RoActemra® (tocilizumab) for Polyarticular juvenile idiopathic arthritis (pJIA) Intravenous (IV) or Subcutaneous (SC)

What you should know about RoActemra

This brochure provides key information to assist patients with pJIA and parents/guardians/carers of pJIA patients, understand the benefits and risks associated with RoActemra therapy.

This educational material is provided by Roche Products Limited and is mandatory as a condition of the marketing authorisation of subcutaneous RoActemra in the treatment of paediatric patients with Polyarticular juvenile idiopathic arthritis (pJIA) in order to further minimise important selected risks.

What you should know about RoActemra

Finding the right treatment for Polyarticular juvenile idiopathic arthritis (pJIA), an autoimmune disease, is very important. All medications carry both potential benefits and potential risks to our health and it is important to understand these. Finding the balance between the two will lead you to a treatment that works best for you.

RoActemra is used to treat children aged 2 years and over with active pJIA, an inflammatory disease that causes pain and swelling in one or more joints. RoActemra is used to improve the symptoms of pJIA and can be given in combination with methotrexate or alone.

This brochure will answer some questions you may have about the side effects and potential risks of RoActemra. Talk to your or the patient in your care's doctor, nurse or pharmacist if there are any questions or problem.

This brochure does not take the place of speaking to your or the patient in your care's doctor, nurse or pharmacist.

Medications are sometimes prescribed for purposes other than those listed. Only take RoActemra as directed for the condition for which it was prescribed.

What you should know about pJIA and RoActemra

What causes pJIA?

The exact cause of pJIA is not known. In pJIA, the body's immune system doesn't work the way it should. The immune system is supposed to attack only foreign substances like germs. But when it doesn't work right, it can also attack the body itself. Diseases in which this happens, like pJIA, are called autoimmune diseases. When the immune system attacks the body, it can lead to the symptoms such as joint pain, swelling, stiffness and fatigue.

What is IL-6?

Interleukin-6 (IL-6) is a protein that is made by the immune system. The body uses IL-6 to manage inflammation and infections.

What is RoActemra?

RoActemra is a biologic drug (a type of therapy made from living cells) that contains the active substance tocilizumab, which is a protein made from specific immune cells (monoclonal antibody), that blocks the action of a specific protein (cytokine) called IL-6.

How has RoActemra been studied in pJIA?

RoActemra has been studied in children with pJIA. It has been studied with and without methotrexate (MTX) for pJIA.

How is RoActemra used in pJIA?

RoActemra is used to treat children, aged 2 years and over, with active pJIA. This is an inflammatory disease that causes pain and swelling in one or more joints. RoActemra is used to improve the symptoms of pJIA. It can be given in combination with methotrexate or alone. RoActemra has not been studied with other biologic medicines for pJIA. Because of the possibility of increased risk of infection, RoActemra should not be used with other biologic medicines for pJIA. These other biologic medicines for pJIA include drugs such as:

Enbrel® (etanercept), Humira® (adalimumab), Simponi® (golimumab) and Orencia® (abatacept).

How is RoActemra given in pJIA?

RoActemra is administered either as an intravenous (into a vein) infusion with a needle or subcutaneous (under the skin) injection using a pre-filled syringe.

Receiving RoActemra by intravenous (IV) infusion

- Your child's doctor or nurse will give your child RoActemra IV
- One dose will take approximately one hour to infuse into a vein, most likely in the arm
- Dosing is based on your child's weight, so the dose may change through the treatment course
- RoActemra IV is given once every 4 weeks

It is very important that your child does not miss their scheduled dose of RoActemra IV. If this happens, call your child's doctor or nurse. He or she will tell you when you should get your next dose.

