E42. PATTERNS OF TOCILIZUMAB USE AND SAFETY IN PATIENTS WITH RHEUMATOID ARTHRITIS: INTERIM RESULTS FROM ACT-UP: A MULTINATIONAL OBSERVATIONAL STUDY

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Background: Tocilizumab (TCZ) is indicated for RA patients with inadequate responses to DMARDs, either as monotherapy (Mono) or in combination with DMARDs (Combo). ACT-UP pools data from several international, observational, post-marketing studies of i.v. TCZ. Interim observations of patterns of TCZ-use in RA patients, adherence to label recommendations and safety are reported.

Methods: Adult patients with moderate-to-severe RA who started TCZ in routine practice were observed in clinical practice for 6 months. There were no specified dosing regimens (concomitant RA treatments permitted) and no interventional procedures, clinic visits, or laboratory analyses outside routine practice.

Results: Data are reported for 961 patients receiving TCZ [352 (37%) initiated as Mono and 609 (63%) as Combo], 94% and 95% of Mono and Combo patients, respectively, started TCZ at 8 mg/kg, and 93% and 94% of patients, respectively, taking TCZ at 6 months received 8 mg/kg. TCZ dose changes occurred in 34 (10%) Mono patients (7 increased, 11 decreased, 16 increased and decreased) and 68 (11%) Combo patients (13 increased, 20 decreased, 35 increased and decreased). Reasons for dose changes were: adverse events (AEs); 4% Mono; 5% Combo) and lack of efficacy (2% Mono; 1% Combo). Median MTX dose for Combo patients was 15.0 mg/week. 63 patients changed MTX dose (median dose change 5.0 mg/week). AEs occurred in 53% of patients (27% Mono; 29% Combo), other reasons (62% Mono; 44% Combo). AEs occurred in 53% of patients (Table 1). Infections were less common in Mono patients. No gastrointestinal perforations were reported.

Conclusion: In clinical practice, 37% of patients started TCZ as monotherapy and most patients continued with TCZ treatment (Mono and Combo) 6 months after initiation. TCZ was well tolerated in both groups.

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