Pharmaceuticals and Medical Devices Safety Information

No. **243** January 2008

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This *Pharmaceuticals and Medical Devices Safety Information (PMDSI)* is issued based on safety information collected by the Ministry of Health, Labour and Welfare. It is intended to facilitate safer use of pharmaceuticals and medical devices by healthcare providers. PMDSI is available on the Pharmaceuticals and Medical Devices Agency website (http://www.pmda.go.jp/english/index.html) and on the MHLW website (http://www.mhlw.go.jp/) (Japanese only).

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This translation of the original Japanese text is for information purpose only (in the event of inconsistency, the Japanese text shall prevail).

Pharmaceuticals and Medical Devices Safety Information

No. 243 January 2008

Pharmaceutical and Food Safety Bureau, Ministry of Health, Labour and Welfare, Japan

[Outline of Information]

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Reporting of safety information such as adverse reactions to the Minister of Health, Labour and Welfare is a duty of medical and pharmaceutical providers.

If medical and pharmaceutical providers such as physicians, dentists, and pharmacists detect adverse reactions, infections associated with drugs or medical devices, or medical device adverse events, they are obligated to report them to the Minister of Health, Labour and Welfare directly or through the marketing authorisation holder. As medical and pharmaceutical providers, drug retailers with a second-class license and household distributors are also required to report safety issues related to drugs and medical devices.

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Revision of PRECAUTIONS (No. 193)

This section presents details of revisions to the PRECAUTIONS section of package inserts and brand names of drugs that have been revised according to the Notifications dated November 30 and December 26, 2007.

<Antipyretics and analgesics, anti-inflammatory agents>

Flurbiprofen (oral dosage form)

[Brand Name] Froben granules 8%, Froben tablets 40 (Kaken Pharmaceutical Co., Ltd.) and

others

[Adverse Reactions (clinically significant adverse reactions)]

Aplastic anaemia: Aplastic anaemia has been reported. Patients should be carefully monitored, and if any abnormalities are observed, appropriate measures such as discontinuing administration should be taken.

Toxic epidermal necrolysis (Lyell syndrome), <u>oculomucocutaneous syndrome</u> (Stevens-Johnson syndrome), dermatitis exfoliative: Toxic epidermal necrolysis (Lyell syndrome), <u>oculomucocutaneous syndrome</u> (Stevens-Johnson syndrome) and dermatitis exfoliative may occur. Patients should be carefully monitored, and if any abnormalities are observed, administration of this drug should be discontinued and appropriate measures should be taken.

<Antipyretics and analgesics, anti-inflammatory agents>

Flurbiprofen Axetil

[Brand Name] Ropion Injection 50 mg (Kaken Pharmaceutical Co., Ltd.)

[Adverse Reactions (clinically significant adverse reactions)]

Toxic epidermal necrolysis (Lyell syndrome), oculomucocutaneous syndrome (Stevens-Johnson syndrome), dermatitis exfoliative: Toxic epidermal necrolysis (Lyell syndrome), oculomucocutaneous syndrome (Stevens-Johnson syndrome) and dermatitis exfoliative may occur. Patients should be carefully observed, and if such abnormalities are observed, administration of this drug should be

Botulinum Toxin Type A

[Brand Name] Botox Injection 100 (GlaxoSmithKline K.K.)

[Precautions of Dosage and Administration]

<Blepharospasm>

Blepharoptosis may occur. Injection near the levator palpebrae superioris should be

avoided.

<Spasmodic torticollis>

Caution should be exercised when administering into the levator scapulae, since

the injection may be associated with an increased risk of dysphagia and

respiratory infection.

discontinued and appropriate measures should be taken.

[Important Precautions]

Injection of botulinum toxin may cause adverse events which are possible related to spread of botulinum toxin distant from the site of administration. Deaths associated with dysphagia, pneumonia and/or significant debility have been reported. Extreme caution should be exercised when administering this drug to patients with neurological disorder such as dysphagia because of an increased risk of these adverse events.

Since feelings of weakness, muscle weakness, dizziness and visual acuity reduced may occur after administration of this drug, the patient should be cautioned when performing potentially hazardous tasks, such as operating an automobile or machinery.

[Adverse Reactions (clinically significant adverse reactions)]

Shock, anaphylactoid reactions, serum sickness: Shock, anaphylactoid reactions and serum sickness may occur. This drug should therefore be administered with precautionary methods against these symptoms.

