum. It is important to remember that not every person taking a medication will get all, or even any, of the possible side effects listed. Many side effects of Kyntheum are mild and do not cause most people to stop taking it. Kyntheum is a new treatment and, as such, this side effect data comes from clinical trials, but will be updated as more ‘real-world’ experience with the treatment is collected.

The most common side effects of Kyntheum are joint pain, headache, tiredness, diarrhoea, fungal infections and throat or mouth pain. Because Kyntheum works by suppressing part of the activity in the immune system, it can lead to low white blood cell levels (known as neutropenia) and can make people taking it more prone to infections than they usually would be. If a serious infection occurs a doctor will most likely stop Kyntheum.
Although side effects are possible with this, and any, treatment, it is important to remember that people taking Kyntheum have regular blood tests to check for health issues. If you are worried about the side effects of Kyntheum, you should discuss these with your doctor.

**How long will Kyntheum take to work?**

It can take a number of weeks before a person’s psoriasis improves on Kyntheum. If considerable improvement is not seen in 12 weeks, treatment with Kyntheum will be stopped. If this happens, a Dermatologist should discuss the next available options with you - there are a number of other biologic or systemic treatments that can be tried if Kyntheum does not work.

**How safe and effective is Kyntheum?**

Kyntheum is a new medication that was licensed to treat psoriasis in the UK in 2017. ‘Real-world’ (ie. Non-clinical trial) safety and effectiveness data is being collected by a long-running study, the British Association of Dermatologists Biologics Interventions Register (BADBIR). It is recommended that all people taking biologic treatments for their psoriasis should be asked for their information to be included in this register.

For more information on BADBIR, please see the website: [www.badbir.org](http://www.badbir.org)

The information in this resource is not intended to replace that of a healthcare professional: If you have any concerns or questions about your treatment, do discuss this with your doctor and **always read the patient information leaflet** to make sure you are using them correctly.

For more information, or for a list of resources used in the production of this information sheet, please contact the Psoriasis Association.

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