

# Taking azathioprine for your respiratory condition

## Respiratory Medicine

### Information for Patients

Produced: November 2021

Review: November 2024

Leaflet number: 1253 Version: 1

This leaflet has been written to help you understand more about azathioprine. It will tell you what it is, how it works and how it is used to treat interstitial lung disease (ILD). ILD covers a wide range of conditions which affect the lungs.

## What is azathioprine and how does it work?

Azathioprine is a medicine that was mainly used to stop the body from rejecting a transplanted organ (e.g. kidney, heart and liver). Azathioprine can also be used to treat certain lung conditions. It lowers the body's own defense system (immune system) and is one of a group of drugs known as immunosuppressants. It is used in lung conditions where your immune system attacks your own body. It aims to reduce the swelling in the lungs that may cause symptoms of breathlessness and ability to exercise. If you are already taking prednisolone starting azathioprine may mean that your dose of prednisolone can be reduced once you are set up on treatment.

Other names for azathioprine include Imuran and Azapress.

## When should I take azathioprine?

The dose is usually once a day. Take the medication with food and swallow the tablet whole (do not chew or crush).

## What dose of azathioprine should I take?

Azathioprine is available in 25mgs and 50mgs tablets.

The normal dose lies between 25mgs and 150mgs once a day. You should only take the dose advised by your ILD specialist team. You will usually start on a lower dose and

**Health information and support is available at [www.nhs.uk](http://www.nhs.uk)  
or call 111 for non-emergency medical advice**

Visit [www.leicestershospitals.nhs.uk](http://www.leicestershospitals.nhs.uk) for maps and information about visiting Leicester's Hospitals  
To give feedback about this information sheet, contact [InformationForPatients@uhl-tr.nhs.uk](mailto:InformationForPatients@uhl-tr.nhs.uk)

gradually increase the dose as advised by your ILD team. The final dose may depend upon your body weight.

Your recommended dose:

Starting Dose	_____ mg	_____ A DAY	_____ WEEKS
Increased dose	_____ mg	_____ A DAY	_____ WEEKS
Increased dose	_____ mg	_____ A DAY	_____ WEEKS
Increased dose	_____ mg	_____ A DAY	

## How long will I have to take azathioprine for?

How long you will need to have treatment will depend on which lung disease you have and how well you respond to treatment. You may need to take azathioprine for at least 3 months before you notice any change in your condition. If it works, azathioprine can be taken long term.

## What are the possible side effects of azathioprine?

Before starting azathioprine your ILD specialist team may do a blood test to check you do not have a condition where your body does not produce enough of a natural chemical called TPMT (thiopurine methyltransferase). If your level of TPMT is low you cannot break down azathioprine in your body as well. This can increase your risk of developing side effects.

Azathioprine has been used for many years and most patients do not have any problems. Sometimes it can cause some side effects. The most common side effects are

- stomach pains
- feeling sick (nausea),
- diarrhoea
- reduced appetite,
- skin rashes and
- sensitivity to sunlight

Azathioprine can affect your white blood count (fewer blood cells are made). This can make you more likely to get infections. Although rare, it can also cause inflammation of the liver.

You should tell your doctor or ILD specialist team straight away if you develop any of the following after starting azathioprine:

- A sore throat
- A fever or chills
- Any other symptoms of infection
- Unexplained bruising or bleeding
- Any other new symptoms or anything else that concerns you

Patients on long-term azathioprine are more likely than others to develop skin cancers and lymphoma. This is especially true if you are fair-skinned and so all patients should avoid too much exposure to sunlight. Sunscreens are not an alternative to clothing and shade, rather they offer additional protection. No sunscreen will provide 100% protection.

## How can I reduce the risks?

You should stop your azathioprine and see your doctor or contact your ILD specialist team immediately if:

- You have any of the symptoms above and they are severe
- You develop chickenpox or shingles or come into contact with someone who has chickenpox and shingles and you have not had chickenpox in the past. You may need treatment with antiviral medicine as chickenpox and shingles can be severe in people on an immunosuppressant. Your azathioprine will be stopped. It will only re-start when you feel better.
- As azathioprine may make you more likely to pick up infections, you should avoid people who have recently been in hospital and if possible people with recent infections.
- If you are being treated for any infection we advise you to stop the azathioprine while you are on antibiotics and to restart it at your previous dose 1 week after stopping antibiotics (unless your ILD team tell you differently).

## How are the side-effect of azathioprine monitored?

Your ILD specialist team will arrange regular blood tests. Your blood tests are frequent to start with (e.g. every 2 weeks), but are needed less often (e.g. usually every 1 to 3 months) once you are set up on treatment. These checks monitor your full blood count, liver and kidney function. You may be asked to keep a record of your results in a booklet - you should bring this with you when you visit your GP or the hospital

You must not take azathioprine unless you have regular blood tests.

## Does azathioprine affect pregnancy?

If you are planning a family or become pregnant while taking azathioprine then you should talk to your doctor as soon as possible. The current guidelines say that azathioprine can be taken if trying for a baby and even when pregnant or breast feeding.

Men can continue taking azathioprine when trying for a baby.

## Can I take other medicines at the same time as azathioprine?

Azathioprine can interfere with some medications and this may alter the dosage of azathioprine that you need. Tell your doctor about all of the medicines that you are taking, whether on prescription or bought over the counter before starting treatment.

Do not begin any medicine or change its dosage without first checking with your doctor or pharmacist.

Medications that can cause problems when taking azathioprine include:

- Allopurinol
- Febuzostat
- Warfarin
- Captopril and Enalapril
- Co-trimoxazole

## Can I have immunisation injections while on azathioprine?

You should avoid live vaccines such as yellow fever, shingles and the new nasal flu vaccines. Flu, Covid-19 and pneumonia vaccines are safe and recommended.

## Can I drink alcohol whilst taking azathioprine?

You can drink alcohol whilst having azathioprine treatment, however, it is advised that you only drink alcohol in small amounts. You should try to drink no more than 14 units of alcohol per week.

## Where can I find out more about azathioprine?

If you want to know more about azathioprine, or if you are worried about your treatment, you should speak to your ILD specialist team. This information sheet does not list all of the side effects of azathioprine. For more detail and information, look at the drug information sheet which comes as an insert with your prescription for azathioprine.

## Contact details

Please do not hesitate to contact the ILD team on 0116 258 3949 for advice.

اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔  
على هذه المعلومات بلغة أخرى، الرجاء الاتصال على رقم الهاتف الذي يظهر في الأسفل

જો તમને અન્ય ભાષામાં આ માહિતી જોઈતી હોય, તો નીચે આપેલ નંબર પર કૃપા કરી ટેલિફોન કરો

ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਭਾਸ਼ਾ ਵਿਚ ਚਾਹੁੰਦੇ ਹੋ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਹੇਠਾਂ ਦਿੱਤੇ ਗਏ ਨੰਬਰ 'ਤੇ ਟੈਲੀਫੋਨ ਕਰੋ।

Aby uzyskać informacje w innym języku, proszę zadzwonić pod podany niżej numer telefonu

If you would like this information in another language or format such as EasyRead or Braille, please telephone 0116 250 2959 or email [equality@uhl-tr.nhs.uk](mailto:equality@uhl-tr.nhs.uk)