After administration of this drug, the patient's clinical condition should be closely

After administration of this drug, the patient's clinical condition should be closely monitored for any changes, such as nausea, to check that no abnormalities have occurred. If symptoms, such as dyspnea, generalized flushing, angioedema and rash, etc. occur, this drug should be discontinued immediately, and appropriate measures, such as maintaining blood pressure, fluid replacement/management, and maintaining the airway, should be taken.

Convulsive seizures: New onset or recurrent convulsive seizures have been reported. If such symptoms are observed, appropriate measures should be taken. Caution should be administered particularly when patients have a history of convulsive seizures.

4 < Miscellaneous> Everolimus

[Brand Name] Certican Tablets 0.25 mg, 0.5 mg, and 0.75 mg (Novartis Pharma K.K.)

[Adverse Reactions (clinically significant adverse reactions)]

<u>Pulmonary alveolar proteinosis:</u> Pulmonary alveolar proteinosis may occur.

<u>Patients should be carefully monitored.</u> If abnormalities are observed, appropriate measures, such as discontinuation of the drug should be taken.

<Synthetic antibacterials>

Garenoxacin Mesilate Hydrate

[Brand Name] Geninax Tablets 200 mg (Toyama Chemical Co., Ltd.)

[Important Precautions]

Shock, anaphylactoid reactions have been reported. Complete medical histories including histories of allergies and drug hypersensitivity should be taken before initiating therapy with this drug.

[Adverse Reactions (clinically significant adverse reactions)]

Shock, anaphylactoid reactions (dyspnoea, oedema, redness, etc.): Shock, anaphylactoid reactions may occur. Patients should be carefully monitored, and if any abnormalities are observed, administration of this drug should be discontinued and appropriate measures should be taken.

<Reasons for revisions of 6 and 7 below>

The MHLW has provided information regarding possible occurrence of abnormal behaviour in pediatric and adolescent influenza patients to healthcare providers through various related organisations by issuing "To All Healthcare Providers Involved in Influenza Treatment (Request for Precautions After Initiating Influenza Treatment)" (February 28, 2007). As results of the investigations by the Subcommittee of the Committee on Drug Safety, under the Pharmaceutical Affairs and Food Sanitation Council regarding "oseltamivir phosphate (Tamiflu)" (December 25, 2007), the MHLW has requested the marketing authorisation holder to revise the PRECAUTION section in order to remind the healthcare providers of the abnormal behaviour.

< Antiparkinsonian agents>

Amantadine Hydrochloride

[Brand Name] Symmetrel Fine Granules 10%, Symmetrel Tablets 50 mg and 100 mg (Novartis

Pharma K.K.) and others

[Important Precautions] Use of this drug for "Influenza A virus infection"

It has been reported that psychoneurotic symptoms including abnormal behaviour occurred after administration of this drug, although the causal relationship to this drug is unknown. When this drug is administered to children and adolescents, it is required to explain to patients or their families that, after initiation of treatment with this drug. Dabnormal behaviour may occur and Ocaregivers should be careful not to let patients alone at least for 2 days if they are treated at home, as preventative measures to avoid rare accidents including falls due to abnormal behaviour. Also, since it has been reported that similar symptoms occur due to influenza encephalopathy, it is required to explain the same as above.

< Antivirals>

Zanamivir Hydrate

[Brand Name] Relenza (GlaxoSmithKline K.K.)

[Important Precautions]

It has been reported that psychoneurotic symptoms including abnormal behaviour occurred after administration of this drug, although the causal relationship to this drug is unknown. When this drug is administered to children and adolescents, it is required to explain to patients or their families that, after initiation of treatment with this drug. Dabnormal behaviour may occur and Ocaregivers should be careful not to let patients alone at least for 2 days if they are treated at home, as preventative measures to avoid rare accidents including falls due to abnormal behaviour. Also, since it has been reported that similar symptoms occur due to influenza encephalopathy, it is required to explain the same as above.

