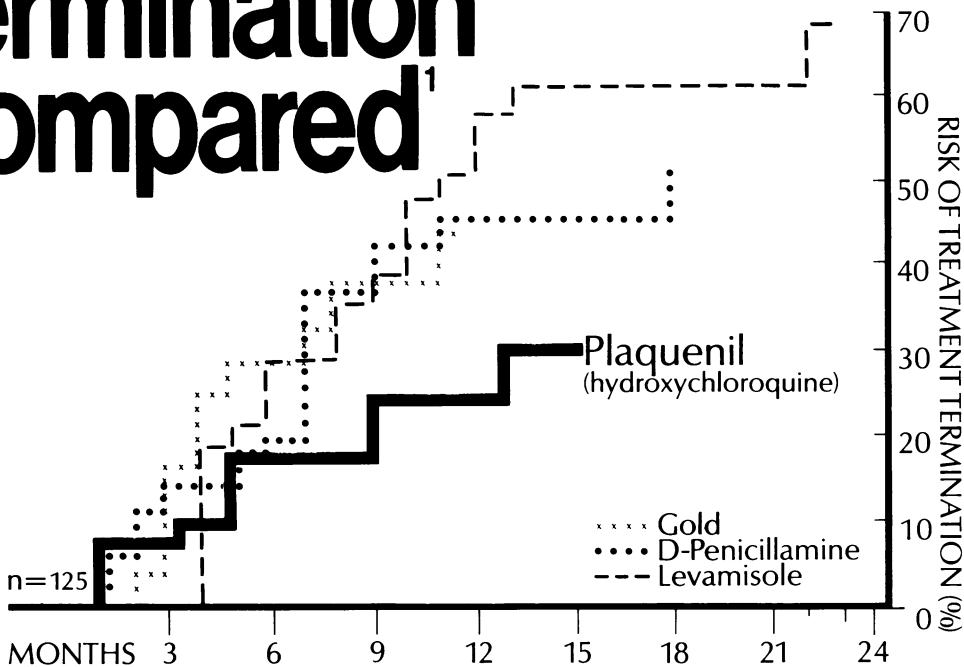


Active rheumatoid arthritis

# Risk of treatment termination compared<sup>1</sup>



Compared with gold, d-penicillamine and levamisole in the treatment of active rheumatoid arthritis, Plaquenil (hydroxychloroquine) showed the lowest frequency of treatment termination due to side effects.<sup>1</sup>

“Fewest adverse reactions occurred with hydroxychloroquine (Plaquenil) at all times during drug treatment.”<sup>1</sup>

Also, in a study of 311 patients treated with Plaquenil (6.5 mg/kg/day) no eye lesions were recorded<sup>2</sup> – confirming the consensus of recent studies that problems can usually be avoided by rigid adherence to dosage recommendations with regular ophthalmological screening.<sup>3,4</sup>

# Plaquenil

hydroxychloroquine

## First in the second line

For prescribing information see overleaf.



1. J. Rheumatol. 1980; 7: 825-830 2. Am J Med. 1983; 75(1A): 40-45 3. Am J Med. 1983; 75(1A): 1-4 4. Am J Med. 1983; 75(1A): 25-34  
Plaquenil is a registered trade mark. Further information is available from Sterling Research Laboratories, Onslow Street, Guildford, Surrey GU1 4YS

In active  
rheumatoid arthritis

# Plaquenil

hydroxychloroquine

First in  
the second line

An antimalarial used for rheumatoid arthritis, juvenile rheumatoid arthritis, discoid and systemic lupus erythematosus and light-sensitive diseases.

Each tablet contains 200 mg Hydroxychloroquine Sulphate B.P.

Supplied in bottles of 100 tablets. Basic NHS cost £24.75. PL 0071/5083.

**Adult dose:** Initially 400 mg daily in divided doses.

**Maintenance** 200-400 mg daily.

Dose should not exceed 6.5 mg/kg/day.

**Children** See Data sheet for details.

**Contra-indications** Pregnancy, maculopathy, concurrent use of drugs causing adverse ocular reactions.

**Caution** in renal and hepatic impairment, porphyria, psoriasis, severe neurological, gastro-intestinal or blood disorders. Also patients with G-6-PD deficiency or hypersensitivity to quinine.

Because retinal changes can occur, all patients should have an ophthalmological examination before treatment starts and regularly thereafter (i.e. every 3-6 months). Plaquenil should be discontinued immediately in any patient who develops a pigimentary abnormality or visual field defect.

**Side effects** include gastro-intestinal disturbances, skin reactions, depigmentation or (rarely) loss of hair. Less commonly headache, muscle weakness, vertigo, tinnitus, deafness, emotional upsets and (rarely) bone marrow depression. Periodic blood counts are advisable. Corneal opacities have been reported. Disturbance of visual accommodation may occur on first taking Plaquenil and patients should be warned regarding driving or operating machinery.

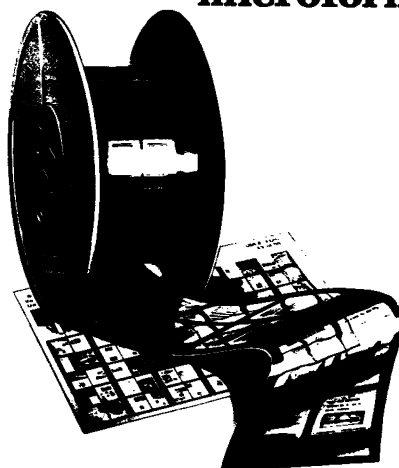
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