



20 October 2021

To whom it may concern

Supply of Actemra® (tocilizumab) 162 mg/0.9 mL solution for subcutaneous injection

As you are aware, Roche is currently experiencing shortages of multiple presentations of Actemra® (tocilizumab) in New Zealand due to a significant increase in global demand. Roche recognises that there are patients who need Actemra® and for which there is no alternative.

The stock you have just received of Actemra® pre-filled syringe (subcutaneous) is labelled differently from the registered pack of Actemra® in New Zealand. This stock is being provided as an action to mitigate the risk of the Actemra® shortage and minimise the risk on the patients, until the shortage is resolved in 2022.

Please disregard the enclosed leaflet. The full Actemra New Zealand Data Sheet (DS) and Consumer Medicine Information (CMI) documents are available at www.medsafe.govt.nz. The CMI includes detailed information for the patient including diagrams on how to use the pre-filled syringe. The New Zealand CMI is provided with this letter as [Attachment 1](#).

Roche confirms that the product contained in each pre-filled syringe is identical and does not differ to the registered product in New Zealand (TT50-8074/2).

Indications for use – Prescription Medicine Only

Actemra® SC is approved in the following registered indications¹:

- **Rheumatoid Arthritis:** Actemra is indicated for the treatment of moderate to severe active rheumatoid arthritis (RA) in adult patients:
 - in combination with methotrexate (MTX) in those not previously treated with MTX;
 - in combination with methotrexate (MTX) or other non-biological disease-modifying antirheumatic drugs (DMARDs) in case of either an inadequate response or intolerance to previous therapy with one or more DMARDs; or
 - as monotherapy in case of intolerance to MTX or where continued treatment with MTX is inappropriate.

Actemra has been shown to inhibit the progression of joint damage in adults, as measured by X-ray, when given alone or in combination with methotrexate.

- **Giant Cell Arteritis:** Actemra is indicated for the treatment of giant cell arteritis (GCA) in adult patients.

Roche does not recommend that Actemra® is used for any indication outside of its approved uses. Any use outside of the approved indications is a clinical decision for prescribing medical practitioners.

Is there any action required?

- Wholesalers – Please provide a copy of this letter to stakeholders receiving this product.

¹ Data Sheet available at www.medsafe.govt.nz



- Pharmacists – Please provide this information to patients as required to avoid any confusion.

Notwithstanding the above:

- to report an adverse event or other safety issue, please contact Roche Patient Safety at nz.drugsafety@roche.com. Alternatively, this information may be reported to the Centre for Adverse Reactions Monitoring (CARM) in Dunedin by telephone on (03) 479 7247, by fax on (03) 479 7150, online at <https://nzphvc.otago.ac.nz/reporting> or by email to nzphvc@otago.ac.nz.
- for further enquiries about Actemra® (tocilizumab) please contact Roche Medical Information at auckland.medinfonz@roche.com or leave a voicemail on 0800 276 243.

Further information can be found on the [PHARMAC website](#)¹ and on the [Medsafe website](#)².

Yours sincerely,

Roche Products (New Zealand) Limited

Kerryn Symons
Medical Director

Roche Products (New Zealand) Limited
PO Box 109113, Newmarket, Auckland, 1149

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¹ <https://pharmac.govt.nz/medicine-funding-and-supply/medicine-notice/tocilizumab/>

² <https://www.medsafe.govt.nz/safety/DHCPLetters.asp>

Consumer Medicine Information

Actemra[®] solution for subcutaneous injection

Tocilizumab

162 mg/0.9 mL solution for subcutaneous injection

What is in this leaflet

This leaflet answers some common questions about Actemra pre-filled syringe for subcutaneous (under the skin) injection.

It does not contain all the available 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 taking Actemra against the benefits they expect it will have for you.

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

Keep this leaflet.

You may need to read it again.

What Actemra is used for

Actemra contains the active ingredient tocilizumab.