2

List of products subject to Early Post-marketing Phase Vigilance

(As of January 1, 2008)

	1/ 1/	5 01 January 1, 2000)	
Nonproprietary name Brand name	Name of the marketing authorisation holder	Date of EPPV initiation	
Carteolol Hydrochloride Mikelan LA Ophthalmic Solution 1% and 2%	Otsuka Pharmaceutical Co., Ltd.	July 3, 2007	
Darbepoetin Alfa (Genetical recombination)		July 9, 2007	
Nesp Injection Syringe 10 µg syringe, 15 µg syringe, 20 µg syringe, 30 µg syringe, 40 µg syringe, 60 µg syringe, and 120 µg syringe	Kirin Pharma Company, Limited		
Fludarabine Phosphate Fludara Tab. 10 mg	Bayer Yakuhin, Ltd.	July 12, 2007	
Estradiol l'estrogel 0.06%	Shiseido Co., Ltd.	August 9, 2007	
Tadalafil Cialis Tablets 5 mg, 10 mg, and 20 mg	Eli Lilly Japan K.K.	September 12, 2007	
Topina Tablets 50 mg and 100 mg	Kyowa Hakko Kogyo Co., Ltd.	September 26, 2007	
Montelukast Sodium Kipres Fine Granules 4 mg	Kyorin Pharmaceutical Co., Ltd.	October 2, 2007	
Montelukast Sodium Singulair Fine Granules 4 mg	Banyu Pharmaceutical Co., Ltd.	October 2, 2007	
Rocuronium Bromide Eslax Intravenous 25 mg/2.5 mL and 50 mg/5.0 mL	Nippon Organon K.K.	October 2, 2007	
Garenoxacin Mesilate Hydrate Geninax Tablets 200 mg	Toyama Chemical Co., Ltd.	October 5, 2007	
Idursulfase (Genetical recombination) Elaprase Solution for Intravenous Drip 6 mg	Genzyme Japan K.K.	October 17, 2007	
Pilocarpine Hydrochloride Salagen Tablets 5 mg ^{*1}	Kissei Pharmaceutical Co., Ltd.	October 19, 2007	
Nicorandil Sigmart Injection 2 mg, 12 mg, and 48 mg ^{*2}	Chugai Pharmaceutical Co., Ltd.	October 19, 2007	
Clopidogrel Sulfate Plavix Tablets 25 mg and 75 mg*3	Sanofi-Aventis K.K.	October 19, 2007	
Loratadine Claritin Tablets 10 mg, Claritin RediTab Tablets 10 mg *4	Schering-Plough K.K.	October 19, 2007	
Travoprost Travatanz Ophthalmic Solution 0.004%	Alcon Japan Ltd.	October 25, 2007	
Strontium Chloride (⁸⁹ Sr) Metastron Injectable	Nihon Medi-Physics Co., Ltd.	October 31, 2007	
Eplerenone Selara Tablets 25 mg, 50 mg, and 100 mg	Pfizer Japan Inc.	November 13, 2007	

Estradiol Divigel 1 mg	Pola Pharma Inc.	November 20, 2007
Imiquimod Beselna Cream 5%	Mochida Pharmaceutical Co., Ltd.	December 10, 2007
Darunavir Ethanolate Prezista Tablets 300 mg	Janssen Pharmaceutical K.K.	December 10, 2007
Insulin Detemir (Genetical recombination) Levemir 300, Levemir 300 FlexPen	Novo Nordisk Pharma Ltd.	December 14, 2007
Nelarabine Arranon G Injection 250 mg	GlaxoSmithKline K.K.	December 14, 2007
Erlotinib Hydrochloride Tarceva Tablets 25 mg, 100 mg, and 150 mg	Chugai Pharmaceutical Co., Ltd.	December 18, 2007
Methylphenidate Hydrochloride Concerta Tablets 18 mg and 27 mg	Janssen Pharmaceutical K.K.	December 19, 2007
Beraprost Sodium Careload LA Tablets 60 μg	Toray Industries, Inc.	December 19, 2007
Beraprost Sodium Berasus LA Tablets 60 μg	Kaken Pharmaceutical Co., Ltd.	December 19, 2007

^{*1:} An additional indication for "the treatment of symptoms of dry mouth in patients with Sjogren's syndrome"

^{*2:} An additional indication for "cardiac failure acute (including acute exacerbation of cardiac failure chronic)"
*3: An additional indication for "acute coronary syndrome (unstable angina pectoris, non ST segment elevation myocardial infarction) to which percutaneous coronary intervention (PCI) is being planned"

^{*4:} Additional administration for "pediatrics"

Information on oseltamivir phosphate (Tamiflu)

<The brief summary of the results of the investigation by the Subcommittee on Drug Safety (held on December 25, 2007)>

The brief summary of the results of the investigation on "oseltamivir phosphate (Tamiflu)" by the Subcommittee of the Committee on Drug Safety under the Pharmaceutical Affairs and Food Sanitation Council (held on December 25, 2007) is presented. Please refer to the "full text" of the results of the investigation and reference materials from the Subcommittee on Drug Safety available on the MHLW website (http://www.mhlw.go.jp/) in Japanese, as well.

