

Sulfasalazine

Rheumatology Department Patient Information Leaflet

Please keep this information in a safe place

Introduction

Sulfasalazine is in a family of drugs called disease modifying anti-rheumatic drugs (DMARDs). Whilst your specialist will suggest the drug they feel is best to treat you at the time, based on research and extensive knowledge of the drug, you will always have the choice to discuss other treatment options and alternative therapies.

What is sulfasalazine?

Sulfasalazine is used to treat many types of arthritis, including rheumatoid arthritis and ankylosing spondylitis. It is also sometimes used to treat bowel disorders.

Sulfasalazine works by slowing down the progression of the arthritis and helping to dampen down inflammation.

How should I take sulfasalazine?

Sulfasalazine are dark orange, oval tablets with a special coating that ensures that they are absorbed in the correct place in the stomach. It is important to swallow them whole and not to chew or crush them. They are best taken with, or just after, a meal.

Unless your consultant tells you otherwise, your dose of sulfasalazine will start at one tablet (500mg) a day for the first week.

After this, the daily dose is increased by one tablet every week until you are on the full dose of two tablets, twice daily, from the fourth week onwards. We will advise you about this when you are at the hospital. You will be given your first prescription at the hospital, but further prescriptions should be obtained from your GP.

How long will it take for sulfasalazine to work?

It can take up to 12 weeks for the sulfasalazine to work. There may be further improvement about four to six months after starting the treatment. When the sulfasalazine is working, you should feel less pain and stiffness in your joints. If sulfasalazine works for you, you can stay on it for many years.

Will I have any side effects?

Most people have no side effects. However, side effects that sometimes occur include nausea (feeling sick), diarrhoea and headaches. These symptoms are usually mild and often settle down as treatment continues.

You need to tell your consultant or contact the rheumatology helpline if you get any of the following side effects – a rash, sore throat or other infection, mouth ulcers, bruising or any unusual shortness of breath.

Occasionally, the dose of sulfasalazine has to be reduced or stopped altogether, after which the side effects generally settle down.

Sulfasalazine may colour your urine orange, but if this happens, do not worry as it is harmless.

If you wear soft contact lenses, tell the consultant as sulfasalazine may discolour them.

Sulfasalazine may make you more sensitive to sunlight, so to avoid burning, use a high factor sunscreen and stay out of strong sunshine if possible.

Do I need special tests while on sulfasalazine?

Yes, because in a few patients sulfasalazine can reduce the number of certain blood cells, so regular blood tests are needed to check for this. In rare cases, sulfasalazine can affect the liver, and the blood test will also check for this.

How often do I need to have a blood test?

You will need a blood test every two weeks until you are on a stable dose for six weeks. Once on a stable dose, you will need blood tests monthly for at least three months. Thereafter, you will need blood tests every three months. In some instances, more frequent blood monitoring may be required, and you will be advised of this by the doctor or clinical nurse specialist.

If your blood tests show that the sulfasalazine has not affected your liver or blood cells, further regular blood tests may not be necessary after the second year of treatment.

If your consultant increases the dose of sulfasalazine in the future, you will need to have a blood test one month after the dose increase has occurred. We will advise you how often to have blood tests when you come to your hospital appointment.

It is your responsibility to have the blood tests and it is important that you do not miss any of them. In order for us to receive the results from your blood tests, you will have to have them at any of the following centres:

Russells Hall Hospital:

Monday to Friday, 8am to 6pm

Saturdays, 8am to 1pm

No appointments required.

Corbett Hospital:

Monday to Friday, 8am to 6pm

You can call to book an appointment on 01384 244330

Guest Hospital:

Monday to Friday, 8am to 1pm

No appointment required

Netherton Health Centre: Appointment required, ring 01384 366500.

Cross Street Health Centre: Appointment required, ring 01384 366257.

Ladies Walk Clinic: Appointment required, ring 01902 575103.

Can I take other medication with sulfasalazine?

If you have indigestion and need to take antacid (an indigestion remedy), you should take it at a different time of day to the sulfasalazine.

As sulfasalazine takes some time to start working, you may need to continue with your regular painkillers.

If a doctor is prescribing medicines for you, or you are buying over-the-counter medicines, tell the doctor or pharmacist you are taking sulfasalazine.

Can I drink alcohol while on sulfasalazine?

You can drink alcohol within reason. We advise staying within the government guidelines (two to three units a day for women and three to four a day for men).

Does sulfasalazine affect fertility or pregnancy?

Sulfasalazine can reduce the sperm count in men, leading to a temporary decrease in male fertility. This is reversible when the drug is stopped.

It is best not to take sulfasalazine during pregnancy or breast feeding. If you are planning a family or discover that you are pregnant, discuss this with your consultant as soon as possible.

What alternatives are there to this treatment?

You do not have to take this treatment and can always discuss alternatives with the rheumatology department. Some people find that complementary therapy treatment is useful and leaflets about this, provided by Arthritis Research Council, are available in our clinics.

Over-the-counter medications may be used alone or in combination with prescribed medication you are taking; however, you are always advised to discuss these with your consultant before taking them. Medication bought over the counter may help to control your pain, but **not** always the condition. Always tell the pharmacist which prescribed medications you are already taking when buying over-the-counter drugs.

Remember, while you are on this medication, it is your responsibility to ensure that you have regular blood tests and it is important that you do not miss any of these tests. If your hospital appointment is rescheduled, contact the rheumatology helpline if you need more blood forms.

Can I find out more?

You can find out more from the following:

Arthritis Care

Tel: 0808 800 4050

Website: www.arthritiscare.org.uk

NHS Choices

Website: www.nhs.uk

If you have any questions, or if there is anything you do not understand about this leaflet, please contact:

Rheumatology helpline on 01384 244789 (this is an answer machine so please do not use this helpline in an emergency)

or speak to your pharmacist

Russells Hall Hospital switchboard number: 01384 456111

You can download or print this leaflet from:

<http://dgft.nhs.uk/services-and-wards/rheumatology/>

If you have any feedback on this patient information leaflet, please email dgft.patient.information@nhs.net

This leaflet can be made available in large print, audio version and in other languages, please call 0800 073 0510.

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此宣传单可提供大字版本、音频版本和其它语言版本，请拨打电话：0800 073 0510。

Ulotka dostępna jest również w dużym druku, wersji audio lub w innym języku. W tym celu zadzwoń pod numer 0800 073 0510.

ਇਹ ਪਰਚਾ ਵੱਡੇ ਅੱਖਰਾਂ, ਬੋਲ ਕੇ ਰੀਕਾਰਡ ਕੀਤਾ ਹੋਇਆ ਅਤੇ ਦੂਸਰੀਆਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਵੀ ਪ੍ਰਾਪਤ ਹੋ ਸਕਦਾ ਹੈ, 0800 073 0510 ਤੇ ਫੋਨ ਕਰੋ ਜੀ।

Aceasta broșura poate fi pusă la dispoziție tipărită cu caractere mari, versiune audio sau în alte limbi, pentru acest lucru vă rugăm sunați la 0800 073 0510.

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