Event of URETERAL CALCULI

- **Investigator:** The subject's underlying disease which is not related to study or study drug.

- **AbbVie:** Event is common in the general population, the prevalence of kidney stones ranges from 8% to 19% in males. Additional risk factor includes obesity.

Alternative Etiology for UPADACITINIB (Open Label)

Event of URETERAL CALCULI

- **Investigator:** The subject's underlying disease which is not related to study or study drug.

- **AbbVie:** Event is common in the general population, the prevalence of kidney stones ranges from 8% to 19% in males. Additional risk factor includes obesity.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] ALT:** 176 IU/L (normal 5 to 40)

[redacted] **20[redacted] ALT:** 97 IU/L (normal 5 to 40)

[redacted] **20[redacted]0 AST:** 150 IU/L (normal 5 to 34)

[redacted] **20[redacted] BLOOD PRESSURE:** Around 150-160 mmHg

[redacted] **20[redacted] BMI:** 32.0 kg/m2

[redacted] **20[redacted] COMPUTED TOMOGRAPHY:** right perineal fat stranding, mild hydronephrotic with contrast delayed enhancement, distal ureter inflammation change suspected of a tiny distal ureter stone

[redacted] **20[redacted] CPK:** Elevated

[redacted] **20[redacted] CREATININE KINASE:** 7377 IU/L (normal 26 to 245)

[redacted] **20[redacted] CREATININE KINASE:** 1257 IU/L (normal 26 to 245)

[redacted] **20[redacted] CREATININE KINASE:** 425 IU/L (normal 26 to 245)

[redacted] **20[redacted] RBC:** Urine RBC's: 44 U/L Upper normal range: 17 Lower normal range: 0

被験者番号 [redacted] (Investigator [redacted])

Reason for Narrative

Adverse Event Preferred Term(s)	Serious Adverse Event	Adverse Event Leading to Discontinuation of Study Drug	Death	Event of Interest
急性胆管炎	X			

Treatment Group	Age at Study Start	Sex	Race
P1:ABT-494 15 MG QD /P2:ABT-494 15 MG QD	6[redacted]	FEMALE	ASIAN

Medical History	Onset Year
MEDICAL HISTORY: FROZEN SHOULDER	20[redacted]
MEDICAL HISTORY: LUMBAR SPINE ADHESION	20[redacted]
MEDICAL HISTORY: MENOPAUSAL	20[redacted]
AXIAL SPONDYLOARTHRITIS DISEASE HISTORY: AXIAL SPONDYLOARTHRITIS	20[redacted]
MEDICAL HISTORY: FATTY LIVER	20[redacted]

Prior Procedures	Procedure Year
PRIOR PROCEDURES: S/P INTERNAL FIXATION L4-S1	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	NEVER			
CIGARS	NEVER			
E-CIGARETTES	NEVER			
PIPES	NEVER			

Alcohol Use	Status	Number/Day
ALCOHOL	NEVER	

Study Drug Administration

Study Drug	Dose/Units	Route	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
ABT-494	15 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 98	98
ABT-494	15 mg	ORAL	QD	[redacted]20[redacted] / 99	/	

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
BCG Vaccine	NOT REPORTED	NOT REPORTED	Y-M: 19[redacted]
ADALIMUMAB	40 mg	OTHER: Q2W	Y-M: 20[redacted]
ACECLOFENAC	100 mg	PRN	Y-M: 20[redacted]
ETORICOXIB	60 mg	QD	Y-M: 20[redacted]
GOLIMUMAB	50 mg	OTHER: Q4W	Y-M: 20[redacted]
SULFASALAZINE	1 g	QD	Y-M: 20[redacted]
ETORICOXIB	60 mg	QD	Y-M: 20[redacted]
SULFASALAZINE	1 g	QD	Y-M: 20[redacted]
GOLIMUMAB	50 mg	OTHER: Q4W	Y-M: 20[redacted]
ETORICOXIB	60 mg	QD	Y-M: 20[redacted]
SULFASALAZINE	1 g	QD	Y-M: 20[redacted]
SULFASALAZINE	1 g	QD	Y-M: 20[redacted]
GOLIMUMAB	50 mg	OTHER: Q4W	Y-M: 20[redacted]
SULFASALAZINE	1 g	QD	Y-M: 20[redacted]
ETORICOXIB	60 mg	QD	Y-M: 20[redacted]
SULFASALAZINE	1 g	QD	Y-M: 20[redacted]
ETORICOXIB	60 mg	QD	Y-M: 20[redacted]
SULFASALAZINE	1 g	QD	Y-M: 20[redacted]
CELECOXIB	200 mg	QD	Y-M: 20[redacted] / -356
SULFASALAZINE	1 g	QD	Y-M: 20[redacted] / -356
ETORICOXIB	60 mg	QD	Y-M: 20[redacted] / -342
GOLIMUMAB	50 mg	OTHER: Q4W	Y-M: 20[redacted] / -286
ETORICOXIB	60 mg	PRN	Y-M: 20[redacted] / -230
SULFASALAZINE	1 g	QD	Y-M: 20[redacted] / -48
ETORICOXIB	NOT REPORTED	3 TIMES PER WEEK	Y-M: 20[redacted] / -20

Other Medications - Medications taken within 30 days prior to each narrative event until AE stopped or end of study

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day	Stop Year-Month / RX Day
SULFASALAZINE	1 G	QD	Y-M: 20[redacted] / -48	NOT REPORTED
ETORICOXIB	NOT REPORTED	3 TIMES PER WEEK	Y-M: 20[redacted] / -20	NOT REPORTED
PHYTOMENADIONE	10 MG	OTHER: QW14	Y-M: 20[redacted] / 43	Y-M: 20[redacted] / 43
HYOSCINE BUTYLBROMIDE	20 MG	OTHER: STAT	Y-M: 20[redacted] / 43	Y-M: 20[redacted] / 44
METOCLOPRAMIDE HYDROCHLORIDE	10 MG	OTHER: STAT	Y-M: 20[redacted] / 43	Y-M: 20[redacted] / 44

