

Abnormal results and what to do

Leflunomide has a half-life of 1-4 weeks and any severe reaction (or suspected severe reaction) may require a wash-out procedure ((see below)

Abnormal blood count

- WCC** < $3.5 \times 10^9/l$ or **neutrophil** count < $1.6 \times 10^9/l$ - stop drug. Inform rheumatology. If the patient is febrile or has other evidence of infection, hospital admission for supportive treatment may be necessary
- MCV** > **105 fl**, check B12 and folate and treat if low. If no cause found contact rheumatology
- Platelet count** < $140 \times 10^9/l$ stop drug and inform rheumatologist. Bleeding or bruising may require hospitalisation for supportive treatment if severe
- Rapid falls or persistent downward trends in any of these measures, even if still within the normal range, may require dosage reduction

Abnormal LFT's

- ALT** and **alkaline phosphatase** within 2 times the upper limit of the normal are acceptable. Levels 2 times upper limit of normal should be discussed with rheumatology. Severe LFT Abnormalities may require a washout procedure if no other cause is identified

BP > 140/90 treat according to current guidelines.

Weight loss

- If >10% of original weight and no other identifiable cause - stop drug and inform rheumatologist

Deteriorating renal function

- An eGFR of ≤ 30 may require dose reduction and/or closer monitoring and should be discussed with rheumatology

Other Adverse Reactions

Mouth ulceration or rash

- withhold drug. Check FBC urgently. In the case of severe lesions commence the washout procedure immediately.

Pneumonitis—

is rare but patients developing new shortness of breath or dry cough should stop the drug and seek medical attention

Pregnancy & Breastfeeding

- Reliable contraception is imperative for men and women taking leflunomide. Women or men taking the drug who wish to become pregnant/father a child should see the rheumatologist. A washout will be required and blood tests to measure drug levels will need to be checked at least twice and confirmed safe before attempting to conceive
- Women taking leflunomide must not breast feed

Washout Procedure.

Use either:

- Cholestyramine 8g three times daily (can be obtained by contacting duty pharmacist if not otherwise available) or
- Activated charcoal 50 g four times daily (not suitable where there is risk of aspiration)

The recommended duration is 11 days. This may be modified depending on the the severity of toxicity. If toxicity is suspected please take blood for FBC, U&E and LFTs plus an additional gel tube to be stored by the laboratory, this can be submitted to the manufacturer for levels if necessary. Do not delay the commencement of the washout procedure, but please ensure that the rheumatologist is informed at the earliest opportunity.

Contacting the rheumatologist (GPs and treatment room nurses)

Emergency problems – contact the rheumatologist via the above numbers. If this fails advice may be sought from the on-call physician. When in doubt stop the drug at least temporarily Less urgent problems may be dealt with by:

- Writing or e-mail (using the rheumatology advice inbox) providing CHI number and clinical details
- Rheumatology telephone clinic for GPs Tuesday mornings 11-12.30—01896 826665

Borders Rheumatology Service Borders
General Hospital MELROSE
TD6 9BS

Tel:

01896 826665 (office)

01896 826666 (nurse helpline)

E-mail: rheumatology@borders.scot.nhs.uk

RheumatologyAdvice@borders.scot.nhs.uk
(for health care professionals only)

Prescribing and Monitoring Guidelines

Leflunomide

Shared Care Guidance for General Practitioners and Practice Nurses

November
2017

(review date Nov 2021)

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Patient's name

Address

Telephone Number:

