

After Taking an Anti-TNF Considering a Different Type of Biologic to Treat Your RA

RISE[™]
RA Information, Service, and Education



www.RISEsupport.com
1-877-474-8892

“ I hadn't really had much success until my doctor and I chose a biologic. ”

—Aimee, living with RA since 2004, has taken an anti-TNF



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About Biologics

Biologics are an advanced class of RA treatments that are usually given to people who:

- Have moderate to severe RA
- Have not been helped enough by other types of treatment (eg, NSAIDs and DMARDs)

Unlike other types of treatment, biologics target specific parts of the immune system believed to play a key role in RA. As a result, they may not only reduce pain and symptoms, but also limit the progression and joint damage of the disease.

There are different types of biologics

Even though all biologics have the potential to work well, there are a number of differences among them. In fact, biologics are often classified by the different ways that they work. And as you'll learn in the next section, different biologics are given to different people based on their treatment history.

From Anti-TNFs to B-Cell Targeted Therapy

People who've never been treated with a biologic are usually given a certain type of biologic called an anti-TNF. These treatments are so named because they are thought to block a chemical in the immune system called tumor necrosis factor (or TNF), which may cause inflammation. The brand names of these treatments include Cimzia® (certolizumab pegol), Enbrel® (etanercept), Humira® (adalimumab), Remicade® (infliximab), and Simponi® (golimumab). Many people have had some success with anti-TNFs, but it's not uncommon to switch to a biologic that works differently.

After one anti-TNF

People who haven't been helped enough by an anti-TNF will sometimes try another. But many have had success with other types of biologics, such as B-cell therapy—also known as Rituxan® (rituximab). Unlike anti-TNFs, Rituxan targets a specific type of white blood cell called B-cells, which are believed to play an important role in RA. You should know that Rituxan can cause side effects, like infections and infusion reactions. For more information, talk with your doctor and see the last page of this brochure.

For more information on Rituxan, please see the enclosed full Prescribing Information, including Medication Guide. All trademarks are the property of their respective owners.

“ After trying one anti-TNF,
my doctor and I decided to
go in a different direction. ”

—Roger, living with RA since 1972



See the chart in the next section for some
important information about these biologics.

Key Information About Anti-TNFs and B-Cell Targeted Therapy

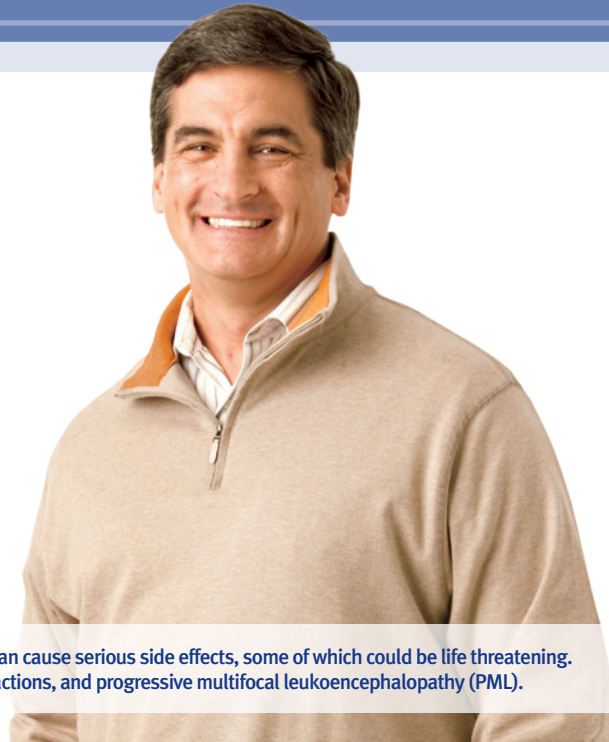
Type of biologic	How does it work?	Who is it for?	Brand names	How is it given?	Who is it given by?	How often is it given?	Treatments in a year*
Anti-TNF	Blocks a chemical called TNF, which may contribute to inflammation	People with moderate to severe RA	Cimzia® (certolizumab pegol)	Injection	Self-administered	After 2 injections, take 2 more at weeks 2 and 4, and then 1 every 2 weeks after	as few as 15
			Enbrel® (etanercept)	Injection	Self-administered	1 injection every week	as few as 52
			Humira® (adalimumab)	Injection	Self-administered	1 injection every 2 weeks	as few as 26
			Remicade® (infliximab)	Infusion	Trained nurse	After 1 infusion, treat again at weeks 2 and 6, and then every 8 weeks after	as few as 9
			Simponi® (golimumab)	Injection	Self-administered	1 injection every month	as few as 12
B-cell targeted therapy	Selectively targets B-cells, a type of white blood cell believed to play an important role in RA	People with moderate to severe RA who haven't been helped enough by an anti-TNF and do not have a serious infection	Rituxan® (rituximab)	Infusion	Trained nurse	1 course every 6 months (1 course = 2 infusions given 2 weeks apart), given along with methotrexate	as few as 4

No conclusions regarding comparative safety or efficacy between treatments can be drawn from this chart. All trademarks are the property of their respective owners. All treatments are prescription only.

