



## Immune Treatment Programme Drugs' Common Side Effects

### *Patient Information Leaflet*

The prescribing doctor believes that this medicine would work well for your condition even though it is licensed for a different condition – when a medicine is used for a condition not stated in its licence, it is said to be “unlicensed”

### **Hydroxychloroquine**

Hydroxychloroquine was originally an anti-malaria drug used in the 1940s but more recently has found a place in the treatment of conditions such as Rheumatoid arthritis and Lupus. This is because it has immune properties and seems to calm down inflammation. We have used it against Natural Killer Cells with possible help in women with miscarriages and fertility conditions. There are several publications which have shown its benefit in reducing risk of miscarriages and other immune related complications in pregnancy.

**Indication:** This drug could be considered in complex cases or if there are contraindications to use prednisolone.

**Dose:** 400mg oral tablets. Usually started 6 weeks prior to pregnancy and continued to 16 weeks gestation with the exception of few cases when it is continued till 34 weeks gestation.

**Caution:** Neurological disorders (especially in epilepsy), severe gastro-intestinal disorders and G6PD deficiency.

**Side Effects:** Gastro-intestinal disturbances, headache and skin reactions, visual changes, hair loss and pigmentation of the skin, nails and mucous membranes.

**NB.** Most of our patients have tolerated this medication well and it has a good track record in pregnancy with no apparent fetal harm. If you are taking omeprazole please ensure that you take the two medications at different times as it may inhibit absorption of the Hydroxychloroquine.