Medication Facts and Agreement: Mercaptopurine, 6-MP, 6-Mercaptopurine (Purinethol), Azathioprine (Imuran)

Medication Facts

6MP and Azathioprine are antimetabolite immunosuppressive drugs that work by inhibiting DNA synthesis in lymphocytes. Lymphocytes are one type of white blood cell that plays a role in the body's immune response. These medications are used in treating patients with inflammatory bowel disease (IBD), leukemia, autoimmune hepatitis, polycythemia vera, and psoriatic arthritis. For patients with IBD these medications can decrease the need for steroids, help patients who have been steroid dependent, and/or help patients who have multiple relapses after steroid withdrawal. These medicines can help with healing of fistulas, improve overall clinical improvement, and maintain remission. With taking these medications, close follow up in the office is needed for blood work, monitoring dosage, symptoms and side effects.

<u>Side Effects</u> this list of side effects includes but is not limited to the following:

- Increased risk of infection. You should avoid receiving live vaccines or being around anyone who has received live vaccines. You should avoid being around anyone who is sick. You should maintain good hand washing to decrease your risk of infection.
- Bone marrow suppression resulting in anemia, low white blood cell count, and/or low platelet count.
- Allergic reactions
- Pancreatitis, most common during the first month of treatment.
- Liver toxicity, also most common during the first month of treatment.
- Teratogenic (harmful to fetus during pregnancy). Women who are seeking pregnancy should discuss this with their doctor. If you should become pregnant, contact your doctor immediately. Women of childbearing age should use some consistent form of contraception.
- Increased risk of developing malignancy.
- Signs to look for regarding side effects are: skin rash, jaundice (yellowing of eyes and skin), abdominal tenderness or pain, diarrhea, decreased appetite, fever, nausea, or vomiting. Call your physician if you experience any of these.

Labs

This lab schedule should be started after the medication is started or after any dosing changes.

<u>Hepatic Function Panel</u> at weeks 2 and 4, then every 3 months for the duration of therapy <u>Complete Blood Count including platelets</u>: weekly for the first month of therapy, then every two weeks for second and third months of therapy, then every four weeks for the next three months, then every three months for the duration of therapy

I have read this handout and understand the risks of taking the medications described above. All my questions have been answered to my satisfaction and understanding.

Physician Signature	Date
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Patient 2	Signature
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