TELAPREVIR

Treatment for Hepatitis C A Patient's Workbook

What You Need to Know When Taking Triple Therapy with Telaprevir (Incivek[™])







CONTACT INFORMATION

| Prescriber contact: |
|--|
| Contact for questions about medications: |
| Number to call for refills: |
| Order your medications 2 weeks ahead of time or as far in advance as possible. |
| Appointments: |
| Other important contacts: |

CALL YOUR PROVIDER IF:

Your temperature is above 101 F. for more than 24-48 hours.
You miss more than one day of the drug telaprevir.
You miss more than 1-2 days of ribavirin.
You miss any dose of pegylated interferon.

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What is Triple Therapy?

Until recently, the standard treatment for chronic hepatitis C was a combination of peginterferon and ribavirin.

In May 2011 the Food and Drug Administration approved two new drugs for the treatment of hepatitis C: **boceprevir** (brand name Victrelis[™]) and **telaprevir** (brand name Incivek[™]). These drugs must be taken with peginterferon and ribavirin. Boceprevir and telaprevir cannot be used together; a patient would take one or the other.

This combination of three drugs—peginterferon, ribavirin, and EITHER boceprevir or telaprevir—is called **triple therapy**. Triple therapy is used only in patients with a strain of hepatitis C called genotype I, the most common strain in the U.S.

This booklet is for people taking **telaprevir**.



RIBAVIRIN

Ribavirin is a medicine that fights certain viruses. Ribavirin works against hepatitis C when taken with peginterferon and telaprevir.



PEGINTERFERON

Interferon is a protein that your body makes to fight infections. When used as a treatment, interferon increases the amount of interferon in your body. Long-acting interferon, given as a shot, once a week, is called pegylated interferon, or peginterferon.



TELAPREVIR

Telaprevir directly attacks the hepatitis C virus to keep it from growing. It can't get rid of the virus if just taken by itself, but it greatly increases the chances of getting rid of the virus (a cure) when used together with peginterferon and ribavirin.

Preparing for Treatment with Telaprevir

- Before starting hepatitis C medications, you should check with your regular doctor
 and your hepatitis doctor on any existing problems, such as diabetes mellitus, gout,
 hypertension, COPD, thyroid disorder, depression, coronary artery disease, skin disease
 and high cholesterol. Your doctors may recommend you have other tests done—an
 eye exam, for example, or an X ray--to be sure you are in the best condition possible
 before starting treatment. Tell your doctor if you are taking any herbal supplements.
- Be sure you and your sexual partner are using 2 forms of contraception—such as
 condoms plus IUD or condoms plus a diaphragm. Birth control pills may not be as
 effective when they are used with the new medicines. Ribavirin can cause serious
 birth defects, and you and your partner should be extremely cautious not to become
 pregnant while either of you is taking treatment and for 6 months after treatment ends.
- Expect that you may be extremely tired and run down while taking treatment.
 Consider discussing with family, friends and coworkers ahead of time.
- Sleep well, exercise regularly, eat a healthy diet, and drink plenty of water.
- It is best if you do not drink any alcohol during your course of treatment.
- Plan a routine for home and work that will ensure:
 - You take your telaprevir every 8 hours, with 20 grams or more of fat.
 - You take ribavirin twice daily.
 - You have a set day and time of the week for your peginterferon injection.
 - You plan on having blood draws approximately every 4 weeks or as directed by your provider. Blood tests will show how you are responding to treatment and can flag side effects, such as low white or red blood cells.
 - You plan on having office visits with your provider, approximately every 4 weeks.
 These may be on different dates than the blood draws. (See Treatment Visit Schedule on p. 29.)

How to Take Your Medications

TELAPREVIR



- Take 2 capsules, every 8 hours. Each capsule is 375 mg.
- · You MUST take within 30 minutes of either a meal or snack containing at least 20 grams of fat with each dose (see p. 8).
- This medicine is taken only for the first 12 weeks of your treatment.
- Store at room temperature between 59-86° F.

RIBAVIRIN



- Take 2 or 3 capsules or tablets, 2 times per day, as prescribed. Each pill is 200 mg.
- Your dose will be based on your weight and may change during the course of treatment because of side effects.
- Take with food to minimize stomach upset.
- Store at room temperature between 59-86° F.