MIDAZOLAM HYDROCHLORIDE	5 MG	OTHER: STAT	Y-M: 20[redacted] / 43	Y-M: 20[redacted] / 44
CEFOPERAZONE;SULBACTAM	4 G	OTHER: Q12H	Y-M: 20[redacted] / 43	Y-M: 20[redacted] / 46
FAMOTIDINE	20 MG	BID	Y-M: 20[redacted] / 43	Y-M: 20[redacted] / 49
MOSAPRIDE CITRATE	5 MG	BID	Y-M: 20[redacted] / 43	Y-M: 20[redacted] / 49
LEVOCETIRIZINE DIHYDROCHLORIDE	5 MG	QD	Y-M: 20[redacted] / 46	Y-M: 20[redacted] / 49
CEFIXIME	200 MG	BID	Y-M: 20[redacted] / 47	Y-M: 20[redacted] / 49

Event #1: Serious Adverse Event

Event Description	ACUTE CHOLANGITIS
Preferred Term	急性胆管炎
AE Onset Date / Rx Day	[redacted]20[redacted] / 42
Age at AE Onset	6[redacted]

Laboratory Testing

[redacted]20[redacted](RX DAY 43): ALANINE AMINOTRANSFERASE: 639 [7 - 35] U/L; ALKALINE PHOSPHATASE: 116 [32 - 91] U/L; ASPARTATE AMINOTRANSFERASE: 237 [15 - 41] U/L; BILIRUBIN: 80 [5 - 21] UMOL/L; EOSINOPHILS/LEUKOCYTES: 0.5 [1 - 6] %; ERYTHROCYTES: 3.6 [4 - 5] 10^12/L; HEMATOCRIT: 0.33 [0.36 - 0.46] FRACTION OF 1; HEMOGLOBIN: 110 [120 - 160] G/L; LEUKOCYTES: 5460 [4000 - 11000] 10^9/L; LYMPHOCYTES/LEUKOCYTES: 11.7 [20 - 45] %; NPTST012-BILIRUBIN DIRECT: 2.7 [0 - 0.5] MG/DL; NPTST033-HS-CRP: 6.37 [0 - 0.75] MG/DL; NPTST041-LIPASE: 21 [22 - 51] U/L; NPTST068-R-GT: 343 [7 - 50] IU/L; NPTST074-SEG: 80.6 [40 - 75] %; POTASSIUM: 3.4 [3.6 - 5.1] MMOL/L; PROTEIN: 2+ [NOT REPORTED - NOT REPORTED] UNIT NOT REPORTED; SODIUM: 134 [136 - 144] MMOL/L; [redacted]20[redacted] (RX DAY 44): NPTST011-BILE CULTURE: ESCHERICHIA COLI [NOT REPORTED - NOT REPORTED] UNIT NOT REPORTED; NPTST013-BLOOD CULTURE: NO GROWTH [NOT REPORTED - NOT REPORTED] UNIT NOT REPORTED; [redacted]20[redacted] (RX DAY 46): ALANINE AMINOTRANSFERASE: 232 [7 - 35] U/L; ASPARTATE AMINOTRANSFERASE: 73 [15 - 41] U/L; BILIRUBIN: 63 [5 - 21] UMOL/L; EOSINOPHILS/LEUKOCYTES: 0.8 [1 - 6] %; HEMOGLOBIN: 97 [120 - 160] G/L; LEUKOCYTES: 6260 [4000 - 11000] 10^9/L; NPTST033-HS-CRP: 2.84 [0 - 0.75] MG/DL; NPTST068-R-GT: 242 [7 - 50] IU/L; [redacted]20[redacted] (RX DAY 49): ALANINE AMINOTRANSFERASE: 180 [7 - 35] U/L; BILIRUBIN: 26 [5 - 21] UMOL/L; NPTST033-HS-CRP: 1.07 [0 - 0.75] MG/DL; NPTST068-R-GT: 172 [7 - 50] IU/L

Microbiology

[redacted]20[redacted] (RX DAY 44): OTHER BILE BILE CULTURE: POSITIVE-ESCHERICHIA COLI

SAE Supplemental Procedure

[redacted]20[redacted] (RX DAY 43): ABDOMINAL SONOGRAPHY:FATTY LIVER, MILD GALLSTONES AND POLYPS; CT WITHOUT / WITH CONTRAST_ABDOMEN:1. FATTY LIVER. 2. GALLSTONES.; [redacted]20[redacted] (RX DAY 44): ENDOSCOPIC SPHINCTEROTOMY:COMMON BILE DUCT SLUDGE, S/P ENDOSCOPIC SPHINCTEROTOMY AND REMOVAL R/O PASSING STONE

AE Stopped Rx Day	71
Duration of AE	30 DAYS
Severity	Grade 3
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	GALLSTONE AND POLYPS

Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted] 20[redacted]:14:15
Program Source Code [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M19-944

治験責任医師からの報告。本被験者は台湾の 6[redacted] 歳女性で，米国アッヴィ社の ABT-494（ウパダシチニブ）の治験で盲検化された治験薬が投与され，急性胆管炎を発現した。

Event 1 の臨床経過：

関連病歴は，腰椎癒着，閉経，L4–S1 の内固定後の状態，脂肪肝，軸性脊椎関節炎，非喫煙者及び非飲酒者であった。

投与開始から 43 日後，被験者は急性胆管炎を発現した。投与開始から 71 日後，急性胆管炎は消散した。

被験者は放射線被曝もなく，突然，右上腹部鈍痛を認めた。被験者には増悪要因も緩和要因もなかった。被験者には，食欲不振，悪心，嘔吐，茶色尿及び腹部膨満感も認められた。被験者に発熱や悪寒，排尿時不快感はなく，上気道感染の症状も認められなかった。不快感が持続するため，被験者は胃腸科外来を受診した。臨床検査及び診断で肝機能検査値上昇が認められた。腹部超音波検査で胆石及びポリープが認められた。胆道仙痛及び黄疸の印象から，医療チームは総胆管結石を疑い，救急治療室に照会した。腹部 CT 検査で総胆管拡張のない胆石が明らかとなった。内視鏡的逆行性胆管膵管造影が行われ，総胆管の胆砂及び胆石の通過が認められた。内視鏡的乳頭括約筋切開術及び総胆管の胆砂の除去が行われた。総胆管の胆砂が急性胆管炎及び胆石と関連している印象から，投与開始から 44 日後，被験者は更なる治療のため入院した。投与開始から 44 日後，被験者は総胆管の胆砂の除去及び通過胆石除去のため，内視鏡的乳頭括約筋切開術を受けた。投与開始から 47 日後，被験者は退院した。

