Joint effort Patient Program
1-888-748-8926
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This book is designed to be a resource for adults like you who are living with giant cell arteritis (GCA) and have been prescribed the subcutaneous (SC) formulation of ACTEMRA. This book will provide you with a brief overview of GCA and contains information about ACTEMRA therapy, including how it works, how it is administered and what it does. ACTEMRA is a medicine that is used to treat adults with GCA.

ACTEMRA treatment should be initiated and supervised by specialist physicians experienced in the diagnosis and treatment of GCA and familiar with the ACTEMRA efficacy and safety profile.

The content contained in this booklet is meant to provide additional information to people like you who have GCA and who have been prescribed ACTEMRA SC. Your physician and healthcare team should be your primary resources. This information is not intended to take the place of speaking with your healthcare team.

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What is GCA?

GCA is a disease where the immune system attacks normal body tissues causing damage and inflammation in the large arteries of the body, including those in the head—which is why GCA is also known as “temporal arteritis”. Inflammation causes the walls of blood vessels to swell, which can decrease the blood flow in the affected areas of the body. 

What causes GCA?

The cause of GCA is currently unknown. In GCA, the immune system doesn’t work the way it should, attacking the body itself instead of just fighting infections. Diseases where this happens, including GCA, are called “autoimmune” diseases.
Who gets GCA?

GCA affects people over the age of 50, and the risk of GCA increases as you get older. It is 2 to 3 times more likely for women to develop GCA than men, and is more common in people of Northern European descent.¹

How common is GCA?

GCA is the most common form of vasculitis (conditions where blood vessels become inflamed) in people over 50 years old.² Globally, it is estimated that 1.54 in 100,000 people over the age of 50 are affected by GCA every year.³
What are the symptoms of GCA?

When the immune system attacks the body, it leads to the symptoms that are seen in people with GCA. Common symptoms include:¹

- New headache and swelling of the arteries near the temples
- Tenderness of the scalp
- Vision changes (a curtain in the field of vision, sudden vision loss [temporary or permanent] or double vision)
- Pain in the muscles of the jaw while chewing food
- Shoulder or hip joint aching and stiffness
- Poor appetite and weight loss
- Low grade temperature
How does GCA cause inflammation?

A normal immune system leaves healthy body tissues alone. In GCA, the body’s immune system doesn’t work properly and attacks healthy body tissues, causing inflammation.\(^1\) The protein known as interleukin-6 (IL-6) is made by the immune system, and is one of the molecules that play a role in the inflammation of GCA.\(^4\) Research has shown that people with GCA have higher amounts of IL-6 and other inflammatory molecules in their body.\(^4\)
What is ACTEMRA?

ACTEMRA (also known as tocilizumab) is a medicine used to treat adults with GCA.

ACTEMRA is a medicine known as a biologic that helps keep your immune system from attacking healthy tissues in your body. A biologic is a type of medication that is isolated from a variety of natural sources—humans, animals or microorganisms.

ACTEMRA is not a steroid. Your doctor will ask you to take steroids with ACTEMRA at first, but may eventually tell you to stop taking the steroids and use ACTEMRA alone.
How does ACTEMRA work?

A normal immune system leaves healthy body tissues alone. ACTEMRA is a medicine that helps keep the immune system from attacking healthy tissues in the body; ACTEMRA interferes with an important step in this attack by blocking a cytokine called interleukin-6 (IL-6).
How to take ACTEMRA SC

ACTEMRA SC is given as a “subcutaneous” injection—this means it is given into the fat layer just under the skin.  

How many injections will I need?

For adult patients treated for GCA, the ACTEMRA dose is 162 mg given once every week as a subcutaneous injection. In some cases, your doctor may tell you to take 162 mg of ACTEMRA once every other week. Your doctor will also ask you to take glucocorticoids with ACTEMRA. Your doctor may eventually tell you to stop taking glucocorticoids and use ACTEMRA alone.

What are the best sites for injections?

The recommended injection sites are:

- Lower part of the abdomen below the navel (belly button) except for the 5 cm area directly around the navel
- Front and middle of the thighs
- Outer area of the upper arms (if someone else is giving you the injection)

You should use a different place each time you give yourself an injection, at least 3 cm from the area you used for your previous injection.

The sites should be rotated and injections should never be given into moles, scars or areas that are tender, bruised, red, hard or have open sores.
ACTEMRA SC is available as either a pre-filled syringe or an autoinjector (ACTPen). You and your healthcare professional can decide which is best for you.