- **PEGINTERFERON** You will be given prefilled syringes or pens of either Pegasys® or Peg-Intron.®
 - Keep in the refrigerator.
 - · Inject under the skin once weekly.

When to Take Your Medications

Telaprevir pills must be taken with 20 grams or more of fat and on a strict schedule of every 8 hours to work properly, so make sure the schedule you and your provider pick will work for you. A common schedule is 6 am-2 pm-10 pm. You can choose whether to take ribavirin and telaprevir together, or at separate times of day. Because ribavirin can interfere with sleep, take your last dose before 6 pm.

Think about your personal routine when deciding which day to take your **peginterferon** shot. Many patients feel more fatigued on the first day or two after each shot. If you work Monday through Friday, for example, consider taking your shot on Friday night so you have the weekend to recover from the worst of the fatigue.

SAMPLE MEDICATION SCHEDULES

The charts below show how a patient might fill in times for taking ribavirin and telaprevir, and the day and time for taking the peginterferon shot.

3 Drugs (Weeks 1-12)

Patients can choose whether to take ribavirin and telaprevir together, or at separate times of day. However, telaprevir *must* be taken every 8 hours with at least 20 grams of fat.

| Time of Day | Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
|----------------------------------|--|------------------------------------|---|--|---|--|----------|
| Morning 20g FAT 30 am | 1 | V/37/5 + 192 (192) 2 # ribavirin | 1 (152 (152 (153 (153 (153 (153 (153 (153 (153 (153 | 1 | V375 V375 + 158 158 158 2 # ribavirin | 7/375 1/375 + 1/38 1/38 2 # ribavirin | 1 |
| Afternoon | (19375 (19375 + (1930 1193) 2 # ribavirin | 1 | 1 | //3/5 + (152 (153) 200 (200) 2 # ribavirin | 1 | 7/375 1/375 + 1/375 1/375 1/375 200 1/300 200 1/300 200 1/300 200 1/300 | 1 |
| Night 20g FAT (0 : 30 pm | V 375 | V375 V375 | V375 V375 | V 375 | V 375 V 375 | V 375 | V 375 |
| Peginterferon Mark day & time | | | | | | 7 PM | |

2 Drugs (Week 13 until end)

| Time of Day | Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
|----------------------------------|--|--|---------------|---|----------------------|---|---|
| Morning O | riba riba riba zeba zeba zeba zeba zeba zeba zeba ze | 71ba (1ba 200 (2ba 2 # ribavirin | 2 # ribavirin | ziba ziba ziba ziba ziba ziba ziba ziba | 2 # ribavirin | ^{1/ba} ^{1/ba} ^{1/ba} 200 ^{1/ba} 2 # ribavirin | riba (zba zba zba zba zba zba zba zba zba zba |
| Afternoon | riba riba 200 | riba riba 200 | riba riba 200 | riba riba 200 | riba riba 200 200 | riba riba 200 | riba riba 200 200 |
| ; <u>30</u> pm | 2 # ribavirin | 2_# ribavirin | # ribavirin | 2 # ribavirin | 2 # ribavirin | 2 # ribavirin | 2 # ribavirin |
| Peginterferon Mark day & time | | | | | | 7 PM | |

If You Miss a Dose

TELAPREVIR:

It is very important that you **do not miss any doses**. The hepatitis C virus can become resistant to telaprevir if you miss even a single dose. Future drugs may also be ineffective if resistance develops. The dose of telaprevir cannot be decreased. Do not make any adjustments to your telaprevir dose.

- If you take your pills within an hour of your scheduled time, it is not considered
 a missed dose.
- If it is 4 hours or less since your missed dose, TAKE THE MISSED DOSE NOW WITH 20 GRAMS OF FAT and take the next dose according to your normal dosing schedule.
- If it is more than 4 hours since your missed dose, SKIPTHE MISSED DOSE and take the next dose according to your normal dosing schedule.
- If you miss multiple doses, call your prescriber contact, listed in the inside cover
 of this booklet.

RIBAVIRIN:

If you miss more than 1-2 days of ribavirin, call your prescriber contact listed in the inside cover of this booklet.

PEGINTERFERON:

If you miss any dose of peginterferon, call your prescriber contact listed in the inside cover of this booklet.