治験責任医師によると，本事象に関連する被験者のリスク要因は胆石であった。

投与された薬剤は，ブスコパン，mopde f c，セキシム，ザイザル，セフォペラゾン・スルバクタム，pulin であった。

The patient's past medications include:

HUMIRA for AXIAL SPONDYLOARTHRITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

TONEC for AXIAL SPONDYLOARTHRITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

ARCOXIA for AXIAL SPONDYLOARTHRITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted], Started [redacted] 20[redacted])

SIMPONI for AXIAL SPONDYLOARTHRITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

CELEBREX for AXIAL SPONDYLOARTHRITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Blinded)

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1) Cholangitis acute (10008605) (Cholangitis acute (10008605)) [v.23.1] [10008605]

Causality as per reporter (Drug/Vaccine): No reasonable possibility

Causality as per Mfr. (Drug/Vaccine): No reasonable possibility

Dechallenge: Yes

Rechallenge: rechallenge was done, reaction did not recur

Alternative Etiology for UPADACITINIB (Blinded)

Event of ACUTE CHOLANGITIS

- Investigator: Gallstone and polyps.

- AbbVie: Risk factors include gallstones and common bile duct sludge.

Relevant Laboratory & Other Diagnostic Tests

[redacted] 20[redacted] **ABDOMINAL ULTRASONOGRAPHY:** Fatty liver, mild gallstones, and polyps

[redacted] 20[redacted] **ALKALINE PHOSPHATASE:** 116 IU/L (normal 32 to 91)

[redacted] 20[redacted] **ALANINE AMINOTRANSFERASE:** 639 IU/L (normal 7 to 35)

[redacted] 20[redacted] **ALANINE AMINOTRANSFERASE:** 232 IU/L (normal 7 to 35)

[redacted] 20[redacted] **ALANINE AMINOTRANSFERASE:** 180 IU/L (normal 7 to 35)

[redacted] 20[redacted] **ASPARTATE AMINOTRANSFERASE:** 237 IU/L (normal 15 to 41)

[redacted] 20[redacted] **ASPARTATE AMINOTRANSFERASE:** 73 IU/L (normal 15 to 41)

[redacted] 20[redacted] **BILE CULTURE:** ESCHERICHIA COLI

[redacted] 20[redacted] **BILIRUBIN:** 4.7 mg/dL (normal 0.3 to 1.2)

[redacted] 20[redacted] **BILIRUBIN:** 3.70 mg/dL (normal 0.3 to 1.2)

[redacted] 20[redacted] **BILIRUBIN:** 1.5 mg/dL (normal 0.3 to 1.2)

[redacted] 20[redacted] **BLOOD CULTURE:** No growth

[redacted] 20[redacted] **CT ABDOMEN:** 1. fatty liver; 2. gallstones

[redacted] 20[redacted] **HEMATOCRIT:** 32.8% (normal 36 to 46)

[redacted] 20[redacted] **HEMOGLOBIN:** 11 G/DL (normal 12 to 16)

[redacted] 20[redacted] **HEMOGLOBIN:** 9.7 G/DL (normal 12 to 16)

[redacted] 20[redacted] **HIGH-SENSITIVITY C-REACTIVE PROTEIN:** 6.365 mg/dL (normal 0 to 0.748)

[redacted] 20[redacted] **HIGH-SENSITIVITY C-REACTIVE PROTEIN:** 2.835 mg/dL (normal 0 to 0.748)

[redacted] 20[redacted] **LIPASE:** 21 U/L (normal 22 to 51)

[redacted] 20[redacted] **POTASSIUM:** 3.4 MMOL/L (normal 3.6 to 5.1)

[redacted] 20[redacted] **RBC:** 364 x10**4/UL (normal 400 to 500)

[redacted] 20[redacted] **SODIUM:** 134 MMOL/L (normal 136 to 144)

[redacted] 20[redacted] **URINE PROTEIN:** 2 +

[redacted] 20[redacted] **WBC:** 5460 /UL (normal 4000 to 11000)

[redacted] 20[redacted] **WBC:** 6260 /UL (normal 4000 to 11000)

被験者番号 [redacted](Investigator [redacted])

Reason for Narrative

Adverse Event Preferred Term(s)	Serious Adverse Event	Adverse Event Leading to Discontinuation of Study Drug	Death	Event of Interest
COVID-19 肺炎	X			X

Treatment Group	Age at Study Start	Sex	Race
P1:PLACEBO /P2:ABT-494 15 MG QD	5[redacted]	MALE	WHITE

Medical History	Onset Year
MEDICAL HISTORY: CHRONIC TONSILLITIS	19[redacted]
AXIAL SPONDYLOARTHRITIS DISEASE HISTORY: AXIAL SPONDYLOARTHRITIS	20[redacted]
MEDICAL HISTORY: TRANSIENT HYPERURICEMIA	20[redacted]
MEDICAL HISTORY: CHRONIC BLEPHAROCONJUNCTIVITIS OF BOTH EYES	20[redacted]

Prior Procedures	Procedure Year
PRIOR PROCEDURES: TONSILLECTOMY	19[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	NEVER			
CIGARS	NEVER			
E-CIGARETTES	NEVER			
PIPES	NEVER			