Actemra belongs to a group of medicines called anti-rheumatic agents. There are many different classes of anti-rheumatic agents. Actemra belongs to a class called monoclonal antibodies.

Monoclonal antibodies are proteins which specifically recognise and bind to other unique proteins in the body.

Actemra is used to treat moderate to severe rheumatoid arthritis (RA) in adults. For RA, Actemra can also prevent damage occurring to your joints and improve your ability to do your normal daily activities. Actemra is also used to treat giant cell arteritis (GCA).

Some of the signs and symptoms of RA and GCA are caused by the actions of a protein called interleukin-6 (IL-6) binding to the interleukin-6 receptor (IL-6R). Actemra works by binding and blocking IL-6R thereby helping to relieve some of the signs and symptoms of RA and GCA.

Actemra is approved to treat GCA and RA, however your doctor may have prescribed Actemra for another purpose.

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

Actemra is not addictive.

This medicine is available only with a doctor's prescription.

Before you use Actemra

When you must not use Actemra

Do not use Actemra if:

- 1. you have had an allergic reaction to Actemra or any ingredients listed at the end of this leaflet**

Some of the symptoms of an allergic reaction may include shortness of breath, wheezing or difficulty breathing, swelling of the face, lips, tongue or other parts of the body, and rash, itching or hives on the skin.

2. **you have had an allergic reaction to any other recombinant human or humanised antibodies or proteins that are of hamster origin**
3. **you have an active, severe infection**
4. **the package is torn or shows signs of tampering**
5. **the expiry date (EXP) printed on the pack has passed.**

If you take this medicine after the expiry date has passed, it may not work as well.

If you are not sure if you should use Actemra, talk to your doctor.

Before you use Actemra

Tell your doctor if:

1. **you have an infection, or a history of a recurring or long-term infection**

Actemra can reduce your body's ability to respond to infections and may make an existing infection worse or increase the chance of getting a new infection. This is particularly important if you have diabetes or diverticulitis as you may have an increased risk of infection.

2. **you have any other health problems, especially the following:**

- liver disease such as viral hepatitis
- tuberculosis
- diverticulitis or intestinal ulcers
- a low white blood cell count or a low platelet count
- diabetes
- raised blood pressure
- high cholesterol or triglycerides
- kidney disease
- cancer

3. **you are pregnant or plan to become pregnant**

It is not known whether Actemra is harmful to an unborn baby when taken by a pregnant woman. If there is a need to take Actemra when you are pregnant your doctor will discuss the risks and benefits to you and the unborn baby.

4. **you are breast-feeding or plan to breast-feed**

It is not known whether Actemra passes into breast milk. It is recommended that you stop breast-feeding while you are treated with Actemra.

5. **you are planning to have a vaccination or have recently had a vaccination**

Certain types of vaccines should not be given while using Actemra.

6. **you are allergic to any other medicines, foods, dyes or preservatives**

If you have not told your doctor about any of the above, tell them before you start taking Actemra.

Use in Children

The safety and efficacy of Actemra given as a subcutaneous injection to patients below 18 years of age have not been established.

Taking other medicines

Tell your doctor if you are taking any other medicines, including any that you have bought from a pharmacy, supermarket or health food shop.

Do not use Actemra with other biological medicines used to treat RA, including infliximab, adalimumab, etanercept, anakinra, abatacept, rituximab, certolizumab pegol and golimumab. It is unknown how Actemra interacts with these medicines.

Actemra may interfere with some medicines. These include:

- warfarin, a medicine used to prevent blood clots
- cyclosporin, a medicine used after organ transplants
- atorvastatin and simvastatin, medicines used to reduce cholesterol levels
- calcium channel blockers, such as amlodipine, which treat raised blood pressure
- theophylline, a medicine used to treat bronchitis
- phenytoin, a medicine used to treat epilepsy
- benzodiazepines, such as diazepam, which treat anxiety
- omeprazole, a medicine used to treat reflux disease and peptic ulcers
- dextromethorphan, a cough medicine

These medicines may be affected by Actemra, or may affect how well the medicine works. You may need to use different amounts of your medicine, or you may need to take different medicines. Your doctor will advise you.