TIP: USE A MEDICINE TIMER!



The best way to ensure that you do not miss a dose is to remind yourself of your pill times by setting a timer. Perhaps use the alarm on your cell phone if you have one.

How Long Does Treatment Last?

Your treatment with telaprevir, ribavirin, and peginterferon may be prescribed for as short as 24 weeks, or as long as 48 weeks, depending on how the virus responds to treatment.

If you are not responding to therapy, treatment may be stopped as early as 4 weeks.

After Treatment is Completed

Once you have finished your treatment, you will continue to have blood draws. One of the blood draws will be done 6 months after treatment is complete. If the virus is still undetectable at that time, then you have successfully cleared the virus and are cured.

If Treatment Doesn't Work for You

Treatments for hepatitis C are changing, and new drugs are always being tested. Some are currently in clinical trials and may be available within a few years. Keep in mind that even if the treatment didn't get rid of the virus, it may have improved the health of your liver.

It's important to continue to see your provider for follow-up. Your provider will set up a schedule for appointments.

What to Eat When Taking Telaprevir

Take your telaprevir pills within 30 minutes after eating a high-fat meal or snack containing at least **20 grams of fat**.

Each of the following foods contains **20 grams of fat**. Fat content can differ by brands, so check nutrition labels to be certain (see next page). Items shown below with a salt shaker can be high in salt (look for "no-added salt" options when shopping). To look up the fat content of specific foods, go to the website: www.calorieking.com.

BREAKFAST IDEAS

- 2-egg omelet with I ounce shredded cheese
- oatmeal with I ounce nuts and ½ tablespoon butter
- toast with 2 tablespoons unsalted peanut butter and glass of 2% milk
- bagel with 2 tablespoons cream cheese and glass of whole milk
- I egg and I-3 sausage links (check sausage label, need 15 g fat)

LUNCH AND DINNER IDEAS

- 6 ounces salmon
- green salad with 3 tablespoons of salad dressing (not low-fat dressing)
- egg salad: 2 eggs, 2 tablespoons mayonnaise
- I chicken leg and thigh with skin
- 2 pork chops
- quarter-pound hamburger or double cheeseburger

- 1/2 box prepared macaroni and cheese
- 2 cups of canned chili with meat
- sandwich with 3 slices bologna and 1 slice cheese
- I ½ beef hot dogs
- burrito with beans, cheese, and guacamole
- 🇂 french fries, medium order

SNACKS AND INGREDIENTS

- I cup cubed avocado
- 3 tablespoon unsalted peanut butter
- 2½ ounces dark chocolate
- 4 tablespoon cream cheese or Nutella
- popcorn with 2 tablespoons butter
- ½ cup unsalted trail mix
- 3 ounces tortilla chips

- I½ tablespoon oil
- I cup original Greek yogurt
- · I cup ice cream
- 16-ounce milkshake
- 1½ ounces unsalted nuts or seeds
- 1/2 ounces Cheddar or Swiss cheese
- 2 ounces potato chips

How to Read a Nutrition Label

The nutrition facts label on packages will also show you the amount of fat in a serving of a food.

- I. Check the SERVING SIZE first. The numbers in the rest of the label are based on I serving.
- 2. Check TOTAL FAT second. Remember, you need a total of 20 grams of fat with each dose of telaprevir. On the label below, I serving (I/2 cup) contains 3 grams of total fat, but if you ate 2 servings (I cup), you would get 6 grams of total fat.

