Study ref	Country	Study design	Number of patients	Coexistent disease	Indication	Amyloidosis	Other biologics before TCZ	Dosage and route of administration	Colchicine coadministration	Mean duration of Tocilizumab treatment (weeks)	Outcomes	
											Efficacy	Safety
Koga et al. 2022	Japan	Double-blind RCT	22	None	crFMF or colchicine intolerance	No	No	SC 162 mg/ week	Yes (mean daily dose 0.63 mg/ day)	24	Primary endpoint not met (reduction on the number of fever attacks due to FMF over 24 weeks of treatment)	Hypofibrinogenemia (n=8), injection site reaction (n=2), headache (n=2), myocarditis (n=1)
Henes et al. 2022	Germany	Double-blind RCT	25	None	crFMF or colchicine intolerance	No	ANA (n=3) CANA (n=1)	IV 8 mg/kg per month	Yes (median daily dose 1.6 mg/ day)	12	Primary endpoint met (2/11 patients responder with PGA ≤2, normalized ESR or CRP and normalized SAA)	lleitis (n=1); elevated liver enzymes (n=1)
Colak et al. 2020	Turkey	Retrospective	15	lgA vasculitis (n=1)	Amyloidosis	Yes (kidney)	No	IV 8 mg/kg per month	Yes (mean daily dose 1.23 mg/ day)	24	No attacks at week 12 = 8/15 Decreased attacks at week 12 = 6/15 No	None

Table 2 : Data regarding double-blind randomized clinical trials and retrospective studies

											response on attacks = 1/15 ↓ Mean	
Ugurlu et al. 2017	Turkey	Retrospective	12	SpA (n=4) CD (n=1)	Amyloidosis	Yes (kidney)	ANA (n=5) ; CANA (n=3) ; IFX (n=3); ETA (n=1)	IV 8 mg/kg per month	Yes (median dose 1.9 ± 0.4 mg/day)	70	24-hour urine protein \downarrow CRP, ESR No attacks = 10/12 Decreased attacks = 1/12 No response on attacks = 1/12	Transient diplopia after the 6th dose (n = 1) with therapy discontinuation; increase in blood pressure (n = 1) with therapy discontinuation

crFMF: colchicine-resistant familial mediterranean fever; IV : intra-venous ; RCT : randomized controlled trial; SC : sub-cutaneous ;

CD: Crohn's disease; SpA: spondyloarthritis

ANA: anakinra; CANA: canakinumab; ETA: etanercept; IFX: infliximab