Alcohol Use	Status	Number/Day
ALCOHOL	NEVER	

Study Drug Administration

Study Drug	Dose/Units	Route	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
PLACEBO		ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 99	99
ABT-494	15 mg	ORAL	QD	[redacted]20[redacted] / 100	/	

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
BCG Vaccine	NOT REPORTED	NOT REPORTED	Y-M: 19[redacted]
DICLOFENAC SODIUM	100 mg	QD	Y-M: 20[redacted]-[redacted] / -280
GOLIMUMAB	50 mg	OTHER: EVERY 4 WEEKS	Y-M: 20[redacted]-12 / -195
METHYLPREDNISOLONE	3 mg	QD	Y-M: 20[redacted]-[redacted] / -195
PIROXICAM BETADEX	20 mg	QD	Y-M: 20[redacted]-[redacted] / -195
SULFASALAZINE	1500 mg	BID	Y-M: 20[redacted]-[redacted] / -195
ETORICOXIB	NOT REPORTED	QD	Y-M: 20[redacted]-[redacted] / -103

Other Medications - Medications taken within 30 days prior to each narrative event until AE stopped or end of study

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day	Stop Year-Month / RX Day
SULFASALAZINE	1500 MG	BID	Y-M: 20[redacted]-[redacted] / -195	NOT REPORTED
ETORICOXIB	NOT REPORTED	QD	Y-M: 20[redacted]-[redacted] / -103	NOT REPORTED
CEFTRIAXONE	UNKNOW OTHER: UNKNOW	OTHER: UNKNOW	Y-M: 20[redacted]-[redacted] / 231	Y-M: 20[redacted]-[redacted] / 241
ENOXAPARIN SODIUM	UNKNOW OTHER: UNKNOW	OTHER: UNKNOW	Y-M: 20[redacted]-[redacted] / 231	Y-M: 20[redacted]-[redacted] / 241
FAMOTIDINE	UNKNOWN OTHER: UNKNOWN	OTHER: UNKNOW	Y-M: 20[redacted]-[redacted] / 231	Y-M: 20[redacted]-[redacted] / 241
QUERCETIN	UNKNOW OTHER: UNKNOW	OTHER: UNKNOW	Y-M: 20[redacted]-[redacted] / 231	Y-M: 20[redacted]-[redacted] / 241
REMDESIVIR	UNKNOW OTHER: UNKNOW	OTHER: UNKNOW	Y-M: 20[redacted]-[redacted] / 231	Y-M: 20[redacted]-[redacted] / 241

Event #1: Serious Adverse Event, Event of Interest - Serious Infections

Event Description COVID 19 PNEUMONIA

Preferred Term COVID-19 肺炎

AE Onset Date / Rx Day [redacted]20[redacted] / 231

Age at AE Onset 5[redacted]

Laboratory Testing

NOT REPORTED

Microbiology

NOT REPORTED

SAE Supplemental Procedure

[redacted]20[redacted] (RX DAY 238): CHEST X-RAY:THERE IS NO INFILTRATION OF LUNG TISSUE IN THE LOWER

LOBES. STRENGTHENING OF THE PULMONARY PATTERN IS PRESERVED.

AE Stopped Rx Day	241
Duration of AE	11 DAYS
Severity	Grade 2
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	COVID INFECTION
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted] 20[redacted]:14:15
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M19-944

治験責任医師からの報告。本被験者はウクライナの 5[redacted] 歳男性で，米国アッヴィ社の ABT-494（ウパダシチニブ）の治験で盲検化された治験薬及びウパダシチニブが投与され，新型コロナウイルス肺炎を発現した。

Event 1 の臨床経過：

関連病歴は，軸性脊椎関節炎，非喫煙者及び非飲酒者であった。

被験者は 14 週時までは盲検化プラセボ対照期に参加していた。投与開始から 100 日後，ウパダシチニブの非盲検投与期に移行した。

投与開始から 231 日後，被験者は新型コロナウイルス肺炎を発現した。投与開始から 241 日後，新型コロナウイルス肺炎は消散した。

投与開始から 231 日後，被験者は重度の脱力感，39°C の発熱，浮動性めまい及び息切れを訴え，入院した。中毒及び呼吸不全を呈しているため，被験者の病状は重篤と判断された。被験者は抗ウイルス薬及び抗生物質を投与された。投与開始から 238 日後，胸部 X 線検査で肺パターンの増強が認められたが，肺下葉組織の浸潤は認められなかった。投与開始から 241 日後，被験者は良好な状態で退院した。

投与された薬剤は，ファモチジン，セフトリアキソン，レムデシビル，corvitin 及びクレキサンであった。

The patient's past medications include:

DICLOBERL RETARD for AXIAL SPONDYLOARTHRITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

BREXIN for AXIAL SPONDYLOARTHRITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

METIPRED for AXIAL SPONDYLOARTHRITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

SIMPONI for AXIAL SPONDYLOARTHRITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Blinded)

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1) COVID-19 pneumonia (10084380) (COVID-19 pneumonia (10084380)) [v.24.0] [10084380]

Causality as per reporter (Drug/Vaccine): No reasonable possibility

Causality as per Mfr. (Drug/Vaccine): No reasonable possibility

Dechallenge: Not Applicable

Causality for UPADACITINIB (Open Label)

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1) COVID-19 pneumonia (10084380) (COVID-19 pneumonia (10084380)) [v.24.0] [10084380]

Causality as per reporter (Drug/Vaccine): No reasonable possibility

Causality as per Mfr. (Drug/Vaccine): No reasonable possibility

Dechallenge: Yes

Rechallenge: rechallenge was done, reaction did not recur

Alternative Etiology for UPADACITINIB (Blinded)

Event of COVID 19 PNEUMONIA

- **Investigator:** COVID Infection

- **AbbVie:** Event is more likely related to the COVID-19 pandemic outbreak.

