

USTEKINUMAB

Dear @Name@,

Your healthcare team has discussed the following medical therapy with you: ustekinumab. The brand name is Stelara. Here is some additional information. Let us know if you have any questions regarding this information.

How it works: This medication belongs to a class of drugs called biologic therapies (protein-based therapies). It helps to reduce irritation and swelling (inflammation) in the intestines. In some cases, this medication is used by itself. In other cases, it may be necessary to combine this medication with another medication to control inflammation. This medication binds and blocks two inflammatory proteins, interleukin 12 and 23, that can lead to inflammation associated with Crohn's disease.

How it is taken: The initial dose is injected into a vein in a procedure called an infusion. The infusion is given at a certified infusion center and lasts approximately one hour. The maintenance treatment is given as a self-administered injection under the skin, typically once every eight weeks; however, some patients may require more frequent dosing depending on their response. It may take up to six to eight weeks after starting this medication to see an improvement in your symptoms.

Possible side effects: During the infusion (and less than 24 hours after the infusion), a few patients may experience a mild reaction, which can include itching, flushing and rare hives. These symptoms can usually be treated by slowing the rate of the infusion or taking medications such as acetaminophen, anti-histamines, steroids, or epinephrine. If you experience any of these during the infusion, let your healthcare team know immediately. A reaction can occur after the infusion (24 hours to 14 days after infusion) as well. These symptoms may be treated by taking acetaminophen, anti-histamines, or steroids. The most common side effects seen in the clinical trials for Stelara in Crohn's disease patients were nasopharyngitis (throat infection), vaginal yeast infection, bronchitis, itching, urinary tract infection, and sinusitis.

Special considerations: There is also a small increased risk of squamous cell skin cancers. There may be an increased risk of cancers in general, but the actual risk is not yet known and likely quite small. Live vaccines (especially the live shingles vaccine) should not be given once you have started taking ustekinumab. There is a non-live vaccine for shingles - be sure to discuss this further with your healthcare provider.

Monitoring: Be sure to get tested for tuberculosis and Hepatitis B before taking this medication. Your provider may check routine labs like blood count, liver enzymes, kidney function and inflammatory markers while on this medication.

Points to remember: Before taking this medication, let your healthcare team know about other medical conditions that you may have or other medications (even over-the-counter medications or complementary therapies) you may be taking.

Other tips: The best way to control your disease is by taking your medication as directed. Even when you do not have any symptoms, it is very important to continue taking your medication to prevent your disease from becoming active again. Do not alter the amount of the medication, or how frequently you take it, unless directed by your healthcare team. If you have any side effects or you continue to have symptoms, speak to your healthcare team immediately.

For further information, please check out <http://www.ibdmedicationguide.org/> or follow this link:

/sites/default/files/2024-09/Biologics%209.13.24_30.pdf