

# Actemra

# DOSING GUIDE

A guide to assist healthcare professionals with the dose preparation and administration of Actemra therapy in patients with:

- Rheumatoid Arthritis [Intravenous]
- Polyarticular Juvenile Idiopathic Arthritis (also referred to as Juvenile Idiopathic Polyarthritis) [Intravenous]
- Systemic Juvenile Idiopathic Arthritis [Intravenous]

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This Actemra Dosing Guide is a requirement of the Actemra product license and contains important safety information that you need to be aware of when administering Actemra. This Actemra Dosing Guide must be read together with the Actemra Healthcare Professional and Patient Brochures [available online at [www.pharm.am](http://www.pharm.am) and the Actemra Labeling/Summary of Product Characteristics that comes with Actemra (and is also available on [www.pharm.am](http://www.pharm.am) as it contains important information about Actemra.

Please read this information carefully before administering the product.

### **Actemra IV** (Actemra 20 mg/ml concentrate for solution for infusion):

Actemra, in combination with methotrexate (MTX), is indicated for:

#### Rheumatoid Arthritis (RA)

Tocilizumab is indicated for the treatment of moderate to severe active rheumatoid arthritis (RA) in adult patients. Tocilizumab can be used alone or in combination with methotrexate (MTX) and/or other diseasemodifying anti-rheumatic drugs (DMARDs). Tocilizumab has been shown to inhibit progression of joint damage as measured by X-ray and to improve physical function.

#### Polyarticular Juvenile Idiopathic Arthritis (pJIA)

Tocilizumab is indicated for the treatment of active polyarticular juvenile idiopathic arthritis in patients 2 years of age and older. Tocilizumab can be given alone or in combination with MTX.

#### Systemic Juvenile Idiopathic Arthritis (sJIA)

Tocilizumab is indicated for the treatment of active systemic juvenile idiopathic arthritis in patients 2 years of age and older. Tocilizumab can be given alone or in combination with MTX.

#### **Prior to each infusion:**

- It is important that you review the pre-administration checklist found in the Patient Brochure: *What You Should Know About Actemra* with your patient, the patient's parents/guardians, or both.
- Allow ample time to discuss any questions your patient, the patient's parents/guardians, or both may have.
- It is important that you review the information contained within the *Important Efficacy and Safety Information for Healthcare Professionals* for Actemra® (tocilizumab) intravenous (IV) and subcutaneous (SC) formulations and the Patient Brochure: *What You Should Know About Actemra* with your patient, the patient's parents/guardians, or both. These will help them understand what they may expect from the treatment of the patient's condition with Actemra.

For full information, see the Summary of Product Characteristics (SmPC) and the Actemra Package Leaflet: Information for the user, which can be found on the site of "Scientific Centre of Drug and Medical Technology Expertise after academician E.Gabrielyan" CJSC website: [www.pharm.am](http://www.pharm.am)

Actemra Patient Brochures and other information can be requested from your sales representative. If you have questions or concerns, please visit [www.pharm.am](http://www.pharm.am) or call +374 91796688 Part I – Intravenous (IV) administration of Actemra by infusion




This guide will walk you through the Actemra infusion process in **6** steps

## **1 WEIGH PATIENT AND CALCULATE ACTEMRA DOSE BASED ON INDICATION**

Actemra dosing is calculated based on each patient's weight and the indication for which they are treated. The treatment frequency varies by indication. Verify the patient's weight and indication, then locate it on the chart to find the corresponding dose and recommended vial combination.

If the patient's dose has been calculated prior to the infusion date, take his or her weight to make sure that it has not changed from the time of the original calculation to require a change in dose. If the patient's weight has changed, contact the prescriber to discuss whether a dosing change is needed. Refer to the chart to check whether a dosing adjustment is necessary.

Once the dose is calculated, choose the vial combination of Actemra that best matches the patient's needs. Actemra is available in three different dosing vials:

 400 mg (20 ml) vials       200 mg (10 ml) vials       80 mg (4 ml) vials

Inspect the vials for particulate matter and discoloration. Only solutions which are clear to opalescent, colourless to pale yellow and free of visible particles should be used.