| Nutrition | Facts | | | | | | | | |
|---|------------------|------------------|--|--|--|--|--|--|--|
| Serving Size ½ | CUP (114g) | | | | | | | | |
| Servings Per Container 4 | | | | | | | | | |
| Amount Per Serving | | | | | | | | | |
| Calories 90 | Calo | ries from fat 30 | | | | | | | |
| | | % Daily Value* | | | | | | | |
| Total Fat 3g | | 5% | | | | | | | |
| Saturated Fa | t 0g | 0% | | | | | | | |
| Cholesterol 0m | g | 0% | | | | | | | |
| Sodium 300mg | | 13% | | | | | | | |
| Total Carbohyd | Irates 13g | 4% | | | | | | | |
| Dietary Fiber 3g 12% | | | | | | | | | |
| Sugars 3g | | | | | | | | | |
| Protein 3g | | | | | | | | | |
| Vitamin A 80% | Vitamin C | 60% | | | | | | | |
| Calcium 4% | Iron | 4% | | | | | | | |
| * Percent Daily Val diet. Your daily valu depending on your | ues may be highe | | | | | | | | |
| Calories | 2,000 | 2,500 | | | | | | | |
| Total Fat Less than | n 65g | 80g | | | | | | | |
| Sat Fat Less than | 20g | 25g | | | | | | | |
| CholesterolLess th | | 300mg | | | | | | | |
| SodiumLess than | 2400mg | 2400mg | | | | | | | |
| Total Carbohydrate | | 375g | | | | | | | |
| Fiber | 25g | 30g | | | | | | | |
| Calories per gram: Fat 9 | Carbohydrates 4 | Protein 4 | | | | | | | |

TIP: PREPACKAGE YOUR SNACKS IN BAGGIES!

Carry a **baggie of food** with 20 grams of fat—I $\frac{1}{2}$ ounces nuts, for example —so you always have the right amount of food ready when it's time to take your telaprevir pills.

Which Treatment Track Should YOU Follow?

Often patients who were treated before but not cured are not sure what happened during their course of treatment. It is completely fine if you are not sure. But before you start treatment with telaprevir, you need to talk over your history carefully with your doctor so that you both understand what happened in earlier treatments.

Also, if you are not sure whether you have cirrhosis (a scarred liver), please specifically ask your doctor.

With this information, you and your doctor can find your treatment track below:

| | Track A | Track B |
|--|---------|---------|
| I have cirrhosis | | x |
| I have never been treated before I do not have cirrhosis | x | |
| I have been treated before and the virus came down somewhat I do not have cirrhosis | | × |
| I have been treated before and the virus cleared but then returned I do not have cirrhosis | × | |
| I have been treated before and the virus did not respond at all I do not have cirrhosis | | × |

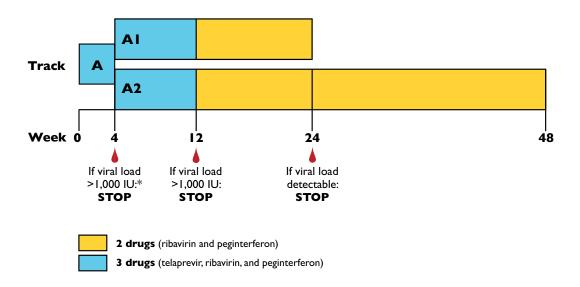
Treatment Tracks

| TRACK A | |
|------------------------|-----|
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| TRACK B | |
| Treatment Roadmap | I 6 |
| My Medication Schedule | 18 |

Track A

Treatment Roadmap

You were never treated before, or you were treated before and the virus cleared but came back, AND You do not have cirrhosis.



TRACK AI: 12 weeks of 3 drugs, 12 weeks of 2 drugs. Total: 24 weeks.

TRACK A2: 12 weeks of 3 drugs, 36 weeks of 2 drugs. Total: 48 weeks.

^{*}IU stands for "international unit"—a standard measure of how much hepatitis C virus is in the blood.

Here are the forks in your road:

| AT WEEK 4: My viral load_ | |
|--|--|
| If viral load undetectable: Go to | o Track A I for a shortened, 24-week course. |
| If viral load detectable but less full 48-week course. | than or equal to 1,000 IU: Go to Track A2 for a |
| If viral load greater than 1,000 | IU:Treatment isn't working and will be stopped. |
| AT WEEK 12: My viral load | d |
| Track A1: If viral load undetecta | able, continue treatment. |
| If viral load greater than 1,000 | IU:Treatment isn't working and will be stopped. |
| If viral load detectable but less 48-week course. | than or equal to 1,000 IU: Move to Track A2 for a full |
| Track A2: If viral load less than | or equal to 1,000 IU: Continue treatment. |
| If viral load greater than 1,000 | IU:Treatment isn't working and will be stopped. |
| AT WEEK 24: My viral load | d |
| Track AI: See "After Treatment | is Completed," p. 7. |
| Track A2: If viral load undetecta | able: Continue treatment. |
| If viral load detectable:Treatme | ent isn't working and will be stopped. |
| AT WEEK 48: My viral load | d |
| Track A2: See "After Treatment | is Completed," p. 7. |

