

Sarilumab for moderate to severe rheumatoid arthritis

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Sarilumab (Kevzara), taken with a drug called methotrexate, is recommended as a possible treatment for severe active rheumatoid arthritis in adults, only if:

- the disease has not responded to conventional disease-modifying antirheumatic drugs (DMARDs) or
- the disease has not responded to other DMARDs, including at least 1 TNF-alpha inhibitor, or the person cannot have them, and they cannot have rituximab or
- the disease has not responded to both rituximab and at least 1 TNF-alpha inhibitor.

Sarilumab can be used alone if people can't have methotrexate.

Treatment should be stopped after 6 months if the rheumatoid arthritis is not responding well enough.

If you are not eligible for treatment, you should be able to continue taking sarilumab until you and your doctor decide when best to stop.

Is this treatment right for me?

Your healthcare professionals should give you clear information, talk with you about your options and listen carefully to your views and concerns. Your family can be involved too, if you wish. Read more about <u>making decisions about your care</u>.

Questions to think about

- How well does it work compared with other treatments?
- What are the risks or side effects? How likely are they?
- How will the treatment affect my day-to-day life?
- What happens if the treatment does not work?
- What happens if I do not want to have treatment? Are there other treatments available?

Information and support

<u>NHS Choices</u> may be a good place to find out more.

These organisations can give you advice and support:

- National Rheumatoid Arthritis Society (NRAS), 0800 298 7650
- Arthritis Action, 020 3781 7120
- <u>Versus Arthritis</u>, 0800 520 0520

NICE is not responsible for the quality or accuracy of any information or advice provided by these organisations.

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