H.P. Acthar® Gel (repository corticotropin injection) Reference Bibliography
This bibliography contains verifiable peer-reviewed manuscripts and abstracts on the use of Acthar Gel, as well as publications supported by Mallinckrodt that relate to Acthar directly or indirectly. Human and preclinical studies, health economic and outcomes analyses (HEOR), reports and reviews are included and, where available, links to PubMed are provided.
Updated February, 2017

Nephrology


81. Lehrer GM. Treatment of MS with Acthar Gel-clinical experience and case presentation [ANA abstract T1819]. *Ann Neurol.* 2012;72(suppl 1):S114


### Neurology – HEOR


**Ophthalmology**


Pulmonology


Pulmonology – HEOR


Rheumatology

144. Decker D, Higgins P, Bendele A, Becker P. Repository corticotropin injection (H.P. Acthar® Gel) attenuates established collagen-induced arthritis when used alone or as adjuvant therapy with Etanercept (Enbrel®) [AAI abstract THER5P.902]. *J Immunol.* 2015;194(suppl 1):139.4-139.4


156. Gaylis N, Needell S, Sagliani J. The effect of corticotropin (ACTH 80 units weekly or biweekly) in combination with MTX in newly diagnosed RA patients from a clinical and structural perspective as measured by a CDAI score and osteitis, synovitis, and erosions on MRI [EULAR abstract AB0503]. *Ann Rheum Dis.* 2015;74(suppl 2):1066-1067


158. Gillis TM, Crane M, Hinkle C, Wei N. H.P. Acthar® Gel (repository corticotropin injection) as adjunctive therapy in patients with rheumatoid arthritis who have failed at least three biologic therapies with different modes of action [EULAR abstract AB0502]. *Ann Rheum Dis.* 2015;74(suppl 2):1066-1066


175. Zutshi DW, Friedman M, Ansell BM. Corticotrophin therapy in juvenile chronic polyarthritis (still's disease) and effect on growth. *Arch Dis Child.* 1971;46(249):584-593. Link

**Rheumatology – HEOR**


221. Hogan JJ, Jai R, Gerald BA, Andrew SB, Pietro AC, Maya KR. Treatment of resistant primary focal segmental glomerulosclerosis (FSGS) with adrenocorticotropic hormone (ACTH) gel [ASN abstract SA-PO381]. *J Am Soc Nephrol*. 2012;23(suppl):725A

222. Jensen MA, Abraham P, Reder AT, Arnason BGW. Co-production of GM-CSF, IL-22, or IL-17F identifies a pathogenic high IL-17A-producing T cell subset from MS patients that is steroid resistant [ANA abstract S151]. *Ann Neurology*. 2016;80:S53-S54.


226. Kongelbeck SR. Discharge planning for the child with infantile spasms. *J Neurosci Nurs*. 1990;No. 4:238-244. [Link](#)


235. Lisak R, Nedelkoska L, Benjamins J. ACTH1-39 protection of oligodendrocytes from damage relevant to multiple sclerosis involves both direct and indirect mechanisms. [AAN abstract P2.189]. *Neurology*. 2015;84(suppl 14):P2.189


244. McElhaney JL. Repository corticotropin injection as an adjunct to smoking cessation during the initial nicotine withdrawal period: Results from a family practice clinic. *Clin Ther.* 1989;11(6):854-861. [Link](#)


258. Tumlin JA, Galphin CM, Rovin BH. Advanced diabetic nephropathy with nephrotic range proteinuria: A pilot study of the long-term efficacy of subcutaneous ACTH gel on proteinuria,
progression of CKD, and urinary levels of VEGF and MCP-1. J Diabetes Res. 2013:489869. Link

