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Translated by Pharmaceuticals and Medical Devices Agency



This English version is intended to be a reference material to provide convenience for users. In the event of inconsistency between the Japanese original and this

English translation, the former shall prevail.

Revision of Precautions Cabergoline

August 22, 2019

Therapeutic category

Antiparkinsonian agents

Non-proprietary name

Cabergoline

Safety measure Precautions should be revised in the package insert.

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3-3-2 Kasumigaseki, Chiyoda-ku, Tokyo 100-0013 Japan E-mail: <u>safety.info@pmda.go.jp</u> Revision in line with the Instructions for Package Inserts of Prescription Drugs, PAB Notification No. 606 by the Director General of Pharmaceutical Affairs Bureau, MHW, dated April 25, 1997 (Old instructions): Revised language is underlined.

Current	Revision
Precautions concerning Dosage and Administration	Precautions concerning Dosage and Administration
When dose reduction or discontinuation of this drug is necessary	(deleted)
for treatment of Parkinson's disease, the dose should be gradually	
reduced.	
Careful Administration	Careful Administration
Patients with marked visual impairment, etc. caused by pituitary	Patients with hyperprolactinemic pituitary adenoma who have
tumors that have grown beyond the sella turcica	marked visual impairment, etc. caused by pituitary tumors that have
	grown beyond the sella turcica
Important Precautions (N/A)	Important Precautions Patients with hyperprolactinemic pituitary adenoma that has grown beyond the sella turcica may have cerebrospinal fluid rhinorrhea because of adenoma shrunk by treatment with this drug, leading to meningitis. When any abnormalities are observed, appropriate measures should be taken such as dose reduction or
	discontinuation of the drug. <u>It has been reported that in patients with hyperprolactinemic</u> <u>pituitary adenoma who had visual field disorders, this drug shrunk</u> <u>the adenoma and improved the visual field disorders, which</u>

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	recurred later through invagination of the optic chiasm into the sella
	caused by the sella turcica's cavitation. When any abnormalities
	are observed, appropriate measures should be taken such as dose
	reduction or discontinuation of the drug.
	When dose reduction or discontinuation of this drug is necessary
	for treatment of Parkinson's disease, the dose should be gradually
	reduced. Rapid dose reduction or discontinuation may cause
	syndrome malin. In addition, rapid dose reduction or
	discontinuation of dopamine receptor agonists may cause drug
	withdrawal syndrome (characterized by apathy, anxiety, depression,
	fatigue, sweating, pain, etc.).
Adverse Reactions	Adverse Reactions
Other Adverse Reactions	Other Adverse Reactions
<parkinson's disease=""></parkinson's>	<parkinson's disease=""></parkinson's>
(N/A)	Drug withdrawal syndrome* (apathy, anxiety, depression, fatigue,
	sweating, pain, etc.)
	*When any abnormalities are observed, appropriate measures
	should be taken such as resuming administration or returning the
	dose to the level prior to reduction.

N/A: Not Applicable, because the section is not included in the current package insert.

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