



Clearly for her

Clearer skin that lasts, so that she can plan ahead











CIMZIA® dosing for patients with moderate to severe plaque psoriasis

Recommended dose is 400 mg every 2 weeks

Week 0 Every 2 Weeks 2 injections (2 x 200 mg) 2 injections (2 x 200 mg) 400 mg 400 mg

Each prefilled syringe and autoinjector pen contains 200 mg per 1 mL





▼ Educational support

✓ Injection training

offers flexible support for your patients' needs, including:

✓ Pharmacy services

✓ Ongoing adherence support





Administration designed with patients in mind

CIMZIA® gives your patients the option to choose their preferred administration method





Each prefilled syringe and autoinjector pen contains 200 mg per 1 mL



UCBCares™: Your patient's treatment journey, simplified. Call us at 1-800-908-5555.

Indications and Clinical Use:

Geriatrics (≥ 65 years of age): Specific clinical studies have not been performed in elderly subjects.

Pediatrics (< 18 years of age): Safety and efficacy of CIMZIA® in pediatric patients have not been established.

Contraindications:

- Hypersensitivity to CIMZIA® (certolizumab pegol) or any of its components
- · Active tuberculosis or other severe infections such as sepsis, abscesses and opportunistic infections
- · Moderate to severe heart failure (NYHA Class III/IV)

Most Serious Warnings and Precautions:

Serious infections: serious infections, sepsis, tuberculosis (including miliary disseminated and extrapulmonary disease), invasive fungal infections (such as histoplasmosis) and other opportunistic infections, some of which have been fatal, have been reported in patients receiving TNF blocking agents including CIMZIA*. Many of these occurred in patients on concomitant immunosuppressive therapy that, in addition to their underlying disease, could predispose them to infections. CIMZIA* should not be given to patients with a clinically important infection including chronic or localized infections. Physicians should exercise caution when considering the use of CIMZIA* in patients with a history of recurring infection. Patients should be monitored for signs and symptoms of infection while on and after treatment with CIMZIA*.

Any new infection that develops while on CIMZIA® or after recent treatment, should be closely monitored. CIMZIA® should be discontinued if a patient develops a serious infection.

Malignancy: lymphoma and other malignancies, some fatal, have been reported in children and adolescent patients treated with TNF blockers, of which CIMZIA® is a member. CIMZIA® is not indicated for use in pediatric patients.

Other Relevant Warnings and Precautions:

- · Worsening congestive heart failure and new onset CHF
- · Hepatitis B virus reactivation
- Hematological reactions: pancytopenia (including aplastic anemia); cytopenia (leukopenia, pancytopenia, thrombocytopenia)
- Neurologic reactions (new onset or exacerbation of CNS demyelinating disease, including multiple sclerosis and PNS demyelinating disease, including Guillain-Barré syndrome)
- · Use in combination with other biologic medicines is not recommended
- · Use caution when switching between biologic DMARDs and in surgery
- · A patient who requires surgery while on CIMZIA® should be closely monitored for infections, and appropriate actions should be taken
- Hypersensitivity
- · Latex sensitivity
- · Formation of autoantibodies
- · Administration of live or live-attenuated vaccines is not recommended
- Use in patients with severe immunosuppression
- May cause erroneously elevated activated partial thromboplastin time (aPTT) assay results in patients without coagulation abnormalities
- Use in women of childbearing potential, pregnant women and nursing women

For more information:

Consult the product monograph at https://www.ucb-canada.ca/en/Our-Medicines/overview for contraindications, warnings, precautions, adverse reactions, interactions, dosing, and conditions of clinical use. The product monograph is also available through Medical Information Services at 1-866-709-8444

Reference: CIMZIA® Product Monograph, UCB Canada Inc., December 2018.



