

# Ciclosporin.

You have been prescribed **Ciclosporin**.  
This is a **Daily** medication.

Don't take over the counter preparations or **herbal remedies** without discussing this with your doctor, rheumatology nurse specialist or pharmacist first.

## Will it affect vaccinations?

**Pneumovax** (which gives protection against the commonest cause of pneumonia) and **yearly flu vaccines** don't interact with Ciclosporin and are recommended.

However it is recommended that you avoid live vaccines such as yellow fever if you are taking Ciclosporin. In situations where live vaccines may be necessary, your doctor will discuss the possible risks and benefits of the immunisation with you.

## Does it affect fertility or pregnancy?

It's best not to take Ciclosporin when you're pregnant. If you're planning a family or if you become pregnant while taking Ciclosporin, you should discuss this with your doctor as soon as possible.

## Can I drink alcohol while on Ciclosporin?

There is no particular reason to avoid alcohol while on Ciclosporin.

## What about breastfeeding?

You should not breastfeed if you are on Ciclosporin. The drug may pass into the breast milk and could be harmful to your baby.

## Where can I obtain further information?

If you would like any further information about Ciclosporin, or if you have any concerns about your treatment, you should discuss this with your doctor, rheumatology nurse or pharmacist.

Arthritis Research UK

Tel: 0870 850 5000

Website: [www.arthritisresearchuk.org](http://www.arthritisresearchuk.org)

Notes:

# Patient Information

If you have any queries please contact the  
Helpline number: 01793 604323

If you would like this information in another format, i.e. large print or another language, please contact the Patient Advice and Liaison Service (PALS) department on 01793 604031

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**Ciclosporin** is a type of drug known as a disease-modifying anti-rheumatic drug, or DMARD. These drugs have the effect of dampening down the underlying disease process, rather than simply treating the symptoms. Ciclosporin regulates the activity of the immune system (the body's own defence system) so is always used with care.

### **Why is Ciclosporin prescribed?**

Ciclosporin is prescribed to reduce pain, swelling and stiffness in rheumatoid arthritis. It's also used to treat a number of other conditions, including psoriatic arthritis and systemic lupus erythematosus (SLE)

### **When and how do I take Ciclosporin?**

Ciclosporin is usually taken in capsule form **twice a day**. It's also available as a liquid. Changing the brand name (manufacturer) of your Ciclosporin can change its effect on your body, and if you do this, you may need to have checks more often.

Your doctor will advise you about the correct dose. Usually you will start on a low dose and your doctor may increase the dose gradually. The dose may be adjusted according to the severity of your symptoms. The dose you're given will depend on your body weight and how well your kidneys are functioning.

### **How long does Ciclosporin take to work?**

Cyclosporin does not work immediately. It may be up to 4 months before you notice any benefit.

### **What other treatments could be used instead of Ciclosporin?**

A number of other drugs are used in the treatment of rheumatoid arthritis and related conditions. Your doctor will discuss these other options with you.

### **Will I need any special checks while on Ciclosporin?**

Because Ciclosporin can affect the kidneys and blood pressure, your doctor will arrange for you to have a blood and urine test and blood pressure management before you start treatment. You will then have regular checks while on Ciclosporin. You may be asked to keep a record of your blood test results in a booklet, and you should take it with you when you visit your GP or the hospital.

**You must not take Ciclosporin unless you're having regular checks.**

### **What are the possible risks or side-effects?**

Possible side effects of Ciclosporin include a rise in blood pressure and effects on your kidneys. It can also affect your liver, but this only seems to happen with doses much higher than those used for arthritis. Ciclosporin can sometimes cause increased levels of lipids (e.g. cholesterol) in the blood.

You should tell your doctor or rheumatology nurse specialist straight away if you develop any of the following after starting Ciclosporin:

- Nausea (feeling sick)
- Diarrhoea
- Headache
- Gum overgrowth – it is important to see your dentist regularly whilst on Ciclosporin as it can affect your gums
- Tiredness
- Excess hair growth
- Any other new symptoms or anything else that concerns you.

You should stop Ciclosporin and see your doctor immediately if:

- Any of the symptoms listed above are severe
- You haven't had chickenpox or shingles and you come into contact with someone who has chickenpox or shingles
- You develop chickenpox or shingles

Chickenpox and shingles can be severe in people on treatments that affect the immune system such as Ciclosporin. You may need antiviral treatment, which your doctor will be able to prescribe.

Side-effects caused by Ciclosporin may clear up if the dose is reduced.

### **Can I take other medicines along with Ciclosporin?**

You should discuss any new medications with your doctor before starting them, and you should always tell any other doctor treating you that you are taking Ciclosporin.

You should only take **non-steroidal anti-inflammatory drugs (NSAIDs)** based on the advice of your GP or rheumatologist.

Ciclosporin isn't a **painkiller**. If you're already on painkillers you can carry on taking these as well as Ciclosporin unless your doctor advises you otherwise.