



Rheumatology medication – Frequently Asked Questions

This leaflet answers some of the most commonly asked questions from patients taking medication for their rheumatology conditions.

Please note the Rheumatology Blood Monitoring Service and advice line are for rheumatology patients only. It is not an emergency service and not a general blood enquiry service.

Should I still take my rheumatology medicines if I feel otherwise well?

Yes. Our general advice is that all patients should continue to take their rheumatology medicines as recommended by their Rheumatology Team. Although many of the rheumatology medicines may reduce the body's natural defence (immune system), stopping your rheumatology medicines may cause your condition to flare up, which may then need stronger medication to get the condition back under control. Always discuss with your specialist team before stopping treatment.

If I develop an infection, should I continue my rheumatology medication?

We recommend that you visit your GP, and skip your rheumatology medications (e.g. methotrexate or biologic therapy) while you have symptoms of an infection (i.e., new cough, shortness of breath, fever or UTI) or you are on antibiotic treatment. **You should restart your rheumatology medicines, when you feel well.** If you are taking steroids, you should continue these, as stopping steroids suddenly can make you very unwell.

Can I have vaccine for shingles?

YES, only the NON-LIVE version called SHINGRIX.

NO, NEVER the live version!!

Can I have the Covid-19 vaccine?

Yes, but please **withhold methotrexate and biologic medication for 1–2 weeks after a COVID-19 vaccination** to improve your immune response to the vaccine.

Can I have the annual flu vaccine?

Yes, but **not on the same day** as your DMARDs or biologic medication.

Can I have an MMR vaccine?

- If you are on biologic therapy – **NO**.
- If you are on methotrexate – It will depend on your weight. Please have your current weight in kilograms (kg) before contacting the specialist nurse on the advice line.

How do I get my a CT or MRI scan result?

Scan reports take about 4-6 weeks to come back to us. The clinician will write to you 2-3 weeks after the result is back, if they are abnormal or something needs to be discussed. Please be aware that the Rheumatology Department can only comment on the scans they requested.

Can I use complementary or herbal remedies?

Complementary or herbal medicines may interact with prescribed drugs. If you wish to use these therapies, please discuss this with us at your appointment. For more information please visit Versus Arthritis <https://www.versusarthritis.org/about-arthritis/managing-symptoms/diet/>

What if I need more blood test forms?

Please leave a message on the advice line 0118 322 6574, clearly stating your name and hospital number and the reason for your call.

Where can I get my disease modifying anti-rheumatic drugs (DMARDs) from (for newly diagnosed patients)?

Your specialist will provide your first prescription in clinic. Repeat prescriptions will be issued by your GP, so please **contact them directly**.

When do I start my biologic therapy?

A minimum of 4-6 weeks from referral to the specialist nurse, provided that all the screening blood test results and x-ray report are back, you are suitable for treatment, and high cost drug funding is in place.

Where can I have the QuantiFERON blood test?

The QuantiFERON blood test is used in rheumatology to screen for latent tuberculosis infection in patients before they start therapy. This test is particularly important as rheumatology medications can increase the risk of reactivating latent TB.

You can get the QuantiFERON test done at the Royal Berkshire Hospital or at Bracknell HealthSpace before midday Monday to Thursday, and at West Berkshire Community Hospital before midday Monday to Thursday. You can book an appointment online for a blood test at one of these locations by visiting: https://www.swiftqueue.co.uk/royal_berkshire.php

I have not heard from the biologic supplier about delivery and training for my injection. What should I do?

Please contact the supplier directly if you know their number. Otherwise, Contact the advice line on 0118 322 6574 or CAT 9 on 0118 322 7969 or email rbb-tr.CAT9@nhs.net.

My biologic meds are finished, and the biologic supplier hasn't received a prescription from the hospital, what should I do?

Please check that you have a recent blood test no longer than 3 months old before contacting CAT 9 on 0118 322 7969 to check on the progress of your prescription.

I received a 'did not attend' letter for a blood test, I have now booked a blood test for next week. Do I need to do anything else?

If you have rebooked your blood test, we will see the result. There is no need to contact us. We will get in touch if your blood test result is abnormal.

