

# ACTIVE LEARNING TEMPLATE: *Medication*

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MEDICATION: Infiximab \_\_\_\_\_ REVIEW MODULE CHAPTER \_\_\_\_\_

CATEGORY CLASS: Antirheumatics (DMARDs), gastrointestinal anti-inflammatories

## PURPOSE OF MEDICATION

### Expected Pharmacological Action

Neutralizes and prevents the activity of tumor necrosis factor-alpha (TNF-alpha), resulting in anti-inflammatory and antiproliferative activity.

### Therapeutic Use

Decreased signs and symptoms and induction and maintenance of clinical remission in Crohn's disease. Reduction in number of fistulas and maintenance of closure of fistulae in Crohn's disease.

### Complications

Arrhythmias, chest pain, edema, HF, HTN, hypotension, myocardial ischemia/infarction, pericardial effusion, tachycardia, vasculitis, acne, alopecia, dry skin, eczema, ecchymosis, erythema, flushing, abdominal pain, nausea, vomiting, fatigue, headache, upper respiratory tract infection, fever, infusion reactions, chills, hypersensitivity reactions, oral pain, flatulence, diarrhea.

### Medication Administration

Crohn's Disease:  
IV (adult): 5 mg/kg initially. Then repeat at 2 and 6 weeks after initial infusion. Then maintenance dose of 5 mg/kg every 8 weeks.  
Dose can be adjusted up to 10 mg/kg in patients who initially respond and then lose their response.

### Contraindications/Precautions

Contraindicated in: hypersensitivity to infliximab, murine proteins, or other components in the formula.  
Use cautiously in: chronic/recurrent infection, history of TB, history of opportunistic infection, moderate to severe HF, COPD, or history of hepatitis B.

### Nursing Interventions

- Watch for infusion related reactions such as fever, chills, urticaria or pruritus.
- Monitor patients closely for signs of infection, discontinue therapy in patients who develop a serious infection.
- Do a tuberculin skin test prior to initiation before and during therapy to assess for latent tuberculosis.
- Monitor for hypersensitivity reactions.

### Interactions

Concurrent use with anakinra or abatacept increases risk of serious infections.  
Concurrent use with azathioprine or methotrexate may increase risk of HSTCL. Use of live-virus vaccines or therapeutic infectious agents may increase risk of infection.

### Client Education

- Instruct that it may cause dizziness and to avoid activities such as driving.
- Advise patient to notify health care provider immediately if they are experiencing symptoms of a fungal infection.
- Instruct patient not to receive live vaccines during time of therapy.

### Evaluation of Medication Effectiveness

Decrease in signs and symptoms of Crohn's disease, also decreased number of draining enterocutaneous fistulas.