*Based on information from each biologic's Prescribing Information. Please discuss with your doctor. For more information on Rituxan, please see the enclosed full Prescribing Information, including Medication Guide.

“ When I didn't see the results
I was expecting, I knew it was
time to try a different biologic. ”

—Jay, living with RA since 2002



Jay is currently taking Rituxan® (rituximab) to treat his RA. You should know that Rituxan can cause serious side effects, some of which could be life threatening. These include severe infusion reactions, tumor lysis syndrome (TLS), severe skin reactions, and progressive multifocal leukoencephalopathy (PML).

When to Switch

So when is the right time to switch biologics? Well, the answer to that question can vary from person to person, but there are a number of signs that everyone can look for. For example:

- If you're having trouble with daily activities
- If your symptoms haven't improved enough
- If you're experiencing different symptoms or symptoms in different places
- If your treatment is losing its effectiveness
- If you can't tolerate the side effects from your treatment

Ultimately, it's up to you and your doctor to decide when a change in treatment may be necessary. So if you recognize any of the signs above, be sure to bring it up at your next appointment, and ask your doctor if a different biologic could be right for you.

Discuss and Decide

The following questions can help you and your doctor decide on the type of biologic that's right for you. Just jot down your answers on the right, and be sure to discuss them at your next appointment.

- How would your doctor describe the severity of your RA (eg, mild, moderate, severe)?
- What types of treatments have you taken in the past (eg, NSAIDs, DMARDs, anti-TNFs)?
- What potential side effects are associated with each treatment?
- Are you being helped enough by your current treatment?
- How does your current treatment work? Do the treatments you're considering work differently?
- Which treatment would best suit your lifestyle?

Remember to be open and honest with your doctor, and consider every aspect of each treatment, including the potential benefits and risks. You know your health as well as anyone, so it's important to partner with your doctor and be actively involved in choosing your treatment.

NOTES

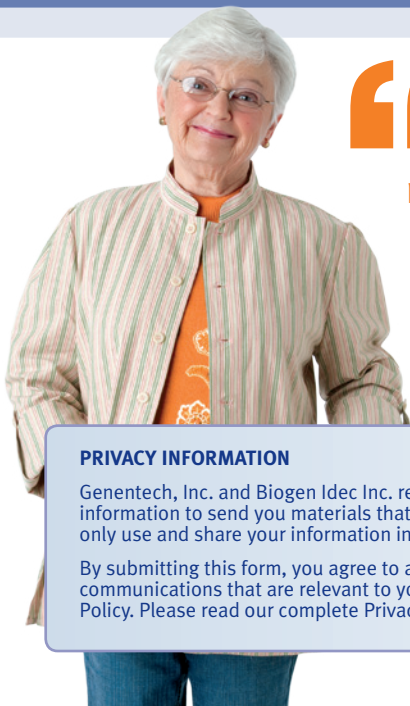
Learn More—Join RISE™

As a member, you'll receive:

- More information about your biologic treatment options
- A DVD full of RA-specific exercises
- Access to a variety of resources for people living with RA

Become a member online at www.RISEsupport.com.





“ The RISE network has so much to offer, and it’s helped me live a better life with RA. ”

—Jo Ann, living with RA since 1993



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By submitting this form, you agree to allow Genentech, Inc., Biogen Idec Inc., and their agents to collect the information provided, to receive communications that are relevant to your condition from Genentech, Inc., Biogen Idec Inc., and their agents, and to the terms of our Privacy Policy. Please read our complete Privacy Policy at www.Rituxan.com to learn more about our use of your information.

RISE™ is brought to you by the makers of Rituxan® (rituximab).

To learn more about Rituxan, call 1-877-474-8892 or visit www.Rituxan.com.

WHAT IS RITUXAN?

Rituxan is a prescription medicine used in adults with another medicine called methotrexate to reduce the signs and symptoms of moderately to severely active rheumatoid arthritis (RA) after at least one other medicine called a tumor necrosis factor (TNF) antagonist has been used and did not work well.

People with serious infections should not receive Rituxan.

