PATIENT FACT SHEET

**WHAT IS IT?**

Apremilast (Otezla) is used to treat patients with psoriatic arthritis and moderate to severe plaque psoriasis who are candidates for phototherapy (treatment of the skin with an ultraviolet light source). Apremilast blocks the production of an enzyme called phosphodiesterase 4 (PDE4) and leads to a reduction in inflammation. Apremilast is typically prescribed to patients who have failed one or more disease-modifying drugs (DMARDs) but are not suitable for biologic therapies.

**HOW TO TAKE IT**

Dosing begins at 10mg on the first day with a gradual increase over 5 days, up to max dose of 30mg twice a day. The reason for this is to reduce nausea and diarrhea linked to initial treatment. Apremilast can be taken with or without food. Tablets should not be crushed, split or chewed. Dosing is the same for both psoriatic arthritis and plaque psoriasis. Apremilast is a chronic medication that will be used continuously as long as it is effective and well tolerated.

**SIDE EFFECTS**

The most common side effects of apremilast include diarrhea, nausea, upper respiratory tract infection and headache. After 2 weeks of treatment, most patients who had symptoms of diarrhea and nausea no longer felt the symptoms without stopping treatment. More serious side effects include body weight loss and depression. Tell your doctor if you are having any feelings of depression, suicidal thoughts, or suicidal behavior. Your doctor may also have to decide if you should continue to take apremilast if significant weight loss occurs.

Many patients do not experience side effects; however, for those who do, many of the minor side effects will improve with time. Side effects should be reported immediately and discussed with your rheumatologist.

**TELL YOUR DOCTOR**

Be sure to tell your doctor about all of the medications you are taking, including over-the-counter drugs and natural remedies, as some of these could affect how apremilast works. Examples of those medications include Phenytoin, Carbamazepine, Primidone, Phenytoin, Carbamazepine, Primidone, Phenytoin, Carbamazepine, Primidone, Phenytoin, Carbamazepine, Primidone, Phenytoin, Carbamazepine, Primidone, Phenytoin, Carbamazepine, Primidone, Phenytoin, Carbamazepine, Primidone, Phenytoin, Carbamazepine, Primidone, Phenobarbital, Rifampin, and St. John’s Wort.

Notify your physician you are taking this before any surgery. There can be increase in some types of infections so talk to your doctor if you are sick. Tell your doctor if you become pregnant or plan to become pregnant. Apremilast’s effect on pregnancy is unknown, so it should be avoided during pregnancy. It is also unknown if Apremilast is excreted into breast milk. Use in caution if you are nursing. If you have kidney disease, you should inform your rheumatologist, as Apremilast’s dosages should be adjusted in patients with severe renal dysfunction.

Reviewed June 2018 by James Udell, MD, and reviewed by the American College of Rheumatology Communications and Marketing. This information is provided for general education only. Individuals should consult a qualified health care provider for professional medical advice, diagnosis and treatment of a medical or health condition.