

# Umhlahlandlela Olula Wokuqonda

## Nokusebenzisa Imithi Yama-Biologic kanye ne-Targeted Synthetic Yezifo Zamathambo



Lo mhlahlandlela usekelwe ezincomweni ze-South African Rheumatism and Arthritis Association zango-2024. Khuluma nodokotela wakho wezifo zamathambo noma umhlengikazi wezifo zamathambo ukuze uthole imininingwane eyongeziwe, futhi ubuze ngamaqembu okusekela iziguli endaweni yangakini.

### Lo Mhlahlandlela Owabani?

Lo mhlahlandlela ungowabo bonke abantu abanesifo samathambo noma izimo ezihlobene, njenge-rheumatoid arthritis (RA), i-psoriatic arthritis (PsA), i-axial spondyloarthritis (axSpA), noma izifo ezithile zomlungu womzimba, abadinga imithi enamandla ebizwa ngokuthi i-biologic noma i-targeted synthetic disease-modifying anti-rheumatic drugs (b/tsDMARDs). Uphinde ube owomndeni kanye nabanakekeli babo. Lo mhlahlandlela uchaza le mithi ngendlela elula futhi ukusiza ukusebenza neqembu lakho lezempilo ukuze uyisebenzise ngokuphephile nangokuphumelelayo.

### Iyini Imithi Yama-Biologic ne-Yama-Targeted Synthetic (b/tsDMARDs)?

Imithi yama-biologic neyama-targeted synthetic (b/tsDMARDs) yimithi enamandla esetshenziselwa ukwelapha isifo samathambo nezinye izimo lapho amasosha omzimba wakho ehlasela umzimba wakho, ebangela ukuvuvukala, ubuhlungu, kanye nomonakalo emalungeni, esikhumbeni, noma ezihlakeni zomzimba. Le mithi ilungisa amasosha omzimba akho ukuze inciphise izimpawu futhi ivimbe umonakalo, ikusiza ukuthi unyakaze kangcono futhi uzizwe ungcono.

Le mithi ivame ukuzanywa emva kokuthi imithi elula (ebizwa ngokuthi i-conventional synthetic DMARDs, njenge-methotrexate) ingasebenzi kahle ngokwanele. Ingaba imijovo, ama-infusions (anikezwa ngomthambo), noma amaphilisi, kuya ngomuthi.

**Imithi Yama-Biologic DMARDs (bDMARDs):** Le yenza kusukela kumamaseli aphilayo futhi iqondise ezingxenyeni ezithile zamasosha omzimba akho, njengamaprothini abangela ukuvuvukala. Isetshenziswe eNingizimu Afrika kusukela ngeminyaka yama-2000 futhi ifaka:

- **Ama-Tumor Necrosis Factor inhibitors (TNFi):** Njenge-adalimumab, i-etanercept, i-infliximab, ne-golimumab.
- **Amanye ama-biologics:** Njenge-rituximab (eqondise kuma-B-cell), i-tocilizumab (eqondise ku-IL-6), i-abatacept (eqondise kuma-T-cell), i-ustekinumab (eqondise ku-IL-12/23), i-secukinumab ne-ixekizumab (eqondise ku-IL-17), kanye ne-guselkumab (eqondise ku-IL-23).

- Amanye “ama-biologics okuqala,” kanti amanye “ama-biosimilars” (izinhlobo ezifanayo, ezingabizi kakhulu ezinemithelela efanayo).

#### **Imithi Yama-Targeted Synthetic DMARDs (tsDMARDs):**

Lawa amaphilisi avimba izimpawu ezithile ngaphakathi kwamaseleli ukuze anciphise ukuvuvukala. Izibonelo zifaka:

- **Ama-Janus Kinase inhibitors (JAKi):** Njenge-tofacitinib, i-baricitinib, ne-upadacitinib.
- **Ama-PDE4 inhibitors:** Njenge-apremilast (ye-PsA elula noma i-psoriasis).

