

PATIENT FACT SHEET

Abatacept (Orencia)



Abatacept (Orencia) is used to reduce inflammatory symptoms such as swelling, pain and stiffness. In the long term, it is expected to stop joint deformities to maintain range of motion. Abatacept can be used as first-line therapy, but it's often prescribed to patients with moderate to severe rheumatoid arthritis who have not responded to one or more DMARDs, such as methotrexate. DMARDs are generally tried first. Abatacept may be used alone or in combination with

DMARDs, which makes it more potent, but not with other biologic drugs, such as TNF inhibitors. Its use in other diseases is still being studied.

Unlike some other biologic drugs, abatacept does not block inflammatory proteins like TNF-alpha antagonists. Abatacept attaches to the surface of inflammatory cells and blocks communication between these cells. By blocking this communication, abatacept lessens inflammation.



TAKE IT

Abatacept is available either in infusible or injectable form. The infusion is given intravenously [through a needle placed in a vein] at 0, 2 and 4 weeks, then monthly thereafter in your doctor's office or at an infusion center. The dosage is adjusted according to the patient's weight. It takes 30 minutes to receive the whole infusion.

The injectable form of abatacept is injected under the skin at home once a week. It can be administered by the patient or another member of the home. Studies have shown this formulation to be as safe and effective as the infusion.

Although some patients feel relief within the first month of treatment, usually three months of continuous treatment are needed to get the full effect of the medication.



The most common side effects are headaches, common colds, sore throat and nausea. Rarely, patients may develop infusion reactions while receiving abatacept, including a severe allergic reaction, hives, shortness of breath and low blood pressure. Nurses will monitor you and your vital signs throughout the infusion. Premedications, such as Tylenol or Benadryl, can be used preventively and can be discussed with your doctor.

The most important side effect is the risk of developing a serious infection, including pneumonia, tuberculosis and others. Patients are tested for possible tuberculosis with

a skin test or blood test before starting this drug. Abatacept should not be combined with another biologic drug, because the combination can increase the risk of contracting a serious infection.

Using two biologic drugs, such as TNF-alpha blockers and abatacept, at the same time carries high risk of developing serious infections. Patients with diabetes mellitus should be aware that sugars in the infusion form of abatacept may cause false high blood sugar levels. You should discuss with your physician how to properly monitor this.



Patients who have been exposed to people with suspected serious infections, such as tuberculosis, should notify their doctors before taking abatacept.

All patients should be tested for tuberculosis before starting abatacept. Other laboratory tests may be required as well. Patients displaying symptoms of an infection, including fever, cough or others should notify their doctor. Patients should not receive live vaccines while receiving abatacept and should consult their rheumatologist before receiving a live vaccine afterwards. Risks in pregnant women are still being studied.

Reviewed March 2019 by Suleman Bhana, MD, and reviewed by the American College of Rheumatology Communications and Marketing. This information is provided for general education only. Individuals should consult a qualified health care provider for professional medical advice, diagnosis and treatment of a medical or health condition.

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