Alternative Etiology for UPADACITINIB (Open Label)

Event of COVID 19 PNEUMONIA

- **Investigator:** COVID Infection

- **AbbVie:** Event is more likely related to the COVID-19 pandemic outbreak.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] BMI:** 28.7 kg/m2

[redacted] **20[redacted] BODY TEMPERATURE:** 39.0 Degrees C

[redacted] **20[redacted] CHEST XRAY:** There is no infiltration of lung tissue in the lower lobes. Strengthening of the pulmonary pattern is preserved.

[redacted] **20[redacted] PCR:** Negative

[redacted] **20[redacted] SARS-COV-2 TEST:** Nasopharyngeal swab: Tested positive

被験者番号 [redacted] (Investigator [redacted])

Reason for Narrative

Adverse Event Preferred Term(s)	Serious Adverse Event	Adverse Event Leading to Discontinuation of Study Drug	Death	Event of Interest
鉄欠乏性貧血				X
子宮平滑筋腫	X			

Treatment Group	Age at Study Start	Sex	Race
P1:PLACEBO /P2:ABT-494 15 MG QD	4[redacted]	FEMALE	WHITE

Medical History	Onset Year
TB SCREENING: LATENT TUBERCULOSIS	NOT REPORTED
AXIAL SPONDYLOARTHRITIS DISEASE HISTORY: AXIAL SPONDYLOARTHRITIS	20[redacted]
MEDICAL HISTORY: UTERINE LEIOMYOMA	20[redacted]
MEDICAL HISTORY: LATENT TUBERCULOSIS	20[redacted]

Prior Procedures	Procedure Year
NOT REPORTED	

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	NEVER			
CIGARS	NEVER			
E-CIGARETTES	NEVER			
PIPES	NEVER			

Alcohol Use	Status	Number/Day
ALCOHOL	NEVER	

Study Drug Administration

Study Drug	Dose/Units	Route	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
PLACEBO		ORAL	QD	[redacted]20[redacted] / 1	[redacted]C20[redacted] / 98	98
ABT-494	15 mg	ORAL	QD	[redacted]20[redacted] / 99	/	

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
BCG Vaccine	NOT REPORTED	NOT REPORTED	Y-M: 19[redacted]
ADALIMUMAB	40 mg	OTHER: ONCE EVERY 2 WEEKS	Y-M: 20[redacted]
CELECOXIB	200 mg	QD	Y-M: 20[redacted]
MELOXICAM	7.5 mg	QD	Y-M: 20[redacted]
METHOTREXATE	10 mg	OTHER: ONCE A WEEK	Y-M: 20[redacted]
METHYLPREDNISOLONE	6 mg	QD	Y-M: 20[redacted]
PIROXICAM BETADEX	NOT REPORTED	QD	Y-M: 20[redacted]
DROSPIRENONE;ETHINYLESTRADIOL	1 OTHER: TABLET	OTHER: 1 TABLET A DAY 21 DAYS, THEN 7 DAYS OFF	Y-M: 20[redacted] / -139
ISONIAZID	0.3 g	QD	Y-M: 20[redacted] / -16

Other Medications - Medications taken within 30 days prior to each narrative event until AE stopped or end of study

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day	Stop Year-Month / RX Day
PIROXICAM BETADEX	NOT REPORTED	QD	Y-M: 20[redacted]	NOT REPORTED
DROSPIRENONE;ETHINYLESTRADIOL	1 OTHER: TABLET	OTHER: 1 TABLET A DAY 21 DAYS, THEN 7 DAYS OFF	Y-M: 20[redacted] / -139	NOT REPORTED
ISONIAZID	0.3 G	QD	Y-M: 20[redacted] / -16	Y-M: 20[redacted] / 166
FERROUS SULFATE	80 MG	BID	Y-M: 20[redacted] / 288	NOT REPORTED

Event #1: Serious Adverse Event

Event Description SYMPTOMATIC UTERINE FIBROIDS

Preferred Term 子宮平滑筋腫

AE Onset Date / Rx Day [redacted]20[redacted] / 183

Age at AE Onset 4[redacted]

Laboratory Testing

NOT REPORTED

Microbiology

NOT REPORTED

SAE Supplemental Procedure

[redacted]20[redacted] (RX DAY 184): LAPAROTOMY, EXTIRPATION OF THE UTERUS WITH APPENDAGES.:POSTOPERATIVE PERIOD - UNEVENTFUL

AE Stopped Rx Day	NOT REPORTED
Duration of AE	NOT REPORTED
Severity	Grade 4
Relation to Study Drug by Investigator	REASONABLE POSSIBILITY
Investigator Alternative Etiology	NOT REPORTED
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Event #2: Event of Interest - Non-hemolytic and Non-aplastic Anemias

Event Description	IRON DEFICIENCY ANEMIA
Preferred Term	鉄欠乏性貧血
AE Onset Date / Rx Day	[redacted]20[redacted] / 280
Age at AE Onset	4[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
SAE Supplemental Procedure	
NOT APPLICABLE	
AE Stopped Rx Day	351
Duration of AE	72 DAYS
Severity	Grade 2
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	NOT APPLICABLE
Discontinued Study Drug Due to the Event	NO
SAE Criteria	NONE

Generated: [redacted]20[redacted]:14:15
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M19-944

治験責任医師からの報告。本被験者はウクライナの 4[redacted] 歳女性で，米国アッヴィ社の ABT-494（ウパダシチニブ）の治験で盲検化された治験薬及びウパダシチニブが投与され，症候性子宮類線維腫を発現した。

Event 1 の臨床経過：

関連病歴は，軸性脊椎関節炎，子宮平滑筋腫，非喫煙者及び非飲酒者であった。

被験者は 14 週時までは盲検化プラセボ対照期に参加していた。投与開始から 99 日後，ウパダシチニブの非盲検投与期に移行した。

投与開始から 183 日後，被験者は症候性子宮類線維腫を発現した。

投与開始の 5 か月前，被験者は子宮平滑筋腫と診断された。投与開始から 145 日後，再度出血したため，被験者は婦人科を受診した。その再出血が周期性のものであることから，被験者は計画された外科治療を勧められた。