Track A (cont.) My Medication Schedule

| V 375 | Telaprevir: Take 2 capsules, every 8 hours, with at least 20 grams of fat. |
|----------------------|--|
| riba riba 200 200 | Ribavirin: Take pills every morning and pills every afternoon or evening, as prescribed. You can take ribavirin with telaprevir, or at separate times of day. |
| | Peginterferon: Pegasys® mcg/week or Peg-Intron® ml/week Inject weeklysame day, same time Take with Food Take with at least 20 grams of fat |
| | Take with rood Take with at least 20 grams of fat |

3 DRUGS

Weeks I-12 Start date: _____ Take until: _____

| Time of Day | Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
|----------------------------------|---|--|---|--|---|---|--|
| Morning 20g FAT am | V.375 V.375 + (15a (15a 200 200 200 200 200 200 200 200 200 20 | //3//5 + //3//5 + //ba //ba //ba //ba //ba //ba //ba //b | V375 + ** ** ** ** ** ** ** ** ** | //3/5 //3/5 + //3/5 //3/5 | //375 //375 + //375 | //3/5 //3/5 + //3/5 | (/3/5) (/3/5) + (/iba (/iba) 200 (/iba) # ribavirin |
| Afternoon | 1/3/5 1/3/5 + 1/3/5 200 (1ba 200 200 200 200 200 200 200 200 200 20 | //375 //375 + //375 | //375 //375 + (1ba 1ba 200 | //3/5 //3/5 + (1ba (1ba (2ba (2ba (2ba (2ba (2ba (2ba (2ba (2 | //375 //375 + (1ba 1ba 200 | //3/5 //3/5 + //3/5 | 1/3/5 1/3/5 + 1/3/5 200 (10a) 200 (200) |
| Night 20g FAT pm | V375 V375 | V375 V375 | V375 V375 | V375 V375 | V375 V375 | V375 V375 | V375 V375 |
| Peginterferon Mark day & time | | | | | | | |

2 DRUGS

| Weeks 13-treatment end Start date:* Tak | e until: |
|---|----------|
|---|----------|

| Time of Day | Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
|----------------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| Morning | | | | | | | |
| | riba 200 riba 200 |
| : am | # ribavirin |
| Afternoon | | | | | | | |
| | riba 200 riba 200 |
| :pm | # ribavirin |
| Peginterferon Mark day & time | | | | | | | |

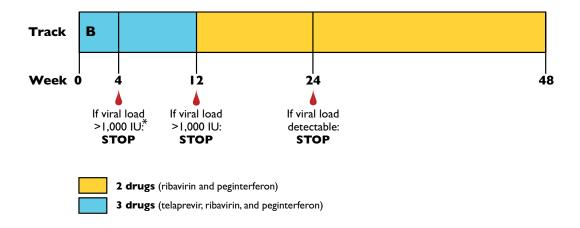
^{*}It can take time to receive lab results. Confirm with your provider the exact date to begin.

Track B

Treatment Roadmap

You have cirrhosis, OR

You were treated before and the virus came down somewhat or the virus did not respond at all



TRACK B: 3 drugs for 12 weeks, 2 drugs for 36 weeks. Total: 48 weeks

^{*}IU stands for "international unit"—a standard measure of how much hepatitis C virus is in the blood.

Here are the forks in your road:

| AT WEEK 4: My viral load |
|---|
| If viral load less than or equal to 1,000 IU: Continue treatment. |
| If viral load greater than 1,000 IU: Treatment isn't working and will be stopped. |
| AT WEEK 12: My viral load |
| If viral load less than or equal to 1,000 IU: Continue treatment. |
| If viral load greater than 1,000 IU:Treatment isn't working and will be stopped. |
| ■ AT WEEK 24: My viral load |
| If viral load undetectable: Continue treatment. |
| If viral load detectable: Treatment isn't working and will be stopped. |
| ■ AT WEEK 48: My viral load |
| See "After Treatment is Completed," p. 7. |

