

Acitretin

What is Acitretin?

Acitretin (also referred to by its commercial name Neotigason), is one of a group of drugs known as retinoids, which are related to vitamin A. Acitretin has been used to treat psoriasis that has not improved with topical treatments, or covers a large area of the body since the 1990's. In the treatment of psoriasis, acitretin belongs to the group of medicines known as 'systemics'. Systemics are treatments that are taken orally e.g., tablets that are swallowed.

Key Features

- Used to treat plaque psoriasis that has not responded to topical treatment, palmoplantar pustulosis (PPP or pustular psoriasis) and generalised pustular psoriasis (GPP)
- Taken orally in capsule form with food, once a day
- Unlike other standard systemic treatments for psoriasis (e.g. methotrexate and ciclosporin), acitretin is not classed as an 'immunosuppressive therapy'
- Should not be used in women of childbearing age as it can seriously harm an unborn baby.

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How does it work?

In people who have psoriasis, the usual skin cell reproduction process has been speeded up. This results in more skin cells being produced and at a faster rate than usual. Acitretin works by slowing down the skin cell reproduction process. Unlike other traditional systemic treatments used for psoriasis (such as methotrexate or ciclosporin), acitretin does not suppress the immune system.

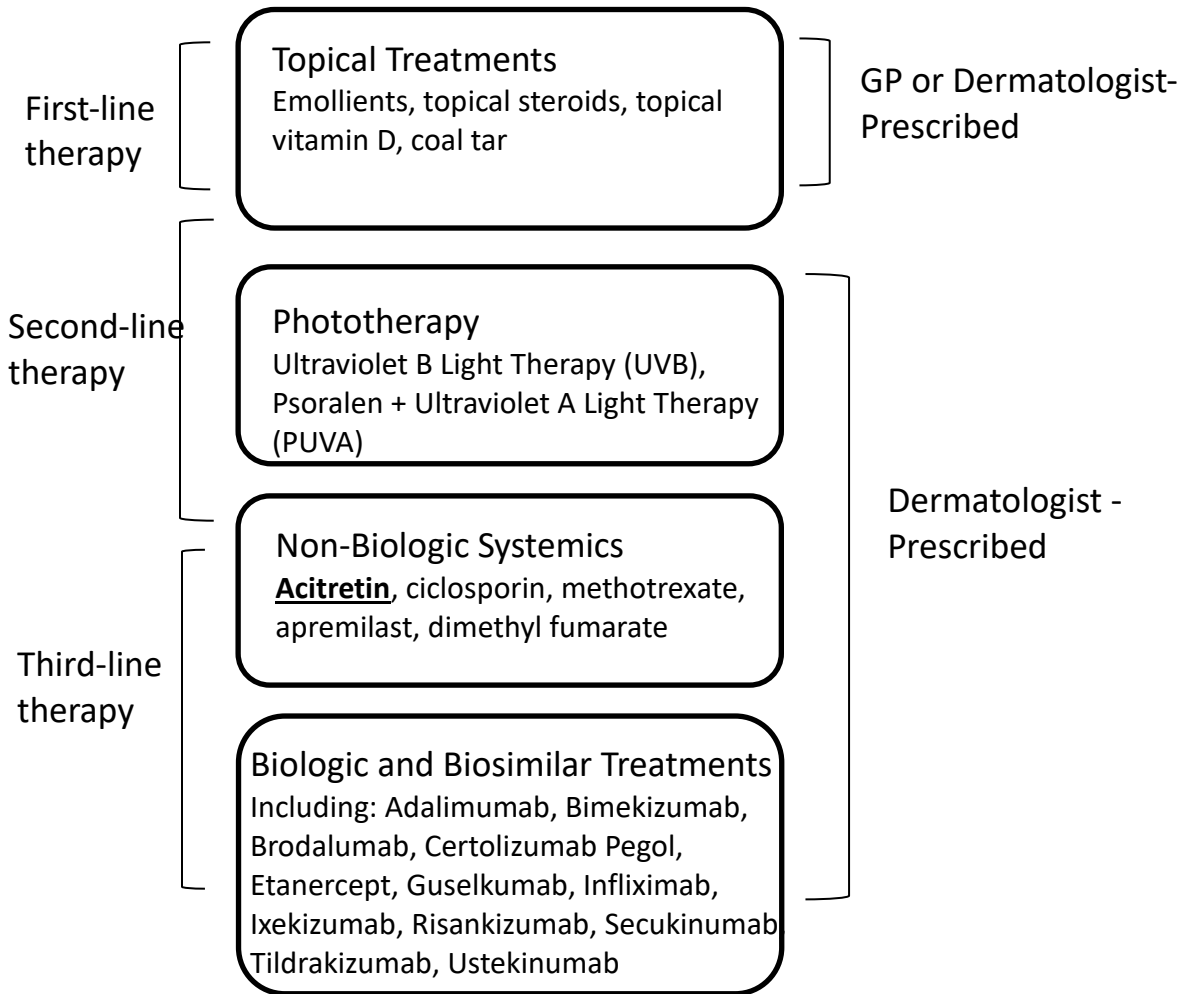
It can take 2-4 weeks before you start to notice an improvement in your psoriasis and may take up to four months before you see the maximum benefit.

