Ciclosporin (Cyclosporin) 100mg/mL Oral Solution

Prescriber Criteria: Consultant

Outpatient and Inpatient use:

1. Chronic Kidney Disease
2. Chronic Liver Disease
3. Psoriasis
4. Rheumatoid Arthritis
5. Secondary Immunodeficiency Disorder
6. Severe Chronic Urticaria
7. Severe Refractory Atopic Dermatitis
8. Malignant Disease

The solution is restricted to paediatric patients, patients with an NG tube, adult patients unable to swallow and patients requiring patient tailored dosages:

- Patients who have undergone organ transplantation and require long-term immunosuppressive therapy to prevent graft rejection.
- Patients with Hypoplastic Myelodysplastic Syndrome.
- Patients with severe chronic urticaria with a UAS7 score of 28-42 despite high doses of non-sedating antihistamine treatment.
- Patients with severe psoriasis – failure to respond to PUVA and antimetabolites.
- Patients with severe refractory atopic dermatitis with POEM score ≥ 17 who are not controlled on or are intolerant to topical calcineurin inhibitors.
- Prevention and treatment of graft versus host disease (GVHD) following Bone Marrow Transplantation (BMT).
- Treatment of primary and secondary glomerular disease refractory to standard therapy.
- Treatment of primary glomerular disease including focal segmental glomerulosclerosis (FSGS), minimal change disease (MCD), and membranous nephropathy (MN).
- Treatment of severe, active rheumatoid arthritis in patients in whom classical traditional disease modifying antirheumatic agents are inappropriate or ineffective.

Duration of Approval:
3 years