The pre-filled syringe can be used to treat children of all approved ages. The autoinjector should not be used to treat children < 12 years of age.

Before you use ACTEMRA SC for the first time, your healthcare provider should show you how to prepare and inject it properly.

Ask your healthcare provider any questions you may have. It is important that you do not attempt to administer an injection until you are sure you understand how to inject it.
ACTEMRA pre-filled syringe

BEFORE USE:

AFTER USE:

The syringe has a safety mechanism to prevent accidental needle-stick injuries by automatically covering the needle after injection.
Proper handling of the ACTEMRA pre-filled syringe

The ACTEMRA syringe is intended to be used by patients or caregivers who have been properly trained. It is important to read, understand and follow these instructions so that you or your caregiver use the ACTEMRA syringe correctly.

These instructions do not replace training from your healthcare provider.\textsuperscript{5}

**DO NOT:**

- Use the syringe if it appears to be damaged
- Use if the medicine is cloudy, hazy, discoloured or contains particles
- Try to take apart the syringe at any time
- Remove the needle-cap until you are ready to inject
- Inject through clothing covering the skin
- Re-use the same syringe
- Touch the syringe trigger fingers as this may damage the syringe

**How do I store ACTEMRA SC?**

Keep the ACTEMRA syringe and all other medicines out of the reach of children. The syringe should always be stored in a refrigerator at a temperature of 2–8°C. Protect the syringe from freezing and from light, and keep the syringe dry.\textsuperscript{5}

Once removed from the refrigerator, the ACTEMRA syringe must be administered within 8 hours and should not be kept above 30°C.\textsuperscript{5}
Preparing for the injection

Before administering the injection you will need to find a well-lit, clean, flat surface, such as a table, to prepare the supplies for injection.\(^5\)

You will need the following supplies to give your injection:\(^5\)

- ACTEMRA pre-filled syringe
- Alcohol pad
- Sterile absorbent ball or gauze
- Puncture-resistant container or sharps container for safe disposal of needle-cap and used syringe

Organize the supplies so that they are easily accessible during the injection.
The following instructions will help you learn how to use the ACTEMRA pre-filled syringe. It is important to follow these directions carefully. Talk to your healthcare provider if you have any concerns about how to use ACTEMRA SC.\textsuperscript{5}

**Step 1: Visually check the syringe\textsuperscript{5}**

- Take the box containing the syringe out of the refrigerator and open the box. Do not touch the trigger fingers on the syringe as this may damage the syringe.

- Remove the syringe from the box and visually examine it, as well as the medicine in the syringe. This is important to ensure that the syringe and medicine are safe to use.

- Check the expiration date on the box and syringe to make sure that it has not passed (expired). Do not use the syringe if the expiration date has passed. This is important to ensure that the syringe and medicine are safe to use.

Dispose of the syringe and do not use it if the medicine is cloudy, contains particles, is any colour besides colourless to yellowish or appears to be damaged.\textsuperscript{5}
**Step 2: Allow the syringe to adjust to room temperature**

- Do not remove the needle-cap on your syringe until Step 5
- Place the syringe on a clean, flat surface and allow the syringe to come to room temperature for about **25–30 minutes** to warm up. Not allowing the syringe to come to room temperature could result in an uncomfortable injection, and it may be difficult to depress the plunger.
- Do not warm up the syringe in any other way

**Step 3: Clean your hands**

- Wash your hands with soap and water
- Be sure to ask your healthcare team if you have any questions or concerns about how to best wash your hands

Remove jewelry and wet your hands and wrists with warm water.

Use 1 to 2 squirts of soap. Lather soap and scrub both hands well. Make sure to scrub the front and back of your palms, between and around each finger and thumb, your fingertips and your wrists.

Rinse thoroughly under running water.

Pat hands dry with a paper towel. Turn off the tap using the same paper towel.
**Step 4: Choose and prepare an injection site**

- The recommended injection sites are the front and middle of your thighs and the lower part of the abdomen below the belly button (except for the five centimetre area directly around it)
- If someone else is giving the injection, the outer area of the upper arms may also be used
- You should use a different place each time you give yourself an injection, at least three centimetres from the area you used for your previous injection
- Do not inject into areas that could be bothered by a belt or waistband. Do not inject into moles, scars, bruises, or areas where the skin is tender, red, hard or not intact.

