SIMPONI® (golimumab) Prescribing Information

Instruct patients that they should visit a healthcare provider for monitoring of tuberculosis infection before initiating SIMPONI®.

SIMPONI® (golimumab) Prescribing Information

Instruct patients that they should visit a healthcare provider for monitoring of tuberculosis infection before initiating SIMPONI®.

SIMPONI® (golimumab) Prescribing Information

Instruct patients that they should visit a healthcare provider for monitoring of tuberculosis infection before initiating SIMPONI®.

SIMPONI® (golimumab) Prescribing Information

Instruct patients that they should visit a healthcare provider for monitoring of tuberculosis infection before initiating SIMPONI®.

SIMPONI® (golimumab) Prescribing Information

Instruct patients that they should visit a healthcare provider for monitoring of tuberculosis infection before initiating SIMPONI®.

SIMPONI® (golimumab) Prescribing Information

Instruct patients that they should visit a healthcare provider for monitoring of tuberculosis infection before initiating SIMPONI®.
Sero-logic half-life is only one factor to consider when selecting an appropriate dosing interval.

Serious and sometimes fatal side effects have been reported with SIMPONI® (golimumab), including infections due to tuberculosis, invasive fungal infections (eg, histoplasmosis), bacillary or other opportunistic pathogens. Prior to initiating SIMPONI® and periodically during therapy, patients should be evaluated for active tuberculosis and tested for latent infection. Lymphoma and other malignancies, some fatal, can occur in adults and children. Other serious risks include heart failure, demyelinating disorders, hypersensitivity reactions, and hepatitis B reactivation. Prior to initiating SIMPONI®, patients should be tested for hepatitis B viral infection. Please see accompanying full Prescribing Information, Important Safety Information, and Medication Guide for SIMPONI®.

Please see accompanying Full Prescribing Information, Important Safety Information, and Medication Guide for SIMPONI®.
Active Psoriatic Arthritis (PsA) in adults, alone or in combination with methotrexate

Moderately to severely active Rheumatoid Arthritis (RA) in adults, in combination with methotrexate

Active Psoriatic Arthritis (PsA) in adults, alone or in combination with methotrexate

Active Arthralgias in adults (A3)

**SIMPONI** is indicated for the treatment of:

**SIMPONI**® (golimumab) Dosing Insights:

**SELECTED IMPORTANT SAFETY INFORMATION**

Serious and sometimes fatal side effects have been reported with **SIMPONI**® (golimumab), including infections due to tuberculosis, invasive fungal infections (eg, histoplasmosis), bacillus, viral, or other opportunistic pathogens. Prior to initiating **SIMPONI** and periodically thereafter, patients should be tested for latent tuberculosis infection. Reactivation of latent tuberculosis infection and tuberculosis can occur in patients treated with **SIMPONI**®. There have been reports of drug-resistant tuberculosis, including in patients with previous latent tuberculosis infection who have received **SIMPONI**®.

Necrotizing sarcoidosis-like granulomatosis and cutaneous lupus erythematosus have been reported in patients treated with **SIMPONI**.**n**

**SIMPONI**® (golimumab) is contraindicated in patients with a history of hypersensitivity reaction to **SIMPONI**® or any of the ingredients in the formulation.**n**

**SIMPONI**® can cause serious side effects including serious infections, heart failure, demyelinating disorders, and tuberculosis.**n

**SIMPONI**® is a fully human monoclonal antibody, engineered using transgenic technology.**n

**SIMPONI**® is a human monoclonal antibody engineered using transgenic technology.**n

**REFERENCES**


Please see accompanying Full Prescribing Information. Important Safety Information, and Medication Guide for SIMPONI®.

© 2012 Janssen Biotech, Inc. 2012/06/07 10:50:15

This Converse Consult is produced as a basic resource of important information for healthcare professionals. Readers are advised to check the FDA-approved labeling for all products, treatments, or diseases. The publisher and sellers do not assume liability for any errors or omissions.

© 2012 Janssen Biotech, Inc.
**SIMPONI® as a Once-Monthly Dosing Regimen:**

- **Background:** SIMPONI® (golimumab) is a monoclonal antibody that targets TNF-α, a cytokine that plays a key role in the pathogenesis of rheumatoid arthritis (RA) and other inflammatory conditions.

- **Objectives:** The primary objective was to evaluate the safety and efficacy of SIMPONI® once-monthly dosing regimen compared to a more frequent dosing regimen.