Receiving RoActemra by subcutaneous (SC) injection by pre-filled syringe

- You and your child's doctor or nurse will decide if your child is suitable for RoActemra SC use at home
  - In this case you will receive proper training on how to inject RoActemra SC using a pre-filled syringe in order that that the patient (adolescent) or parent/guardian/carer can administer the dose
- Your doctor or nurse will give your child's first RoActemra SC injection.
- The recommended injection sites (abdomen, thigh and upper arm) should be rotated and injections should never be given into moles, scars, or areas where the skin is tender, bruised, red, hard, or not intact.
- RoActemra is given based on your child's weight, so each child's dose may be different:
  - If the child weighs less than 30 kg: the dose is 162 mg (the content of 1 pre-filled syringe), once every 3 weeks
  - If the child weighs 30 kg or more: the dose is 162 mg (the content of 1 pre-filled syringe), once every 2 weeks.

It is very important to use RoActemra exactly as prescribed by your child's doctor and to keep track of your child's doses.

- If a pJIA patient misses a SC injection of RoActemra within 7 days of the scheduled dose, he/she should take the missed dose as soon as they remember and take the next dose at the regular scheduled time.
- If a pJIA patient misses a SC injection of RoActemra by more than 7 days of the scheduled dose or is unsure when to inject RoActemra, call the doctor or pharmacist.

General considerations for SC administration (pre-filled syringe)

RoActemra 162 mg is supplied in 0.9 ml of solution for injection as a pack of 4 single use pre-filled syringes. The pre-filled syringes should be stored at 2°C–8°C and should not be frozen.

- The pre-filled syringes should be kept in the outer carton to protect them from light and should be kept dry. The pre-filled syringes should be kept out of sight and reach of children
- Inspect the pre-filled syringe visually for particulate matter and discolouration prior to administration and check the expiration date. Do not use if the medicine has expired, is cloudy or contains particles, is any colour besides colourless to slightly yellowish, or if any part of the pre-filled syringe appears to be damaged
- Once removed from the refrigerator, RoActemra 162 mg/0.9 ml must be administered within 8 hours and should not be kept above 30°C
- After removing from the refrigerator the pre-filled syringe should be allowed to reach room temperature (18°C to 28°C) by waiting for 25 to 30 minutes, before injecting RoActemra 162 mg/0.9 ml. Do not warm up the pre-filled syringe in any other way
- After removing the needle-cap, the injection must be started within 5 minutes to prevent the medicine from drying out and blocking the needle. If the pre-filled syringe is not used within 5 minutes of removing the cap, you must dispose of it in a sharps container and use a new pre-filled syringe. Never re-attach the needle-cap after removal
- The pre-filled syringe should not be shaken
- Wash your hands with soap and water
- Choose and prepare an injection site, preferably the front or middle of the thigh or lower part of the abdomen below the navel (except for the five centimetre area directly around the navel). If a care giver is giving the injection, the outer area of the upper arms may also be used. Clean the injection site with an alcohol pad. Let the skin dry for approximately 10 seconds. A different site should be used for subsequent injections

- Injections should never be given in moles, scars or areas where the skin is tender, bruised, red, hard, swollen or not intact. Do not inject into areas that could be bothered by a belt or waistband
- If following insertion of the needle you cannot depress the plunger, you must dispose of the pre-filled syringe in a sharps container and use a new pre-filled syringe.
- Any unused product or waste material should be disposed of in a sharps container.

For further information, please consult the information given in the package leaflet.

What tests will be done when receiving treatment with RoActemra?

At each of the patient's visit to see their doctor or nurse, they may test the patient's blood to help guide the patient's treatment. Here are some things they may look at:

Neutrophils

Having enough neutrophils is important to help our bodies fight infections. RoActemra works on the immune system and can cause the number of neutrophils, a form of white blood cells, to drop. For this reason, your doctor may test to make sure your child has enough neutrophils and monitor for signs and symptoms of infection.

Platelets

Platelets are small blood components that help stop bleeding by forming clots. Some people taking RoActemra had a drop in the number of platelets in their blood. In clinical trials, the drop in platelets was not associated with any serious bleeding.

Liver enzymes

Liver enzymes are proteins produced by the liver which may be released into the blood, sometimes indicating liver damage or disease. Some people who have taken RoActemra have had a rise in liver enzymes, which could be a sign of liver damage. Rises in liver enzymes were seen more often when medications that could be harmful to the liver were used with RoActemra. If this happens to your child, your doctor should take care of this right away. Your doctor may decide to change your dose of RoActemra, or of other medication, or potentially stop treatment with RoActemra altogether.