- **Clean the chosen injection site** using the alcohol pad to reduce the risk of infection
- Let the skin dry for approximately 10 seconds
- Be sure not to touch the cleaned area prior to the injection. Do not fan or blow on the clean area.
Step 5: Remove the needle-cap

- Do not hold the syringe by the plunger while removing the needle-cap
- Hold the needle-shield of the syringe firmly with one hand and pull off the needle-cap with the other hand
- If you cannot remove the needle-cap, you should request the help of someone else or contact your healthcare provider
- Do not touch the needle or let it touch any surface
- You may see a drop of liquid at the end of the needle (this is normal)
- Throw away the needle-cap in the puncture-resistant container or sharps container

Once the needle-cap is removed, the syringe should be used immediately.

- If it is not used within 5 minutes, the syringe should be disposed of in the puncture-resistant container or sharps container, and a new syringe should be used
- Never re-attach the needle-cap after removal
Step 6: Give the injection

- Hold the syringe comfortably in your hand
- To be sure the needle can be inserted correctly under the skin, pinch a fold of loose skin at the clean injection site with your free hand
- Pinching the skin is important to ensure that you inject under the skin (into fatty tissue) but not any deeper (into muscle)
  - Injection into muscle could result in an uncomfortable injection
- Do not hold or push on the plunger while inserting the needle into the skin
- Insert the needle all the way into the pinched skin at an angle between 45° to 90° with a quick, firm action

It is important to insert the needle at the correct angle to ensure the medication is delivered under the skin, otherwise the injection could be painful and the medication may not work.
• Once the needle is inserted, keep the syringe in position and let go of the pinch of skin

• **Slowly inject** all of the medicine by gently pushing the plunger all the way down

• If the plunger is not fully pressed down, the needle-shield will not extend to cover the needle when it is removed

  • If the needle is not covered, proceed carefully, and place the syringe into the puncture-resistant container to avoid injury with the needle

**You must press the plunger all the way down to ensure that you get the full dose of medication.**

• Keep pressing down on the plunger to be sure all of the medicine is injected before taking the needle out of the skin

• Take the needle out of the skin at the same angle as inserted while keeping the plunger pressed down

**Once the needle is removed completely from the skin, you can release the plunger, allowing the needle-shield to protect the needle.**
• If you see drops of blood at the injection site, you can press a sterile absorbent ball or gauze over the injection site for approximately 10 seconds
• Do not rub the injection site

Step 7: Dispose of the syringe
• Do not re-cap your syringe
• Throw away used syringes in a puncture-resistant container or sharps container
Disposing of the syringe

If you use ACTEMRA SC pre-filled syringes at home, you must throw them away after you use them.

The pre-filled syringe should be discarded in a container that will not let the needle stick through it. This will help protect you and other people from accidental needle sticks. Being stuck by a needle not only hurts, but can also pass diseases on to other people.

You can get these special containers, often called “puncture-resistant containers” or “sharps containers”, from your doctor, pharmacist or the Jointeffort® Patient Program. Keep this container out of the reach of children, and follow your healthcare provider’s instructions for throwing it away when it’s full. Placing used containers in the household waste should be avoided.

For safety reasons, always throw away the pre-filled syringes right after you use them and only ever use them one time.
ACTEMRA autoinjector (ACTPen™)

**BEFORE USE**
- Green cap
- Window area
- Green activation button
- Expiry date

**AFTER USE**
- Purple indicator “injection complete”
- Needle-shield (extended and locked)

The autoinjector has a safety mechanism to prevent accidental needle-stick injuries by automatically covering the needle after use.
Proper handling of the ACTEMRA ACTPen autoinjector

The ACTEMRA autoinjector is intended to be used by patients or caregivers who have been properly trained. The autoinjector should not be used to treat children < 12 years of age. It is important to read, understand and follow these instructions so that you or your caregiver use the ACTEMRA autoinjector correctly.

These instructions do not replace training from your healthcare provider.

**DO NOT:**

- Use the autoinjector if you are opening the box for the first time and it is not properly sealed or if the box looks like it has already been opened
- Use the autoinjector if the expiration date has passed
- Use the autoinjector if it appears to be damaged or if you have accidentally dropped it

**How do I store the ACTEMRA autoinjector?**

Keep the ACTEMRA autoinjector and all other medicines out of the reach and sight of children. The autoinjector should be stored in a refrigerator at a temperature of 2 – 8°C. Protect the autoinjector from freezing and from light.