### **RA: Dosing Preparation and Administration Guide with Actemra IV**

Actemra IV dosing in RA patients is calculated based on each patient's weight as follows:

**For the 8 mg/kg dose: Patient weight (kg) x 8 (mg/kg) = Actemra 8 mg dose.**

**For individuals whose body weight is more than 100 kg, doses exceeding 800 mg per infusion are not recommended.**

## 8 mg/kg dose

Weight (kg)	Weight (lbs)	Dose (mg)	Dose (mL)	Vial combinations
50	110.0	400	20.0	1 + 1
52	114.4	416	20.8	1 + 1
54	118.8	432	21.6	1 + 1
56	123.2	448	22.4	1 + 1
58	127.6	464	23.2	1 + 1
60	132.0	480	24.0	1 + 1
62	136.4	496	24.8	1 + 1 + 1
64	140.8	512	25.6	1 + 1 + 1
66	145.2	528	26.4	1 + 1 + 1
68	149.6	544	27.2	1 + 1 + 1
70	154.0	560	28.0	1 + 1 + 1
72	158.4	576	28.8	1 + 1
74	162.8	592	29.6	1 + 1
76	167.2	608	30.4	1 + 1 + 1
78	171.6	624	31.2	1 + 1 + 1
80	176.0	640	32.0	1 + 1 + 1
82	180.4	656	32.8	1 + 1 + 1
84	184.8	672	33.6	1 + 1 + 1
86	189.2	688	34.4	1 + 1 + 1 + 1
88	193.6	704	35.2	1 + 1 + 1 + 1
90	198.0	720	36.0	1 + 1 + 1 + 1
92	202.4	736	36.8	1 + 1 + 1 + 1
94	206.8	752	37.6	1 + 1 + 1 + 1
96	211.2	768	38.4	1 + 1 + 1
98	215.6	784	39.2	1 + 1 + 1
≥100	≥220.0	800	40.0	1 + 1 + 1

### pJIA: Dosing Preparation and Administration Guide with Actemra IV

Actemra IV dosing in pJIA patients is calculated based on each patient's weight as follows:

**For patients weighing <30 kg:** Patient's weight (kg) x 10 mg/kg = Actemra dose

**For patients weighing ≥30 kg:** Patient's weight (kg) x 8 mg/kg = Actemra dose

	Weight (kg)	Weight (lbs)	Dose (mg)	Dose (mg)	Vial combinations
10 mg/kg	10	22.0	100	5.0	100
	12	26.4	120	6.0	120
	14	30.8	140	7.0	140
	16	35.2	160	8.0	160
	18	39.6	180	9.0	180
	20	44.0	200	10.0	200
	22	48.4	220	11.0	110 + 110
	24	52.8	240	12.0	120 + 120
	26	57.2	260	13.0	130 + 130
	28	61.6	280	14.0	140 + 140
	30	66.0	240	12.0	120 + 120
	32	70.4	256	12.8	128 + 128
	34	74.8	272	13.6	136 + 136
	36	79.2	288	14.4	144 + 144
8 mg/kg	38	83.6	304	15.2	152 + 152
	40	88.0	320	16.0	160 + 160
	42	92.4	336	16.8	168 + 168
	44	96.8	352	17.6	176 + 176
	46	101.2	368	18.4	184 + 184
	48	105.6	384	19.2	192 + 192
	50	110.0	400	20.0	200 + 200
	52	114.4	416	20.8	208 + 208
	54	118.8	432	21.6	216 + 216
	56	123.2	448	22.4	224 + 224
	58	127.6	464	23.2	232 + 232
	60	132.0	480	24.0	240 + 240
	62	136.4	496	24.8	248 + 248
	64	140.8	512	25.6	256 + 256
	66	145.2	528	26.4	264 + 264
	68	149.6	544	27.2	272 + 272
	70	154.0	560	28.0	280 + 280
	72	158.4	576	28.8	288 + 288
	74	162.8	592	29.6	296 + 296
	76	167.2	608	30.4	304 + 304
	78	171.6	624	31.2	312 + 312
	80	176.0	640	32.0	320 + 320
	82	180.4	656	32.8	328 + 328
	84	184.8	672	33.6	336 + 336
86	189.2	688	34.4	344 + 344	
88	193.6	704	35.2	352 + 352	
90	198.0	720	36.0	360 + 360	
92	202.4	736	36.8	368 + 368	
94	206.8	752	37.6	376 + 376	
96	211.2	768	38.4	384 + 384	
98	215.6	784	39.2	392 + 392	
≥100	≥220.0	800	40.0	400 + 400	

### sJIA: Dosing Preparation and Administration Guide with Actemra IV

Dosing should take place at 2-week intervals.