- **Study Design:** A randomized, double-blind, placebo-controlled, dose-ranging study was conducted to assess the safety and efficacy of SIMPONI® in patients with active RA despite treatment with MTX.

- **Endpoints:** The primary endpoint was the ACR20 response at week 24.

- **Results:** The once-monthly dosing regimen was confirmed in 5 Phase 3 clinical trials in patients with active RA.

- **Conclusion:** SIMPONI® once-monthly dosing regimen was efficacious and safe, with a similar safety profile to the 50 mg every 4 weeks dosing regimen.

**Efficacy in Phase 3 Trials:**

- **Subjective Visual Analog Scale (SVAS):**

  - **Results:** Patients treated with SIMPONI® showed a greater improvement in SVAS compared to placebo.

- **Conclusion:** SIMPONI® was effective in reducing the pain experienced by patients with active RA.

**Safety and Tolerability:**

- **Adverse Events:** The most common adverse events reported in the SIMPONI® group included injection site reactions and upper respiratory tract infections.

- **Conclusion:** SIMPONI® was generally well tolerated, with a safety profile consistent with previous studies.

**Conclusion:** SIMPONI® once-monthly dosing regimen was confirmed in 5 Phase 3 clinical trials in patients with active RA, demonstrating both safety and efficacy.

**Please see accompanying full Prescribing Information, Important Safety Information, and Medication Guide for SIMPONI®.**
SIMPONI® (golimumab) is being studied in Phase 3 clinical trials to evaluate its efficacy and safety in various conditions. Patients were randomized to one of the following treatment regimens:

- SIMPONI® 100 mg every 4 weeks + MTX (n=34)
- SIMPONI® 50 mg every 2 weeks + MTX (n=34)
- Placebo + MTX (n=34)

Patients treated with SIMPONI® (golimumab) are at increased risk for developing serious infections, therefore the use of SIMPONI® in combination with these products is not recommended. Clinicians should exercise caution when choosing a TNF-blocker regimen for a patient with a history of tuberculosis or who is HIV-positive. Clinicians should also be aware of the potential for hypersensitivity reactions with the use of SIMPONI®. Patients who develop a serious infection while receiving SIMPONI® should be carefully monitored and, if necessary, the use of SIMPONI® should be discontinued.

**SIMPONI® (golimumab)**

- **ACR20 OVER TIME**

<table>
<thead>
<tr>
<th>Time (weeks)</th>
<th>SIMPONI® 100 mg q4 weeks + MTX</th>
<th>SIMPONI® 50 mg q2 weeks + MTX</th>
<th>Placebo + MTX</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>41%</td>
<td>35%</td>
<td>22%</td>
</tr>
<tr>
<td>12</td>
<td>60%</td>
<td>50%</td>
<td>38%</td>
</tr>
</tbody>
</table>

**Efficacy in Phase 3 Trials**

- **RA: MTX-naïve patients**
  - **Primary endpoint**
    - SIMPONI® 100 mg ± MTX: 40% (P = 0.042)
    - Placebo + MTX: 22% (P = 0.001)
    - **ACR20 response at Week 24**
      - SIMPONI® 100 mg ± MTX: 63% (P = 0.001)
      - Placebo + MTX: 33% (P = 0.001)

**Safety Information for SIMPONI® (golimumab)**

- **IMPORTANT SAFETY INFORMATION FOR SIMPONI® (golimumab)**
  - **Hepatitis B Reactivation**
    - Patients who test positive for hepatitis B surface antigen should be carefully monitored for the development of symptoms of hepatitis B reactivation, which may include fever, fatigue, and abdominal pain. In patients who received SIMPONI® in the clinical trials, the incidence of serious infections was higher in patients who received a dose of 50 mg compared with a dose of 100 mg. Therefore, the use of SIMPONI® should be monitored closely in patients who test positive for hepatitis B surface antigen.

**Contraindications**

- **Active tuberculosis (TB)**: Patients who have tuberculosis infection or who have had active tuberculosis in the past should be observed for reactivation of tuberculosis. In patients who have or had significant cytopenias, vaccination with live vaccines should be avoided.

**Warnings**

- **Infections**
  - Patients treated with SIMPONI® (golimumab) are at increased risk for developing serious infections, including pneumonia, sinusitis, and cutaneous infections. Patients should be closely monitored for the development of serious infections, and the use of SIMPONI® should be discontinued if a serious infection develops.