Track B (cont.) My Medication Schedule

| V 375 | Telaprevir: Take 2 capsules, every 8 hours, with at least 20 grams of fat. |
|---------------|--|
| riba riba 200 | Ribavirin: Take pills every morning and pills every afternoon or evening, as prescribed. You can take ribavirin with telaprevir, or at separate times of day. |
| | Peginterferon: Pegasys® mcg/week or Peg-Intron® ml/week Inject weeklysame day, same time |
| | Take with Food Take with at least 20 grams of fat |

3 DRUGS

Weeks I-12 Start date: _____ Take until: _____

| Time of Day | Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
|----------------------------------|--|---|--|--|--|--|--|
| Morning O O EAT | 1/375 1/375 + 1/366 (1/6)6 | //375 //375 + 150 (150) # ribavirin | 1/375 1/375 + 1/376 1/376 # ribavirin | //375 //375 + (150 (150) — # ribavirin | /375 /375 + (15a) (15a) 200 (15b) — # ribavirin | 19375 19375 + 1938 1938 # ribavirin | 1/3/5 1/3/5 + 1/3/6 (1/3/6) # ribavirin |
| Afternoon | 1/375 1/375 + 1/286 1/286 # ribavirin | //375 //375 + 100 100 # ribavirin | //375 //375 + (156 (156) # ribavirin | //375 //375 + (156 (156)# ribavirin | /375 //375 + (188 (188) — # ribavirin | \(\frac{\frac{1}{3}}{3}\) \(\frac{1}{3}\) \(\f | 1/3/5 1/3/5 + 1/288 (1/288) —# ribavirin |
| Night | V375 V375 | V375 V375 | V375 V375 | V375 V375 | V 375 V 375 | V375 V376 | V375 V375 |
| Peginterferon Mark day & time | | | | | | | |

2 DRUGS

 Weeks 13-48
 Start date*:
 Take until:

| Time of Day | Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
|----------------------------------|-------------------------|-------------------------|-------------------------|-------------------------|----------------------|-------------------------|---------------|
| Morning | riba riba 200 | riba 200 riba 200 | riba riba 200 200 | riba 200 riba 200 | riba riba 200 200 | riba riba 200 | riba riba 200 |
| :am | # ribavirin | # ribavirin | # ribavirin | # ribavirin | # ribavirin | # ribavirin | # ribavirin |
| Afternoon | riba 200 riba 200 | riba 200 riba 200 | riba 200 riba 200 | riba riba 200 200 | riba riba 200 200 | riba 200 riba 200 | riba riba 200 |
| :pm | # ribavirin | # ribavirin | # ribavirin | # ribavirin | # ribavirin | # ribavirin | # ribavirin |
| Peginterferon Mark day & time | | | | | | | |

^{*}It can take time to receive lab results. Confirm with your provider the exact date to begin.

Dealing with Side Effects

*indicates brand name

| SIDE EFFECT | WHAT TO DO |
|---------------------------------|---|
| ANAL-RECTAL | To relieve anal itching, try short-term topical corticosteroid |
| DISCOMFORT (HEMORRHOIDS, RECTAL | To relieve nighttime itching, try over-the-counter antihistamines before bedtime |
| ITCHING OR | Your doctor can prescribe drugs to loosen stools |
| BURNING) | If you are constipated, eat high-fiber foods (such as whole grains, dried beans and peas, and fruits) |
| FEVER/CHILLS | Try injecting interferon at bedtime if fever/chills develop I-3 hours after the interferon injection |
| | Take acetaminophen (Tylenol*) about 30-60 minutes before weekly interferon injection |
| | Take acetaminophen (Tylenol*) I-2 tablets prior to interferon injection and repeat 4-6 hours later if needed up to a maximum of 2,000 mg/day. Thus, do not exceed 6 tablets/day of 325 mg or 4 tablets/day of 500 mg acetaminophen (Tylenol*). |
| | Use ibuprofen [Advil*, Motrin*] or naproxen [Aleve*] if approved by your provider and you do not have cirrhosis |
| | Try a cool sponge bath, ice pack or cold pack when you have a fever |
| | Use extra blankets and clothes when you have the chills |
| | Notify your provider if your temperature is above IOI°F for more than 24-48 hours |
| MUSCLE AND BODY ACHES | Try injecting interferon at bedtime if body aches develop 1-3 hours after the interferon injection |
| | Take acetaminophen (Tylenol*) about 30-60 minutes before weekly interferon injection |
| | Take acetaminophen (Tylenol*) I-2 tablets prior to interferon injection and repeat 4-6 hours later if needed up to a maximum of 2,000 mg/day. Thus, do not exceed 6 tablets/day of 325 mg or 4 tablets/day of 500 mg of acetaminophen (Tylenol*). |