If you haven't rebooked, please contact your GP to arrange one as soon as possible or alternatively, book an appointment at Royal Berkshire Hospital, Bracknell HealthSpace or West Berkshire Community Hospital online: https://www.swiftqueue.co.uk/royal_berkshire.php

I have missed a call from the nurse, what should I do?

Please **do not call us back**; we will contact you again. However, please be aware that calls from the hospital may displayed as '**undisclosed**', '**withheld**' or '**spam**'.

Family Planning

Planning a family: When should I stop my arthritis medication?

If you're taking methotrexate or leflunomide, it is essential to stop these medications at least **three months before trying to conceive**, as they can harm the baby. Some medications, like hydroxychloroquine and sulfasalazine, are generally considered safe during pregnancy. Always consult your doctor before making any changes to your lifestyle and to your medication.

Medication effects/ side effects

How long before my new medication takes effect?

Most DMARDs take 8-12 weeks to be effective, particularly if they require a gradual dose increase. Some people notice an improvement earlier than this.

Why do I need to take folic acid after methotrexate each week?

Folic acid helps protect the healthy cells in your body and reduces some of the side effects of methotrexate. It can make you less likely to be sick (vomit) or to experience diarrhoea.

I feel sick after taking my methotrexate, should I stop taking it?

Feeling sick (nausea) is a common side-effect of methotrexate, especially when treatment starts. This normally gets better, but for some people it may continue.

This feeling may be helped by:

- taking the methotrexate with or after food
- taking the methotrexate just before bed; you may be able to sleep through the feeling of sickness
- making sure you take your folic acid
- switching to injectable methotrexate once a week
- taking an anti-sickness tablet, you can get this from your pharmacy
- It is important that you take your methotrexate regularly so do not stop the drug without discussing it with the Rheumatology Team or your doctor first.

For further information about the drugs used in rheumatology and possible side effects please visit the medication leaflets site on the [arthritis research UK website](#).

Can I change the day I take my methotrexate?

Yes, to a later date (two or three days at the most) but not earlier. Always leave 7 days between treatments.

How often do I need blood tests?

When you first start DMARD, biologic or start a new medication regime, you will have two-weekly blood monitoring for 6 weeks, then monthly thereafter. Once your condition is stable on the medication, your blood tests will be every 3 months.

If any of your blood test results show any abnormalities, a nurse will contact you.

What should I do if I develop a rash after starting a new rheumatology medication?

If you develop a rash after starting a rheumatology medication, promptly contact your GP and stop the medication. While many rashes are mild and manageable with anti-histamine medication, some can signify serious allergic reactions. Seek immediate medical attention if the rash is accompanied by symptoms such as difficulty breathing, facial swelling, fever, or blistering skin.

Your doctor may recommend adjusting the dosage, switching medications, or prescribing treatments to treat the rash. Always monitor your symptoms and consult your GP for review and guidance and inform us if related to a new rheumatological medication.

What can I do about injection site reactions?

Rheumatology medication injection site reactions include redness, itching, pain or swelling at the injection site. They mostly occur one to two days after an injection and go away within three to five days. They are most common during the first few months of treatment.

- It may help to apply a cold compress to the site.
- Anti-histamine tablets or creams available from your chemist can help.
- Check your injection technique – we may need to check the way you are doing the injection.
- Remember to change the injection site each time you give the injection.
- If you have pain, redness, or swelling around the injection site that doesn't go away, or gets worse, please contact us on 0118 322 6574.

Flaring

What if my arthritis flares?

Sometimes your arthritis may flare despite being on medication. The majority of these are short-lived and can be self-managed.

To manage an arthritis flare-up effectively, consider the following strategies:

- **Rest and gentle movement:** Allow your joints time to recover by reducing activities that make pain worse. Engage in low-impact activities such as stretching or walking to maintain joint flexibility without overexertion.
- **Heat and cold therapy:** Apply warm baths or heating pads to relax muscles and alleviate stiffness. Use cold packs to reduce inflammation and numb sharp pain.