A change in dose of 8mg/kg or 12 mg/kg should only be based on a consistent change in the patient's body weight over time (e.g., within 3 weeks). If the patient's weight has changed, contact the prescriber to discuss whether a dosing change is needed. Refer to the chart to check whether a dosing adjustment is necessary.

Actemra dosing in sJIA patients is calculated based on each patient's weight as follows:

Dosing Guide for Actemra® (tocilizumab) (IV) for RA, pJIA, sJIA, pJIA, and sJIA

For patients weighing <30 kg: Patient's weight (kg) x 12 mg/kg = Actemra dose

For patients weighing ≥30 kg: Patient's weight (kg) x 8 mg/kg = Actemra dose

	Weight (kg)	Weight (lbs)	Dose (mg)	Dose (ml)	Vial combinations
12 mg/kg	10	22.0	120	6.0	1 × 120
	12	26.4	144	7.2	1 × 144
	14	30.8	168	8.4	1 × 168
	16	35.2	192	9.6	1 × 192
	18	39.6	216	10.8	1 × 216
	20	44.0	240	12.0	1 × 240
	22	48.4	264	13.2	1 × 264
	24	52.8	288	14.4	1 × 288
	26	57.2	312	15.6	1 × 312
	28	61.6	336	16.8	1 × 336
	30	66.0	240	12.0	2 × 120
	32	70.4	256	12.8	2 × 128
	34	74.8	272	13.6	2 × 136
	8 mg/kg	36	79.2	288	14.4
38		83.6	304	15.2	2 × 152
40		88.0	320	16.0	2 × 160
42		92.4	336	16.8	2 × 168
44		96.8	352	17.6	2 × 176
46		101.2	368	18.4	2 × 184
48		105.6	384	19.2	2 × 192
50		110.0	400	20.0	2 × 200
52		114.4	416	20.8	2 × 208
54		118.8	432	21.6	2 × 216
56		123.2	448	22.4	2 × 224
58		127.6	464	23.2	2 × 232
60		132.0	480	24.0	2 × 240
62		136.4	496	24.8	2 × 248
64		140.8	512	25.6	2 × 256
66		145.2	528	26.4	2 × 264
68		149.6	544	27.2	2 × 272
70		154.0	560	28.0	2 × 280
72		158.4	576	28.8	2 × 288
74		162.8	592	29.6	2 × 296
76		167.2	608	30.4	2 × 304
78		171.6	624	31.2	2 × 312
80		176.0	640	32.0	2 × 320
82		180.4	656	32.8	2 × 328
84		184.8	672	33.6	2 × 336
86		189.2	688	34.4	2 × 344
88		193.6	704	35.2	2 × 352
90		198.0	720	36.0	2 × 360
92		202.4	736	36.8	2 × 368
94		206.8	752	37.6	2 × 376
96		211.2	768	38.4	2 × 384
98		215.6	784	39.2	2 × 392
≥100		≥220.0	800	40.0	2 × 400

**2 GATHER ALL NECESSARY SUPPLIES**

You will need:

- Actemra, at room temperature
- Syringes and large-bore needles
- One primary infusion set
- One 100 ml bag of 0.9% (9 mg/mL) sterile, non-pyrogenic sodium chloride solution for injection
- One intravenous (IV) catheter
- Gauze
- Tourniquet
- Gloves
- Alcohol/cleansing wipes

### 3 TAKE BASELINE ASSESSMENTS

Take baseline assessments to ensure the patient is healthy enough to receive the infusion.

Vital signs may include:

- Blood pressure
- Temperature
- Pulse

Follow the recommended baseline patient questions as described in the Actemra Healthcare Professional Brochure (Section 15 – General Recommendation) as well as the Summary of Product Characteristics (Section 4.4 – Warnings and Precautions).