| SIDE EFFECT | WHAT TO DO |
|--------------------------|--|
| MUSCLE AND BODY ACHES | Use ibuprofen [Advil*, Motrin*] or naproxen [Aleve*] if approved by your provider and you do not have cirrhosis |
| continued | Try low-impact exercise such as walking or low-impact aerobics as directed by your provider |
| | Maintain adequate fluid intake (at least six to eight non-caffeinated 8-oz glasses/day) |
| | Apply warm moist heat or massage areas |
| HEADACHES | Maintain adequate fluid intake (at least six to eight non-caffeinated 8-oz glasses/day) |
| | Take acetaminophen (Tylenol*) or ibuprofen (Motrin*, Advil*) as directed by your provider |
| | Keep lights dim, wear sunglasses or stay in darkened rooms |
| | Try to get plenty of rest |
| FATIGUE | Try low-impact exercise such as walking or low-impact aerobics as directed by your provider |
| | Maintain adequate fluid intake (at least six to eight non- caffeinated 8-oz glasses/day; you may have a caffeinated beverage in the morning) |
| | Take a short nap during the day |
| | Lessen your work schedule if possible |
| | Eat well-balanced meals every day |
| DEPRESSION | Talk to your provider about your symptoms and medications that might help |
| | Always discuss thoughts of harming yourself or someone else with your provider |
| | Go to the nearest emergency room if you are in danger of harming yourself or others |
| | Do mild to moderate exercises at least 3 times/week as directed by your provider |
| | Join a hepatitis C support group |

| SIDE EFFECT | WHAT TO DO |
|--------------------------|--|
| ANXIETY AND IRRITABILITY | Talk to your provider about your symptoms and medications that might help |
| | Always discuss thoughts of harming yourself or someone else with your provider |
| | Go to the nearest emergency room if you are in danger of harming yourself or others |
| | Do mild to moderate exercises at least 3 times/week as directed by your provider |
| | Try relaxation techniques such as deep breathing, taped exercises, yoga, Tai Chi or meditation |
| | Avoid stimulants like caffeine and maintain adequate fluid intake |
| | Join a hepatitis C support group |
| INSOMNIA | Go to sleep and wake up at the same time every day |
| | Do not read or watch TV in bed |
| | Limit daytime naps |
| | If ribavirin makes you jittery, take it before 6 pm instead of right before bedtime |
| | Limit fluid intake for 2 hours before bedtime to avoid having to get up to go to the bathroom |
| | Avoid caffeinated products, especially in the afternoon and at night |
| | Avoid heavy meals close to bedtime |
| | Take warm baths, read or listen to music, get a massage |
| | Try a glass of warm milk (contains tryptophan, a natural sleep agent) |
| | Diphenhydramine (Benadryl*) or other medications may be recommended by your provider |

| SIDE EFFECT | WHAT TO DO |
|--------------------|--|
| DRY MOUTH | Brush teeth frequently, especially after eating |
| OR MOUTH ULCERS | Avoid mouthwash containing alcohol |
| | Drink plenty of water or use ice chips or sugar-free lemon drops |
| | Other medications may be needed for mouth sores/ulcers |
| | Ask your provider about medications that may help |
| BAD TASTE | Use sugar-free lemon drops or real lemon wedges |
| IN MOUTH | Eat a small amount of yogurt, I/2 hour before meals or eat dark chocolate (monitor your glucose levels if you have diabetes) |
| | Drink lemonade or cranberry juice (monitor your glucose levels if you have diabetes) |
| | Eat food cold or at room temperature |
| | Brush teeth frequently, especially after eating, to eliminate metallic taste |
| | Use plastic utensils if experiencing metallic taste |
| POOR | Eat smaller, more frequent (4-6) meals throughout the day |
| APPETITE | Drink protein drinks (Carnation Instant Breakfast*, Ensure* or Boost*) |
| | Eat snacks with protein (cheese, peanut butter, eggs) |
| | Eat whatever appeals to you even if you're not hungry. Eat a variety of foods |
| | Walk before a meal |