Your doctor or pharmacist has more information on medicines to be careful with or avoid while taking Actemra.

Ask your doctor or pharmacist if you are not sure about this list of medicines.

How to use Actemra

Follow all directions given to you by your doctor or pharmacist carefully.

They may differ from the information contained in this leaflet.

Use Actemra exactly as your doctor has prescribed.

How much to inject

The recommended dose of Actemra to treat RA and GCA is 162 mg injected once a week.

The syringe is designed to deliver 162 mg per injection when used according to the instructions in this leaflet.

Your doctor may test your blood to help guide your treatment. If you experience certain changes in your blood tests, your doctor may decide to interrupt your treatment and reduce the frequency of dosing to 162 mg every 2 weeks or stop your treatment.

For RA, Actemra can be used in combination with methotrexate or other arthritis medications. Actemra can also be used on its own if your doctor decides that methotrexate is inappropriate.

For GCA, Actemra is initially given in combination with a glucocorticoid medicine (such as prednisone). Over the period of treatment with Actemra, your doctor should reduce the dose of glucocorticoid medicine.

How to inject Actemra

Actemra is administered by subcutaneous injection. This means it is injected with a short needle into the fatty tissue just under the skin.

The first injection of Actemra should always be given under the supervision of your healthcare professional.

Your doctor may discuss with you whether it would be more convenient for you to inject Actemra yourself at home, in which case, you or a caregiver would be instructed on how to give the injection. This is a simple procedure and many patients prefer it.

Directions for self-injection

You should read these directions from beginning to end before starting so that you are familiar with each step of the procedure. These instructions must be carefully followed. Consult with your healthcare provider if you require further instructions. These instructions do not replace the instructions from your healthcare provider. Your healthcare provider should show you how to prepare and inject properly before you inject for the first time. Ask them any questions you may have.

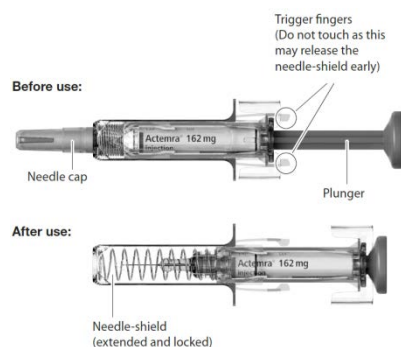
Do not attempt to administer an injection until you are sure that you understand how to self-inject.

It is important to remain under your doctor's care while using Actemra.

The syringe is for single use only and should be safely discarded after use.

How to inject using the syringe

The syringe components:



Do not use if the syringe appears to be damaged.

Do not use if the medicine is cloudy, hazy, discoloured or contains particles.

Do not shake the syringe.

Do not try to open the syringe or take it apart.

Do not remove the needle cap until you are ready to inject.

Do not inject through clothing covering the skin.

Do not re-use the same syringe.

Do not touch the syringe trigger fingers as this may damage the syringe.

Gather what you will need:

Included in the pack:

- pre-filled syringe

Not included in the pack:

- Alcohol pad
- Sterile cotton ball or gauze
- Puncture-resistant container (also called a “sharps” container) for safe disposal of the needle cap and used syringe.

Find a well-lit, clean, flat surface such as a table.

STEP 1. Visually check the syringe

Take the carton containing the syringes out of the refrigerator and remove one syringe from the carton. Return the remaining syringes in the carton to the refrigerator.

Do not shake.

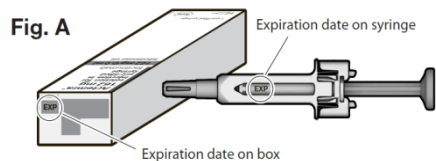
If there is foam in the medicine, put the syringe back in the carton in the refrigerator for use another time and take a new syringe from the refrigerator.

Visually examine the syringe, as well as the medicine through the viewing window.

Do not use if the syringe appears to be damaged.

