



## **COLCHICINE**

### **What are the aims of this leaflet?**

This leaflet has been written to help you understand more about colchicine. It tells you what it is, how it works, how it is used to treat skin conditions, and where you can find out more about it.

### **What is colchicine and how does it work?**

Colchicine is an extract of the plant *Colchicum autumnale* (autumn crocus). It has been used as a medicine since ancient times.

Colchicine changes the response of the immune system. It has been found to be helpful in conditions where a person has too many neutrophils (a type of white blood cell) in the skin.

### **What skin conditions are treated with colchicine?**

In the UK, colchicine is currently only licensed for the treatment of gout, but is used for many conditions as an unlicensed treatment, such as familial Mediterranean fever in children, and pericarditis. Colchicine has been used to treat a number of skin conditions, some of which are quite rare, which include Behçet disease, epidermolysis bullous acquisita, recurrent aphthous ulcers, cutaneous vasculitis, chronic [urticaria](#) and [Sweet syndrome](#). Occasionally colchicine is used in combination with other treatments.

### **What does “unlicensed” mean when referring to a drug?**

An unlicensed drug is one that has not been awarded a Market Authorisation from the UK Medicines Healthcare Products Regulatory Agency (MHRA). Drug licenses are awarded after a rigorous process of evaluation by the MHRA following an application by a pharmaceutical company. Once awarded, the licensed drug can then be marketed and sold in the UK. In the absence of

a license, the drug may still be prescribed in the UK, provided there is funding available locally to pay for it. Additionally, there must be a clear body of evidence to confirm that the drug is effective for the condition in question and that safety concerns have been adequately addressed.

### **Will Colchicine cure my skin condition?**

Depending on the skin condition, colchicine may cure or improve it, but it does not work for everybody. When stopping colchicine however, the skin condition may return.

### **How often/when should colchicine be used?**

How often or for how long colchicine should be used will depend on the skin condition and other factors; a doctor will be able to advise.

Most people take small amounts of colchicine regularly for a long time (months or even years) to prevent severe attacks or other problems caused by inflammation. Other people take large amounts of colchicine during a short period of time (several hours) only when the medicine is needed to relieve an attack that is occurring. The chance of serious side effects is much lower with the first (preventive) kind of treatment.

### **What dose of colchicine should be taken?**

The doctor will recommend a treatment schedule. It is common to start with one 0.5 milligram (mg) tablet a day and gradually increase to between two and four times a day.

### **When should colchicine not be used?**

Patients with advanced kidney failure, including those on dialysis, should not use colchicine long-term as this may accumulate in the body if the kidneys are not working well. In patients with reduced kidney function, the dose of colchicine may be reduced or the dosage interval increased.

In patients aged more than 65 years and those with reduced liver function, heart or gastrointestinal disease, colchicine should be used with caution. It is advisable to seek the doctor's advice.

### **What are the common side effects of colchicine?**

Mild stomach pain, nausea and diarrhoea are the most common side effects of colchicine. In most cases, this is not harmful and will resolve when the dose is reduced.

### **What are the rare side effects of colchicine?**

Overall, with the low doses of colchicine used in skin disease, severe side effects are rare.

With prolonged use, colchicine can cause a reduction of blood cells, which may cause anaemia, a tendency to bleed or an inability to fight infection. Following prolonged use, some thinning of hair may be noticed. All these side effects resolve after colchicine has been stopped.

Colchicine may damage nerves, causing tingling, reduced sensation, and muscle weakness. Very rarely patients can be allergic to colchicine and develop a severe allergic skin rash.

Colchicine poisoning, due to excessive doses, can cause severe abdominal pain, fever, burning sensations in the throat, abdomen and skin, diarrhoea, nausea and vomiting, and collapse. Immediate attention should be sought.

### **How will the side-effects of colchicine treatment be monitored?**

Regular blood and urine tests are required, initially monthly, and then every three months during treatment. Where appropriate, women may be asked to take a pregnancy test.

### **Can immunisations (vaccinations) be given whilst using colchicine?**

Yes, vaccinations are safe whilst taking colchicine.

### **Does colchicine affect fertility or pregnancy?**

Men taking colchicine may develop a reduced sperm count, which may reduce their fertility. Women of child-bearing age should use effective contraception whilst taking colchicine.

Though studies have demonstrated safety in pregnant patients with familial Mediterranean fever, there is the potential risk of damage to the unborn baby. In general, colchicine **should not** be taken during pregnancy. Colchicine is also present in breast milk, but has not been found to harm the baby.

However, it is probably best avoided when breastfeeding. A doctor can advise further.

### **Can alcohol be consumed while taking colchicine?**

Yes, within recommended limits. Grapefruit juice can, however, make colchicine more toxic and should be avoided.

### **Can other medications be taken at the same time as colchicine?**

Always seek the advice of a doctor, but drugs that may interact with colchicine include:

- Statins and fibrates (drugs used to lower the cholesterol level in the blood); the risk of muscle damage is increased when combined with colchicine
- Ciclosporin; there may be an increased risk of damage to the muscles and to the kidney
- Macrolide antibiotics, e.g. erythromycin, clarithromycin and telithromycin may increase the risk of colchicine toxicity
- Amiodarone
- Itraconazole and ketoconazole
- Antivirals, e.g. Atazanavir, indinavir, ritonavir
- Diltiazem, verapamil, quinidine
- Digoxin

### **Where can I get more information about colchicine?**

*Web links to further information:*

<http://dermnetnz.org/treatments/colchicine.html>

<http://www.patient.co.uk/medicine/Colchicine.htm> (this website addresses colchicine for use in gout)

**This leaflet aims to provide accurate information about the subject and is a consensus of the views held by representatives of the British Association of Dermatologists; individual patient circumstances may differ, which might alter both the advice and course of therapy given to you by your doctor.**

*This leaflet has been assessed for readability by the British Association of Dermatologists' Patient Information Lay Review Panel*

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