Nurse Roadshow

Dermatology for the clinical nurse specialist: Optimising patient care

Programme booklet

18:30 – 19:55 • 31st March 2022

Hilton Paddington, London

Click here to join the meeting
Password: Novartis2022

CPD CERTIFIED
The CPD Certification Service

This meeting has been approved for CPD credits, and a certificate will be shared following the meeting.

BDNG BRITISH DERMATOLOGICAL NURSING GROUP

The Novartis Nurse Roadshow Meeting – 31st March 2022 has been developed and funded by Novartis Pharmaceuticals UK Limited and promoted by The British Dermatological Nursing Group (BDNG).

Cosentyx® (secukinumab) is indicated for the treatment of moderate to severe plaque psoriasis in adults, adolescents and children from the age of 6 years who are candidates for systemic therapy and active psoriatic arthritis in adult patients, (alone or in combination with methotrexate) who have responded inadequately to disease-modifying anti-rheumatic drug therapy.

UK • March 2022 • 194524 • This is a promotional meeting organised and funded by Novartis Pharmaceuticals UK Ltd and is intended for UK healthcare professionals only.

Prescribing information and adverse event reporting can be found on pages 7-8.

NOVARTIS

Cosentyx® secukinumab

Introduction

Novartis is pleased to welcome you to the Novartis Nurse Roadshow, a series of hybrid meetings aimed at nurse specialists in dermatology. In this meeting, streaming live from Hilton Paddington, London, our panel of expert speakers will share survey results on nurse wellbeing, showcasing the personal experiences of a Dermatology nurse in their Trust. There will be a presentation on psychodermatology, providing practical advice on the You First* programme, exploring its benefits to patients, HCPs and the NHS. The final presentation of the meeting will be on the topic of paediatric dermatology and management of paediatric patients.

As part of the meeting, you will have the opportunity to submit your topic-related questions. These questions are submitted via Mentimeter, which you can access by following this link **www.menti.com/hj6dmypssz**. Alternatively, scan the QR code with your mobile phone for instant access.

HCPs, healthcare professionals

*You First is a patient support programme developed and funded by Novartis Pharmaceuticals UK Ltd. You First is for NHS patients who are receiving Cosentyx® (secukinumab) or for whom the prescribing decision has been made. A service level agreement is required for each NHS organisation participating.

Novartis hopes that you will find these meetings useful and practical for helping you manage patient care.

Should you have any questions about the Novartis Nurse Roadshow, please contact Georgeia Goodhew, Event Manager, at georgeia.goodhew@novartis.com or your Novartis Key Account Manager

Agenda

Time	Session	Speaker(s)
18:30–18:40	Welcome and introduction	**Lucy Moorhead (Chair)** *Consultant Nurse, Dermatology* Guy's and St Thomas' NHS Foundation Trust
18:40–19:00	Nurse wellbeing: survey results and personal experience in wellbeing management	**Jenny Carolan** *Lead Nurse, Dermatology* Royal Free London NHS Foundation Trust
19:00–19:20	Psychodermatology and using a patient support programme	**Emmanuel Toni** *Clinical Nurse Specialist* Royal Free London NHS Foundation Trust
19:20–19:40	Managing your Paediatric Psoriasis (PsO) Patients	**Alessandro Gradassi** *Consultant Dermatologist* Ealing Hospital
19:40–19:55	Q&A	**Lucy Moorhead (Chair)**

PsO, moderate to severe plaque psoriasis

Speaker biographies

Lucy Moorhead (Chair)

Lucy Moorhead is a Nurse Consultant in Inflammatory Skin Disease at St John's Institute of Dermatology at Guy's and St Thomas' NHS Foundation Trust

Lucy has a background in dermatology research and clinical trials and has been awarded a BA (Hons) in Nursing and an MA in Medical Ethics and Law. She has a strong interest in dermatology education for nurses and is on the steering committee for St John's DermAcademy.

Lucy has published in a variety of nursing publications, including *Nursing Times*, *Nursing Standard* and *Dermatological Nursing*.

Lucy was awarded the inaugural Psoriasis Nurse of the Year Award at the British Dermatological Nursing Conference in 2016 after nomination from her patients. She is currently a trustee for the British Dermatological Nursing Group.

