INFLECTRA®

infliximab [rmc]

Consumer Medicine Information

What is in this leaflet

This leaflet answers some common questions about INFLECTRA.

It does not contain all the a vailable information. It does not take the place of talking to your doctor or pharmacist.

All medicines have risks and benefits. Your doctor has weighed the risks of you using INFLECTRA against the benefits it is expected to have for you.

If you have any concerns about being given this medicine, ask your doctor or pharmacist.

Keep this leaflet.

You may need to read it again.

What INFLECTRA is used for

INFLECTRA contains the active ingredient, infliximab.

INFLECTRA is an approved biosimilar medicine. Comparability in safety, efficacy and quality between INFLECTRA and the reference product has been established.

Infliximab is a monoclonal antibody that is produced from human and mouse proteins by recombinant technology. Monoclonal antibodies are proteins that recognise and bind to certain special proteins in the body.

Infliximab acts by binding to a special protein in the body called tumour necrosis factor a lpha (TNFα).

In people with diseases such as Crohn's disease, ulcerative colitis, rheumatoid arthritis, ankylosing spondylitis, psoriatic arthritis and psoriasis, the body produces too much $TNF\alpha$, which can cause the body's immune system to attack normal healthy parts of the body.

INFLECTRA can block the damage caused by too much TNF α .

Rheumatoid arthritis

Rheumatoid arthritis is an inflammatory disease of the joints. INFLECTRA is used to reduce the signs and symptoms of rheumatoid arthritis and to prevent damage to the joints. You will also be given a disease-modifying medicine called methotrexate.

Ankylosing Spondylitis

Ankylosing spondylitis is an inflammatory disease of the spine. INFLECTRA can reduce the signs and symptoms of ankylosing spondylitis, thereby improving physical function.

Psoriatic arthritis

Psoriatic arthritis is an inflammatory disease of the joints in which psoriasis usually occurs in association with arthritis. Often the fingers and toes are affected, although it may occur in other parts of the body. INFLECTRA is used to reduce the signs and symptoms of psoriatic arthritis and improve the physical function in a dults who have not responded well enough to previous treatments with other disease-modifying anti-rheumatic

drugs (DMARDS). INFLECTRA may be given a lone or in combination with methotrexate.

Psoriasis

Psoriasis is an inflammatory disease of the skin. INFLECTRA is used to treat patients with moderate to severe psoriasis who have not responded well enough to treatments such as phototherapy or conventional systemic treatments, or when these treatments are not appropriate.

Crohn's disease

Crohn's disease is a chronic inflammatory disease of the bowel. It may also affect any part of the gut. INFLECTRA is used to treat moderate to severe Crohn's disease in adult patients and in children and adolescent patients (6 to 17 years old) who have not responded well enough to other treatments.

INFLECTRA can also reduce the number of abnormal openings from the bowel through the skin (called draining enterocutaneous fistula), a common complication of Crohn's disease.

Ulcerative Colitis

Ulcerative colitis is an inflammatory disease of the bowel. INFLECTRA is used to treat the signs and symptoms of ulcerative colitis in adult patients and in children and adolescent patients (6 to 17 years old) who have not responded well enough to other treatments.

Do not give INFLECTRA to children with Crohn's disease or

ulcerative colitis who are younger than 6 years.

Do not give INFLECTRA to children and adolescents with any other disease.

Your doctor, however, may prescribe INFLECTRA for a nother purpose.

Ask your doctor if you have any questions about why INFLECTRA has been prescribed for you.

Before you are given INFLECTRA

When you must not be given it

Do not use INFLECTRA if you have an allergy to mouse proteins or any of the ingredients listed at the end of this leaflet.

Some of the symptoms of an allergic reaction to INFLECTRA may include skin rash, hives, fatigue, wheezing, difficulty in breathing, and/or low blood pressure.

Do not use INFLECTRA if you have severe infections such as tuberculosis and infected abscesses, a repeating infection or have had repeating infections.

Do not use INFLECTRA if you are already taking another medicine for arthritis, which contains the substance called anakinra.

If you have never been given INFLECTRA and have congestive heart failure, you should not use it.

Before you are given it

Tell your doctor if you:

 currently have an infection, or if you are prone to infections, or if you have a history of infections

INFLECTRA may affect the normal immune response. You might get infections more easily. Some cases of serious infections, including tuberculosis (TB) and sepsis have been reported in patients treated with INFLECTRA.

- have ever had or been in close contact with TB, even if you were treated for it
- have ever had or had been in close contact with hepatitis B

Reactivation of hepatitis B have been reported in people treated with TNF α blockers. However, these reports are very rare.

have lived in or travelled to an area where fungal infections called histoplasmosis, coccidioidomycosis, or blastomycosis are common. Ask your doctor if you don't know if these infections are common in the area in which you have lived in or travelled to

These infections are caused by fungus that can affect the lungs or other parts of your body.

• have had cancer

A type of blood cancer called lymphoma has been reported in patients receiving TNF-blockers. The reports are rare but are more frequent than expected for people in general. Cancers, other than lymphoma, have also been reported.

 have a long history of Crohn's disease rheumatoid arthritis, ankylosing spondilitis or psoriatic arthritis, especially if you have a highly active disease and/or have been taking medicine that reduces the activity of the body's natural defences

You may be more likely to develop infections and lymphomas than people in general, even without receiving TNF-blockers such as INFLECTRA.

 are pregnant or plan to become pregnant

Treatment with INFLECTRA is not recommended while you are pregnant. INFLECTRA crosses the placenta and has been detected in the bloodstream of infants for up to 12 months following birth.

You must use adequate contraception to avoid falling pregnant.

• are breast-feeding

INFLECTRA has been detected at low levels in breast milk. Your doctor will discuss with you if the benefit of treatment with INFLECTRA outweighs the potential risk to your infant while breast feeding.

- have or have had a disease that affects the nervous system such as multiple sclerosis and seizures, or if you experience any numbness, weakness, tingling, or sight disturbances
- suffer from congestive heart failure

Steps must be taken to monitor any changes to your condition during treatment with INFLECTRA.

- have ongoing blood disorders or a history of blood disorders
- are scheduled to receive any vaccines

Patients receiving INFLECTRA should not receive sometypes of vaccines. If possible, you should have all your vaccines brought up to date before starting treatment with INFLECTRA.

Your doctor will discuss with you the benefits of using INFLECTRA against the potential risks.

Taking or being given other medicines

Tell your doctor if you are taking any other medicines, including any that you buy without a prescription from your pharmacy, supermarket or health food shop.

Some medicines may affect the way other medicines work.

Do not use INFLECTRA if you are already taking another medicine for arthritis, which contains the substance anakinra.

Tell your doctor if you are already taking another medicine for

arthritis which contains the substance abatacept.

Tell your doctor if you are receiving other treatments

- for rheumatoid arthritis
- for ankylosing spondylitis
- for psoriatic arthritis
- for psoriasis, such as phototherapy or other treatments
- for Crohn's disease or ulcerative colitis
- to prevent rejection in organ transplantation.

Tell your doctor you are taking INFLECTRA before receiving any vaccinations.

Some vaccinations should not be given while you are being treated with INFLECTRA.

Your doctor or pharmacist will be able to tell you what to do when being given INFLECTRA with other medicines.

How INFLECTRA is given

INFLECTRA is only available on prescription. INFLECTRA is given in a drip into a vein (called an infusion) over at least 2 hours.

If you were able to tolerate the first 3 two-hour infusions, your doctor may decide to give your next INFLECTRA infusions over a period of not less than 1 hour.

For children and adolescents (6-17 years) the infusion is given over at least 2 hours.

A period of observation follows treatment.

Rheumatoid arthritis

The recommended starting dose is an infusion of 3 mg/kg. You will get additional doses of 3 mg/kg at 2 and 6 weeks after your first infusion and then every 8 weeks after that.

If, a fter 12 weeks of treatment, your arthritis does not respond well enough to the 3 mg/kg dose, your doctor may decide to gradually increase your dose to a maximum of 10 mg/kg.

You will also be taking methotrexate as part of your treatment.

Ankylosing Spondylitis

The recommended starting dose is an infusion of 5 mg/kg. You will get additional doses of 5 mg/kg at 2 and 6 weeks after your first infusion and then every 6 to 8 weeks after that.

Psoriatic arthritis

The recommended starting dose is an infusion of 5 mg/kg. You will receive additional doses of 5 mg/kg at 2 and 6 weeks after your first infusion, then every 8 weeks after that.

INFLECTRA may be given a lone or in combination with methotrexate.

Psoriasis

The recommended starting dose is an infusion of 5 mg/kg. You will get additional doses of 5 mg/kg at 2 and 6 weeks after your first infusion, and then every 8 weeks after that.