投与開始から 183 日後，被験者は外科治療のために入院し，投与開始から 184 日後に手術を受けた。

開腹し，子宮及び付属器を摘出した。術後は特記なし。投与開始から 195 日後，被験者は退院した。

The patient's past medications include:

CELEBREX for AXIAL SPONDYLOARTHRITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

HUMIRA for AXIAL SPONDYLOARTHRITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

MELBEK for AXIAL SPONDYLOARTHRITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

METHOTREXATE for AXIAL SPONDYLOARTHRITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

MEDROL for AXIAL SPONDYLOARTHRITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Blinded)

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1) Uterine fibroids (10046784) (Uterine leiomyoma (10046798)) [v.23.1] [10046784]

Causality as per reporter (Drug/Vaccine): Reasonable possibility

Causality as per Mfr. (Drug/Vaccine): No reasonable possibility

Dechallenge: Not Applicable

Causality for UPADACITINIB (Open Label)

1) Uterine fibroids (10046784) (Uterine leiomyoma (10046798)) [v.23.1] [10046784]

Causality as per reporter (Drug/Vaccine): Reasonable possibility

Causality as per Mfr. (Drug/Vaccine): No reasonable possibility

Dechallenge: No

Alternative Etiology for UPADACITINIB (Blinded)

Event of SYMPTOMATIC UTERINE FIBROIDS

- **Investigator:** Not applicable

- **AbbVie:** event more likely related to pre-existing Uterine leiomyoma

Alternative Etiology for UPADACITINIB (Open Label)

Event of SYMPTOMATIC UTERINE FIBROIDS

- **Investigator:** Not applicable

- **AbbVie:** event more likely related to pre-existing Uterine leiomyoma

NON SERIOUS EVENTS AND **OTHER AREAS OF SAFETY INTEREST

Iron deficiency anaemia: study drug interrupted

被験者番号 [redacted] (Investigator [redacted])

Reason for Narrative

Adverse Event Preferred Term(s)	Serious Adverse Event	Adverse Event Leading to Discontinuation of Study Drug	Death	Event of Interest
虹彩毛様体炎	X			X
ぶどう膜炎	X			X

Treatment Group	Age at Study Start	Sex	Race
P1:ABT-494 15 MG QD /P2:ABT-494 15 MG QD	3[redacted]	FEMALE	WHITE

Medical History	Onset Year
AXIAL SPONDYLOARTHRITIS DISEASE HISTORY: AXIAL SPONDYLOARTHRITIS	20[redacted]
MEDICAL HISTORY: BILATERAL FLAT FEET	20[redacted]
MEDICAL HISTORY: IRON DEFICIENCY ANEMIA	20[redacted]
MEDICAL HISTORY: MITRAL VALVE PROLAPSE 1 DEGREE	20[redacted]
MEDICAL HISTORY: LEFT EYE ANTERIOR UVEITIS	20[redacted]

Prior Procedures	Procedure Year
NOT REPORTED	

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	CURRENT	10 CIGARETTE	6	
CIGARS	NEVER			
E-CIGARETTES	NEVER			
PIPES	NEVER			

Alcohol Use	Status	Number/Day
ALCOHOL	NEVER	

Study Drug Administration

Study Drug	Dose/Units	Route	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
ABT-494	15 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 97	97
ABT-494	15 mg	ORAL	QD	[redacted]20[redacted] / 98	/	

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
BCG Vaccine	NOT REPORTED	NOT REPORTED	Y-M: 19[redacted]
ETHINYLESTRADIOL;LEVONORGESTREL	1 OTHER: PILL	OTHER: 21 DAYS FOR 1 PILL PER DAY, THEN 7 DAYS OFF	Y-M: 20[redacted]-[redacted]
DICLOFENAC SODIUM	3.0 mL	QD	Y-M: 20[redacted]-[redacted] / -267
DICLOFENAC POTASSIUM;PARACETAMOL;SERRAPEPTASE	50 mg	BID	Y-M: 20[redacted]-[redacted] / -257
SULFASALAZINE	1000 mg	BID	Y-M: 20[redacted]-[redacted] / -257
MELOXICAM	15 mg	QD	Y-M: 20[redacted]-[redacted] / -221
MELOXICAM	15 mg	QD	Y-M: 20[redacted]-[redacted] / -140
ADALIMUMAB	40 mg	OTHER: ONCE EVERY 2 WEEKS	Y-M: 20[redacted]-[redacted] / -110
ETORICOXIB	NOT REPORTED	QD	Y-M: 20[redacted]-[redacted] / -110
FOLIC ACID	5 mg	OTHER: ONCE A WEEK	Y-M: 20[redacted]-[redacted] / -110
METHOTREXATE	15 mg	OTHER: ONCE A WEEK	Y-M: 20[redacted]-[redacted] / -110
METHYLPREDNISOLONE	6 mg	QD	Y-M: 20[redacted]-[redacted] / -110

Other Medications - Medications taken within 30 days prior to each narrative event until AE stopped or end of study

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day	Stop Year-Month / RX Day
ETHINYLESTRADIOL;LEVONORGESTREL	1 OTHER: PILL	OTHER: 21 DAYS FOR 1 PILL PER DAY, THEN 7 DAYS OFF	Y-M: 20[redacted]-[redacted]	NOT REPORTED
ETORICOXIB	NOT REPORTED	QD	Y-M: 20[redacted]-[redacted] / -110	NOT REPORTED
FOLIC ACID	5 MG	OTHER: ONCE A WEEK	Y-M: 20[redacted]-[redacted]7 / -110	NOT REPORTED
METHOTREXATE	15 MG	OTHER: ONCE A WEEK	Y-M: 20[redacted]-[redacted] / -110	NOT REPORTED

