Ustekinumab intravenous for adults

Who can administer

May be administered by registered competent doctor or nurse/midwife

Important information

- Before the administration of each dose, the patient should be examined for the presence of infection, and consideration given to delaying treatment should infection be present
- Caution in patients with a chronic infection, or a history of recurrent infection
- Prior to initiating therapy, patients should be evaluated for tuberculosis infection - see SPC
- **High cost item (>2,000 EURO per vial)-** take care during preparation

Available preparations

Stelara 130mg per 26ml vial (5mg/ml)

Pyzchiva 130mg per 26ml vial (5mg/ml)

Wezenla 130mg per 26ml vial (5mg/ml)

Reconstitution

Already in solution

Dilute further prior to administration

Infusion fluids

Sodium chloride 0.9%

Methods of intravenous administration

Intermittent intravenous infusion only (using an electronically controlled infusion device)

- Withdraw and discard a volume of infusion fluid from 250ml infusion bag that is equal to the volume of drug solution to be added
- For 130mg dose (1 vial)- remove and discard 26ml from the 250ml infusion bag
- For 260mg dose (2 vials)- remove and discard 52ml from the 250ml infusion bag
- For 390mg dose (3 vials)- remove and discard 78ml from the 250ml infusion bag
- For 520mg dose (4 vials)- remove and discard 104ml from the 250ml infusion bag
- Withdraw 26ml drug solution from each vial needed and add to the infusion bag, to end up

with a total volume of 250ml
- Gently mix. Administer over 60 minutes
- An in-line 0.2 micron filter **must be used** during administration (Braun filter 0409 9303)
    - UCH: available from pharmacy
    - MPUH: available from stores

Dose in adults

Initial intravenous dose: Dose as per table below (equates to approximately 6mg/kg)

Crohn's disease and Ulcerative Colitis		
Body weight	**Recommended dose (approx 6mg/kg)**	**Number of 130mg vials**
55kg or less	260mg	2
55 to 85kg	390mg	3
over 85kg	520mg	4

Subsequent doses

- **Following the initial intravenous dose, the treatment is continued with subcutaneous use**
- The first subcutaneous dose should be given at week 8 following the intravenous dose (a different preparation must be used for subcut route - available as a pre-filled pen)
- See SPC for further details

Renal or hepatic impairment

- Ustekinumab has not been studied in this patient population

Monitoring

- Monitor for hypersensitivity reactions during and for an hour after the infusion [(ref 1)]
- Levels may be monitored - see below

Storage

Store between 2 and 8 C

Do not freeze

References

SPC 25/09/2024

1: Injectable medicines guide, downloaded from Medusa 05/02/2025

Therapeutic classification

Immunosuppressant, monoclonal antibody