

Health Bulletin

Career Success With A Chronic Illness

(NAPSA)—Everyone has a sick day or two at work. But how do you climb the career ladder when you don't feel well for months or years? Chronic conditions like arthritis, diabetes and digestive disorders can make work-related tasks difficult. For example, arthritis can make typing, taking notes or even holding the telephone a challenge.

A recent survey from the Centers for Disease Control (CDC) found that 33 percent of workers with arthritis in the United States experience work limitations due to their condition. No matter what their condition, most people cannot afford to stop working to focus on their health. Many hesitate to inform their employers for fear of being passed over for promotion or resented by coworkers.

Firefighter Rick Williams experienced firsthand how difficult work can be when trying to manage a disease. Six years ago, Rick was diagnosed with rheumatoid arthritis (RA), a chronic disease that affects over 2 million Americans and is characterized by pain and loss of joint motion. He experienced stiffness and How to Make Your Career Work for You 1. If you cannot handle certain tasks, be proactive in finding and proposing solutions. For example, look at how tasks might be redistributed or exchanged and discuss with your co-workers and supervisor. 2. When you're having a good day, offer to help others who have pitched in for you. 3. Manage your energy during the day. Consider asking your employer about a flexible schedule or working from home.

pain in his hands that made crucial parts of his job, such as lifting a fire hose, extremely difficult. Rick felt he had to hide his condition from coworkers, and worried about being seen as weak. He recalls, "I had to make a decision about my career. I thought it was quickly coming to an end." Rick has since started taking Humira (adalimumab), a medication used to treat moderate to severe RA and certain other conditions. It has helped reduce the pain and stiffness and has helped his ability to perform some of these activities, but he still remembers how every day was a challenge.

Many times, the hardest part about working with a chronic illness is knowing what to tell people at work. Rosalind Joffe, an executive career coach who suffers from chronic illness herself, offers helpful tips on how to maintain success and productivity at work. She stresses the importance of knowing your rights and says, "There is no law that forces employees to disclose information about their condition to an employer. But if your condition impacts your performance at work, it's important to find strategies so that you can stay healthy and productive. Educate yourself about the latest treatment options and coping strategies."

If you or someone you know suffers from rheumatoid arthritis and is struggling at work, visit www.RA.com for more helpful workplace tips. More information about Humira, including full prescribing information and Medication Guide, is available on the Web site www.rxabbott.com or in the United States by calling Abbott Medical Information at (800) 633-9110.

About HUMIRA

HUMIRA is indicated for reducing signs and symptoms, inducing major clinical response, inhibiting the progression of structural joint damage and improving physical function in adult patients with moderately to severely active rheumatoid arthritis. HUMIRA is indicated for reducing signs and symptoms of moderately to severely active polyarticular juvenile idiopathic arthritis in patients four years of age and older. HUMIRA can be used alone or in combination with methotrexate. HUMIRA is indicated for reducing signs and symptoms of active arthritis, inhibiting the progression of structural damage and improving physical function in patients with psoriatic arthritis. HUMIRA is also indicated for reducing signs and symptoms in adult patients with active ankylosing spondylitis. HUMIRA is indicated for reducing the signs and symptoms and inducing and maintaining clinical remission in adults with moderately to severely active Crohn's disease who have had an inadequate response to conventional therapy, and reducing signs and symptoms and inducing clinical remission in these patients if they have also lost response to or are intolerant to infliximab. HUMIRA is indicated for the treatment of adult patients with moderate to severe chronic plaque psoriasis who are candidates for systemic therapy or phototherapy, and when other systemic therapies are medically less appropriate. HUMIRA should only be administered to patients who will be closely monitored and have regular follow-up visits with a physician.

Serious infections, sepsis, tuberculosis (TB) and opportunistic infections, including fatalities, have been reported with the use of TNF-blocking agents, including HUMIRA. Many of these serious infections have occurred in patients also taking other immunosuppressive agents that in addition to their underlying disease could predispose them to infections. Infections have also been reported in patients receiving HUMIRA alone. Treatment with HUMIRA should not be initiated in patients with active infections. TNF-blocking agents, including HUMIRA, have been associated with reactivation of hepatitis B (HBV) in patients who are chronic carriers of this virus. Some cases have been fatal. Patients at risk for HBV infection should be evaluated for prior evidence of HBV infection before initiating HUMIRA. The combination of HUMIRA and anakinra is not recommended and patients using HUMIRA should not receive live vaccines. More cases of malignancies have been observed among patients receiving TNF blockers, including HUMIRA, compared to control patients in clinical trials. These malignancies, other than lymphoma and non-melanoma skin cancer, were similar in type and number to what would be expected in the general population. There was an approximately three-fold higher rate of lymphoma in combined controlled and uncontrolled open label portions of HUMIRA clinical trials. The potential role of TNF-blocking therapy in the development of malignancies is not known. TNF-blocking agents, including HUMIRA, have been associated in rare cases with demyelinating disease and severe allergic reactions. Infrequent reports of serious blood disorders have been reported with TNF-blocking agents. Worsening congestive heart failure (CHF) has been observed with TNF-blocking agents, including HUMIRA, and new onset CHF has been reported with TNF-blocking agents. Treatment with HUMIRA may result in the formation of autoantibodies and rarely, in development of a lupus-like syndrome. In the placebo-controlled clinical studies of adult patients with rheumatoid arthritis, the most frequent adverse reactions vs. placebo were injection site reactions (20 percent vs. 14 percent), upper respiratory infection (17 percent vs. 13 percent), injection site pain (12 percent vs. 12 percent), headache (12 percent vs. 8 percent), rash (12 percent vs. 6 percent) and sinusitis (11 percent vs. 9 percent). Discontinuations due to adverse events were 7 percent for HUMIRA and 4 percent for placebo. In HUMIRA clinical trials for ankylosing spondylitis, psoriatic arthritis, Crohn's disease and plaque psoriasis, the safety profile for adult patients treated with HUMIRA was similar to the safety profile seen in adult patients with rheumatoid arthritis. In the placebo-controlled clinical trials in plaque psoriasis, the incidence of arthralgia was 3 percent in HUMIRA-treated patients versus 1 percent in controls. In general, adverse reactions in pediatric patients were similar in frequency and type to those seen in adult patients. Severe adverse reactions reported in the clinical trial in juvenile idiopathic arthritis (JIA) included neutropenia, streptococcal pharyngitis, increased aminotransferases, herpes zoster, myositis, metrorrhagia and appendicitis. Serious infections were observed in 4 percent of patients within approximately two years of initiation of treatment with HUMIRA and included cases of herpes simplex, pneumonia, urinary tract infection, pharyngitis, and herpes zoster. Safety of HUMIRA in pediatric patients for uses other than JIA have not been established. As with any treatment program, the benefits and risks of HUMIRA should be carefully considered before initiating therapy.