


Information about

Rituximab for Treating Kidney Diseases

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Renal Day Ward
Level 4
Queen Elizabeth University Hospital
Govan Road
Glasgow G51 4TF
☎ 0141 452 3760 or 3761

Rituximab is being used to help treat your kidney disease. Many patients have been given rituximab, but like all drugs it has some side effects. This leaflet should help you understand what rituximab is and what to expect from treatment.

What is rituximab?

Rituximab is a treatment which is given as an infusion (via a drip). It helps to suppress the immune system and is called a 'biological therapy'. It works by suppressing production of B cells, the cells in the body which produce antibodies. Antibodies are thought to be important in a number of auto-immune kidney conditions (where the immune system attacks the body) such as membranous nephropathy, systemic lupus erythematosus, vasculitis and others. It is also used in other non-renal conditions such as rheumatoid arthritis and blood cancers.

Why am I being prescribed rituximab?

Your doctor feels that this is the most appropriate treatment for your kidney condition.

How will I receive rituximab?

Rituximab is given as an infusion (through a drip which we insert either in your arm or hand). You may receive either a single dose, 2 doses 2 weeks apart or 4 doses weekly for 4 weeks. Depending on why you need rituximab, you are likely to require repeat infusions. For vasculitis, you are likely to require repeat infusions every 6 months, for up to 24-48 months. Your doctor will discuss a provisional rituximab schedule plan with you in advance of your treatment.

You will attend the Renal Day Ward (4C) at the Queen Elizabeth University Hospital for rituximab infusions.

When you arrive, the nurse practitioner will run through a check list with you, to make sure that it is safe to proceed with the infusion. Particularly, they will be looking for any signs of infection. They will then insert a cannula (small tube) into a vein.

Before you receive the rituximab, we will also give you paracetamol tablets and an injection of hydrocortisone and chlorphenamine. These medicines help to reduce the risk of a reaction to the infusion. The infusion of rituximab may take up to 6 hours to complete.

Do I need other tests before I receive rituximab?

Your doctor will check your blood to see if you have, or have ever had, hepatitis B. If this is the case, you may need different treatment.

If you have had rituximab before, your doctor may check your antibody levels before giving you another dose.

If you have a chronic infection such as bronchiectasis, or have had TB, please tell your doctor.

It would be helpful if you could let us know in advance of your appointment if you have any signs of an infection, as we may need to delay your infusion if that is the case.

What side effects might I experience?

The most common side effect is an allergic reaction to the infusion (around 1 in 100 people). These reactions include fever, skin reactions, wheezing or low blood pressure. If this happens during the infusion, we will slow the rate of the infusion. There is an increased risk of infection for 6-9 months after receiving treatment. Rarely, skin reactions can happen up to 4 months after treatment, if this happens you should tell your doctor.

After repeated doses (3-4 courses of rituximab), the protective antibodies in your blood might drop. Rarely, this might increase the risk of infection and your doctors will consider whether further rituximab is appropriate.

Very rarely (less than 1 in 10,000 people) rituximab can cause a condition called progressive multifocal leukoencephalopathy (PML). This is a serious infection of the brain which can lead to death. Symptoms include weakness of arms and legs, unsteadiness, change in vision or difficulty speaking.

Anything else I need to know?

You will be at increased risk of infection for 6-9 months after receiving rituximab. If you have not had chicken pox before and are exposed to someone, who has it, you should contact your doctor straightaway.

It is not safe for you to have live vaccines – tell your doctor that you have had rituximab before any vaccinations.

Pregnancy: women should use contraception for 12 months after rituximab infusion. It is not clear what harm rituximab may cause to an unborn baby, but you should tell your doctor if you become pregnant within 12 months of treatment. There is no restriction for men with regards to fathering children whilst on rituximab.

Breastfeeding is not recommended for 12 months after treatment as the drug may pass into breast milk.

Alcohol is safe to drink within recommended limits.

Your doctor may recommend an antibiotic (usually co-trimoxazole) to take for 6 months or longer after treatment to reduce the risk of a specific serious lung infection.

How long will it take to have an effect?

The effect of rituximab on the immune system and kidneys will last for 6-9 months and sometimes longer.

Your doctor will discuss a provisional rituximab schedule plan with you in advance of treatment. It may be recommended that you receive repeated rituximab infusions for up to 24-48 months or occasionally longer. You will continue to be monitored in your usual outpatient renal clinic for the duration of time that you are prescribed rituximab.

Further information:

If you have any questions please ask the staff.

Arthritis research UK

 www.versusarthritis.org