## Kungani i-b/tsDMARDs Ibalulekile?

i-b/tsDMARDs ingenza umehluko omkhulu kubantu abanesifo samathambo noma izimo ezihlobene ngokuthi:

- Inciphise ubuhlungu, ukuvuvukala, kanye nokuqina emalungeni noma kwezinye izindawo.
- Ivikele umonakalo ongapheli emalungeni, esikhumbeni, noma ezihlakeni zomzimba.
- Ithuthukise ikhono lakho lokwenza imisebenzi yansuku zonke, ukusebenza, nokujabulela impilo.
- Yehlise amathuba zezinye izinkinga zezempilo, njengesifo senhliziyo, ezibangelwa ukuvuvukala okuqhubekayo.

Nokho, le mithi inamandla futhi ingaba nemiphumela engemihle, njengokwandisa amathuba okuthola izifo. Iyabiza, yingakho isetshenziswa ngokucophelela, kuphela uma idingekile, futhi ngaphansi kokugada okucophelelayo. Ukuyisebenzisa ngendlela efanele kungonga imali ngokuhamba kwesikhathi ngokukugcina unempilo futhi kunciphise ukuvakashela esibhedlela.

## i-b/tsDMARDs Ikhethwa Futhi Ihlolwa Kanjani?

Odokotela bakhetha futhi bagade i-b/tsDMARDs ngokucophelela ukuze baqinisekise ukuthi ziphephile futhi zisebenza kahle kuwe. Nansi indlela:

### Ukukhetha umuthi ofanele:

- Udokotela wakho ubheka isimo sakho (isib., i-RA, i-PsA, noma i-axSpA), ukuthi yiziphi izimpawu ezimbi kakhulu (amalunga, isikhumba, noma izihlaka zomzimba), kanye nezinye izinkinga zezempilo (njengesifo senhliziyo noma izifo oke wabanazo phambilini).
- Bayakucabangela ukuthi ukhetha imijovo, ama-infusions, noma amaphilisi, kanye nokuthi yini egunyaziwe ngesimo sakho.
- Isibonelo, imithi ye-TNFi ilungele i-RA ne-PsA kodwa ayilungile kubo bonke abanesifo samathumbu. i-Rituximab ingakhethwa uma unethuba elikhulu yokuthola i-tuberculosis (TB).

### Ngaphambi kokuqala:

- Uzongena kuhlu yama-biologics ye-South African Rheumatism and Arthritis Association (SARAA) (<https://saraa.phoenix.app>) ukuze kulandelelwe ukwelashwa kwakho nokuphepha. Uzosayina ifomu lokuvuma, futhi udokotela wakho uzothumela imininingwane yakho ukuze igunyazwe yithimba lochwepheshe.
- Uzohlolwa izifo ezifana ne-TB, i-hepatitis B ne-C, kanye ne-HIV, ngoba le mithi ingenza izifo zibe bucayi kakhulu.
- Uzodinga i-X-ray yesifuba kanye nezivivinyo ze-TB (njengokuhlolwa kwesikhumba noma

kwegazi) ukuhlola i-TB efihliwe, evame kakhulu eNingizimu Afrika. Uma kutholakala, uzoqala ukwelashwa kwe-TB ngaphambi kokuqala.

- Imigomo yakho (njenge-umkhuhlwane, i-pneumonia, noma i-COVID-19) zizovuselelwa, kuyinto engcono ngaphambi kokuqala, ukuze uvikelwe ezifweni.

### Ukugada ngesikhathi sokwelashwa:

- Udokotela wakho uzokuhlola njalo (njalo emva kwezinyanga ezingu-1–3 ekuqaleni, bese kuba njalo emva kwezinyanga ezingu-3–6) ukuze abone ukuthi umuthi uyasebenza yini, esebenzisa amathuluzi afana nokubalwa kwamalunga noma izinhlobo zezimpawu.
- Uzokwenza izivivinyo zegazi ukuhlola imiphumela engemihle, njengezinkinga zesibindi noma zamaseli egazi.
- Uzozibikela izimpawu ezintsha, njengomkhuhlane noma ukukhwehlela, ngoba zingasho ukutheleleka.
- Udokotela wakho uzovuselela uhlu ye-SARAA minyaka yonke noma uma uneziphazamiso noma ushintsha imithi.