Subcommittee on Drug Safety Committee on Drug Safety Pharmaceutical Affairs and Food Sanitation Council

Oseltamivir Phosphate (Tamiflu)

This subcommittee held meetings to decide on a conclusion with regard to a relationship between the administration of oseltamivir phosphate (Tamiflu) and adverse reactions such as abnormal behaviour on April 4, June 16, and November 11, 2007. A hearing was conducted on June 16, 2007 to obtain statements of opinion from organizations collecting information on the safety of Tamiflu. In addition, investigations have been continuing on the reports on the status of reviews provided by the Oseltamivir Phosphate Non-clinical Working Group (Non-clinical WG) and Oseltamivir Phosphate Clinical Working Group (Clinical WG) on June 16 and November 11, 2007 (Note 1).

(Note 1) Refer to the reference materials for the progress on the safety measures for Tamiflu.

Today, this subcommittee conducted an investigation of the review results reported by the Non-clinical WG and Clinical WG, as shown in <u>Appendix 1 and 2</u>, respectively. The results of the present review by this subcommittee regarding the relationship between Tamiflu intake and abnormal behaviour or sudden death are as follows.

<Editing note: The underlined materials are not referable.>

- OToday, this subcommittee received reports on results of non-clinical studies (animal experiments, etc.), clinical studies, and epidemiological surveys (currently, have not reached the analysis stage necessary to obtain a clear conclusion) from the Non-clinical WG and Clinical WG. Although at present there have not been any results obtained that suggest a causal relationship between Tamiflu intake and abnormal behaviour or sudden death, it is appropriate to continue to make progress with thorough and careful investigation and analysis of epidemiological surveys and clinical studies in particular, which should be reported to the Clinical WG and this subcommittee as soon as possible.
 - (1) Non-clinical Studies

 Results of binding assays showed that the brain concentrations of Tamiflu and active metabolite that are estimated when the clinical dose is administered are not thought to have multiple effects on CNS (central nerves system) receptors and
 - (2) Clinical Studies Based on an interim analysis of the sleep laboratory study, it was confirmed that Tamiflu did not cause dyssomnia, and there were no clear changes noted in ECG tests. And others.
- O Based on these results, this subcommittee will progress with further review of results from non-clinical studies, clinical studies and epidemiological surveys, etc., that are currently being conducted or analysed in the Non-clinical WG and Clinical WG, and will decide on a final conclusion as soon as possible.
- O It is necessary to remind healthcare providers and the public of abnormal behaviour that may occur due to influenza.
- O Based on the above, the measures being taken for Tamiflu (Note 2) are still valid at the present time, and healthcare providers, patients and their families, etc. should be kept alerted.

(Note 2) Dear Healthcare Professional Letter issued on March 20, 2007:

ion channels. And others.

Abnormal behaviour that have resulted in accidents such as falls have been reported in patients aged 10 to 19 years following administration of this drug, although the causal relationship to this drug is unknown. As a general rule, this drug should not be used in these patients for the above reason except that the patient is considered a high-risk patient based on complications and past history, etc. When this drug is administered to children and adolescents, it is required to explain to patients or their families that, after initiation of treatment with this drug, ①abnormal behaviour may occur and ②caregivers should be careful not to let patients alone at least for 2 days if they are treated at home, as preventative measures to avoid rare accidents.

Also, since it has been reported that similar symptoms occur due to influenza encephalopathy, it is required to explain the same as above.

- O Furthermore, with regard to zanamivir hydrate (Relenza) and amantadine hydrochlorate (Symmetrel, etc.), the following points should be added to the PRECAUTIONS in the package insert, and efforts should be made to remind healthcare professionals, patients and their caregivers, etc. of the possibility of abnormal behaviour occurring in children and adolescents with influenza.
 - It has been reported that psychoneurotic symptoms including abnormal behaviour occurred after administration of this drug, although the causal relationship to this drug is unknown. When this drug is administered to children and adolescents, it is required to explain to patients or their families that, after initiation of treatment with this drug, ①abnormal behaviour may occur and ②caregivers should be careful not to let patients alone at least for 2 days if they are treated at home, as preventative measures to avoid rare accidents including falls due to abnormal behaviour. Also, since it has been reported that similar symptoms occur due to influenza encephalopathy, it is required to explain the same as above.