



Initial pre-treatment workup

Evidence Based Medicine

Official recommendations

Expert opinion

This checklist is designed to help you conduct a systematic search for the main contraindications to tocilizumab and to determine whether special precautions are in order. It does not include the evaluations needed to assess the activity and severity of the disease treated with tocilizumab.

When interviewing the patient, ask about a history of any of the following:

- Severe, chronic, and/or recurrent infections (bacterial or viral)
- Tuberculosis (contact of the patient or family with tuberculosis cases)
- Cancer
- Diverticulitis

Determine whether the patient is taking any drugs metabolized by the CYP450 enzymes, whose dosage may need to be adjusted upon tocilizumab initiation or discontinuation. The most widely used medications metabolised by CYP450 are listed in Table 1. The full list is available online at <http://medicine.iupui.edu/clinpharm/ddis>.

When conducting the physical examination, check the absence of the following:

- Fever
- Active infection
- Lymphadenopathy
- Signs suggesting a malignant disease
- Hypertension
- Abdominal pain

Vaccinations:

- Updates should be offered. The interval between vaccine administration and tocilizumab initiation should be at least 2 weeks; with live vaccines, the ideal interval is 4 weeks
- The pneumococcal vaccine should be recommended

Investigations that should be obtained routinely at the first evaluation:

- Blood cell counts
- Transaminases
- Serum lipid profile including total cholesterol, LDL-cholesterol, HDL-cholesterol, and triglycerides
- Serum protein electrophoresis
- Chest radiograph
- 5 IU intradermal tuberculin test (Tubertest®) or QuantiFERON Gold® *in vitro* test or T-Spot-TB® (under evaluation in France)
 - If prophylactic anti-tuberculous treatment was given based on the results of previous screening tests, further screening is unnecessary
 - If previous screening tests performed more than 1 year earlier were negative, they should be repeated

- In patients who have never had screening tests, AFSSAPS recommendations about screening for latent tuberculosis should be followed
- Serological tests for hepatitis B and C, even if performed previously
- Serological test for HIV infection, with the consent of the patient; if test results obtained within the last 5 years are available, further testing is unnecessary unless the patient has risk factors for HIV infection
- Detection of risk factors for malignancy and early malignancy detection in accordance with good practice guidelines
- and immunoglobulin assays by weight in patients previously treated with rituximab.

Contraindications and precautions

Contraindications to tocilizumab therapy:

- Hypersensitivity to tocilizumab or to any of the excipients
- Severe uncontrolled infections such as sepsis and opportunistic infections.

Diseases that warrant special precautions when using tocilizumab:

- Diverticulitis
- Active liver disease and liver failure
- Neutropenia and thrombocytopenia
- Dyslipidaemia
- History of cardiovascular disease
- Demyelinating disease
- Malignancy within the last 5 years, other than non-melanoma skin cancer that was removed completely with disease-free margins