Crohn's disease

The recommended starting dose for Crohn's disease in a dults and in children and a dolescents (6 to 17 years) is an initial infusion of 5 mg/kg followed by additional doses of 5 mg/kg at 2 and 6 weeks after your first infusion, and then every 8 weeks after that. In some cases, your doctor may decide to increase your dose up to 10 mg/kg.

Fistulising Crohn's Disease

The recommended starting dose is an infusion of 5 mg/kg. You will get additional doses of 5 mg/kg at 2 and 6 weeks after your first infusion.

Ulcerative colitis

The recommended starting dose for ulcerative colitis in a dults and in

children and adolescents (6 to 17 years) is an infusion of 5 mg/kg. You will get additional doses of 5 mg/kg at 2 and 6 weeks after your first infusion, and then every 8 weeks after that.

What do I do if I receive too much? (overdose):

As INFLECTRA is being given to you under the supervision of your doctor it is very unlikely you will receive too much.

If you think you or anybody else has been given too much INFLECTRA, contact your doctor, pharmacist or the Poisons Information Centre who will advise you what to do, or go to Accident and Emergency at your nearest hospital.

New Zealand Poisons Centre telephone number:

0800 POISON or 0800 764 766

Keep this telephone number handy.

While you are being given INFLECTRA

Things you must do

Tell your doctor, nurse or pharmacist if the medicine starts to upset you or your symptoms become worse.

Tell your doctor or dentist that you are being treated with INFLECTRA before you undergo any surgical procedures.

Tell your doctor:

- if symptoms of TB (persistent cough, weight loss, listlessness, fever), or any other infection appear. Do this immediately.
- if symptoms of hepatitis B
 (upset stomach, loss of appetite,
 vomiting, tiredness, dark yellow
 or brown urine, and yellow eyes
 or skin) appear. You must do
 this immediately.

that you are taking INFLECTRA before receiving any vaccinations.

Some vaccinations should not be given while you are being treated with INFLECTRA.

• If you are receiving other medicines for the treatment of cancer.

Patients receiving INFLECTRA should not receive some medicines used for the treatment of cancer.

You should continue to take adequate contraceptive measures to avoid pregnancy.

Your doctor will also advise you not to breastfeed. If you have a baby while you are using INFLECTRA, tell your baby's doctor about your INFLECTRA use before the baby receives any vaccinations. A 12-month waiting period is recommended before administering live vaccines to your baby.

Things to be careful of

Tell your doctor if you think you have an infection.

INFLECTRA may affect the normal immune response. There is a possibility that you may be more prone to infections. You will be watched closely for signs of infection.

Tell your doctor immediately if you develop a skin rash or hives.

Your doctor may discontinue INFLECTRA until the symptoms go a way and then begin giving the medicine again. Symptoms will resolve with a ppropriate treatment.

If you suffer from congestive heart failure, tell your doctor immediately if your condition worsens.

INFLECTRA is unlikely to make you drowsy. If you are tired, do not drive a car or work with machinery.

Side effects

Tell your doctor, nurse, or pharmacist as soon as possible if you do not feel well while you are being given INFLECTRA.

All medicines can have side effects. Sometimes they are serious, most of the time they are not. You may need medical treatment if you get some of the side effects.

Generally, patients with rheumatoid arthritis, Crohn's disease, ankylosing spondylitis, psoriatic arthritis, or psoriasis already take several medicines to treat their disease.

These medicines may themselves cause side effects.

If you get additional side effects or any new symptoms, please tell your doctor.

Ask your doctor or pharmacist to answer any questions you may have.

Do not be alarmed by the following list of possible side effects. You may not experience any of them.

During the infusion of INFLECTRA the following reactions may occur:

- fever or chills
- itchiness or hives
- · chest pain
- · low blood pressure
- high blood pressure
- shortness of breath

These reactions are more likely to occur during the first and second infusion but may also appear up to six months after the last infusion.

Tell your doctor immediately if you notice any of the following:

- pain or tenderness in chest, muscles, joints or jaw
- swelling of the hands, feet, ankles, face, lips, mouth or throat, which may cause difficulty in swallowing or breathing
- numbness or paralysis in the face, leg, or arm, most likely on just one side of the body
- blurred or darkened vision

- fever
- muscle pains
- joint pains
- tiredness
- abnormal chest sounds
- rash
- itching
- symptoms that may indicate heart failure, e.g. shortness of breath, especially with exercise or lying down, or swelling of your feet.