Do not use if the medicine is cloudy, hazy, discoloured or contains particles.

Check the expiration date on the carton and syringe to make sure that it has not expired (Fig. A). The expiry date refers to the last day of that month.



Do not use the syringe if the expiration date has passed.

Do not remove the syringe needle cap until step 5.

STEP 2. Allow the syringe to adjust to room temperature.

Place the syringe on a clean flat surface. Allow the syringe to warm up to room temperature which should take 25 to 30 minutes.

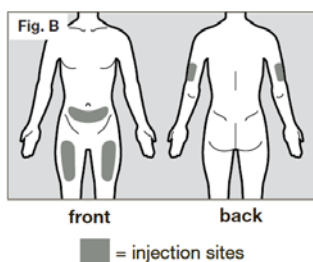
Do not warm up the syringe in any other way.

STEP 3. Clean your hands

Wash your hands with soap and water. Cleanliness is vital during the injection procedure.

STEP 4. Choose and prepare an injection site

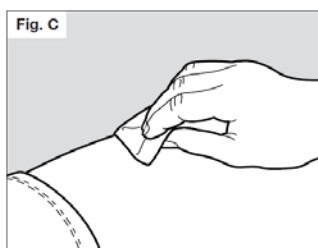
The recommended injection sites are the front and middle of your thighs and the lower part of your abdomen below the navel (belly button), except for the five centimeter area directly around the navel. If a caregiver is giving the injection, the outer area of the upper arms may also be used (Fig. B).



Use a different place each time you give yourself an injection at least 3 centimeters from the area you used for your last injection.

Do not inject into areas that could be irritated by a belt or waistband. Do not inject into moles, scars, bruises, or areas where the skin is tender, red, hard or not intact.

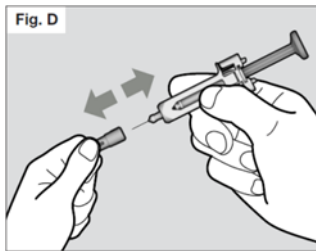
Clean the chosen injection area using the alcohol pad, to reduce the risk of infection (Fig. C). Let the skin dry for approximately 10 seconds. Be sure not to touch the cleaned area prior to the injection. Do not fan or blow on the cleaned area.



STEP 5. Remove 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 (Fig. D). If you cannot remove the needle cap you should request the help of a caregiver 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 sharps container.

Once the needle-cap is removed, the syringe should be used immediately to prevent the medicine from drying out and blocking the needle. If it is not used within 5 minutes, the syringe should be disposed of in the sharps container and a new syringe should be used.

Do not reattach the needle-cap after removal.

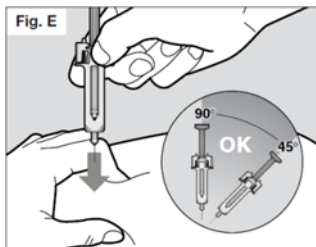
STEP 6. Give the injection

Hold the syringe comfortably in your hand. Be careful not to touch the syringe trigger fingers as this may damage the syringe.

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.

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 (Fig. E.).

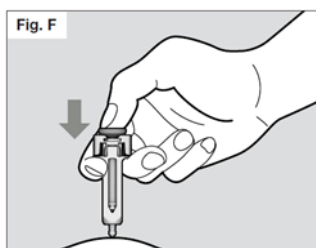


It is important to choose the correct angle to ensure the medication is delivered under the skin (into fatty tissue), otherwise the injection could be painful and the medication may not work.

Then keep the syringe in position and let go of the pinch of skin.

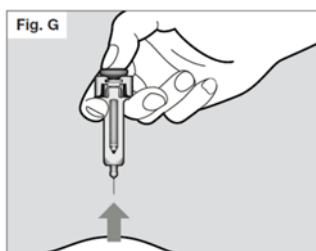
Hold the syringe with two fingers under the flange (or “wings”) and thumb on the plunger. Slowly inject all of the medicine by gently pushing the plunger all the way down.