Once removed from the refrigerator, the ACTEMRA autoinjector must be administered within 8 hours and should not be kept above 30°C.
Preparing for the autoinjection

Before using the ACTEMRA autoinjector, find a comfortable space with a clean, flat, working surface.

You will need the following supplies to give your injection:

- ACTEMRA autoinjector
- Alcohol pad
- Sterile absorbent ball or gauze
- Puncture-resistant container or sharps container for safe disposal of needle-cap and used syringe
The following instructions will help you use the ACTEMRA autoinjector. It is important to follow these directions carefully. Talk to your healthcare provider if you have any questions or concerns.

**Step 1: Visually check the autoinjector**

- Take the box containing the autoinjector out of the refrigerator.
- Open the box, and remove 1 single-use autoinjector from the box.
- Return any remaining autoinjector in the box to the refrigerator.
- Check the expiration date on the autoinjector. Do not use it if the expiration date has passed. If the expiration date has passed, safely dispose of the autoinjector in a sharps container and get a new one.
- Place the autoinjector on a clean, flat surface and let the autoinjector warm up for 45 minutes to allow it to reach room temperature. If the autoinjector does not reach room temperature, this could cause your injection to feel uncomfortable and it could take longer to inject.
- Do not speed up the warming process in any way, such as using the microwave or placing autoinjector in warm water.
- Do not leave the autoinjector to warm up in direct sunlight.
- Do not remove the green cap while allowing your autoinjector to reach room temperature.

Look in the clear window area to check the liquid in the autoinjector. Do not use the autoinjector if the liquid is cloudy, discolored, or has lumps or particles in it because it may not be safe to use. Safely dispose of the autoinjector in a sharps container and get a new one.

Wash your hands well with soap and water.
Step 2: Choose and prepare an injection site

- The recommended injection sites are the front of your thigh or your abdomen (except for the 5cm area around your navel)
- If someone else is giving the injection, the outer area of the upper arms may also be used
- You should use a different place each time you give yourself an injection, at least 2.5 centimetres from the area you used for your previous injection
- Do not inject into moles, scars, bruises, or areas where the skin is tender, red, hard or not intact.
- Wipe the injection site with an alcohol pad and let it air dry (do not fan or blow the area) to reduce the chance of getting an infection. Do not touch the injection site again before giving the injection.
Step 3: Inject autoinjector

- Hold the autoinjector firmly with one hand. Twist and pull off the green cap with the other hand. The green cap contains a loose fitting metal tube.
- If you cannot remove the green cap you should ask a caregiver for help or contact your healthcare provider.
- Never reattach the green cap after removal.
- Throw away the green cap in a sharps container.
- After you remove the green cap, the autoinjector is ready for use.

Important: Do not touch the needle shield which is located at the tip of the autoinjector below the window area to avoid accidental needle stick injury.
Once the cap is removed, the autoinjector should be used within 3 minutes.

Inject autoinjector

- Hold the autoinjector comfortably in 1 hand by the upper part, so that you can see the window area of the autoinjector.
- Use your other hand to gently pinch the area of skin you cleaned, to prepare a firm injection site. The autoinjector requires a firm injection site to properly activate.
- Pinching the skin is important to make sure that you inject under the skin (into fatty tissue) but not any deeper (into muscle). Injection into muscle could cause the injection to feel uncomfortable.
- Place the needle-shield of the autoinjector against your pinched skin at a 90° angle.
- It is important to use the correct angle to make sure the medicine is delivered under the skin (into fatty tissue), or the injection could be painful and the medicine may not work.

Do not press the green activation button yet
Unlock the green Activation button and inject

- Unlock the green Activation button by pressing the autoinjector firmly against your pinched skin until the needle-shield is completely pushed in.
- Continue to pinch the skin while you keep the autoinjector in place.
- Press the green activation button to start the injection. A “click” sound indicates the injection has started.
- Keep the green button pressed in and continue holding the autoinjector firmly against your skin.
- The purple indicator will move along the Window area during the injection.
- When the purple indicator stops moving, release the green button.

