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ADVERSE SKIN EFFECTS SECONDARY TO THE USE OF IMMUNOBIOLOGICALS ON RHEUMATOID ARTHRITIS

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BACKGROUND

The development of immunobiological therapy has been changing the course of Rheumatoid Arthritis (RA). The treatment of RA with immunobiologicals is well established in scientific journals, as well as the incidence of its adverse effects. In this article, we will discuss the skin side effects secondary to the use of biologicals in the patients of the RA clinic in the last 4 years.

MATERIALS AND METHODS

A total of 233 patients with RA using immunobiologicals currently available in the public health care system (Adalimumabe, Certolizumab, Etanercept, Golimumab, Infliximab, Rituximab, Tocilizumab and Abatacept) were analyzed according the presence of skin lesions concomitant with the use of the medication. Subsequently, the lesions that resulted in the drug suspension were considered as directly related to the medication.

RESULTS

Abatacept was used by 39 patients, with cutaneous lesions being described in 11 of these, 2 lesions were related to immunobiological use. Both cases were pyoderma gangrenosum.

Adalimumab, used by 52 patients, 10 of these developed some cutaneous reaction. In 1 case there was change of medication due to pharmacodermia.

Certolizumab, used by 9 patients, 3 had a cutaneous reaction. In 1 case there was a direct relationship, and this was a paradoxical psoriasis.

Etanercept, used by 34 patients, 16 presented a dermatological reaction. In 5 cases, the lesions were related to the drug. The lesions found were: two cases of Herpes zoster, external otitis, paradoxical psoriasis and unspecified cutaneous reaction.

Golimumab was used by 23 patients, 5 of them had skin reactions during use. However, in neither case was there a need for suspension.

Of the 17 patients who used Infliximab, 10 had some dermatological reaction. Of these, 6 patients had the drug-related lesions, described as: Scaly papilloma of the tongue, paradoxical psoriasis, macular rash and 3 cases of unspecified allergic reaction.

Rituximab was used by 39 patients, with 5 of them developing some cutaneous reaction. In only 1 case there was a need for suspension of the drug due to a lesion characterized as urticaria.

Finally, Tocilizumab, used in 20 patients. Five of them developed dermatological lesions, and in 4, the drug had to be suspended. The lesions were: herpes zoster, subacute eczema and 2 cases of psoriasis.

CONCLUSION

The total number of skin lesions was 65 and the use of immunobiologicals had to be suspended in 25 cases, showing a safe use of the medications in relation to skin reactions.