

# GETTING STARTED

Use this checklist to set expectations for your patient before they begin Kineret® (anakinra)

## Review the basics

- ◇ Review patient's prescribed dose
- ◇ Remind patient to inject Kineret around the same time every day<sup>1</sup>
- ◇ Review Kineret storage requirements
- ◇ Raise awareness of the [potential side effects](#) of Kineret

## Teach patient how to inject Kineret

- ◇ Supplies needed: Kineret syringe, alcohol wipe, dry gauze, puncture-resistant sharps disposal container<sup>1</sup>
- ◇ Let Kineret warm to room temperature for 30 minutes before injecting<sup>1</sup>
- ◇ Walk patient through the steps provided in their demo kit or in the downloadable brochure on [KineretRX.com](http://KineretRX.com), [An Introduction to Kineret](#)

## Talk to your patient about injection site reactions

Explain to your patient that they may get raised red patches at the injection site. Walk them through these tips:

- ◇ Cool the site with a cold compress or ice pack for a few minutes, both before and after the injection<sup>2</sup>
- ◇ Don't skip the warm-up step of bringing Kineret to room temperature<sup>1</sup>
- ◇ Apply hydrocortisone or an antihistamine cream to the injection site<sup>2</sup>
- ◇ Rotate sites to avoid soreness.<sup>1</sup> A diary or the [Kineret Injection Tracker](#) can help keep track of sites
- ◇ Don't inject into skin that is red, bruised, tender, or hard<sup>1</sup>

## Review resources

Encourage your patient to access the additional support available to them when they begin treatment. Let them know when they should call your office with questions.

- ◇ [KineretRX.com](http://KineretRX.com)
- ◇ The downloadable patient brochure, [An Introduction to Kineret](#)
- ◇ Kineret Welcome Kit
- ◇ [KINERET® On TRACK™](#)
- ◇ Injection video on [KineretRX.com](http://KineretRX.com)

PATIENT NAME

HCP NAME

DATE

### INDICATION

KINERET® (anakinra) is an interleukin-1 receptor antagonist indicated for:

#### Rheumatoid Arthritis (RA)

- Reduction in signs and symptoms and slowing the progression of structural damage in moderately to severely active rheumatoid arthritis, in patients 18 years of age or older who have failed 1 or more disease-modifying antirheumatic drugs (DMARDs)

### IMPORTANT SAFETY INFORMATION

- KINERET is contraindicated in patients with known hypersensitivity to *E. coli*-derived proteins, KINERET, or to any components of the product
- In RA, discontinue use if serious infection develops. In KINERET-treated NOMID or DIRA patients, the risk of a disease flare when discontinuing KINERET treatment should be weighed against the potential risk of continued treatment. Do not initiate KINERET in patients with active infections

Please see additional Important Safety Information on page 2.

[Click here for full Prescribing Information](#) for KINERET, including Patient Information.

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- Use in combination with Tumor Necrosis Factor (TNF)-blocking agents is not recommended
- Hypersensitivity reactions, including anaphylactic reactions and angioedema, have been reported. Patients with DIRA may have an increased risk of allergic reactions, particularly in the first several weeks after starting KINERET treatment
- The impact of treatment with KINERET on active and/or chronic infections and the development of malignancies is not known
- Live vaccines should not be given concurrently with KINERET
- Neutrophil counts should be assessed prior to initiating KINERET treatment, and while receiving KINERET, monthly for 3 months, and thereafter quarterly for a period up to 1 year
- **RA:** The most common adverse reactions (incidence  $\geq 5\%$ ) are injection site reaction, worsening of rheumatoid arthritis, upper respiratory tract infection, headache, nausea, diarrhea, sinusitis, arthralgia, flu-like symptoms, and abdominal pain
- **NOMID:** The most common AEs during the first 6 months of treatment (incidence  $> 10\%$ ) are injection site reaction, headache, vomiting, arthralgia, pyrexia, and nasopharyngitis
- **DIRA:** The most common AEs are upper respiratory tract infections, rash, pyrexia, influenza-like illness, and gastroenteritis
- A higher rate of serious infections has been observed in RA patients treated with concurrent KINERET and etanercept therapy than in patients treated with etanercept alone. Use of KINERET in combination with TNF-blocking agents is not recommended
- KINERET is indicated for use in pediatric patients with NOMID and DIRA
- Because there is a higher incidence of infections in the elderly population in general, caution should be used in treating the elderly
- KINERET is known to be substantially excreted by the kidney, and the risk of toxic reactions to this drug may be greater in patients with impaired renal function

[Click here for full Prescribing Information](#) for KINERET, including Patient Information.

**REFERENCES:** **1.** Kineret [Prescribing Information]. Stockholm, Sweden: Swedish Orphan Biovitrum AB (publ). **2.** Kaiser C, Knight A, Nordström D, et al. Injection-site reactions upon Kineret (anakinra) administration: experiences and explanations. *Rheumatol Int.* 2012;32(2):295-299. doi:10.1007/s00296-011-2096-3