Jenny Carolan

Jenny Carolan is the Lead Nurse Dermatology at the Royal Free London NHS Foundation Trust

Jenny's specialist area of interest is in inflammatory dermatology specifically biologic therapies for patients with psoriasis. Jenny has a Master's degree in Dermatology, which she gained at the University of Hertfordshire.

Jenny is the co-chair of the biologics sub-group of the British Dermatological Nursing Group (BDNG), and she has also represented the London area for the BDNG. She has a very strong interest in the education of student nurses regarding dermatology and was instrumental in adding dermatology to the student nurse rotation at the University of Hertfordshire and Middlesex University London.

Jenny lectures on the Minor Illness course at the University of Hertfordshire annually and also teaches on biologics for the MSc post-grad course at the same university.

Speaker biographies

Emmanuel Toni

Emmanuel is a Dermatology Clinical Nurse Specialist based at the Royal Free NHS Foundation trust.

He has a background in emergency medicine before moving onto dermatology research where he led on both NIHR and pharma sponsored trials.

He currently leads the Biologic Service at the Royal Free site. He also curates a dermatology podcast called Dermatology UK the podcast to help increase and improve public perception and knowledge about skin conditions and care.

Alessandro Gradassi

Alessandro is a Consultant Dermatologist at Ealing Hospital, part of the London North West University Healthcare NHS trust (LNWH).

He qualified from Florence University Medical School in 2013 and trained in Dermatology and Venereal Diseases in Bologna, renowned as the most prestigious school in Italy. He gained entry into the UK Specialist Register in May 2020. He developed and currently leads the service of Paediatric Dermatology of LNWH and runs the Biologic and systemic medications clinic at Ealing Hospital.

He masters Dermatoscopy at the highest levels and is a member of the International Dermoscopy Society. He has ongoing teaching commitments with Imperial College medical school. Dr Gradassi is widely published in peer reviewed journals.

Feedback

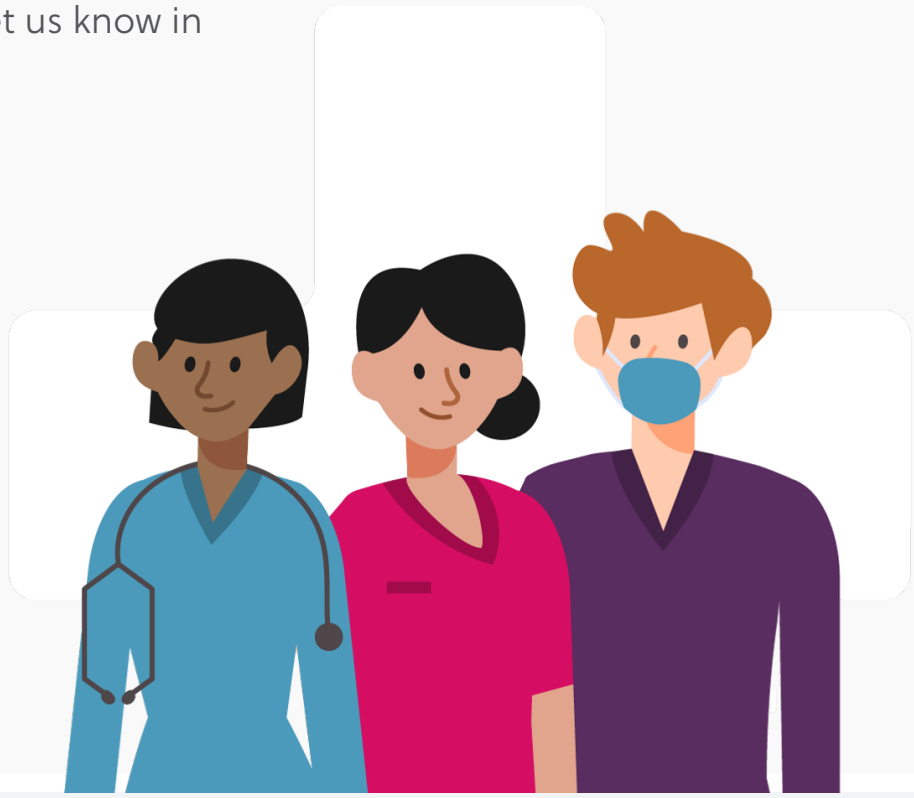
We hope you enjoy the upcoming Novartis Nurse Roadshow. After attending the meeting, we would appreciate your feedback to assist us in developing future programmes. Can we ask that you kindly fill in the evaluation form using the link below:

https://survey.alchemer.eu/s3/90431462/Novartis-Nurse-Roadshow-2022-Meeting-1

Participants attending the meeting in person will be able to complete printed out copies of the evaluation form.

