



Vedolizumab

Information for people with inflammatory bowel disease

PE-IBD-12

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Vedolizumab works only in the gut. It blocks the doorway that inflammatory white cells use to enter the bowel wall, and has almost no effect on the immune system elsewhere in the body. This makes it one of the safest of the biologic medicines.

Why you are taking it

Vedolizumab is used for moderate to severe ulcerative colitis and Crohn's disease when steroids, immunosuppressants or anti-TNF medicines have not worked or were not tolerated. Because it acts only in the gut, it is often the preferred choice for older patients, for people with a history of cancer or recurrent infection, and for people who cannot take anti-TNF medicines. For the same reason it does little for joint, skin or eye problems related to inflammatory bowel disease.

How to take it

The intravenous dose is 300 mg at week 0, week 2 and week 6, then every eight weeks. The infusion takes about 30 minutes. A subcutaneous form is also available: after the first intravenous doses it is given as a 108 mg injection under the skin every two weeks, which you can do at home. Before starting we screen for tuberculosis and viral hepatitis, as we do for all biologics.

How long it takes to work

Vedolizumab is slower to work than an anti-TNF medicine, and this is expected rather than a failure. We assess the response at about week 10 in ulcerative colitis and week 14 in Crohn's disease, and sometimes give an extra dose at week 10 before deciding. Do not stop because there has been no change after a month or two.

Blood tests and monitoring

We check blood tests before starting and then every three to six months. Tuberculosis screening is repeated after a significant exposure.

Side effects

Side effect	What it means and what to do
Nasal congestion, sore throat, cough	Common and usually minor.
Headache, joint pain, tiredness, nausea	Common.
Infusion or injection reaction	Uncommon with this medicine. Tell the nurse if you feel unwell during an infusion.
Injection site reaction with the subcutaneous form	Common, mild, and settles in a few days.
Gut infections	Because it acts in the gut, report any new diarrhoea with fever so infection can be excluded.
Serious infection elsewhere in the body	Less likely than with other biologics, but still report fever or any infection early.

Important precautions

- Keep to the schedule; the eight-week interval matters.
- No live vaccines. Non-live vaccines are recommended – see sheet [PE-IBD-04](#).
- Tell your doctor before any surgery.
- Tell your doctor if you develop new neurological symptoms such as weakness on one side, confusion or visual loss. This is a precaution: only one such case has ever been reported with vedolizumab, in a patient with several other causes of immune suppression.
- For a repeat prescription, message the clinic. If there is no reply after 48 hours send the message again, and if there is still no reply, come to the clinic.

Pregnancy and breastfeeding

Vedolizumab is continued in pregnancy. As with other antibody medicines it crosses to the baby late in pregnancy, so the baby's live vaccines must be delayed – BCG above all, which in Oman is given at birth. Arrange the deferral before you deliver; see sheet [PE-IBD-04](#). Breastfeeding is safe.

Tell your doctor straight away if

- You have a fever, or any sign of infection.
- You have new diarrhoea with fever or severe abdominal pain.
- You feel unwell, breathless or itchy during or after an infusion.
- You develop weakness on one side, confusion, or loss of vision.
- Your symptoms return before the next dose is due.

Tell your doctor so they know and can bring your appointment forward. But if you feel seriously unwell, go to the Emergency Department first – do not wait for a reply.

Contact your doctor using the numbers your clinic has given you. If you are seriously unwell, or it is outside working hours, go to the Emergency Department rather than waiting for a reply. Brand names and preparations may differ – check the label on your own medicine. General safety advice is in sheet [PE-IBD-04](#). Version 1.0 · review date October 2028.

This leaflet is general information and does not replace advice from your own doctor.

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