Taltz (ixekizumab)

Biologic medications have been used to treat psoriasis in the UK for a number of years and, although those currently in use are thought to be safe, it is important to note that long term safety data is still being compiled by the British Association of Dermatologists Biologics Interventions Register (BADBIR). The National Institute for Health and Care Excellence (NICE) recommends that all patients receiving biologic therapy, who provide their consent, are entered onto this observational study register. For more information on BADBIR, please see the website: www.badbir.org

What is Taltz?

Taltz (also referred to by its generic name, ixekizumab) is a biologic medication that is used to treat psoriasis and psoriatic arthritis. Biologics are modern medications that are made using living cells, designed to change or mimic processes within the human body. Taltz is taken by injection.

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

How does it work?

Taltz binds to a cytokine (chemical messenger) called interleukin-17A (IL-17A), which is involved in the body’s inflammatory and immune responses. There are higher levels of IL-17A in psoriatic plaques than in non-psoriatic skin. By binding to IL-17A, Taltz inhibits its action (ie. stops it from working as it usually does). This means Taltz interrupts the inflammatory cycle of psoriasis, which can lead to the improvement in symptoms for many people who take it.

Because of the effect Taltz has on the immune system, you will be monitored for infections throughout treatment, and you will be tested for latent (hidden) TB before starting treatment. People taking Taltz may need an annual flu jab, but should check with a doctor or nurse before having any other vaccinations or taking other medication.
Who is it for?
Taltz is for people with severe psoriasis who have not responded to, or cannot take or tolerate other systemic treatments including ciclosporin, methotrexate or PUVA. Most people will have to have tried these treatments before they can be offered Taltz or any other biologic treatment for their psoriasis.

Taltz can also be prescribed to treat active and ‘progressive’ (worsening) psoriatic arthritis if other disease-modifying anti-rheumatic drugs have not worked. This includes other ‘anti-TNF’ biologic treatments that are available for psoriatic arthritis. This means that if you have taken systemic treatments such as methotrexate, sulfasalazine or leflunomide, or biologic treatments such as Simponi (golimumab), Humira (adalimumab), Enbrel (etanercept) or Remicade (infliximab) for your psoriatic arthritis without a good response, you could be offered Taltz.

Who should not take Taltz?

- Taltz should be used with caution in people who have an active infection. Some infections – including tuberculosis – will need to be treated before Taltz can be taken. Your doctor will test for infections before starting treatment with Taltz
- Pregnant women should not be treated with Taltz and women should not fall pregnant for at least 10 weeks after treatment has stopped
- Caution is advised in people with Crohn’s Disease or ulcerative colitis, as Taltz has been shown to exacerbate (make worse) these conditions in some cases. If you have one of these conditions and you are offered Taltz, make sure you discuss this with your doctor
- Caution is also advised for those with already impaired immune systems

How is it used?

Taltz is taken as an injection under the skin, either via pre-filled syringe or pre-filled ‘pen device. Most people will be trained by a nurse to administer the injection themselves. A Taltz syringe or ‘pen’ holds 80mg, but the recommended first dose is 160mg, meaning two injections should be taken. After this initial dose, people will usually have 80mg (one injection) every other week, at weeks 2, 4, 6, 8, 10 and 12. After this, people usually have one 80mg injection every four weeks.

People taking Taltz are likely to need regular blood tests - usually carried out by a Dermatology Nurse or by their own GP- to monitor for infections or other possible effects of the treatment.

If an adequate response is not seen after 12 weeks of using Taltz, the treatment may be stopped.
What are the side effects?

Taltz is a new treatment and, as such, the information on side effects comes from clinical trials.

The most common side effects reported in clinical trials include upper respiratory tract infections, injection site reactions (such as redness or burning of the skin where the treatment is injected), pain in the mouth or throat, and nausea. Fungal infections, such as athlete’s foot, were also common. Most infections were not serious and did not cause the person to have to stop taking Taltz. However, if a serious infection does occur a doctor will most likely stop treatment with Taltz.

How do I get Taltz?

Taltz can only be prescribed by the hospital consultant (usually Dermatologist) who is responsible for your psoriasis care.

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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