



Infliximab: a quick guide

This is a summary of our information about infliximab. Scan the QR code below for our full information about infliximab. Or visit www.crohnsandcolitis.org.uk/treatments for information about other treatments for Crohn's and Colitis.

Infliximab (pronounced **in-flik-see-mab**) is known by the brand names Flixabi, Inflectra, Remicade, Remsima and Zessly.

You might also hear it called an anti-TNF medicine or a biologic.

Who is infliximab for?

Infliximab is used to treat Crohn's Disease and Ulcerative Colitis in adults and children from 6 years.

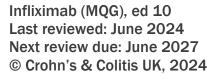
Your doctor or IBD team might offer you infliximab if you are in a flare-up to try and get your symptoms under control. You may also take infliximab to keep your Crohn's or Colitis under control (in remission).

How quickly does it work?

Everyone responds differently when taking a new medicine. You may begin to feel better soon after starting infliximab. But you might need two or three doses before you start to feel better.

How do I take infliximab?

At first you will take infliximab through a drip into a vein in your arm. This is called an infusion. Infliximab infusions are usually given in hospital. After your first infusion, you will have a second infusion two weeks later. Some people may have a third infusion four weeks after that. If infliximab is working for you, you will then have an infusion in hospital every 8 weeks.









Some hospitals may offer the option to take infliximab by injection. But you will still have your first two or three doses by infusion in hospital. The injection is given using a pre-filled pen or syringe that you inject yourself under your skin. If you change to injections, you or a family member will be shown how to do this. You will then have your injections at home every 2 weeks.

Your hospital will organise for the injections to be delivered to your home.

How well does it work?

For many people, infliximab works well to get their Crohn's or Colitis under control and keep it under control. But it does not work well for everyone. And for other people it may stop working after a while.

You may need to try several medicines before you find one that works for you.

Checks before starting infliximab

Before you start treatment, your IBD team will check that infliximab is right for you. They may ask you some questions and do some tests. This may include blood tests and X-rays. Tell your IBD team if you are pregnant, or you plan to get pregnant. They can help you make an informed decision about your care and your baby's safety.

Checks while taking infliximab

You should have regular checks while taking infliximab. This may include having blood tests.

Blood tests may be used to check the levels of infliximab and antibodies in your blood. This helps your IBD team to see if infliximab is working or if your dose needs changing.

It is important that you attend these check-ups and have the blood tests.







Special precautions

Infliximab affects the way your immune system works. You may be at a higher risk from infection. Infections may affect you more than they used to. You will still be able to fight off infections, but not quite as well as other people. And it may take you longer to recover. But this should not stop you from living life as before. Find out how you can reduce the risk of infection by visiting www.crohnsandcolitis.org.uk/immunosuppressants.

You may be more at risk of skin reactions when taking infliximab, and in rare cases, skin cancer. To reduce this risk, take care in the sun:

- Stay in the shade
- Use sunblock or high factor sunscreen
- Cover your skin and wear a hat when you are out in the sun
- Do not use tanning equipment, such as a sunbed or tanning booth

The NHS website (www.nhs,uk) has more tips for staying safe in the sun.

Side effects

All medicines can have unwanted effects, although not everyone will get them.

Tell your IBD Team if you notice any side effects, or if you think you have an infection.

The most common side effects with infliximab are:

- Redness, swelling or pain where you had the injection or infusion
- Infections, such as a cold, tonsillitis, sinus infection or flu
- Tummy pain or feeling sick
- Headaches

This is not a full list of side effects. For more information see the Patient Information Leaflet provided with your medicine or visit medicines.org.uk/emc/







Taking other medicines

Infliximab can interact with some other medicines. Speak to your doctor or pharmacist if you are taking, or plan to take, any other medicines. This includes medicines that you buy yourself and any herbal, complementary, or alternative remedies.

Vaccinations

If possible, make sure that you are up-to-date with all of your vaccinations before you start treatment with infliximab.

You should not have live vaccines while taking infliximab. Live vaccines contain weakened live strains of viruses or bacteria. They can cause infection in people with a weakened immune system.

Everyone with Crohn's or Colitis taking a biologic medicine, such as infliximab, should be invited to have the flu vaccine every year. You should also be invited to have booster vaccines for COVID-19. You may be advised to have a pneumococcal vaccine and a shingles (Shingrix) vaccine. These are **not** live vaccines, and they are safe to have when you are taking infliximab.

Your IBD nurse is
You can contact them on

Our Helpline is a confidential service providing information and support to anyone affected by Crohn's or Colitis. Call us on **0300 222 5700** or email helpline@crohnsandcolitis.org.

We follow strict processes to make sure our information is based on up-to-date evidence and easy to understand. You can find out more at

http://www.crohnsandcolitis.org.uk/information-production.

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