

OFF-LABEL USE OF ADALIMUMAB IN BEHÇET'S DISEASE. A CASE REPORT

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BACKGROUND

Behçet's disease (BD) is a rheumatic disease characterized by polyarthritis, urogenital ulcers, uveitis, cutaneous lesions, alterations in central nervous system and vascular disease.

PURPOSE

To describe the use of adalimumab in a patient with BD in whom immunosuppressive therapy had failed.

MATERIALS AND METHODS

Follow-up of a patient with BD treated with adalimumab after trying other treatments without success.

Data collected:

- Erythrocyte sedimentation rate (ESR)
- C-reactive protein (CRP)

RESULTS

April 2010:

A 43-years-old woman visited the rheumatologist because of polyarthralgias, symptoms of inflammatory disease, recurrent episodes of red eye, cutaneous lesions and urogenital ulcers.



Treatment: **allopurinol** and **colchicine**. In June 2011, positive HLA-B51 was determined and **methotrexate** was initiated. After 7 months, she had **cutaneous lesions** and **corticosteroids** were added to the treatment.



In May 2012, she visited the ophthalmologist and she was diagnosed with uveitis and this confirmed the diagnosis of BD. **Methotrexate** dosage was increased but without results.



She presented clear improvement:

Month 1: **CRP<0.4mg/dL** and **ESR=6mm/h**
Month 4: **CRP=0.4mg/dL** and **ESR=6mm/h**
Month 12: **CRP=0.5mg/dL** and **ESR=11mm/h**
After a follow-up of 21 months, the patient continues receiving adalimumab, with good clinical control and no side effects.



Finally, **adalimumab** was associated to methotrexate (baseline **CRP=0.7 mg/dL** and **ESR=65 mm/h**).

CONCLUSION

Our patient has presented a good response to the treatment.

Adalimumab represents a good option for patients with BD and severe manifestations.