## Ukuma noma ukuwushintsha:

- Uma umuthi usebenza kahle (isib., ubuhlungu obuncane kanye nokuvuvukala emva kwezinyanga ezingu-3–6), uzoqhubeka nawo.
- Uma ungasizi emva kwezinyanga ezingu-3–6 noma ubangela imiphumela engemihle (njengezifo), udokotela wakho angakushintshela kwenye i-b/tsDMARD.
- Uma uthola ukutheleleka okubi, umuthi uzomiswa kuwona uze ube ngcono.

## i-b/tsDMARDs Isetshenziswa Kanjani?

i-b/tsDMARDs isetshenziswa ngokucophelela ngudokotela wezifo zamathambo (udokotela okhethekile kwisifo samathambo). Nali isu:

### 1. Sebenzisana NoDokotela Wakho

- **Bonana nodokotela wezifo zamathambo:** Bazokuhola ekwelashweni kwakho futhi bangase basebenzisane:
  - Nabanye ochwepheshe (njengochwepheshe bezifo ezithathelwanayo) ngezifo noma izinkinga.
  - Nomhlengikazi wezifo zamathambo ukuze achaze imithi futhi aphenjule imibuzo.
  - Nomeluleki uma uzizwa ucindezekile noma ukhathazekile ngokwelashwa.
- **Yenza isu ndawonye:** Wena nodokotela wakho nizokhetha umuthi osekwe empilweni yakho, indlela ophila ngayo, kanye nezinhloso zakho. Nizoxoxa ngezingu-zi, njengezifo, kanye nendlela yokuphepha.
- **Funda ngomuthi wakho:** Ukuqonda indlela osebenza ngayo kanye nokuthi yini okufanele uyiqaphele kukusiza uzizwe unamandla.

### 2. Lungiselela Ukuqala

- **Hlola izifo:** Uzohlolwa i-TB, i-Hepatitis, kanye ne-HIV. Uma une-TB efihliwe, uzoqala ngokwelashwa kwe-TB (njengamaphilisi e-isoniazid) izinyanga ezingu-1–9, futhi i-b/tsDMARD yakho ingaqala emva kwenyanga yokwelashwa kwe-TB.
- **Vuselela ukugoma:** Thola imijovo yomkhuhlane, i-pneumonia, i-gordelroos, noma i-COVID-19 ngaphambi kokuqala, ngoba eminye imigomo awunikezwa ngesikhathi sokwelashwa.
- **Ngena kuhlu ye-SARAA:** Udokotela wakho uzokubhalisa ukuze kulandelelwe ukwelashwa kwakho ngokuphephile.

### 3. Thatha Umuthi Wakho

Indlela onikezwa ngayo:

- **Imijovo (subcutaneous):** Njenge-adalimumab (njalo emva kwezinsuku ezi-2), i-etanercept (ngesonto), noma i-secukinumab (ngenyanga emva komthamo wokulayisha).
- **Ama-infusions (IV):** Njenge-infliximab (njalo emva kwamasono angu6-8) noma i-rituximab (imithamo emibili izinsuku ezi-2 ehlukeni, bese kuba ngenyanga ezi-6), enikezwa emtholampilo ngokuqapha.
- **Amaphilisi:** Njenge-tofacitinib (kabili ngosuku), i-baricitinib (kanye ngosuku), noma i-apremilast (kabili ngosuku ngemuva kokuqala kancane).

Nemithi eminye:

- Nge-RA, i-b/tsDMARDs ivame ukusetshenziswa ne-methotrexate (iphilisi lomthamo ophansi owesonto) ukuze kube nemiphumela emihle, ngaphandle uma ungayibekezeleli.
- Nge-PsA noma i-axSpA, i-methotrexate ayidingeki ngaso sonke isikhathi.
- Amaphilisi e-steroid (njenge-prednisone) kufanele agwenywe noma ancishiswe ukuze kwehliswe ingozi yokutheleleka.
- **Isikhathi esithathayo ukuze isebenze:** Iningi liqala ukusiza phakathi kwamasono angu2-16, nemiphumela egcwele ngezinyanga ezingu-3–6.

#### 4. Qaphela Imiphumela Engemihle

**Izifo:** Le mithi ingenza ube sengozini yokuthola izifo, njenge-TB, i-pneumonia, noma i-gordelroos. Tshela udokotela wakho ngokushesha uma unomkhuhlane, ukukhwehlela, noma ezinye izimpawu.