Future events

Thank you for attending. Please keep an eye out for future Novartis Nurse Roadshow meetings. If there is a particular topic you would like to see covered at future meetings, please contact your local key account manager. Or let us know in the evaluation form.



Cosentyx® (secukinumab) Great Britain Prescribing Information. Please refer to the Summary of Product Characteristics (SmPC) before prescribing. Indications: Treatment of: moderate to severe plaque psoriasis in adults, children and adolescents from the age of 6 years who are candidates for systemic therapy; active psoriatic arthritis in adults (alone or in combination with methotrexate) who have responded inadequately to disease-modifying anti-rheumatic drug therapy; active ankylosing spondylitis in adults who have responded inadequately to conventional therapy; active non-radiographic axial spondyloarthritis (nr-axSpA) with objective signs of inflammation as indicated by elevated C-reactive protein (CRP) and/or magnetic resonance imaging (MRI) evidence in adults who have responded inadequately to non-steroidal anti-inflammatory drugs. **Presentations:** Cosentyx 75 mg solution for injection in pre-filled syringe; Cosentyx 150 mg solution for injection in pre-filled syringe; Cosentyx 150 mg solution for injection in pre-filled pen; Cosentyx 300 mg solution for injection in pre-filled pen. **Dosage & Administration:** Administered by subcutaneous injection at weeks 0, 1, 2, 3 and 4, followed by monthly maintenance dosing. Consider discontinuation if no response after 16 weeks of treatment. Each 75 mg dose is given as one injection of 75 mg. Each 150 mg dose is given as one injection of 150 mg. Each 300 mg dose is given as two injections of 150 mg or one injection of 300 mg. *Plaque Psoriasis:* Adult recommended dose is 300 mg. Adolescents and children from the age of 6 years: if weight ≥ 50 kg, recommended dose is 150 mg (may be increased to 300 mg as some patients may derive additional benefit from the higher dose). If weight < 50 kg, recommended dose is 75 mg. If possible avoid areas of the skin showing psoriasis. *Psoriatic Arthritis:* Recommended doses are 300 mg in patients with concomitant moderate to severe plaque psoriasis or who are anti-TNFα inadequate responders, 150 mg in other patients. Can be increased to 300 mg based on clinical response. *Ankylosing Spondylitis:* Recommended dose 150 mg. Can be increased to 300 mg based on clinical response. *nr-axSpA:* Recommended dose 150 mg. **Contraindications:** Hypersensitivity to the active substance or excipients. Clinically important, active infection. **Warnings & Precautions:** *Infections:* Potential to increase risk of infections; serious infections have been observed. Caution in patients with chronic infection or history of recurrent infection. Advise patients to seek medical advice if signs/symptoms of infection occur. Monitor patients with serious infection closely and do not administer Cosentyx until the infection resolves. Non-serious mucocutaneous candida infections were more frequently reported for secukinumab in the psoriasis clinical studies. Should not be given to patients with active tuberculosis (TB). Consider anti-tuberculosis therapy before starting Cosentyx in patients with latent TB. *Inflammatory bowel disease (including Crohn's disease and ulcerative colitis):* New cases or exacerbations of inflammatory bowel disease have been reported with secukinumab. Secukinumab, is not recommended in patients with inflammatory bowel disease. If a patient develops signs and symptoms of inflammatory bowel disease or experiences an exacerbation of pre-existing inflammatory bowel disease, secukinumab should be discontinued and appropriate medical management should be initiated. *Hypersensitivity reactions:* Rare cases of anaphylactic reactions have been observed. If serious allergic reactions occur, discontinue immediately and initiate appropriate therapy. *Vaccinations:* Do not give live vaccines concurrently with Cosentyx; inactivated or non-live vaccinations