Cholesterol

Some people who have taken RoActemra have had a rise in blood cholesterol, which is a type of lipid (fat). If this happens, your child's doctor may prescribe a cholesterol-lowering medication.

Can patients have vaccinations during treatment with RoActemra?

RoActemra is a medication that affects the immune system and may lower the body's ability to fight infection. Immunisation with live or live-attenuated vaccines (which contain very small amounts of the actual germ or weakened germs), should not be given during treatment with RoActemra. Patients should be brought up to date with all immunisations before starting RoActemra.

What are the most common side effects of RoActemra?

Most common side effects reported by patients in clinical trials were usually mild and usually did not result in the patient having to stop using the medication. These common side effects were:

- Upper respiratory tract infections (with typical symptoms such as cough, blocked nose, runny nose, sore throat and headache)
- Common cold
- Headache
- High blood pressure
- Rash
- Dizziness
- Injection site reactions (during subcutaneous use).

What are the serious side effects of RoActemra?

Infections

RoActemra is a medication that affects the patient's immune system. The immune system is important because it helps the patient fight infections. The patient's ability to fight infections may be lowered with RoActemra. Some infections may become serious while on RoActemra. Serious infections may require treatment and hospitalisation and in some cases may lead to death. It is very important to report any signs of infection to your doctor or nurse right away.

Seek immediate medical attention if the patient you care for develops signs/symptoms of infection such as:

- Fever and chills
- Persistent cough
- Weight loss
- Throat pain or soreness
- Wheezing
- Red or swollen skin or mouth blisters, skin tears or wounds
- Severe weakness or tiredness
- Stomach ache

Allergic reactions

Most allergic reactions occur during injection or within 24 hours of RoActemra administration, although allergic reactions can occur at any time. Serious allergic reactions including anaphylaxis have been reported in association with RoActemra. Such reactions may be more severe, and potentially fatal in patients who have experienced allergic reactions during previous treatment with RoActemra. Fatal anaphylaxis has been reported during treatment with RoActemra.

- If your child is receiving an IV infusion in the clinic, then during the infusion, your doctor or nurse will be monitoring your child closely for any signs of an allergic reaction.
- If your child is receiving SC injections, then your doctor will assess your child's suitability to receive RoActemra SC injections at home.

If an anaphylactic reaction or other serious allergic reaction occurs, administration of RoActemra should be stopped immediately, appropriate medical treatment initiated and RoActemra should be permanently discontinued.

Seek immediate medical attention if you notice any of the following signs or symptoms of allergic reactions after RoActemra is administered:

- Rash, itching or hives
- Shortness of breath or trouble breathing
- Swelling of the lips, tongue or face
- Chest pain or chest tightness
- Feeling dizzy or faint
- Severe stomach pain or vomiting
- Very low blood pressure

Do not administer the next dose until you have informed the doctor AND the doctor has told you to administer the next dose if you or the patient you care for has experienced any allergic reaction symptoms after receiving RoActemra.

Abdominal pain

Patients taking RoActemra have on rare occasions experienced serious side effects in their stomach and intestines. Symptoms may include fever and persistent abdominal pain with change in bowel habits. Seek immediate medical attention if you or the child you care for develops stomach pain or colic, or you notice blood in your/their stool.

Malignancies

Medicinal products which act on the immune system, like RoActemra, may increase the risk of malignancy.

Summary and contact information

This pJIA patient brochure reviews some of the most important information about RoActemra. Medications are sometimes prescribed for purposes other than those listed. Do not use RoActemra for a condition for which it was not prescribed.

Tell the doctor, nurse or pharmacist about any side effects, that bothers you or the child you care for. The side effects listed in this brochure are not all of the possible side effects that you or the child you care for could experience with RoActemra. Ask the doctor, nurse or pharmacist for more information and, talk to them if you have any questions or you or the child you care for has problems.