### 4 PREPARE THE PATIENT FOR THE INFUSION

Review the Patient Brochure: *What You Should Know About Actemra* with the patient. Answer any questions he or she might have

Actemra does not require premedication

### 5 PREPARE THE ACTEMRA INFUSION

Actemra is a ready-mix solution and requires no reconstitution. The expiry date should always be checked before use. The Actemra concentrate for IV infusion should be diluted by a healthcare professional using aseptic technique.

- Actemra should be refrigerated for storage. However, the fully diluted Actemra solution should be allowed to reach room temperature before it is infused.
- The fully diluted Actemra solutions for infusion may be stored at 2°C–8°C or room temperature (if diluted under controlled and validated aseptic conditions) for up to 24 hours and should be protected from light.
- Actemra solutions do not contain preservatives; therefore, unused product remaining in the vials should not be used.
- **Weight-/indication-based dosing:**
  - **For RA, sJIA (>30 kg), and pJIA (>30 kg):** From a 100 ml infusion bag withdraw a volume of 0.9% (9 mg/ml) sterile, non-pyrogenic sodium chloride solution for injection equal to the volume of the Actemra solution required for the patient's dose.



- **For sJIA and pJIA patients < 30 kg:** Use a 50ml infusion bag withdraw a volume of 0.9% (9 mg/ml) sterile, non-pyrogenic sodium chloride solution for injection equal to the volume of the Actemra solution required for the patient's dose.
- Actemra should not be infused concomitantly in the same IV line with other medications. No physical or biochemical compatibility studies have been conducted to evaluate the co-administration of Actemra with other medications.
- Slowly add Actemra concentrate for IV infusion from each vial into the infusion bag. To mix the solution, gently invert the bag to avoid foaming.
- Parenteral medicinal products should be inspected visually for particulate matter and discolouration prior to administration. Only solutions which are clear to opalescent, colourless to pale yellow and free of visible particles should be diluted.
- Dispose of needle and syringe in sharps containers when finished.

## 6 BEGIN THE ACTEMRA INFUSION

The infusion should be administered over 60 minutes. It must be administered with an infusion set and should never be administered as an IV push or bolus.


- Prior to the infusion, inform the patient that serious allergic reactions including anaphylaxis have been reported in association with Actemra. Such reactions may be more severe, and potentially fatal, in patients who have experienced allergic reactions during previous treatment with Actemra even if they have received premedication with steroids and antihistamines. Most allergic reactions occur during infusion or within 24 hours of Actemra administration, although allergic reactions can occur at any time.
- If an anaphylactic reaction or other serious hypersensitivity reaction occurs, administration of Actemra should be stopped immediately, appropriate therapy initiated and Actemra should be permanently discontinued. Fatal anaphylaxis has been reported after marketing authorisation during treatment with IV Actemra.
- Instruct the patient to **seek immediate medical attention** if they notice any of the following signs or symptoms of systemic allergic reactions after receiving Actemra:
  - Rash, itching or hives
  - Shortness of breath or trouble breathing
  - Swelling of the lips, tongue or face
  - Chest pain
  - Feeling dizzy or faint
  - Severe stomach pain or vomiting
  - Hypotension

Once the infusion is completed, remove the catheter and dispose of all supplies properly, clean and bandage the infusion site and check the patient's vital signs.


**Company contact point**

Should you have any questions regarding to this, please contact Medical Manager, Local Safety Responsible of Hoffmann-La Roche products in Armenia /LSR Gayane Ghazaryan: mob.: +374 91 796688/ email: [gayaneh.ghazaryan@gmail.com](mailto:gayaneh.ghazaryan@gmail.com), or Nune Karapetyan, mob: +374 91 721153/ email: [nune.karapetyan.roche@gmail.com](mailto:nune.karapetyan.roche@gmail.com). Also direct your reports to Roche Moscow DS Hub via following contacts: tel.: +7-495-229 2999, Fax: +7-495- 229 7999/ email: [moscow.ds@roche.com](mailto:moscow.ds@roche.com); website: [www.roche.ru](http://www.roche.ru).

Sincerely,

Gayane Ghazaryan,  \_\_\_\_\_  
Medical Manager, Local Safety Responsible of  
Hoffmann-La Roche products in Armenia

14.06.2019

Nune Karapetyan  \_\_\_\_\_  
Commercial Lead of Hoffmann-La Roche products in Armenia

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