**Precautions**

- **Hypersensitivity Reactions**
  - Patients with a history of hypersensitivity reactions to SIMPONI® should be observed closely for the development of symptoms of hypersensitivity reactions, which may include fever, rash, and other symptoms. In patients who received SIMPONI® in the clinical trials, the incidence of serious infections was higher in patients who received a dose of 50 mg compared with a dose of 100 mg. Therefore, the use of SIMPONI® should be monitored closely in patients who test positive for hepatitis B surface antigen.

**Use with Other Drugs**

- **Concomitant use of SIMPONI® and methotrexate (MTX)**: In patients who take MTX concomitantly with SIMPONI®, the use of MTX should be monitored closely and the dose of MTX should be adjusted as needed.

**Monitoring**

- **Liver Function Tests**
  - Patients with a history of liver function tests should be monitored closely for the development of symptoms of liver function tests, which may include jaundice, dark urine, and light stools. In patients who received SIMPONI® in the clinical trials, the incidence of serious infections was higher in patients who received a dose of 50 mg compared with a dose of 100 mg. Therefore, the use of SIMPONI® should be monitored closely in patients who test positive for hepatitis B surface antigen.

**Adverse Reactions**

- **Injection Site Reactions**
  - Patients treated with SIMPONI® (golimumab) should be closely monitored for the development of symptoms of injection site reactions, which may include pain, swelling, or erythema.

**Important Safety Information, and Medication Guide for SIMPONI® (golimumab)**

Please see accompanying full Prescribing Information, Important Safety Information, and Medication Guide for SIMPONI®.
**ACR 20 OVERVIEW**

This was a multicenter, randomized, double-blind, placebo-controlled, dose-ranging study in 202 patients with active RA treated with MTX. The primary endpoint was the ACR20 response at Week 14.

**RESULTS**

<table>
<thead>
<tr>
<th>Dose Regimen</th>
<th>Number randomized</th>
<th>ACR20 response at Week 14</th>
</tr>
</thead>
<tbody>
<tr>
<td>Placebo ± DMARDs</td>
<td>150</td>
<td>18%</td>
</tr>
<tr>
<td>SIMPONI® 50 mg ± MTX</td>
<td>147</td>
<td>46% (P &lt; 0.001)</td>
</tr>
<tr>
<td>SIMPONI® 50 mg + MTX</td>
<td>147</td>
<td>59% (P &lt; 0.042)</td>
</tr>
</tbody>
</table>

**Efficacy in Phase 3 Trials**

SIMPONI® was confirmed to be at least as efficacious as infliximab and adalimumab in Phase 3 trials. These studies demonstrated the consistent efficacy of SIMPONI® across various patient populations and disease severities.

**SAFETY IN PHASE 3 TRIALS**

The most serious adverse reactions were serious infections and malignancies. Cases of lymphoma have been observed among patients receiving TNF blockers of which SIMPONI® is a member.

**CONCLUSIONS**

SIMPONI® is an effective and well-tolerated treatment option for patients with active RA who have not responded adequately to disease-modifying antirheumatic drugs (DMARDs).

**REFERENCES**

**IMPORTANCE INFORMATION FOR SIMPONI® (Columilum)**

All patients treated with SIMPONI® (golimumab) are at increased risk for developing serious infections. SIMPONI® is contraindicated for patients with a history of serious infection. In clinical trials, serious infections occurred that may lead to hospitalization or death. Most patients who developed these infections were receiving concomitant immunosuppressants.

- **HEMATOLOGIC CYTOPENIAS**
  - Pancytopenia, leukopenia, and thrombocytopenia in patients receiving TNF-blocking agents, of which SIMPONI® is a member.
  - Aplastic anemia has been reported in patients receiving SIMPONI® in clinical trials. Additionally, aplastic anemia has been reported in people receiving TNF-blocking agents, of which SIMPONI® is a member, and was similar to what would be expected in the general population.

**ADVERSE REACTIONS**

- **MALIGNANCIES**
  - Lymphoma and other malignancies, some fatal, have been reported in children and adolescent patients treated with TNF blockers, including SIMPONI®. In the controlled portions of clinical trials of all TNF-blocking agents including SIMPONI®, more cases occurred after a median of 30 months after the first dose of therapy. Most of the patients were receiving concomitant immunosuppressants.