may be given. Paediatric patients should receive all age appropriate immunisations before treatment with Cosentyx. *Latex-Sensitive Individuals:* The removable needle cap of the 75mg and 150 mg pre-filled syringe and 150mg pre-filled pen contains a derivative of natural rubber latex. *Concomitant immunosuppressive therapy:* Combination with immunosuppressants, including biologics, or phototherapy has not been evaluated in psoriasis studies. Cosentyx was given concomitantly with methotrexate, sulfasalazine and/or corticosteroids in arthritis studies. Caution when considering concomitant use of other immunosuppressants. **Interactions:** Live vaccines should not be given concurrently with secukinumab. No interaction between Cosentyx and midazolam (CYP3A4 substrate) seen in adult psoriasis study. No interaction between Cosentyx and methotrexate and/or corticosteroids seen in arthritis studies. **Fertility, pregnancy and lactation:** *Women of childbearing potential:* Use an effective method of contraception during and for at least 20 weeks after treatment. *Pregnancy:* Preferably avoid use of Cosentyx in pregnancy. *Breast feeding:* It is not known if secukinumab is excreted in human breast milk. A clinical decision should be made on continuation of breast feeding during Cosentyx treatment (and up to 20 weeks after discontinuation) based on benefit of breast feeding to the child and benefit of Cosentyx therapy to the woman. *Fertility:* Effect on human fertility not evaluated. **Adverse Reactions**: *Very Common* (≥1/10)*:* Upper respiratory tract infection. *Common* (≥1/100 to <1/10)*:* Oral herpes, Tinea pedis, headache, rhinorrhoea, diarrhoea, nausea, fatigue. *Uncommon (≥1/1,000 to <1/100):* Oral candidiasis, lower respiratory tract infections, neutropenia, inflammatory bowel disease. *Rare (≥1/10,000 to <1/1,000)*: anaphylactic reactions, exfoliative dermatitis (psoriasis patients). *Not known:* Mucosal and cutaneous candidiasis (including oesophageal candidiasis). *Infections:* Most infections were non-serious and mild to moderate upper respiratory tract infections, e.g. nasopharyngitis, and did not necessitate treatment discontinuation. There was an increase in mucosal and cutaneous (including oesophageal) candidiasis, but cases were mild or moderate in severity, non-serious, responsive to standard treatment and did not necessitate treatment discontinuation. Serious infections occurred in a small proportion of patients (0.015 serious infections reported per patient year of follow up). *Neutropenia:* Neutropenia was more frequent with secukinumab than placebo, but most cases were mild, transient and reversible. Rare cases of neutropenia CTCAE Grade 4 were reported. *Hypersensitivity reactions*: Urticaria and rare cases of anaphylactic reactions were seen. *Immunogenicity*: Less than 1% of patients treated with Cosentyx developed antibodies to secukinumab up to 52 weeks of treatment. *Other Adverse Effects:* Please consult the SmPC for a detailed listing of all adverse events before prescribing. **Legal Category:** POM. **MA Number & List Price:** PLGB 00101/1205 – 75 mg pre-filled syringe x 1 - £304.70; PLGB 00101/1029 - 150 mg pre-filled pen x2 £1,218.78; PLGB 00101/1030 - 150 mg pre-filled syringe x2 £1,218.78; PLGB 00101/1198 – 300 mg pre-filled pen x 1 £1218.78. **PI Last Revised:** October 2021. 162554. Full prescribing information, (SmPC) is available from: Novartis Pharmaceuticals UK Limited, 2nd Floor, The WestWorks Building, White City Place, 195 Wood Lane, London, W12 7FQ. Telephone: (01276) 692255.

Adverse Event Reporting:
Adverse events should be reported. Reporting forms and information can be found at www.mhra.gov.uk/yellowcard. Adverse events should also be reported to Novartis via uk.patientsafety@novartis.com or online through the pharmacovigilance intake (PVI) tool at www.report.novartis.com.

If you have a question about the product, please contact Medical Information on 01276 698370 or by email at medinfo.uk@novartis.com

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