**Ezinye izingozi:**

- Izinkinga zesibindi noma zamaseli egazi (ezihlolwa ngezivivinyo zegazi).
- Izimpawu zesikhumba, njengokuqubuka noma i-psoriasis entsha.
- Ngandlela thize, izinkinga zenhliziyi (gwema i-TNFi uma unokwehluleka kwenhliziyi okubi) noma izinkinga zemizwa (gwema i-TNFi uma une-multiple sclerosis).
- Ama-JAK inhibitors angenza ingozi yokuhlaselwa yinhliziyi, isifo sohlangothi, noma amagazi ajiyayo kubantu abathile (isib., ababhemayo noma abaneminyaka engaphezu kuka-65).

**Ukukhulelwa kanye nokuncelisa:**

- Hlela kusenesikhathi nodokotela wakho uma ufuna ukukhulelwa. Eminye imithi (njenge-TNFi) iphephile ngesikhathi sokukhulelwa, kanti eminye (njenge-tocilizumab noma ama-JAK inhibitors) kufanele igwenywe.
- i-TNFi ingasetshenziswa ngesikhathi sokuncelisa, kodwa eminye idinga ucwaningo olwengeziwe.

#### 5. Izimo Ezikhethekile

- **Ukuhlinzwa:** Misa i-b/tsDMARD yakho ngaphambi kokuhlinzwa (isib., izinsuku ezi-1–2 kwezinye eziningi, isikhathi eside kwe-tocilizumab) ukuze wehlise ingozi yokuthetheleka. Qala kabusha emva kokuphola (ngokuvamile emva kwezinsuku ezi-2) uma kungekho ukuthetheleka.
- **Izifo zomlungu womzimba:** Ngezimo ezifana ne-lupus (SLE), i-systemic sclerosis, noma i-vasculitis, i-b/tsDMARDs (njenge-rituximab noma i-tocilizumab) isetshenziselwa izimo ezinzima kuphela, njengomonakalo wezinhlaka, futhi ivame ukuba “ngaphandle kwelabhuli” (engagunyazwanga ngokusemthethweni kulowo msebenzi).

#### 6. Gcina Impilo Yakho Ihlolekile

- **Ukuhlolwa njalo:** Bonana nodokotela wakho wezifo zamathambo njalo emva kwezinyanga ezi-1–3 ekuqaleni, bese kuba njalo emva kwezinyanga ezi-3–6, ukuze ugade izimpawu kanye nezinkinga.
- **Impilo enemphilo:** Idla ukudla okunempilo, unyakazise umzimba, futhi ungabhemi ukuze wehlise amathuba okuthola ezinye izifo njengesifo senhliziyi.
- **Impilo yengqondo:** Ukuzizwa ukhathazekile noma uphansi kuyinto evamile ngesifo esingapheli noma imithi enamandla. Khuluma nodokotela wakho uma udinga usizo.

#### Izinto Ezibalulekile Okufanele Uzikhumbule

- **Sebenzisana nochwepheshe:** Udokotela wezifo zamathambo kuphela okufanele akunikeze i-b/tsDMARDs, ngoba uyena owazi indlela yokuwasebenzisa ngokuphephile.
- **Hlola kuqala:** Hlola i-TB, i-Hepatitis, ne-HIV, futhi uvuselele ukugoma ngaphambi kokuqala.
- **Ngenela uhlu:** Bhalisa ku-SARAA ukuze kulandelelwe ukwelashwa kwakho ngokuphephile.
- **Qaphela izifo:** Tshela udokotela wakho ngokushesha uma unomkhuhlane, ukukhwehlela, noma ezinye izimpawu zokuthetheleka.
- **Landela uhlelo:** Thatha imithi yakho njengoba uyalelwe futhi uye ekuhlolweni ukuze uqinisekise ukusebenza kwawo.
- **Phila ngempilo:** Hlala unyakaza, udle kahle, futhi ungabhemi ukuze usekele ukwelashwa kwakho.
- **Hlela ukukhulelwa noma ukuhlinzwa:** Khuluma nodokotela wakho kusenesikhathi ukuze ulungise imithi ngokuphephile.