The injection may take up to 10 seconds
Unlock the green Activation button and inject

- Lift the autoinjector off the injection site at a 90° angle to remove the needle from the skin
- The needleshield will then move out and lock into place covering the needle
- Confirm the Window area is filled with purple

If the Window area is not filled by the purple indicator, then:

- The needle-shield may not have locked. Do not touch the needle-shield, because you may stick yourself with the needle
- Carefully place the autoinjector into the sharps container
- You may not have received your full dose of ACTEMRA
  - Do not try to re-use the autoinjector
  - Do not repeat the injection with another autoinjector
  - Call your healthcare provider for help

After the injection

- Do not rub the injection site
- There may be a little bleeding at the injection site. You can press a cotton ball or gauze over the injection site
- If needed, cover the injection site with a small bandage
**Step 4: Dispose of the autoinjector**

Do not dispose of the autoinjector and green cap in your household trash and do not recycle them

- Put your used ACTEMRA autoinjector and green cap in a sharps disposal container right away
- The ACTEMRA autoinjector should not be reused
- If your injection was given by another person, this person must also be careful when removing the autoinjector and disposing of it to prevent accidental needle stick injury and passing infection
- Dispose of the full sharps container as instructed by your healthcare professional
- Always keep the sharps container out of the sight and reach of children

**Record your injection:**

- Write the date, time, and specific part of your body where you injected yourself
- It may be helpful to write any questions or concerns about the injection so you can ask your healthcare provider
Taking ACTEMRA

ACTEMRA is used to treat adults with GCA.\textsuperscript{5} It is important to take your medications exactly as prescribed by your doctor to receive the best possible results. If you are finding it difficult to stick to your medication it is important that you talk to your doctor.

How will I be monitored while taking ACTEMRA?

You will be closely observed and monitored during your treatment with ACTEMRA. Your healthcare team will be monitoring your blood work regularly. Any changes will be taken into account and your treatment may be adjusted, interrupted or discontinued accordingly.
Side effects of ACTEMRA treatment

Unwanted side effects are possible with all medicines. Tell your rheumatologist, nurse or pharmacist as soon as possible if you do not feel well while you are receiving treatment with ACTEMRA.⁵

Before starting treatment, make sure your doctor knows if you are taking or have recently taken any other medicines (including those you have bought for yourself from a pharmacy, supermarket or health store). This is extremely important, as using more than one medicine at the same time can strengthen or weaken their effect. ACTEMRA should not be used with other drugs unless your doctor has told you it is safe to do so.⁵

ACTEMRA is not to be used with biological medicines that are used to treat rheumatoid arthritis (RA) including etanercept injection, etanercept for injection, adalimumab injection, infliximab powder for solution, rituximab injection, rituximab for injection, abatacept for injection, abatacept injection, anakinra injection, golimumab injection, golimumab for injection, certolizumab pegol injection. ACTEMRA has not been studied in combination with these biological medicines.
Side effects of ACTEMRA treatment

• The most common side effects with ACTEMRA are upper respiratory tract infections (common cold, sinus infections) headaches, and increase in blood pressure.\textsuperscript{5}

• Possible serious side effects include serious infections, liver injury and allergic reactions\textsuperscript{5}

• A severe skin reaction called Stevens-Johnson syndrome (SJS) and serious drug-induced liver injury (DILI), including rapid loss of liver function, inflammation of the liver and jaundice (yellowing of skin and eyes) were reported during treatment with ACTEMRA

Stop taking ACTEMRA and call your doctor or seek medical attention immediately if you notice any of the following:\textsuperscript{5}

• Difficultly with breathing or light-headedness
• Rash, itching, hives, swelling of the lips or other signs of an allergic reaction
• Chest pain
• Feeling dizzy or faint
• Yellowing of the skin and eyes, dark brown coloured urine, pain or swelling in the upper right side of the stomach area, or you feel very tired and confused.
Tell your doctor as soon as possible if you notice any of the following:\(^5\)

- Signs of infection such as fever and chills
- Mouth or skin blisters
- Stomach ache
- Persistent headaches

This is not a complete list of side effects. For any unexpected effects while taking ACTEMRA, contact your doctor or pharmacist.
SERIOUS WARNINGS AND PRECAUTIONS

ACTEMRA should not be started if you have any active infections including long-term or localized infections. If a serious infection develops, stop ACTEMRA until the infection is controlled.

Your doctor will evaluate you for both active and non-active tuberculosis before starting treatment with ACTEMRA. During and after treatment with ACTEMRA, you will be closely monitored for signs and symptoms of an infection, including the possible development of tuberculosis even if you tested negative prior to initiating therapy.