IMPORTANT SAFETY INFORMATION

- **Rituxan can cause serious side effects, some which could be life threatening. These include severe infusion reactions, tumor lysis syndrome (TLS), severe skin reactions, and progressive multifocal leukoencephalopathy (PML)**
- Other serious, potentially life-threatening side effects include hepatitis B reactivation, serious infections, heart problems, and low blood cell counts
- Common side effects include infections and infusion reactions
- Before treatment with Rituxan, tell your doctor if you have an infection, including one that will not go away or keeps coming back. If you experience any symptoms or side effects during or after treatment with Rituxan, seek immediate medical attention

For more information about side effects, please see the enclosed full Prescribing Information, including Medication Guide.

Rituxan®

Rituximab

MEDICATION GUIDE

RITUXAN® (ri-tuk'-san) (rituximab) for injection

Read this Medication Guide before you start Rituxan and before each Rituxan infusion. There may be new information. This Medication Guide does not take the place of talking to your doctor about your medical condition or your treatment.

What is the most important information I should know about Rituxan?

Rituxan can cause serious side effects that can lead to death, including:

- 1. Infusion reactions.** Infusion reactions are the most common side effect of Rituxan treatment. Serious infusion reactions can happen during your infusion or within 24 hours after your infusion of Rituxan. Your doctor should give you medicines before your infusion of Rituxan to decrease your chance of having a severe infusion reaction.

Tell your doctor or get medical help right away if you get any of these symptoms during or after an infusion of Rituxan:

- hives (red itchy welts) or rash
- itching
- swelling of your lips, tongue, throat or face
- sudden cough
- shortness of breath, difficulty breathing, or wheezing
- weakness
- dizziness or feel faint
- palpitations (feel like your heart is racing or fluttering)
- chest pain

- 2. Progressive Multifocal Leukoencephalopathy (PML).** PML is a rare, serious brain infection caused by a virus. People with weakened immune systems can get PML. Your chance of getting PML may be higher if you are treated with Rituxan alone or with other medicines that weaken your immune system. PML can result in death or severe disability. There is no known treatment, prevention, or cure for PML.

Tell your doctor right away if you have any of the following symptoms or if anyone close to you notices these symptoms:

- confusion or problems thinking
- loss of balance
- change in the way you walk or talk
- decreased strength or weakness on one side of your body
- blurred vision or loss of vision

- 3. Tumor Lysis Syndrome (TLS).** TLS is caused by the fast breakdown of cancer cells. TLS can cause you to have:

- kidney failure and the need for dialysis treatment
- abnormal heart rhythm

Your doctor may do blood tests to check you for TLS. Your doctor may give you medicine to help prevent TLS.

- 4. Severe skin and mouth reactions.** Tell your doctor or get medical help right away if you get any of these symptoms at any time during your treatment with Rituxan:

- painful sores or ulcers on your skin, lips or in your mouth
- blisters
- peeling skin
- rash
- pustules

See “**What are the possible side effects of Rituxan?**” for more information about side effects.

What is Rituxan?

Rituxan is a prescription medicine used to treat:

- **Non-Hodgkin’s Lymphoma (NHL):** alone or with other chemotherapy medicines.
- **Chronic Lymphocytic Leukemia (CLL):** with the chemotherapy medicines fludarabine and cyclophosphamide.
- **Rheumatoid Arthritis (RA):** with another prescription medicine called methotrexate, to reduce the signs and symptoms of moderate to severe active RA in adults, after treatment with at least one other medicine called a Tumor Necrosis Factor (TNF) antagonist has been used and did not work well enough.
- **Wegener’s Granulomatosis (WG) and Microscopic Polyangiitis (MPA):** with glucocorticoids, to treat WG and MPA.

People with serious infections should not receive Rituxan. It is not known if Rituxan is safe or effective in children.

What should I tell my doctor before receiving Rituxan?

Before receiving Rituxan, tell your doctor if you:

- have had a severe infusion reaction to Rituxan in the past
- have a history of heart problems, irregular heart beat or chest pain
- have lung or kidney problems
- have an infection or weakened immune system
- have or have had any severe infections including:
 - Hepatitis B virus (HBV)
 - Hepatitis C virus (HCV)
 - Cytomegalovirus (CMV)
 - Herpes simplex virus (HSV)
 - Parvovirus B19
 - Varicella zoster virus (chickenpox or shingles)
 - West Nile Virus
- have had a recent vaccination or are scheduled to receive vaccinations. You should not receive certain vaccines before or after you receive Rituxan. Tell your doctor if anyone in your household is scheduled to receive a vaccination. Some types of vaccines can spread to people with a weakened immune system, and cause serious problems
- have taken Rituxan for WG or MPA in the past
- have any other medical conditions
- are pregnant or planning to become pregnant. Rituxan may affect the white blood cell counts of your unborn baby. It is not known if Rituxan may harm your unborn baby in other ways. Women who are able to become pregnant should use effective birth control (contraception) while using Rituxan and for 12 months after you finish treatment. Talk to your doctor about effective birth control
- are breast-feeding or plan to breast-feed. It is not known if Rituxan passes into your breast milk. You and your doctor should decide the best way to feed your baby if you receive Rituxan