| SIDE EFFECT | WHAT TO DO |
|-------------|---|
| NAUSEA AND | Take ribavirin with food |
| VOMITING | Eat small meals |
| | Avoid foods or smells that trigger nausea. Try eating cold foods and avoiding cooking smells |
| | Eat healthy foods. Avoid greasy, spicy, acidic or sweet foods |
| | Try eating ginger in ginger tea, ginger ale or gingersnaps |
| | Eat some crackers or dry white toast if you feel sick in the morning |
| | Over-the-counter antacids or other medications may be recommended by your provider |
| DIARRHEA | Eat more soluble fiber like B ananas, white R ice, A pplesauce and white T oast (the "BRAT" diet) |
| | Avoid foods that are spicy or acidic (like citrus) |
| | Avoid dairy products up to several days after diarrhea resolves |
| | Maintain adequate fluid intake (at least six to eight 8-oz glasses/day) |
| | Your provider may recommend loperamide (Imodium*) or methylcellulose (Citrucel*) or psyllium (Metamucil*) |
| DEHYDRATION | Increase intake of water or non-caffeinated beverages; try to drink at least 8-10 glasses of water each day. |
| | Water down juices, Gatorade* or Crystal Light* |
| | Avoid caffeinated beverages |
| COUGH | Increase intake of water or non-caffeinated beverages |
| | Use a humidifier |
| | Try sugar-free hard candy or cough drops |

| SIDE EFFECT | WHAT TO DO | | | |
|---------------------|--|--|--|--|
| DRY SKIN/ | Avoid long, hot showers or baths | | | |
| RASHES | Use moisturizing soaps (Dove*, Oil of Olay*, Cetaphil*) | | | |
| | Use moisturizing lotion after showers (Aquaphor*, Absorbase*, Lac-Hydrin*) | | | |
| | Use mild unscented laundry detergents and avoid fabric softeners | | | |
| | Use sunscreen | | | |
| | Try rubbing or pressing on the itchy areas rather than scratching | | | |
| | Use petroleum jelly on dry, itchy areas. Your provider may recommend other agents to help | | | |
| HAIR THINNING OR | Avoid harsh hair products such as dyes, perms, gels, sprays and mousses | | | |
| HAIR LOSS | Use a mild shampoo such as baby shampoo | | | |
| | Avoid braiding hair; use a wide-tooth comb or soft brush | | | |
| | Wear a cap, scarf, turban or wig | | | |
| INJECTION SITE | Before injecting, warm your medicine by gently rolling the syringe in your hands for a minute | | | |
| REACTIONS | Rotate/alternate your injection site—thigh, upper arm and abdomen. If you are thin, use the thigh area | | | |
| | Do not inject into an area that is irritated, bruised or red | | | |
| | Do not rub injection site | | | |
| | Apply a cold pack | | | |
| | Your provider may recommend applying hydrocortisone cream or other medications to help | | | |

Notes to Bring to Your Provider

| your provider. | | | |
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My Viral Load Chart

As you progress through treatment, you may find it helpful to mark down the viral load results of your blood work. (Viral load tests are required before you start treatment; for treatment weeks 4, 12, 24, and 48; and 6 months after treatment.)

| Date: | Week: | Results: |
|-------|-------|----------|
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My Treatment Visit Schedule

| Treatment start date: | | | |
|---|---------------|--------------------|----------|
| The following information may not be det | ermined until | after you start tr | eatment: |
| Expected treatment duration (circle one): | 24 weeks | 48 weeks | |
| Expected finish date: | | | |

You will meet with your provider, approximately every 4 weeks. These may be on different dates than the blood draws for your viral load. You also may have lab visits for other tests.

| LAB TESTS | PROVIDER APPOINTMENTS | | OTHER APPOINTMENTS | |
|-----------|-----------------------|------|--------------------|------|
| Date | Provider Name | Date | Туре | Date |
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OFFICE OF PUBLIC HEALTH

U.S. DEPARTMENT OF VETERANS ADMINISTRATION

JULY 2012

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