Initial pre-treatment assessment

This checklist is designed to help you conduct a systematic search for contraindications to abatacept therapy. It does not include evaluations of disease activity and severity of RA to be treated with abatacept.

**When interviewing the patient,** check the absence of the following:
- A history of tuberculosis in the patient or family or contact with a tuberculosis patient
- A history of severe, chronic, and/or recurrent infections (bacterial, viral)
- A history of solid cancer
- A history of chronic obstructive pulmonary disease (COPD)
- A history of autoimmune disease

**When conducting the physical examination of the patient,** check the absence of the following:
- Fever
- Active infection
- Lymphadenopathy
- Evidence suggesting a malignancy
- Hypertension

**Vaccinations:**
- Boosters should be offered as appropriate, if possible at least 2 weeks before starting abatacept therapy
- Administration of the pneumococcal vaccine should be recommended

**Investigations that should be obtained routinely at the first evaluation:**
- Blood cell counts
- Serum protein electrophoresis
- Chest radiograph
- 5-IU tuberculin skin test or *in vitro* interferon gamma release assay (IGRA)
  - In patients with a history of prophylactic antituberculosis treatment given because a previous intradermal test showed an induration larger than 5 mm in diameter, the intradermal test does not need to be repeated.
  - In patients who had a negative intradermal skin test when screened at least 1 year earlier, the test should be repeated.
  - In patients who have never been screened, national guidelines for detecting latent tuberculosis should be followed.
- Hepatitis B and C serology and, and HIV serology following patient consent. If tests done within the last 5 years are available, re-testing is unnecessary unless the patient has risk factors or a history of a high-risk medical procedure in the interval.
Standard practice should be followed regarding the detection of cancer.

- Screening for colorectal cancer
- Individual screening for prostate cancer
- Screening mammography for breast cancer

The following investigations are recommended

- In patients previously treated with rituximab: lymphocyte typing and immunoglobulin assay by weight

Contraindications to abatacept therapy

- Hypersensitivity to abatacept or to any of its excipients
- Severe uncontrolled infection such as sepsis or opportunistic infection

Warnings when using abatacept

- Past History of recurrent or chronic infection or risk factors for infection
- Abatacept therapy should be stopped in case of severe infection
- History of tuberculosis or evidence of tuberculosis
- History of viral hepatitis
- Recent or scheduled vaccination
- Diabetes mellitus: abatacept therapy can interfere with blood glucose measurements by some devices (refer to the Summary of Product Characteristics)
- Monoclonal gammopathy of undetermined significance (MGUS) (refer to the fact sheet entitled “Lymphomas and other hematological diseases”)
- Malignancy in the past 5 years other than skin cancer (except for melanoma and severe squamous cell carcinoma) removed completely with tumor-free margins