Infusions are listed below. The types and frequencies of adverse reactions observed were similar in REMICADE-treated RA, AS, PsA, plaque PsO and CD patients.

**System disorders:**
- Back pain: 5, 8
- Arthralgia: 7, 8

**Urinary system disorders:**
- Urinary tract infection: 6, 8

**Cardiovascular disorders, general:**
- Hypertension: 5, 7
- Myocardial infarction (including pulmonary fibrosis/interstitial pneumonitis and very rare rapidly progressive disease), idiopathic thrombocytopenic purpura, thrombotic thrombocytopenic purpura, myelofibrosis, and MPGN.

Infusion Reactions
- Anaphylaxis
- Hypotension
- Fever
- Tachycardia
- Arrhythmia
- Cardiac arrest

**Neurologic events have also been observed, see WARNINGS, Neurologic Events:**
- Transient ischemic attack
- Anoxic encephalopathy
- Necrolytic migratory erythema
- Thrombotic microangiopathy
- Guillain-Barré syndrome
- Pseudotumor cerebri
- Panhypopituitarism
- Psychiatric disorders
- The following serious adverse events have been reported in clinical trials and post-marketing surveillance:
  - Sudden death
  - Cardiac arrest
  - Myocardial infarction
  - Thrombosis
  - Embolism
  - Stroke
  - New onset diabetes mellitus
  - Thrombotic thrombocytopenic purpura
  - Thrombocytopenia

Tuberculosis
- If it occurs.
- Treat with an appropriate regimen before further REMICADE treatment.
- If severe infusion-related hypersensitivity reactions occur, discontinue REMICADE treatment.

**Infusion-related reactions**
- Patients that have severe infusion-related hypersensitivity reactions should be discontinued from further REMICADE treatment. The management of severe infusion-related reactions should be initiated immediately.