



GENERIC NAME: **Sodium AUROTHIOMALATE**

BRAND NAME: **Myochrysine (Gold Compounds)**

How it works:

- Is a disease modifying anti-rheumatic drug (DMARD).
- Gold compounds improve immune cell function, therefore reducing the symptoms of inflammation, slowing down the disease process and damage to joints in people with rheumatoid arthritis and psoriatic arthritis.

How quickly it works:

- Gold therapy works slowly and benefits are usually seen within 3 to 6 months.

How to take:

- *Once weekly* by injection into the *muscle* of your buttock, or given by self-injection into the thigh muscle.
- Available in 1 ml ampoules of 10 mg, 25 mg and 50 mg.
- The dosing schedule is as follows:
 - Week 1: 10 mg
 - Week 2: 25 mg
 - Week 3: 50 mg
 - The dose remains at 50 mg per week provided that are no side effects or changes in weekly blood and urine tests.
- Gold therapy can be continued for years.
- If you are taking a blood pressure medication called an ACE Inhibitor (Accupril, Captopril, Monopril etc.) the following is recommended:
 - Inform your rheumatologist/nurse.
 - Discuss with your family doctor some other types of blood pressure medications that you can take instead of an ACE inhibitor.



- Your dosing schedule will be 10, 15, then 25 mg IM once weekly. You will not exceed 25 mg IM once/week.
- You will also be required to wait 20 minutes after the first 3 gold injections when you initially start gold or after any further new dose increases.
- It is important you take your ACE inhibitor medication at least 4 hours after taking your gold injection. Do not take before your gold injection.



If you forget to take the gold injection

- on your weekly scheduled day, take it as soon as you remember.
- There should be at least 5 days between your injections.

Monitoring: Lab Tests:



- Blood tests (CBC, platelet count) and a urine test (for protein) are done weekly for the first 4 weeks, then every other week for the next 20 weeks (5 months).
- After 20 weeks, the lab tests are usually reduced to every 3 to 4 weeks.
- After 2 years, the blood and urine tests may be reduced to every 2 to 3 months.
- A blood test called an ESR, which is a measure of the level of inflammation in the body, is done with every second blood test.

Side Effects:

Possible side effects:

- Skin itching, often occurs before a rash develops (30%)
- Skin rash (30%)
- Mouth sores – on tongue, gums or inner cheeks (20%)
- Metallic taste in mouth, which may come before mouth sores
- Vaginal burning or itching
- Aching or arthritis flare within a few hours following the gold injection
- Feeling of flushing, warmth, dizziness or faintness with low blood pressure immediately following a gold injection (5%)
- Leakage of protein in the urine (2–7%)

- Chrysiasis, a greying colour of the skin and cornea, has been observed after many years of gold therapy. Chrysiasis is increased by sun exposure.
- Gold deposits have been seen in breasts on mammograms. Inform the radiologist of this prior to your test.

Potentially serious side effects:

- Sudden drop in platelet cells, and/or experiencing easy bruising (1%)
- Drop in all blood cells because of bone marrow suppression (1:1000)
- Unexplained severe diarrhea with or without blood (allergic colitis)
- Unexplained dry cough (that may occur at night), and shortness of breath (allergic pneumonia)
- Liver inflammation that causes nausea, vomiting, & jaundice (< 1:1000)



Managing side effects:

Contact your doctor:

- If you develop any of the above signs & symptoms.
- Side effects can occur anytime during treatment and are usually temporary. They are often related to the dosage of gold that you are taking so can be eliminated by lowering the dosage.

Before each injection:

- Side effects, previous blood and urine tests must be checked prior to receiving gold by yourself, your nurse or physician.
- Inform your nurse/physician if you are having side effects
- If you are doing self-injection you must confirm your lab tests are within normal range prior to giving the injection.
- In the event of a definite or suspected drug reaction, gold therapy should be held temporarily until side effects subside. Gold therapy is then restarted at a 50% lower dose.
- An increase in the frequency of blood testing may be required if you are having side effects



Sun Sensitivity:

- Avoid unprotected, prolonged exposure to the sun.
- Use a sunscreen & wear long-sleeve clothing

Allergic type of reactions: (skin itchiness or rashes)

- Bathe in Aveeno bath treatment (100% natural colloidal oatmeal), or use various anti-itch creams (Benadryl, Aveeno or Hydrocortisone .05%).
- Take Benadryl 25 – 50 mg every 4 to 6 hours as needed. Or may take other non-drowsy antihistamines (Claritin, Alerius, Reactine) if desired

Mouth sores:



- Rinse mouth with warm water & salt.
- A non-prescription protective ointment, Orabase, can be put on the ulcers.
- A prescription ointment such as Oracort or Topsyn gel may also be used.

Precautions:



Laser therapy:

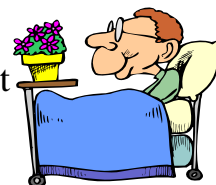
- Permanent skin scarring/dyscoloration can occur following dermatologic, ruby laser therapy (specifically Q-switched laser). This can occur in anyone who is on gold therapy or has received gold in the past.

Pregnancy:

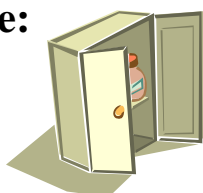
- Gold therapy is usually stopped when pregnancy is confirmed. It has been used safely during pregnancy and by nursing mothers.

Illness/Surgery:

- Gold therapy may be continued safely throughout illness or surgery.



Storage:



- Store below 25°C and protect from light.
- Do not administer if the solution is darker than a clear pale yellow.

Syringe Disposal:

Discard the syringe after each injection into a sharps container from your pharmacist.



General medication considerations:



1. Take your medication as instructed by your physician.

Work with your physician to determine how much medication you need. Taking more medication than is recommended increases your risk of side effects. Skipping doses of medication will decrease the desired effect of the medication.

2. Keep a diary.

As a reminder, keep a gold chart and record the dosage and the dates you took your injection, blood and urine tests, and any reason for a change or withdrawal of a medication.



3. Keep a medication list in your wallet.

Record all medications, vitamin/mineral & herbal supplements you are presently taking & any allergies you may have.

4. Carry a travel letter.

When travelling with injectable medication & needles, carry a letter from your doctor or clinic indicating the medication & dosage you are taking.

Disclaimer:

This information does not replace medical advice. Specific questions about medications should be discussed with your doctor, clinic nurse or pharmacist.

Example Lab/Medication Record

Date	WBC	Hgb	Platelets	ESR	Urine protein	Gold (mg)	Total Gold (mg)	Comments

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