Infliximab Infusion for Patients with Ulcerative Colitis
Patient Information Leaflet
Contact numbers

If you have any questions or are unsure about any of the information provided in this booklet, please contact a member of the GI team on one of the numbers listed below.

Russells Hall Hospital - GI Unit
Tel: 01384 244113 or via switchboard: Tel: 01384 456111.

Ask to speak to the nurse in charge. If the nursing staff are unable to address your questions, they will suggest alternative contacts.
Infliximab Infusion for Patients with Ulcerative Colitis

The decision for you to have Infliximab has been reached; this will depend on specific criteria being fulfilled by your disease process. Infliximab is expensive, funding has to be obtained in advance of your treatment and can only initially be given as an inpatient.

What is Infliximab?

Infliximab (Remicade) is a medication that is available to patients with Crohn's Disease however it is now licensed for use in patients with Ulcerative Colitis due to the severity of disease and lack of response to conventional treatments.

Ulcerative Colitis is due to an inflammatory process within the bowel. It is understood that a substance called Tumour Necrosis Factor (TNF) plays a major part in causing this inflammation. Infliximab works by blocking the action of TNF and as a result, inflammation is reduced.

Results cannot be guaranteed but success rates are good.

What if I need more information regarding Infliximab treatment?

Talk to your IBD nurse, GP, hospital consultant or pharmacist about Infliximab. Your IBD nurse can arrange for you to talk to someone who has already undergone this treatment if you would prefer.

We want you to be as informed as possible regarding this treatment and your Ulcerative Colitis.

Alternatives

This treatment has been offered to you because alternative treatments you have tried have been ineffective for your disease process. This will have been discussed with you already, however if you have any further questions do not hesitate to contact your IBD Specialist Nurse.

Further information

If you have any concerns or questions or if there is anything that you do not understand, please do not hesitate to ask a member of staff prior to discharge or contact the ward on 01384 456111 ext 2440.

If you have any questions or are unsure about any of the information provided in this booklet, please contact a member of the GI team on one of the numbers listed below.

Results cannot be guaranteed but success rates are good.
How soon will I notice the benefits of treatment and how long will they last?

Infliximab works quite quickly, but each patient is an individual, some patients notice an improvement in as little as 2 weeks. Although it appears that benefits can be long lasting, the length of time in remission from symptoms cannot be predicted.

Can I drink alcohol during treatment?

The national guidelines for alcohol consumption are set at 21 units per week for men and 14 units per week for women. It is recommended you stay within these guidelines. Any alcohol drunk should be consumed evenly over one week. (1 unit = a half pint of normal strength beer or 1 glass of wine or 1 pub measure)

Can I smoke whilst having treatment?

Smoking is not recommended; you will already have been advised by your doctor or IBD nurse regarding this.

You are not allowed to smoke in the hospital.

Do I need to take any other precautions?

It is recommended that you have a Pneumonia Vaccine prior to commencing infliximab, this is then repeated between 5-10 years. It is also advisable to have an annual flu jab. You should avoid live vaccines; these include Polio and Rubella (German Measles) vaccine.

Always let your General Practitioner (GP) that you are receiving infliximab before having any vaccinations.

How will Infliximab be given?

Infliximab is given by an intravenous infusion (drip into your vein). This is carried out initially as an inpatient on the ward following which you have 2 further infusions as a day case procedure within a 6 week period, this does depend upon your response to the initial infusion. It involves the insertion of a small plastic needle (cannula) into the vein in your arm. Although the infusion is given over a period of 2 hours, your total stay in the endoscopy unit will be approximately 5 hours when given as a day case procedure. This allows for pre assessment and a period of observation following the infusion.

It is important to remember that Infliximab is a treatment and not a cure.
Will I be able to drive home after the infusion?

Yes. Infliximab is non-sedating. If you needed antihistamines during your infusion however, your nurse would advise you, as these may make you drowsy. It may be wiser to have someone drive you home.

Do I take my other medication whilst having infliximab?

Yes. Your doctor will know what medication you are taking for your Ulcerative Colitis, however if you are taking other tablets then you must tell him before commencing Infliximab.

Does Infliximab affect pregnancy?

Recent limited research performed suggests that it may be safe to use if you are pregnant or become pregnant whilst being treated with Infliximab, we do not advise this however and it may alter or postpone your treatment should you become pregnant. It is recommended you use contraception during and after treatment for 6 months after treatment. If you are breastfeeding, then treatment may be postponed until your baby is weaned, however recent research says that breastfeeding is now possible. In men receiving Infliximab research suggests there is no need for contraception.

How often are the infusions given?

You will receive a course of 1, 2 or 3 infusions; this will be dependant on your disease process. A course of treatment will be over a period of 6 weeks. Your hospital consultant, based on his/her clinical judgement will decide on how many infusions you require.

Before admission

You will have your:-
- Weight, pulse and blood pressure measured.
- Your urine will be tested.
- Routine blood tests will be done.
- A chest x-ray will be performed if you have not recently had one.

When given as a daycase procedure, your Inflammatory Bowel Disease (IBD) Nurse will co-ordinate your admission to either the Endoscopy Unit/Clinical Research Unit or to ward C7. Admissions will be on a mutually suitable date.

You do not need to bring nightclothes but wear light non-restrictive clothing and to make your stay more comfortable, please bring a book, magazines or a personal CD/DVD player. You may also bring light refreshments with you although coffee and tea will be provided during your stay.
During your admission:

On arrival, you will be asked to complete an admissions document with your named nurse. Your temperature, pulse and blood pressure will be taken prior to commencement of your infusion; these will be monitored throughout your stay with us. If everything is satisfactory a cannula will be inserted into your vein and the infusion will be commenced. Your named nurse will look after you throughout your stay.

Will I have a reaction to the infusion?

During the infusion some people notice mild reactions, such as itching or mild stinging of the skin. Other reactions such as chills, wheeziness and difficulty in breathing, low blood pressure and rashes can occur and although rare, some patients can experience anaphylactic reactions, these can be severe and require emergency treatment.

If you experience any kind of strange feeling or discomfort during your treatment, you must let your nurse know immediately.

The nurse may slow the infusion down or if necessary stop the infusion temporarily. These reactions usually settle quickly but in some cases require treatment with antihistamines or paracetamol. If the reaction is severe the infusion will be discontinued.

Occasionally patients can have a delayed reaction to the infusion and feel unwell a few days after the infusion.

What side effects are there with Infliximab?

These include cough, headache, and chest infections and can include nausea and diarrhoea. If you have an active infection at the time of infusion this can be made worse by the treatment however your nurse will have made appropriate checks and if active infection is present, the infusion will be deferred to a later date. Old infections such as TB can be reactivated and heart failure can be made worse, these will have been taken into consideration prior to your treatment commencing.

Long-term effects cannot be known with each individual, this should have been discussed with you prior to your treatment commencing.

What if I develop any infections during treatment?

If you develop a serious infection, you will not proceed to your next infusion. If prior to any of your infusions, you develop an infection of any type, you must inform the endoscopy unit on 01384 456111 ext 2731 or your IBD Nurse on ext 2440 as soon as possible. You must also inform your General Practitioner (GP). The hospital staff will inform your consultant.