Tell your doctor about all the medicines you take, including prescription and nonprescription medicines, vitamins, and herbal supplements. Especially tell your doctor if you take or have taken:

- a Tumor Necrosis Factor (TNF) inhibitor medicine
- a Disease Modifying Anti-Rheumatic Drug (DMARD)

If you are not sure if your medicine is one listed above, ask your doctor or pharmacist. Know the medicines you take. Keep a list of them to show to your doctor and pharmacist when you get a new medicine. Do not take any new medicine without talking with your doctor.

How will I receive Rituxan?

- Rituxan is given by infusion through a needle placed in a vein (IV or intravenous infusion), in your arm. Talk to your doctor about how you will receive Rituxan.
- Your doctor may prescribe medicines before each infusion of Rituxan to reduce side effects of infusions such as fever and chills.
- Your doctor should do regular blood tests to check for side effects to Rituxan.

Before each Rituxan treatment, your doctor or nurse will ask you questions about your general health. Tell your doctor or nurse about any new symptoms.

What are the possible side effects of Rituxan?

Rituxan can cause serious and life-threatening side effects, including:

See “**What is the most important information I should know about Rituxan?**”

- **Hepatitis B virus (HBV) reactivation.** If you have had hepatitis B or are a carrier of hepatitis B virus, receiving Rituxan could cause the virus to become an active infection again. This may cause serious liver problems including liver failure, and death. You should not receive Rituxan if you have active hepatitis B liver disease.
- **Serious infections.** Serious infections that happen with Rituxan can lead to death. Call your doctor right away if you have any symptoms of infection:
 - fever
 - cold symptoms, such as runny nose or sore throat that do not go away
 - flu symptoms, such as cough, tiredness, and body aches
 - earache or headache
 - pain during urination
 - white patches in the mouth or throat
 - cuts, scrapes or incisions that are red, warm, swollen or painful
- **Heart problems.** Rituxan may cause chest pain and irregular heart beats which may need treatment, or your doctor may decide to stop your treatment with Rituxan.
- **Kidney problems,** especially if you are receiving Rituxan for NHL. Your doctor should do blood tests to check how well your kidneys are working.
- **Stomach and serious bowel problems that can sometimes lead to death.** Bowel problems, including blockage or tears in the bowel, can happen if you receive Rituxan with chemotherapy medicines to treat non-Hodgkin’s lymphoma. Tell your doctor right away if you have any stomach area pain during treatment with Rituxan.
- **Low blood cell counts.** Your doctor may do a blood test during treatment with Rituxan to check your blood cell counts.
 - **White blood cells.** White blood cells fight against bacterial infections. Low white blood cells can cause you to get infections, which may be serious. See “Increased risk of infections” above for a list of symptoms of infection.
 - **Red blood cells.** Red blood cells carry oxygen to your body tissues and organs.
 - **Platelets.** Platelets are blood cells that help your blood to clot.

Common side effects during Rituxan treatment include:

- infusion reactions (see “**What is the most important information I should know about Rituxan?**”)
- chills
- body aches
- low white blood cells
- infections
- tiredness

Other side effects with Rituxan include:

- aching joints during or within hours of receiving an infusion
- more frequent upper respiratory tract infection

Tell your doctor about any side effect that bothers you or that does not go away. These are not all of the possible side effects with Rituxan. For more information, ask your doctor or pharmacist.

Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

General information about Rituxan

Medicines are sometimes prescribed for purposes other than those listed in a Medication Guide. This Medication Guide provides a summary of the most important information about Rituxan. If you would like more information, talk with your doctor. You can ask your doctor for information about Rituxan that is written for healthcare professionals. For more information, go to www.Rituxan.com or call 1-877-474-8892.

What are the ingredients in Rituxan?

Active ingredient: rituximab

Inactive ingredients: sodium chloride, sodium citrate dihydrate, polysorbate 80, and water for injection.

Jointly Marketed by: Biogen Idec Inc. and Genentech USA, Inc.

Manufactured by:

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10126776

Initial US Approval: November 1997

Med Guide Revision Date: April 2011

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RRA0000444601

This Medication Guide has been approved by the U.S. Food and Drug Administration.