

Resource

Abatacept

Abatacept was approved for use in rheumatoid arthritis in 2007. It was initially only available by infusion but has more recently become available for use as an injection in both syringe and pen devices.

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Original Biologic drug	Method of administration
Abatacept (Orencia)	Monthly intravenous infusion or weekly subcutaneous (under the skin) injection

How does it work?

Abatacept works in a slightly different way to other biologic medicines. Abatacept targets white blood cells called T-lymphocytes, which regulate the activity of the immune system. It stops the T-lymphocytes from being switched on and so reduces the activity of the immune system. This in turn reduces the symptoms of RA.

Most commonly reported side effects

As with all medicines, abatacept does have possible side effects. It is important to remember that these are only possible side effects. They may not occur at all.

The most common side effects with abatacept are:

- Infections of the upper airway (including infections of the nose and throat)
- headache and nausea

Abatacept with other medicines

Some biologic medicines are known to interact poorly with other biologics. You may therefore be asked to leave a gap between stopping one biologic medicine and starting another, so that the first biologic has time to start coming out of your system.

Your healthcare team can advise you of any known interactions with your medication, so it is important to let them know about all the medicines you are taking, whether they are prescribed or over-the-counter. You should also let them know if you are taking any supplements or herbal medicines as these can also interact with medicines.

If you start taking any new medicines, check with a doctor, nurse or pharmacist that they are safe to take with any medicines you are currently taking.

Abatacept during pregnancy and breastfeeding

Abatacept should not be used during pregnancy or while breastfeeding, as there is limited data on its safety. Men can take these medicines while their partner is trying to conceive, although there is limited data on this.

As abatacept may cross the placenta during pregnancy, it is recommended that babies exposed to abatacept in the womb should not be given live vaccines for 14 weeks following the mother's last dose of abatacept during pregnancy.

Pregnancy information in this booklet is based on British Society for Rheumatology (BSR) guidelines on prescribing medicines in pregnancy and breastfeeding.

Before starting a family it is recommended that you get advice from the consultant or clinical nurse specialist about when to start a pregnancy.

T-cell blockers and alcohol

You can drink alcohol while taking abatacept. However, it is not uncommon when taking a biologic medicine to be on other medications, where different guidance applies. For example, methotrexate can affect the liver, so if you are taking methotrexate alongside a biologic, moderate intake of alcohol is recommended in line with government guidelines.

Abatacept and immunisations/ vaccinations

Live vaccines cannot be given to anyone who is already taking abatacept. The live vaccines used in the UK include: measles, mumps and rubella (MMR), chickenpox, BCG (for tuberculosis), yellow fever, oral typhoid or oral polio (injectable polio and thyroid vaccines can be used). If abatacept has not yet been started, it is important to seek advice on how long a gap to leave after having a live vaccine.

Annual flu vaccine is strongly recommended. It is available in two forms: an injection for adults and a nasal spray for children. The injectable vaccine is not a live vaccine so is suitable for adults taking abatacept. The nasal spray is a live vaccine and not suitable for adults taking abatacept. You can have a flu vaccination at your GP surgery or local pharmacy.

Annual 'Pneumovax' vaccination (which protects against pneumococcal pneumonia) is not live and is strongly recommended. Vaccination with Pneumovax should ideally be given before starting abatacept.

Shingles (Herpes zoster) vaccine is recommended for all adults turning 65, those aged 70 to 79 and those aged 50 and over with a severely weakened immune system. The vaccination is given as two doses, two months apart. at your GP surgery. It is available as a live or non-live vaccine, so it is important to make sure you are given the non-live version.

Covid-19 vaccines and boosters are not live and are generally recommended for people with RA.

Your GP can advise if you are eligible for free flu, Pneumovax, shingles and Covid vaccinations, depending on the medications you are taking and their doses.

Vaccination of close family members can help to protect someone with a lowered immune system from infection.

Medicines in rheumatoid arthritis

We believe it is essential that people living with RA understand why certain medicines are used, when they are used and how they work to manage the condition.

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