Tell your doctor or nurse as soon as possible if you notice any of the following:

- headache
- nausea or vomiting
- dizziness and light-headedness
- fatigue
- fever
- rash
- hives
- itching
- sore throat
- coughing
- hoarseness
- shortness of breath
- chest pain
- back pain
- muscle pain
- abdominal pain
- indigestion
- diarrhoea
- weight loss, muscle wasting
- problems with urination
- changes in the way your heart beats, for example, if you notice it beating faster
- flushing
- dry skin or increased sweating
- fluid retention
- new onset of psoriasis, mainly on the soles of the feet and on palms
- worsening of rheumatoid arthritis.

There have been very rare cases where people taking INFLECTRA have developed liver problems. Signs

that you could be having a problem include:

- jaundice (skin and eyes turning yellow)
- dark-brown coloured urine
- right-sided abdominal pain
- fever
- severe fatigue (tiredness).

You should contact your doctor immediately if you develop any of these symptoms.

Tell your doctor if you notice any other effects.

Most of the side effects are mild to moderate in severity. Other side effects not listed above may also occur in some patients. Some side effects may appear up to six months after the last infusion.

Cancers

In clinical studies, more cancers were seen in patients who received TNF-blockers, including INFLECTRA, than patients who did not receive these treatments.

In children and adults being treated with TNF-blockers, the chances of getting lymphoma or other cancers may increase. It should be noted, however, that patients with longstanding and active rheumatoid arthritis or Crohn's disease may already have a higher risk for developing cancers even without TNF-blockers, making it difficult to estimate the risk of developing cancers in these patients.

Nevertheless, the role of TNF-blockers in the development of cancers cannot be excluded.

A rare type of cancer called Hepatosplenic T-cell Lymphoma (HSTCL) has been reported rarely in a dolescents and young a dults with Crohn's disease or ulcerative colitis who have received INFLECTRA. All of these patients were also receiving drugs known as azathioprine or 6-merca ptopurine. No cases of HSTCL have been reported in patients receiving INFLECTRA only. HSTCL often results in death. The

role of TNF-blockers in the development of cancers in children and a dolescents remain unclear.

Talk to your doctor if you are concerned about this.

Skin cancers (melanoma, Merkel cell carcinoma, basal cell carcinoma and squa mous cell carcinoma) have been reported rarely in patients treated with TNF-blockers, including INFLECTRA.

Tell your doctor if you notice any new skin lesions during or after therapy or if existing lesions change appearance.

Cervical cancer may occur more frequently in women treated with INFLECTRA. Periodic screening of women treated with INFLECTRA should continue.

Patients with a lung disease called Chronic Obstructive Pulmonary Disease and who have a history of heavy smoking may have an increased risk for getting cancer while being treated with INFLECTRA.

After INFLECTRA has been stopped

Tell your doctor immediately if:

- you notice any of the following side effects, even if they occur several weeks after stopping treatment with INFLECTRA.
 - skin rash or hives
 - frequent infections
- symptoms of TB (persistent cough, weight loss, listlessness, fever), or any other infection appear.
- symptoms of hepatitis B (upset stomach, loss of appetite, vomiting, tiredness, dark yellow or brown urine, and yellow eyes or skin) appear.

These symptoms may appear several months after your last INFLECTRA treatment.

You should continue to take adequate contraceptive measures to avoid pregnancy for at least 6 months after the last infusion of INFLECTRA.

Tell your doctor if you wish to breastfeed your infant after your last INFLECTRA treatment.

Your doctor will discuss the risks and benefits with you.

Tell your doctor if you notice any other effects.

Storage

INFLECTRA should be stored at 2°C to 8°C (Refrigerate.) Do not use beyond the expiry date.

INFLECTRA vials are for single use only. Any unused portion should be discarded.

Product description

What it looks like

INFLECTRA comes as a white powder in a glass vial.

Ingredients

Active ingredient:

Infliximab [rmc] 100 mg per vial

Inactive ingredients:

- monobasic sodium phosphate monohydrate
- dibasic sodium phosphate dihydrate
- sucrose
- polysorbate 80

Supplier

INFLECTRA is supplied in New Zealand by:

Pfizer New Zealand Limited PO Box 3998 Auckland

Toll Free Number: 0800736363

Date of Preparation:

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