Serious cases of drug-induced liver injury (DILI) have been observed in patients treated with ACTEMRA. Some of these cases have resulted in acute liver failure requiring a liver transplant.
What to tell your doctor before ACTEMRA treatment

Before taking ACTEMRA for the first time, tell your doctor if:\(^5\)

- You have ever had a bad reaction to tocilizumab or any of the non-medicinal ingredients
- You are allergic to other medications, food or dyes
- You are taking any other medications, including but not limited to corticosteroids. You can take other medicines provided your doctor has prescribed them and has told you it is okay to take them while you are taking ACTEMRA. You should also tell your doctor about any over-the-counter drugs, herbal medicines and vitamin and mineral supplements you are taking.
- You have any kind of infection, or if you often get infections. Treatment with ACTEMRA could cause your infection to get worse. Tell your doctor immediately if symptoms from an infection occur (see warning box on page 26).
- You have diabetes, HIV/AIDS or a weaker immune system, which can increase your risk of serious infections
- You live or have lived, or have travelled to certain parts of the world where there is an increased chance for getting certain kinds of fungal infections (histoplasmosis, coccidiomycosis or blastomycosis). These infections may happen or become more severe if you use ACTEMRA.
• You are scheduled to have surgery
• You have recently had a vaccination or are planning to have a vaccination. Certain vaccines should not be given while receiving ACTEMRA.
• You have tuberculosis (TB), or if you have been in close contact with someone who has had TB. Your doctor should test you for TB before starting treatment with ACTEMRA.
• You have hepatitis or any disease of the liver
• You have had any type of cancer
• You have disease of the nerves or nervous system, such as multiple sclerosis
• You have abdominal pain or have been diagnosed with stomach, pancreas or bowel (intestine) problems, including ulcers, inflammation or infection, including diverticulitis and pancreatitis
• You have cardiovascular risk factors such as high blood pressure and raised cholesterol levels
• You are pregnant or plan on becoming pregnant or are breastfeeding a child
Talk to your doctor **before your ACTEMRA injection** if:

- Your status of any of the previously mentioned items has changed (infections, medications, vaccinations, surgery, etc.)
- You have experienced any major change(s) since your last injection
- You have felt any new symptoms or anything new since your last injection
Getting the Most out of Your Treatment

Speaking with your rheumatologist

Many people with GCA find it difficult to discuss their condition with their healthcare team. While it is difficult, effective communication is of utmost importance in achieving the best care possible. The following section provides some insight into why this discomfort might exist and offers strategies for effective clinic visits. It is important that you feel comfortable talking openly and honestly with the healthcare team involved in your care.
Talking about GCA can be difficult

Talking openly about your GCA symptoms may be difficult for a number of common and understandable reasons:

• The clinic visit feels rushed and you may not feel there is time to talk or give enough detail about your problems
• You do not feel that you know your rheumatologist or nurse well enough
• You don’t want to sound negative or let them down
• You don’t know how to describe how you are feeling or what is wrong
• You don’t understand what your rheumatologist or nurse is asking or telling you
• You may find it hard to talk about intimate and personal details related to the disease
• You may be worried about filling out forms or paperwork
• You may be worried about finances
Easing the GCA discussion

For all these reasons, talking about GCA can be challenging. However, speaking freely about your concerns and asking questions can help ensure you get the right information and advice prior to and during your treatment.

It’s important that you remember to take ACTEMRA, and any other medications, as prescribed by your doctor. Being prepared for each visit and having the confidence to discuss challenges you may be facing with any aspect of your GCA therapy will help you take an active role in your care, and get the most out of your treatment.

Remember, your healthcare team is here to help you—don’t be afraid to have an honest and open discussion!

“My rheumatologist is...a very busy man, but I never feel like I am taking up too much of his time. He always sits and waits until I feel that my questions have been answered and I understand everything he’s telling me.”

–MOREEN, PATIENT
Coordinating ACTEMRA treatment

The Jointeffort Patient Program is available to patients who have been prescribed ACTEMRA. Jointeffort is there to help support your treatment process, including helping you manage the finances involved with treatment. This program can help you identify your reimbursement options and apply for coverage. They can help you over the phone and can even help take care of the paperwork.
Important Numbers

Rheumatologist name:

Rheumatologist number:

Ophthalmologist name:

Ophthalmologist number:

Other healthcare provider name:

Other healthcare provider number:
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References:
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ABOUT ACTEMRA® (tocilizumab) SC
and Giant Cell Arteritis