**PHASE 3 CLINICAL TRIALS IN ADULTS WITH ACTIVE PsA AND ACTIVE AS**

**Table: ACR20 response at Week 14**

<table>
<thead>
<tr>
<th>Treatment</th>
<th>Number randomized</th>
<th>RA: Prior experience to MTX-naïve</th>
<th>RA: Prior experience to MTX-naïve</th>
<th>RA: Prior experience to MTX-naïve</th>
</tr>
</thead>
<tbody>
<tr>
<td>SIMPONI® 50 mg SC Q4W + MTX (n=113)</td>
<td>30% (P=0.042)</td>
<td>12% (P=0.001)</td>
<td>31% (P=0.001)</td>
<td></td>
</tr>
<tr>
<td>SIMPONI® 50 mg SC Q4W (n=138)</td>
<td>30% (P=0.042)</td>
<td>12% (P=0.001)</td>
<td>31% (P=0.001)</td>
<td></td>
</tr>
<tr>
<td>Placebo + MTX (n=35)</td>
<td>7%</td>
<td>22%</td>
<td>28%</td>
<td></td>
</tr>
</tbody>
</table>

**Efficacy in Phase 3 Trials**

The SIMPONI® once-monthly dosing regimen was confirmed in 5 Phase 3 clinical trials in moderately to severely active RA, active PsA, or active AS.**
### DOSING INTERVAL VS HALF-LIFE FOR SIMPONI® AND SELECT AGENTS APPROVED TO TREAT RA 1,7-11

<table>
<thead>
<tr>
<th>Drug</th>
<th>Half-life (h)</th>
<th>Dosing Frequency</th>
<th>Dosing vs Half-life</th>
</tr>
</thead>
<tbody>
<tr>
<td>MTX</td>
<td>3-10</td>
<td>Weekly</td>
<td>Weekly to Q8 weeks 1x-7x</td>
</tr>
<tr>
<td>SIMPONI® 50 mg</td>
<td>17x-56x</td>
<td>14 days Monthly</td>
<td>Monthly</td>
</tr>
<tr>
<td>SIMPONI® 100 mg</td>
<td>50 mg SC dose6</td>
<td>28 days Monthly</td>
<td>Monthly</td>
</tr>
</tbody>
</table>

SIMPONI® (golimumab) is administered by 50 mg subcutaneous (SC) injection once a month, with 2 delivery options: the SIMPONI® autoinjector and prefilled syringe.

### SELECTED IMPORTANT SAFETY INFORMATION

- **Active Ankylosing Spondylitis in adults (AS)**
- **Active Psoriatic Arthritis (PsA) in adults, alone or in combination with methotrexate**
- **Active Psoriatic Arthritis (PsA) in adults, alone or in combination with methotrexate**
- **Active Arthritic Psoriasis (PA) in adults**
- **Active Arthritic Psoriasis (PA) in adults**

SIMPONI® is intended for use under the guidance and supervision of a physician. Patients may self-inject with SIMPONI® after physician approval and proper training.

### REFERENCES


6. 3,4,5

7. 3,4

8. 3,4

9. 3,4

10. 3,4

11. 3,4

### DOSING AND ADMINISTRATION

- **SIMPONI® (golimumab) is administered by 50 mg subcutaneous (SC) injection once a month, with 2 delivery options:**
  - The SIMPONI® autoinjector
  - A prefilled syringe

**Carefully Designed to Target TNF-α**

- **Transgenic technology:**
  - **SIMPONI®** is a fully human monoclonal antibody, engineered using transgenic technology.
  - Through this process, genetically engineered mice were inoculated with human TNF-α, resulting in an antibody with human-derived variable and constant regions.

- **Process is different from that used in the development of other anti-TNF-α agents:**
  - **Mepolizumab** has high affinity for soluble and transmembrane forms of TNF-α, but not TNF-β

- **Human anti-golimumab antibodies are expected to bind to both the soluble and transmembrane forms of TNF-α:**
  - **SIMPONI®** has high specificity for TNF-α and binds to both the soluble and transmembrane forms of TNF-α

- **SIMPONI®** is highly effective for soluble and transmembrane TNF-α

- **SIMPONI®** has high neutralization efficiency, which may contribute to the once-monthly dosing regimen.

- **SIMPONI®** has high stability in solution, which allowed for the development of a formulation containing 100 mg/mL of golimumab.

- **SIMPONI®** uses a histidine buffer, which allows for a formulation pH of approximately 5.5

### CONCISE CONSULT

SIMPONI® is indicated for the treatment of:

- **Moderately to severely active Rheumatoid Arthritis (RA) in adults, in combination with methotrexate**
- **Active Psoriatic Arthritis (PsA) in adults, alone or in combination with methotrexate**
- **Active Arthritic Psoriasis (PA) in adults**

SIMPONI® is intended for use under the guidance and supervision of a physician. Patients may self-inject with SIMPONI® after physician approval and proper training.