You must press the plunger all the way down to ensure you get the full dose of medication and to ensure the trigger fingers are completely pushed to the side (Fig. F). If the plunger is not fully depressed the needle shield will not extend to cover the needle when it is removed.

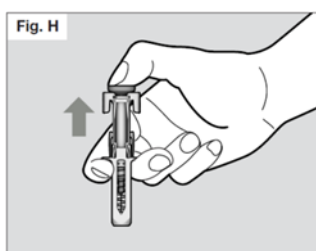


Once the plunger is pushed all the way down, keep pressing down on the plunger to be sure all of the medicine is injected before taking the needle out of the skin.

Keep pressing down on the plunger while you take the needle out of the skin at the same angle as inserted (Fig G.).



Once the needle is removed completely from the skin, you can release the plunger. The needle will retract allowing the needle shield to protect the needle (Fig H.).



If the needle is still exposed proceed carefully, and place the syringe into the sharps container to avoid injury with the needle (see STEP 7).

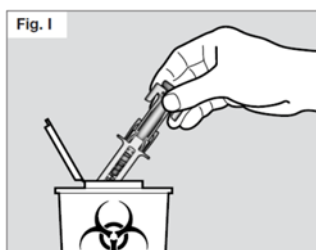
If you see drops of blood at the injection site, you can press the sterile cotton ball or gauze over the injection site for approximately 10 seconds.

Do not rub the injection site.

STEP 7. Safely dispose of the syringe

Do not try to re-cap your syringe.

Throw away used syringes in a sharps container (Fig I.). Ask your healthcare provider or pharmacist for information about where you can get a sharps container or what other types of puncture-resistant containers you can use to safely dispose of your used syringes, if you do not have one.



Do not throw away used syringes or the sharps container in household rubbish and do not recycle them.

Dispose of the full container as instructed by your healthcare provider or pharmacist.

Always keep the sharps container out of the reach of children.

How long to use Actemra

The duration of treatment depends on how you are responding to the medicine. Your doctor will discuss this with you.

Continue to use Actemra until your doctor tells you to stop.

If you forget to use it

It is very important to use Actemra exactly as prescribed by your doctor. Keep track of your next dose.

If you inject Actemra weekly and it is within 7 days of the dose you missed, you should skip the missed dose. Inject your next dose as you would have on the originally scheduled day, had you not forgotten the dose.

Do not give yourself two injections to make up for the injection that you missed.

If you inject Actemra every 2 weeks and it is within 7 days of the dose you missed, you should inject the missed dose as soon as you remember. Inject the next dose as you would have on the originally scheduled day, had you not forgotten the dose.

Do not give yourself two injections to make up for the injection that you missed.

If you inject Actemra every week or every 2 weeks and it has been more than 7 days since you missed your dose, contact your healthcare provider for advice.

If you are not sure when to inject your next dose, contact your healthcare provider for advice.

In case of an overdose

If you think that you or anyone else may have used too much Actemra, immediately telephone your doctor or Poisons Information Centre (telephone 0800 764 766 [0800 POISON]) for advice or go to Accident and Emergency at your nearest hospital. Do this even if there are no signs of discomfort or poisoning. You may need urgent medical attention.

Keep telephone numbers for these places handy.

While you are using Actemra

Things you must do

Tell your doctor immediately if you experience allergic reactions such as chest tightness, wheezing, severe dizziness or light-headedness, swelling of the lips or skin rash during or after using Actemra.

If you experience any allergic reaction symptoms after using Actemra, do not take the next dose until you have informed your doctor AND your doctor has told you to take the next dose.

Tell your doctor immediately if you develop an infection while you are using Actemra.

The first signs of infection can include:

- body aches, fever, chills
- cough, chest discomfort/tightness, shortness of breath
- redness, heat, unusual swelling of skin or joint
- abdominal pain/tenderness and/or change in bowel function

Tell your doctor immediately if you develop severe blisters and bleeding in the lips, eyes, mouth, nose and genitals while you are using Actemra.

