**ACITRETIN**

**What are the aims of this leaflet?**

This leaflet has been written to help you understand more about Acitretin. It advises what it is, how it works, how it is used to treat skin conditions and where you can find out more about this drug.

**What is Acitretin and how does it work?**

Acitretin is a type of drug called a retinoid. Retinoids are closely related to Vitamin A and work by slowing down cell growth in the skin.

**What skin conditions are treated with acitretin?**

Acitretin is used most commonly to treat psoriasis. It is also licensed as a treatment for Darier’s disease and types of a skin condition called ichthyosis. Other skin diseases that may improve with acitretin treatment include lichen planus, lupus erythematosus and pityriasis rubra pilaris.

**Will acitretin cure my skin condition?**

Acitretin is not a cure for skin disease. The skin condition may recur when the acitretin is stopped.

**How long will I need to take acitretin before it has an effect?**

Most patients notice an improvement in their skin condition in approximately two weeks with continued improvement up to twelve weeks of starting treatment. The improvement should persist whilst taking the acitretin.

**How do I take acitretin?**

Acitretin is usually taken once a day after a meal. Absorption is reduced if the drug is taken on an empty stomach and the drug will be less effective.
What dose should I take?

The standard dose depends on your body weight and your skin condition. The usual dose for psoriasis is 0.5-1mg/kg/day. The maximum recommended dose is 75mg a day. Lower doses may be used for other skin conditions and if the side effects are troublesome.

The medication is available as 10mg and 25mg capsules which cannot be split so your actual dose may need to be rounded up or down.

Is acitretin a suitable treatment for all patients?

Acitretin, like other oral retinoid drugs is teratogenic. This means that it can cause serious damage to an unborn baby and cause birth deformities. The drug remains in the body for a long time after stopping treatment. Women who have taken acitretin need to wait at least three years before trying to get pregnant. For this reason acitretin is rarely given to women of childbearing age.

There is no known increased risk of birth deformity in the children of men who take acitretin because sperm is not affected by acitretin.

People who take acitretin must not donate blood for at least 3 years after stopping treatment. This is in case the donated blood is given to a pregnant woman thereby potentially causing damage to her developing baby.

Acitretin can worsen diabetes, raise blood lipids (cholesterol, triglyceride) and cause liver inflammation. You should advise your doctor before treatment If you have had any of these problems.

What are the possible side effects of acitretin?

All medicines can cause side effects and these can vary from person to person. Detailed information about side effects is found in the package insert leaflet. Please read this carefully before starting treatment.

**Frequent side effects** include: dry skin, soreness and peeling of the lips with cracking, soreness and bleeding of the inner nose, dry eyes, fragile skin and minor skin infections. Dry skin and lips can be managed with moisturisers and lip balms. An antibiotic ointment may be needed for soreness of the nose. Dry eyes can be managed with artificial tears. Acitretin can increase the tendency for sunburn. Fair skinned people need to take extra care in the sun including using sunscreens. Mild headaches are common at the start of treatment.
**Rarer side effects** include: raised pressure around the brain which can lead to headaches, nausea and visual disturbance. Liver inflammation is usually mild and reversible on stopping treatment and is detected by blood liver tests.

Other side effects include hair loss and hair thinning, which are reversible on stopping treatment, reduced night vision, gastrointestinal upset with nausea and abdominal pain, and aching muscles after exercise.

Other retinoid drugs, especially isotretinoin, have been linked to depression and mood change but it is unclear whether acitretin causes this problem.

Long-term treatment with acitretin can cause calcium deposits around the bones, which can lead to pain and stiffness. This can be investigated with x-rays.

**How will I be monitored for the side effects of acitretin?**

Before treatment is started, blood tests are performed to check that your liver and kidneys are working normally and that your blood lipids are not raised. The blood test needs to be performed after an overnight fast because food and drinks may increase the blood lipids. These blood tests are usually checked every 3 months during treatment. It is important that you attend regularly as these tests help your doctor decide that the medication can be safely continued.

Children who take acitretin should have their growth carefully monitored.

Advice your doctor or nurse about any new symptoms or problems with your general health during acitretin as these may need further investigation.

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**The BAD Biologic Interventions Register (BADBIR)**

If you have been prescribed acitretin for treatment of your psoriasis, you may be asked to take part in the national biologics register. This register is to compare the safety of different treatments for psoriasis and to see how well they work. It was set up to monitor some new treatments for psoriasis called biological treatments. The register will give doctors information on how best to use the treatments available for moderate to severe psoriasis. No information will be passed to the register without your informed consent.
Can I have immunisations (vaccinations) while taking acitretin?

Yes. There are no reasons why vaccinations cannot be given.

Does acitretin affect pregnancy?

Acitretin may cause serious deformity and harm to an unborn child therefore it must never be taken during pregnancy. Furthermore, women should avoid pregnancy for at least three years after stopping acitretin. Alcohol prolongs the time that acitretin is stored in the body and women must not consume any alcohol (in food, drink or medicines) during treatment with acitretin and for 2 months after stopping acitretin. This very strict advice regarding alcohol consumption in women taking acitretin is due to the risk to a future pregnancy and to minimise this risk.

Can I drink alcohol if I take acitretin?

Women of child bearing age should not consume any alcohol including in drinks, foods or medicines (see above Does acitretin affect pregnancy?). Manufacturers of acitretin advise that alcohol consumption should be avoided because the risk of side effects is increased; alcohol increases the risk of liver inflammation and raised blood fats. If you choose to drink alcohol you should keep within the government guidelines for alcohol consumption.

Can I take other medicines if I take acitretin?

Most drugs can be taken safely with acitretin, but some can interact so always tell your doctor and pharmacist before taking any new prescription or over-the-counter medication.

Drugs that may interact with acitretin include:

- Vitamin A supplements should not be taken
- Tetracycline antibiotics
- Methotrexate
- Anticonvulsant medication
- Warfarin

The effectiveness of the combined oral contraceptive pill is not affected by acitretin, but it is possible that the progesterone only / mini-pill is less effective.
Can I sunbathe?

Acitretin can increase the tendency to sunburn. Fair-skinned people need to take extra precautions in sunny weather and wear protective clothing and sunscreens.

Acitretin is sometimes given to increase the effectiveness of ultraviolet therapy (UVB or PUVA).

Where can I find out more about acitretin?

If you would like any further information about acitretin, or if you have any concerns about your treatment, you should discuss this with your doctor or pharmacist. This information sheet does not list all the side effects this drug can cause. For full details, please see the drug information leaflet that comes with your medicine. Your doctor will assess your medical circumstances and draw your attention to side effects that may be relevant in your particular case.

Links to other Internet sites:

www.dermnetnz.org/treatments/acitretin.html

For details of source materials used please contact the Clinical Standards Unit (clinicalstandards@bad.org.uk).

This leaflet aims to provide accurate information about the subject and is a consensus of the views held by representatives of the British Association of Dermatologists: individual patient circumstances may differ, which might alter both the advice and course of therapy given to you by your doctor.

This leaflet has been assessed for readability by the British Association of Dermatologists’ Patient Information Lay Review Panel

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