METHYLPREDNISOLONE	6 MG	QD	Y-M: 20[redacted] / -110	NOT REPORTED
BROMFENAC SODIUM	1 GTT	QD	Y-M: 20[redacted] / 35	Y-M: 20[redacted] / 93
DICLOFENAC	3.0 ML	QD	Y-M: 20[redacted] / 65	Y-M: 20[redacted] / 74
CALCIUM CHLORIDE;MAGNESIUM CHLORIDE;POTASSIUM CHLORIDE;SODIUM CHLORIDE;SODIUM LACTATE;SORBITOL	200.0 ML	OTHER: EVERY OTHER DAY	Y-M: 20[redacted] / 65	Y-M: 20[redacted] / 77
ASCORBIC ACID	2.0 ML	OTHER: EVERY OTHER DAY	Y-M: 20[redacted] / 65	Y-M: 20[redacted] / 79
CALCIUM CHLORIDE;MAGNESIUM CHLORIDE;POTASSIUM CHLORIDE;SODIUM CHLORIDE;SODIUM LACTATE;SORBITOL	UNK OTHER: UNK	OTHER: EVERY OTHER DAY	Y-M: 20[redacted] / 65	Y-M: 20[redacted] / 79
CALCIUM GLUCONATE	5.0 ML	OTHER: EVERY OTHER DAY	Y-M: 20[redacted] / 65	Y-M: 20[redacted] / 79
CYCLOPENTOLATE	1 GTT	BID	Y-M: 20[redacted] / 65	Y-M: 20[redacted] / 79
DEXAMETHASONE	UNK OTHER: UNK	OTHER: EVERY OTHER DAY	Y-M: 20[redacted] / 65	Y-M: 20[redacted] / 79
DEXAMETHASONE;TOBRAMYCIN	1 GTT	QID	Y-M: 20[redacted] / 65	Y-M: 20[redacted] / 79
METHYLETHYLPIRIDINOL HYDROCHLORIDE	10 MG	QD	Y-M: 20[redacted] / 65	Y-M: 20[redacted] / 79
THIOTRIAZOLINE	2.0 ML	OTHER: EVERY OTHER DAY	Y-M: 20[redacted] / 65	Y-M: 20[redacted] / 79
DEXAMETHASONE	1 GTT	QD	Y-M: 20[redacted] / 79	Y-M: 20[redacted] / 100
CALCIUM CHLORIDE;MAGNESIUM CHLORIDE;POTASSIUM CHLORIDE;SODIUM CHLORIDE;SODIUM LACTATE;SORBITOL	200.0 ML	QD	Y-M: 20[redacted] / 175	Y-M: 20[redacted] / 179
DICLOFENAC SODIUM	3.0 ML	QD	Y-M: 20[redacted] / 175	Y-M: 20[redacted] / 179
CALCIUM GLUCONATE	5.0 ML	QD	Y-M: 20[redacted] / 175	Y-M: 20[redacted] / 184
CALCIUM CHLORIDE;MAGNESIUM CHLORIDE;POTASSIUM CHLORIDE;SODIUM CHLORIDE;SODIUM LACTATE;SORBITOL	0.5 ML	QD	Y-M: 20[redacted] / 175	Y-M: 20[redacted] / 189
CYCLOPENTOLATE HYDROCHLORIDE	1 GTT	TID	Y-M: 20[redacted] / 175	Y-M: 20[redacted] / 189
DEXAMETHASONE	0.5 ML	QD	Y-M: 20[redacted] / 175	Y-M: 20[redacted] / 189
OMEPRAZOLE	20 MG	BID	Y-M: 20[redacted] / 175	Y-M: 20[redacted] / 189

Event #1: Serious Adverse Event, Event of Interest - Serious Infections

Event Description	RECURRENT LEFT EYE UVEITIS
Preferred Term	ぶどう膜炎
AE Onset Date / Rx Day	[redacted]C20[redacted] / 65
Age at AE Onset	3[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
SAE Supplemental Procedure	
NOT REPORTED	
AE Stopped Rx Day	79
Duration of AE	15 DAYS
Severity	Grade 2
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	WORSENING OF LEFT EYE CHRONIC UVEITIS
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Event #2: Serious Adverse Event, Event of Interest - Serious Infections

Event Description	LEFT EYE IRIDOCYCLITIS
Preferred Term	虹彩毛様体炎
AE Onset Date / Rx Day	[redacted]20[redacted] / 172
Age at AE Onset	3[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
SAE Supplemental Procedure	
NOT REPORTED	
AE Stopped Rx Day	189
Duration of AE	18 DAYS
Severity	Grade 2
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	THE PRESENCE OF CHRONIC UVEITIS

Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted] 20[redacted]:14:15
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M19-944

治験責任医師からの報告。本被験者はウクライナの 3[redacted] 歳女性で，米国アッヴィ社の ABT-494（ウパダシチニブ）の治験で盲検化された治験薬が投与され，再発左眼ぶどう膜炎を発現した。

Event 1 の臨床経過：

関連病歴は，軸性脊椎関節炎，左眼前部ぶどう膜炎，現喫煙者（1 日 10 本）及び非飲酒者であった。

投与開始から 65 日後，被験者は再発左眼ぶどう膜炎を発現した。投与開始から 79 日後，再発左眼ぶどう膜炎は消散した。

投与開始から 65 日後，3 日間左眼に疼痛及び充血があったため，被験者は入院した。治療後，被験者の状態は改善した。投与開始から 79 日後，被験者は退院した。

投与された薬剤は，グルコン酸カルシウム，アスコルビン酸，reosorbilakt，oftalek，デキサメタゾン，ジクロフェナク，ciklomed，tobradex，broksinak 及び tiotriazolin であった。

The patient's past medications include:

DICLOFENAC for AXIAL SPONDYLOARTHRITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

DICLOFENAC POTASSIUM for AXIAL SPONDYLOARTHRITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

SULFASALAZINE for AXIAL SPONDYLOARTHRITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

REUMOXICAM for AXIAL SPONDYLOARTHRITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

HUMIRA for AXIAL SPONDYLOARTHRITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Blinded)

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1) Uveitis (10046851) (Uveitis (10046851)) [v.23.1] [10046851]

Causality as per reporter (Drug/Vaccine): No reasonable possibility

Causality as per Mfr. (Drug/Vaccine): No reasonable possibility

Dechallenge: Not Applicable

Alternative Etiology for UPADACITINIB (Blinded)

Event of RECURRENT LEFT EYE UVEITIS

- **Investigator:** WORSENING OF LEFT EYE CHRONIC UVEITIS

- **AbbVie:** Event more likely related to pre-existing left eye uveitis and pre-existing axial spondyloarthritis.

