Medication

STUDENT NAME: Hanna Wenerd
MEDICATION: Infliximab (remicade)
CATEGORY CLASS: antirheumatic, immunosuppressant agent

Expected Pharmacological Action:
binds to tumor necrosis factor (TNF), inhibiting functional activity of TNF, prevents disease and allows diseased joint to heal, decreases inflammation

Therapeutic Use:
Tx psoriatic arthritis RA reduces s/sx induces and maintains remission in moderate to severe active crohn's disease, maintains fistula closure in fitulizing chrons disease, reduces s/sx of active ankylosing spondylitis

Complications:
HA, nausea, fatigue, fever, chills during infusion, pharyngitis, vomiting, pain dizziness, cough, bronchitis, hypo/hypertension, mood changes, diarrhea, sepsis, severe hepatic reaction, HF

Medication Administration:
dosage for crohn's disease: 5mg/kg followed by additional dosage at 2 and 6 weeks after first infusion then q 8 weeks after. 10 mg/kg are for those who respond less

Contraindications/Precautions:
hypersensitivity, severe/mild HF, sepsis, severe infection, hematologic abnormalities, hx of COPD, seizures, exposed to TB, elderly, ,chronic hepatitis B

Nursing Interventions:
monitor urine analysis, ESR, BP, infection, BM pattern, CRP, and frequency of stools, and assess for abdominal pain

Interactions:
anakirina, anti TNF agents, baricitinib, pimecrolimus, tacrolimus, tocilizumab, BCG, vaccines, echinacea

Client Education:
report persistent fever, cough, abd pain, swelling of ankles or feet, Tx may depress immune system, report signs of infection, do not receive live vaccine, frequent TB test, and report travel plans

Evaluation of Medication Effectiveness:
decreases inflammation and s/sx