Tell all doctors, dentists and pharmacists who are treating you that you are using Actemra.

Tell your doctor if you become pregnant while using Actemra.

Tell your doctor if you are breast-feeding while using Actemra.

Tell your doctor if you feel Actemra is not helping your condition.

Be sure to keep all of your appointments with your doctor so that your progress can be checked.

Your doctor may test your blood to help guide your treatment.

Things you must not do

You should not breast-feed your infant during treatment with Actemra.

It is not known whether Actemra crosses into human milk.

Do not take any other medicines whether they require a prescription or not without first telling your doctor or consulting a pharmacist.

Things to be careful of

Be careful driving or operating machinery until you know how Actemra affects you.

Actemra has not been shown to impair the ability to drive or operate machinery.

Side effects

Tell your doctor or pharmacist as soon as possible if you do not feel well while you are using Actemra.

Actemra helps many patients with RA and GCA but it may have unwanted side effects. 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.

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

Tell your doctor if you notice any of the following and they worry you:

- mild fever and chills
- high blood pressure (symptoms may include headache, dizziness, ringing in the ears)
- rashes or itching
- headache
- cough
- blocked or runny nose
- sore throat
- dizziness
- nausea or indigestion
- stomach pain
- constipation
- diarrhoea
- cold sores
- mouth or skin blisters
- mouth ulcers
- skin infection (redness, pain and/or swelling)
- pain in the joints
- injection site reactions

These are the more common side effects of Actemra. Mostly these are mild.

Tell your doctor immediately or go to your nearest Accident and Emergency Centre if you notice any of the following:

- difficulty breathing, chest tightness or wheezing
- severe light-headedness
- severe skin rash, itching, hives
- swelling of the face, lips, mouth
- signs of serious infection such as severe fever and chills, stomach ache or persistent headaches
- bleeding from the stomach or intestines. Signs and symptoms may include severe stomach pain, vomiting blood or material that looks like coffee grounds, bleeding from your rectum, black sticky bowel motions, bloody diarrhoea
- severe blisters and bleeding in the lips, eyes, mouth, nose and genitals.

These are serious side effects. You may need urgent medical attention. Serious side effects are rare.

This is not a complete list of all possible side effects. Others may occur in some people and there may be some side effects not yet known.

Tell your doctor if you notice anything else that is making you feel unwell, even if it is not on this list.

Ask your doctor or pharmacist if you don't understand anything in this list.

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

After using Actemra

Storage

Store in a refrigerator (2°C to 8°C).

Once removed from the refrigerator, Actemra must be used within 8 hours and must be kept below 30°C. Once the needle cap is removed, the Actemra syringe must be used within five minutes.

Do not freeze.

Store the syringes in the carton to protect them from light and to keep them dry.

Do not use Actemra after the expiry date which is stated on the carton and syringe labels after “EXP”. The expiry date refers to the last day of that month.

Disposal

The syringe is intended for single use only and must be thrown away after the injection.

Dispose of the syringes in a sharps container as instructed by your doctor, nurse or pharmacist.

Do not put the used syringes in your normal household rubbish.

If your doctor tells you to stop using Actemra, or the product has passed its expiry date, ask your pharmacist what to do with any medicine that is left over.

Product description

Availability

Actemra is available as:

- A pre-filled syringe, 162mg/0.9mL, in packs of 4 syringes

Actemra is also available as a concentrated solution for intravenous infusion.

What Actemra looks like

Actemra is a clear to opalescent, colourless to pale yellow solution.

Ingredients

Active ingredient

- tocilizumab (rch)

Inactive ingredients

- polysorbate 80, histidine, histidine hydrochloride, arginine, arginine hydrochloride, methionine, water for injections

Distributor

Actemra is distributed in New Zealand by:

Roche Products (New Zealand) Limited
PO Box 109113 Newmarket
Auckland 1149
NEW ZEALAND

Medical Enquiries: 0800 656 464

This leaflet was prepared on 03 February 2021.