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**East Suffolk and
North Essex**
NHS Foundation Trust

Treating kidney disease with rituximab

Introduction

Rituximab is a drug that can help prevent your immune system causing damage to your body. This leaflet explains about rituximab treatment for kidney diseases, including the benefits, risks and what you can expect during your treatment. You still need to discuss with your kidney doctor before you make an informed decision.

What is rituximab and how does it work?

Rituximab is a type of drug known as a biological therapy. It is also known by the names MabThera, Rixathon and Truxima.

The immune system normally works by protecting the body from infections by causing inflammation. In some illnesses, the immune system becomes too active and fights the person's own body instead of helping to protect it. These kinds of diseases are called autoimmune diseases like vasculitis and Systemic Lupus Erythematosus (SLE). B cells are a type of white blood cells found in your blood and are involved in making proteins (antibodies) which are causing your illness. Rituximab works by removing these B cells from the blood for several months. After this, levels of B cells will slowly return to normal.

How long does rituximab take to work?

Rituximab usually takes about 4–6 weeks to work, and the effect of rituximab

usually lasts up to nine months. The first two doses are given 2–3 weeks apart and then if rituximab works for you, you may be given further doses. In most cases only one course is needed, but you can have repeat courses after 6–12 months if the doctor thinks you need this. If you have complications from the treatment, or the treatment does not work, your doctor will discuss other treatment options with you.

How is rituximab given?

You will be given a time slot to arrive at Rushmere Medical Day Unit.

You can have your usual breakfast in the morning; please bring all your medications with you.

Rituximab is given as an infusion into a vein in your arm by a trained nurse.

You will be prescribed other medications before the infusion to reduce side effects that can be caused by the infusion. These medications are oral paracetamol and two drips through the cannula; chlorphenamine (an antihistamine also called piriton) and methylprednisolone (steroid).

The first infusion takes about 5–7 hours in total. If you tolerate this well, you can have any further treatments more quickly.

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If you have any symptoms of an infection when you come for the infusion, you must tell the nurse or doctor straight away. It is not safe to give you rituximab when you have an infection.

What side effects might I experience?

Most people tolerate rituximab very well with few side effects. If they occur, side effects can begin during the first dose and may continue for a few hours afterwards but are usually milder with further doses.

During the infusion

A few people experience a fever, wheeziness, a rash or fall in blood pressure during or shortly after the infusion, or you may feel unwell during infusions. If this happens, tell the nurse and he or she will adjust the infusion rate and/or give you medications to help. The symptoms are usually milder with further doses. If your symptoms are severe you may need to stop treatment, but this is rare.

Other adverse effects

Rituximab may, in rare cases, cause temporary abnormalities of your blood counts and affect liver functions. This can manifest as being more prone to infection, easy bruising, bleeding, or tiredness.

Exceedingly rare side effects

Some patients (fewer than 1 in 100,000) taking rituximab have had a serious brain condition called progressive multifocal leucoencephalopathy (PML), which damages the brain and nervous system and can be fatal. Symptoms can include weakness, difficulty with movements (face, arms or legs), shaky movements or unsteadiness, pins and needles, sight loss, speech problems and/or changes in

behaviour or mood. If you experience any of these symptoms, you must tell your doctor straight away.

Other information

Taking medicines with rituximab

You should discuss any new medications with your doctor before starting them, and you should also tell any other doctor treating you that you are taking rituximab. Do not take 'over-the-counter' preparations without first discussing it with your doctor, nurse, or pharmacist.

Fertility, pregnancy, and breastfeeding

Avoid starting a family and breast feeding during and for 12 months after treatment with rituximab. The risk is unknown. Women of child-bearing age must use contraception while on rituximab.

Having an operation

If you need to have an operation, this will usually be scheduled for at least three months after your last infusion. Make sure your surgeon knows you're on rituximab.

Immunisations

Live vaccines (such as typhoid, polio, rubella, BCG, chicken pox, shingles) should be avoided.

Non live vaccine (such as flu and pneumococcal) can be given but discuss with your doctor first.

The COVID-19 vaccine, where clinically possible, should be given four weeks or more before rituximab. There may be a reduced response to COVID-19 vaccines, especially for people within six months of the last dose of rituximab.



You should also see your doctor if you develop chickenpox or shingles or come into contact with someone who has chickenpox or shingles. It is important to try to avoid any unnecessary contact with people known to have an infection.

Rushmere Medical Day Unit

Tel: 01473 702223

Monday to Friday, 8 am–8 pm

More information about Rushmere Medical Day Unit can be found on the ESNEFT website.

You can either scan this QR code with a smart phone:



Or type the following web address into your browser:
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Your experience matters

We value your feedback. Please help us improve our services by answering a simple question, in our online survey – “Overall, how was your experience of our services?”

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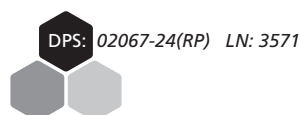
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www.esneft.nhs.uk/get-involved/your-views-matter/friends-and-family-test/

Thank you very much.

Please ask if you need this leaflet in an alternative format.

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www.esneft.nhs.uk



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