Who is it for?

Acitretin is for people with widespread psoriasis who have not had a good response from, or are unsuitable for, topical treatments (treatments that are applied to the skin) or phototherapy.

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The diagram below shows where acitretin is placed in the psoriasis treatment pathway. Acitretin is also used to treat severe pustular psoriasis on the palms of the hands and soles of the feet (also known as palmoplantar pustulosis, or PPP) and generalised pustular psoriasis (GPP).



Who should not take acitretin?

- Acitretin is not normally given to women of childbearing age. This is because retinoids, such as acitretin, can cause birth defects and so both pregnancy and breastfeeding **must** be avoided whilst taking acitretin and for three years after the therapy has stopped. Effective contraception **must** be used during this time. Your Dermatologist will discuss this with you prior to prescribing acitretin. Men taking acitretin can father children with no additional risk.
- Acitretin should be used with caution in those with kidney or liver problems, diabetes, or high cholesterol. If these problems are severe, acitretin will not be suitable. Your Dermatologist should discuss this with you, if relevant.
- Acitretin should not be used by people taking other vitamin A-based medications (sometimes referred to as 'retinoids'), or methotrexate, progesterone-only contraceptive pills (sometimes referred to as 'minipills'), keratolytics (which are treatments designed to soften or break down the top layer of skin, such as salicylic acid (a topical treatment used to treat skin conditions including psoriasis) and benzoyl peroxide (a topical treatment used to treat acne)) and certain types of antibiotics (such as triglycerides). Remind your doctor that you are currently taking acitretin to treat psoriasis if you are prescribed any other medication.
- Women and men on acitretin should not donate blood whilst taking acitretin or for at least three years after stopping treatment as this could expose a pregnant woman to acitretin. In most cases, alcohol should be avoided whilst taking acitretin, unless your doctor advises you otherwise. This is because alcohol lengthens the time acitretin is stored in the body and also increases the risk of some of the side effects associated with acitretin such as liver inflammation and raised blood fats.

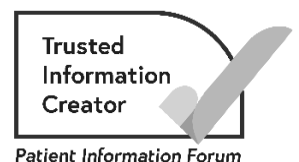
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How is it used?

Acitretin comes in a capsule form and is taken orally (swallowed) once a day. Try to take your acitretin at the same time of day each day, as this will help you to remember to take them regularly. The capsules should be taken with food, either just after eating a meal or with a snack or glass of milk. Acitretin is not absorbed by the body as effectively if taken on an empty stomach.

The dose of acitretin you should take will be worked out for you personally by your doctor. The dose is determined for each individual based on several factors, including the type of psoriasis and your weight. The amount you take may be reduced after symptoms begin to improve, and treatment with acitretin is normally stopped when the psoriasis has cleared significantly.

