Azathioprine

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This is an information leaflet for people who are considering starting azathioprine. It answers lots of the frequently asked questions and can guide you with your decision making as to whether this is the right drug for you. However, this booklet is not intended to take the place of the manufacturer’s guidance on the medication and should always be read in conjunction with the manufacturer’s recommendations.

If you have any more questions once you have read this leaflet, please contact your doctor or clinical nurse specialist.

What is azathioprine?

Azathioprine is a tablet which may be recommended by your consultant to help treat your autoimmune condition. This drug, and those with similar properties, is often referred to as an immunomodulator. Autoimmune disorders are when your body’s immune system becomes overactive and begins to attack healthy cells in your body. Azathioprine reduces the activity of the immune system, modifying the underlying disease process to limit or prevent tissue damage and disability. Some of the conditions and indications for use include:

- **Neuroimmunological indications including:**
  - Autoimmune encephalitis
  - Stiff person syndrome
  - Neurosarcoidosis
  - Neuromyelitis optica
  - Myasthenia gravis

- **Inflammatory muscle disease or myositis such as:**
  - Dermatomyositis
  - Polymyositis
  - Overlap myositis
• **Vascular indications including:**
  - Vasculitis

• **Other rheumatological and medical conditions such as:**
  - Rheumatoid arthritis
  - Lupus (SLE)
  - Asthma
  - Crohn’s disease
  - Eczema
  - General allergies

• **Prevention of organ rejection after transplantation**

**How do I take it?**
Azathioprine is usually taken in tablet form once or twice daily. It is usually taken with or after food. It is available as 25mg or 50mg tablets.

Before prescribing azathioprine, your doctor may order a blood test for an enzyme called TPMT (thiopurine s-methyltransferase).

**What are the possible side effects?**
As with all medications, azathioprine can sometimes cause side effects, particularly when you first begin taking it. Possible side effects include:

• Nausea (feeling sick), vomiting, diarrhoea

• Loss of appetite (which may be alleviated by taking it with food or last thing at night)

• Hair loss (although it often does grow back even if you’re still taking azathioprine) and skin rashes
• In rare cases, azathioprine causes inflammation of the lungs with breathlessness. If this happens to you, consult your doctor.

As with any drug that affects the immune system, there is a small increased risk of developing lymphoma (cancer of the lymphatic system) or skin cancer. You will need to limit your exposure to sunlight and UV light, by wearing clothing that covers exposed skin, using a high skin factor sunscreen and wearing sunglasses when appropriate. Discuss this with your doctor or clinical nurse specialist if you are concerned.

As azathioprine suppresses the immune system it can cause you to develop anaemia, make you more likely to develop infections and you are more likely to bruise easily.

You will require monitoring blood tests whilst taking azathioprine. This will need to be done at least every 2-4 weeks for the first two months, then at 2-3 monthly intervals. You will be told whether the blood tests will be carried out at the hospital or local GP surgery.

You must not take azathioprine unless you are having regular blood checks.

Is infection a side effect of azathioprine treatment?
As azathioprine affects the immune system, it can make you more likely to develop infections. You should tell your doctor or clinical nurse specialist straight away if you develop any of the following:

• A sore throat
• High temperature above 37.5°C or any other signs of infection
• Unexplained bruising or bleeding
• Yellowing of the skin or eyes (jaundice)
If any of these symptoms are severe or you become very unwell, you should stop the azathioprine and seek immediate medical attention, explaining you have been taking azathioprine.

You should also see your doctor if you develop chickenpox or shingles or come into contact with someone who has chickenpox or shingles. These infections can be severe in people on azathioprine. You may need antiviral treatment, and you may be advised to stop taking azathioprine until you are better.

For advice on avoiding infection from food, visit: https://www.nhs.uk/live-well/eat-well/10-ways-to-prevent-food-poisoning/

Is there an alternative?

There are alternatives if azathioprine is not well tolerated. Drugs such as mycophenolate and methotrexate have a similar effect on the immune system. If your condition is not adequately controlled by azathioprine, then stronger medications, such as cyclophosphamide, might be considered.

Immunomodulators can be used in the place of steroids, which can have long-term side effects. They usually take longer to work than steroids, so they may not have an immediate effect on symptoms. Unless you have severe side effects, it is important to keep taking azathioprine, even if it doesn’t seem to be working at first and/or when your symptoms improve, as this will be keeping the disease under control.

What happens if I forget to take a dose?

Never take more than the dose prescribed by your doctor. If you remember a missed dose within 12 hours of your dose being due, then take your dose as normal. If it is more than 12 hours since your dose was due, do not take a dose and take your next dose at the normal time. **Do not double the dose.** If you begin to miss doses frequently, please let your medical team know.
Will azathioprine interfere with my other medicines?

Before you start any new medicines, you must check with your doctor or pharmacist whether they might interact with azathioprine, especially those that are not prescribed by a doctor (such as over the counter medication or herbal remedies). Do not take over the counter preparations or herbal remedies without discussing this with your healthcare team first.

If you are on other medications which could interact with azathioprine, such as allopurinol, warfarin, co-trimoxazole or trimethoprim, then your doctor may suggest another treatment or a different dose of either the azathioprine or of your other medication.

You can drink alcohol whilst on azathioprine. However, it is recommended you only drink small amounts.

Can I still have vaccinations?

When taking azathioprine it is usually recommended that you avoid live vaccines, such as yellow fever or shingles. Sometimes a live vaccine may be necessary, for example the rubella vaccination in women of childbearing age. However speak to your medical team about this as there may be some exceptions. Pneumococcal vaccine and the yearly flu vaccines are recommended.

Azathioprine does not appear to increase the risk of catching influenza, but the illness can be much more severe if you catch it whilst taking this medication.
Can I still take azathioprine if I am pregnant or breastfeeding?

Current guidelines state that azathioprine can be taken during pregnancy. It is important that the mother’s health is maintained during pregnancy and disease flares are avoided by not stopping azathioprine.

If you are planning a family or become pregnant whilst taking azathioprine, you should discuss this with your doctor as soon as possible.

Azathioprine may pass into the breast milk. If you are on azathioprine and wish to breastfeed, you should discuss this with your neurology team beforehand.
The Trust provides free monthly health talks on a variety of medical conditions and treatments. For more information visit www.uhb.nhs.uk/health-talks.htm or call 0121 371 4323.

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