Reporting of side effects

If you or the patient you care for gets any side effects, talk to your / their doctor, pharmacist or nurse. This includes any possible side effects not listed in the package leaflet. Reporting forms and information can be found at: www.medicinesauthority.gov.mt/adrportal. Adverse events should also be reported to Roche Products Ltd. Please contact Roche Drug Safety Centre by emailing welwyn.uk_dsc@roche.com or calling +44(0)1707 367554.

By reporting side effects you can help provide more information on the safety of this medicine.

Detailed information on this medicine is available on the European Medicines Agency website (www.ema.europa.eu).

Pre-Administration Checklist for pJIA - Before each administration of RoActemra, please review the points below

RoActemra may not be right for you or the child you care for. Before starting RoActemra, and before each administration of RoActemra, please review the points below, and tell your or your child's doctor or nurse if you checked 'yes' for any of the following:

	YES	NO
Infections		
Do you or the child you care for have an infection or feel unwell? (Signs of an infection may include: fever, cough, headache, open wounds or sores (as in chicken pox or shingles)	❑	❑
Are you or the child you care for being treated for an infection or get a lot of infections?	❑	❑

	YES	NO
Do you or the child you care for have tuberculosis (TB) or have you or the child you care for been in close contact with someone who has had TB? (Your doctor should test you or the child you care for, for TB before starting RoActemra.)	❑	❑
Have you or the child you care for had or currently have viral hepatitis or any disease of the liver?	❑	❑
Do you or the child you care for have diabetes or other conditions that increase the chance of infections?	❑	❑
Allergic Reactions		
Have you or the child you care for had any allergic reactions to previous medications, including RoActemra?	❑	❑
Gastrointestinal Complications		
Have you or the child you care for had or currently have gastrointestinal ulcers or diverticulitis (inflammation in parts of your large intestine)? (Symptoms my include abdominal pain and unexplained changes in bowel habits, with fever)	❑	❑
Medical History		
Have you or the child you care for had or now have impaired lung function? (For example, interstitial lung disease, where inflammation and scarring in the lungs make it difficult to get enough oxygen)	❑	❑
Have you or the child you care for ever had cancer?	❑	❑
Do you or the child you care for have heart or circulatory disease? (Examples include raised blood pressure or cholesterol levels)	❑	❑
Do you or the child you care for have kidney problems?	❑	❑
Do you or the child you care for have persistent headaches?	❑	❑
Pregnancy		
Are you or the child you care for pregnant, possibly pregnant or do you or the child you care for intend to become pregnant? (Women of childbearing potential must use effective contraception during (and up to 3 months after)) treatment. RoActemra should not be used during pregnancy unless absolutely necessary).	❑	❑
Are you or the child you care for breast-feeding or do you or the child you care for intend to breast-feed?	❑	❑

	YES	NO
Medications		
Have you or the child you care for recently had a vaccination (immunisation), or are scheduled to have one?	❑	❑
Are you or the child you care for taking other medications? Tell the doctor or nurse about all the medicines you or the child you care for take. This includes prescription (such as steroids) and non-prescription medications, vitamins and herbal medicines	❑	❑
You or the child you care for can take other medications if your doctor has told you it is okay to take them while you or the child you care for are taking RoActemra. RoActemra may interact with some medications. This may affect the dose you or the child you care for needs of that medication.		
Tell your doctor if you or the child you care for are taking the following medicines:		
atorvastatin, used to reduce cholesterol levels	❑	❑
calcium channel blockers (e.g. amlodipine), used to treat raised blood pressure	❑	❑
theophylline, used to treat asthma	❑	❑
warfarin, used as a blood-thinning agent	❑	❑
phenytoin, used to treat convulsions	❑	❑
ciclosporin, used to suppress the immune system during organ transplants	❑	❑
benzodiazepines (e.g. temazepam), used to relieve anxiety	❑	❑
Any other medications to treat pJIA:	❑	❑
• Non-biologic medicines:	❑	❑
- methotrexate	❑	❑
- leflunomide	❑	❑
• Biologic medicines	❑	❑
- etanercept	❑	❑
- adalimumab	❑	❑
- infliximab	❑	❑
- rituximab	❑	❑
- abatacept	❑	❑
- anakinra	❑	❑
- certolizumab pegol	❑	❑
- golimumab	❑	❑

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