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Acitretin may be used in rotation with other systemic treatments such as ciclosporin and methotrexate. Acitretin can also be used with phototherapy (also called ultra-violet light therapy, or UV therapy), rather than just by itself. In some cases this combination can speed up the clearing of the skin, meaning that fewer phototherapy sessions are needed.

Will I need any blood tests or other investigations?

People taking acitretin will have blood tests before starting treatment. These are to check that your liver and kidneys are working normally and to check your cholesterol and triglycerides levels. Once you have started taking acitretin you will have regular blood tests to monitor for possible effects of the treatment. These are usually checked about every three months - your Dermatologist or Dermatology Nurse Specialist will explain this process.

If you have diabetes you may need to monitor your blood sugar levels more regularly. Children taking acitretin will need to have their growth closely monitored and this may include regular X-rays.

What are the side effects?

As with all medications, some side effects are possible when taking acitretin. It is important to remember that not every person taking a medication will get all, or even any, of the possible side effects listed. The most serious side effect of acitretin is the risk of birth defects, as previously mentioned.

Most of the common side effects of acitretin are mild and settle when the dosage is reduced or usually disappear if treatment is stopped.

Common side effects include dryness of the 'mucous membranes' such as lips, mouth, nose and eyelids. This can often be managed with moisturisers, lip balms and artificial tears / eye drops. Other less common side effects include peeling of the skin (especially the palms of the hands and soles of the feet), rhinitis (sneezing and runny / stuff nose), sensations of burning, itchy, or sticky skin, sensitive skin, changes to the hair (including change in growth rate, hair loss, change in hair structure), change in the pigmentation of the skin and hair, weakening of the nails, bleeding gums and taste disturbances.

Side effects relating to the skin and mucous membranes occur in the first few days after starting treatment. Side effects relating to hair loss usually take a few weeks into treatment before being noticed. As mentioned above, these side effects are reversible if the dose is lowered, or you stop taking acitretin.

Further common side effects include issues relating to the eyes such as conjunctivitis and visual disturbances e.g. blurred vision and difficulty seeing at night. People who wear contact lenses may need to wear glasses instead whilst they are taking acitretin. An increase in thirst and feeling cold are also common side effects when taking acitretin.

Acitretin makes people who take it more sensitive to the effects of UV light, including the sun which means that you will get sun burn quicker than you may have done previously. Therefore, it is sensible to reduce exposure to UV light (including sunlight and sunbeds) and to use a high factor sunscreen (e.g. SPF 30+) and wear a hat when going outside. In people who are diabetic, acitretin can alter the way the body processes glucose, meaning that blood sugar levels should be closely monitored.

Always speak to your Dermatologist or Dermatology Specialist Nurse if you have concerns regarding side effects of treatments.

For a full list of potential side effects please speak to your Dermatologist or Pharmacist, or refer to the Patient Information Leaflet that is in the box of acitretin capsules.

Can I have immunisations (vaccinations) whilst on acitretin?

It is important that when having vaccinations, you check with your Dermatology team as to whether you need to stop or delay taking acitretin as they will have the most up-to-date advice regarding the continuing of your treatment at this time.

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How do I get acitretin?

Acitretin can only be prescribed by the hospital consultant (Dermatologist) who is responsible for your psoriasis care. You will need to have regular monitoring in the form of blood tests, and women of childbearing age will need to carry out pregnancy tests and use effective contraception.

BADBIR

If you have been prescribed acitretin for treatment of your psoriasis, you may be asked to take part in the **British Association of Dermatologists Biologic and Immunomodulators Register (BADBIR)**. This register is to compare the safety of different treatments for psoriasis and to see how well they work. For more information on BADBIR, please see the website: www.badbir.org

The information in this resource is not intended to replace that of a healthcare professional: If you have any concerns or questions about your treatment, do discuss this with your doctor and **always read the patient information leaflet** to make sure you are using it correctly.

For more information, or for a list of resources used in producing this information sheet, please contact the Psoriasis Association

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