- **Medication management:** Over-the-counter NSAIDs like ibuprofen can help reduce pain and inflammation. Continue taking prescribed medications as directed by your healthcare provider.
- **Stress reduction:** Practice relaxation techniques like deep breathing or meditation to manage stress, which can trigger flares. arthritisnsw.org.au

The following website may be helpful: [Managing flares in rheumatoid arthritis \(RA\) | Rheumatoid Arthritis Flare Up](#)

If your symptoms continue or you feel they are severe despite following the above strategies, please initially contact your GP and then the advice line if needed.

Can I have a steroid injection before my holiday/wedding/special occasion?

If your arthritis is particularly active, we may consider giving you a steroid injection to settle your symptoms, especially if you are waiting for new treatments to start working.

However, regular use of steroids can be harmful, so we do not routinely offer this before holidays or other special occasions. If you want to discuss this further please contact your GP or the Rheumatology Advice Line on 0118 322 7969 as this can be organised if appropriate.

Infection or surgery

Should I stop any of my medications before going into hospital for surgery?

Depending upon the reason for your admission, we may advise you to temporarily stop some or all of your treatment. However, you should continue to take all prescribed medication unless specifically advised to do otherwise.

Biologic treatment and methotrexate may need to be stopped for 1-2 weeks before surgery, and can usually restart 1-2 weeks after surgery, once the wound is healed and you are free of infections. The team will provide guidance tailored to your specific situation. Discuss this with your treating surgeon and rheumatologist in your appointment.

What should I do if I get chickenpox while on methotrexate or biologic medications?

You should stop taking this medication and notify your own GP as soon as possible as you may need treatment to minimise the severity of the disease.

Should I stop methotrexate if starting an antibiotic?

We advise to **STOP** taking methotrexate for at least 2 weeks if you get an infection or if antibiotics are prescribed. Do not take antibiotics such as Septrin (Co-trimoxazole) and Trimethoprim while taking methotrexate.

How do I change or cancel an appointment?

If you need to **change or cancel a rheumatology outpatient appointment or telephone appointment**, please phone the rheumatology admin team CAT 9 on 0118 322 7969.

Please ensure that you do cancel your appointment if you cannot attend so other patients can be contacted to take your appointment slot.

Can you complete my Personal Independence Payment (PIP) paperwork?

You should see your GP for assistance if you need help filling in your PIP application. A specialist report is not normally required; however, we can provide advice or provide a medical report if specifically requested.

Research

Can I take part in research or clinical trials?

We may have current studies related to various rheumatology conditions.

All research is optional, and not all studies involve drugs – most require a few minutes of your time and possibly a small blood sample.

If you are interested, do please contact us on tel: 0118 322 6694/6536 or email:

CrossSpeciality.ResearchTeam@royalberkshire.nhs.uk

Alcohol and smoking

Can I drink alcohol while on rheumatology medications?

Some medicines used to treat your arthritis are processed by your liver, and when taken with alcohol, can increase the risk of liver side-effects. We recommend that you have no more than 14 units of alcohol a week.

Will smoking affect my condition?

Smokers are at increased risk of developing rheumatoid arthritis, and patients with rheumatoid arthritis who smoke have worse arthritis than those who don't. Any inflammatory condition increases your risk of cardiovascular (heart and blood vessel) disease, and if you smoke that risk is increased further.

We strongly encourage you to stop smoking. Further information is available at [Smoking And Rheumatoid Arthritis | NRAS | Smoking and RA](#)

Where can I find more information about my condition, exercise and medication?

- www.nhs.uk and www.111.nhs.uk
- Royal Osteoporosis Society: 0808 800 0035 www.theros.org.uk
- National Ankylosing Spondylitis Society: 0208 741 1515 www.nass.co.uk
- National Rheumatoid Arthritis Society: 0800 298 7650 www.nras.org.uk
- British Society of Rheumatology: 0800 2987650 www.rheumatology.org.uk
- Lupus UK: 0170 873 1251 www.lupusuk.org.uk
- Arthritis Action: 0203 781 7120 www.arthritisaction.org.uk
- Versus Arthritis: 0300 790 0400 www.versusarthritis.org
- www.nhs.uk/conditions/arthritis/living-with

Contact us

Rheumatology Telephone Advice Line: 0118 322 6574 (24/7 answerphone)

Clinical Admin Team (CAT 9): 0118 322 7969 rbb-tr.CAT9@NHS.net

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

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