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M19-944

治験責任医師からの報告。本被験者はウクライナの 3[redacted] 歳女性で，米国アッヴィ社の ABT-494（ウパダシチニブ）の治験で盲検化された治験薬及びウパダシチニブが投与され，左眼虹彩毛様体炎を発現した。

Event 2 の臨床経過：

関連病歴は，左眼前部ぶどう膜炎，現喫煙者（1 日 10 本を 6 年間）及び非飲酒者であった。

被験者は 14 週時までは盲検化プラセボ対照期に参加していた。投与開始から 98 日後，ウパダシチニブの非盲検投与期に移行した。

投与開始から 172 日後，被験者は左眼虹彩毛様体炎を発現した。投与開始から 189 日後，左眼虹彩毛様体炎は消散した。

投与開始から 172 日後，被験者に左眼の疼痛及び充血が認められた。投与開始から 175 日後，被験者は眼科を受診し入院した。左眼水晶体嚢前部に色素増加が認められた。水晶体は部分的に混濁し，硝子体の破壊が認められた。治療中，疼痛や充血が軽減し，状態は改善した。投与開始から 189 日後，被験者は退院した。

投与された薬剤は，omez，indocolir，デキサメタゾン，rheosorbilact，dicloberl，ciklomed，グルコン酸カルシウムであった。

The patient's past medications include:

EVINOPON for AXIAL SPONDYLOARTHRITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

DICLOFENAC POTASSIUM for AXIAL SPONDYLOARTHRITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

SULFASALAZINE for AXIAL SPONDYLOARTHRITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

REUMOXICAM for AXIAL SPONDYLOARTHRITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

HUMIRA for AXIAL SPONDYLOARTHRITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Blinded)

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1) Iridocyclitis (10022941) (Iridocyclitis (10022941)) [v.24.0] [10022941]

Causality as per reporter (Drug/Vaccine): No reasonable possibility

Causality as per Mfr. (Drug/Vaccine): No reasonable possibility

Dechallenge: Not Applicable

Causality for UPADACITINIB (Open Label)

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1) Iridocyclitis (10022941) (Iridocyclitis (10022941)) [v.24.0] [10022941]

Causality as per reporter (Drug/Vaccine): No reasonable possibility

Causality as per Mfr. (Drug/Vaccine): No reasonable possibility

Dechallenge: Not Applicable

Alternative Etiology for UPADACITINIB (Blinded)

Event of LEFT EYE IRIDOCYCLITIS

- **Investigator:** The presence of chronic uveitis.

- **AbbVie:** Event more likely related to pre-existing left eye anterior uveitis and pre-existing axial spondyloarthritis. Additional risk factor incudes current smoker.

Alternative Etiology for UPADACITINIB (Open Label)

Event of LEFT EYE IRIDOCYCLITIS

- **Investigator:** The presence of chronic uveitis.

- **AbbVie:** Event more likely related to pre-existing left eye anterior uveitis and pre-existing axial spondyloarthritis. Additional risk factor incudes current smoker.

被験者番号 [redacted] (Investigator [redacted])

Reason for Narrative

Adverse Event Preferred Term(s)	Serious Adverse Event	Adverse Event Leading to Discontinuation of Study Drug	Death	Event of Interest
COVID-19 肺炎	X			X

Treatment Group	Age at Study Start	Sex	Race
P1:ABT-494 15 MG QD /P2:ABT-494 15 MG QD	5[redacted]	FEMALE	WHITE

Medical History	Onset Year
MEDICAL HISTORY: IRON-DEFICIENCY ANEMIA	20[redacted]
MEDICAL HISTORY: RECURRENT IRIDOCYCLITIS	20[redacted]
AXIAL SPONDYLOARTHRITIS DISEASE HISTORY: AXIAL SPONDYLOARTHRITIS	20[redacted]
MEDICAL HISTORY: OSTEOARTHRITIS OF THE HIP JOINT	20[redacted]

Prior Procedures	Procedure Year
NOT REPORTED	

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	NEVER			
CIGARS	NEVER			
E-CIGARETTES	NEVER			
PIPES	NEVER			

Alcohol Use	Status	Number/Day
ALCOHOL	NEVER	

Study Drug Administration

Study Drug	Dose/Units	Route	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
ABT-494	15 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 97	97
ABT-494	15 mg	ORAL	QD	[redacted]20[redacted] / 98	/	

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
BCG Vaccine	NOT REPORTED	NOT REPORTED	Y-M: 19[redacted]
ACECLOFENAC	200 mg	QD	Y-M: 20[redacted]
DICLOFENAC SODIUM	75 mg	QD	Y-M: 20[redacted]
METHOTREXATE	10 mg	OTHER: 1 TIME A WEEK	Y-M: 20[redacted]
SULFASALAZINE	2000 mg	QD	Y-M: 20[redacted]
LORNOXICAM	16 mg	QD	Y-M: 20[redacted]
BETAMETHASONE DIPROPIONATE;BETAMETHASONE SODIUM PHOSPHATE	2.0 mL	OTHER: ONE TIME A WEEK	Y-M: 20[redacted]
DICLOFENAC SODIUM	100 mg	QD	Y-M: 20[redacted]
DIENOGEST;ESTRADIOL VALERATE	1 OTHER: TABLET	QD	Y-M: 20[redacted]
PIROXICAM BETADEX	NOT REPORTED	QD	Y-M: 20[redacted] / -220
ETANERCEPT	25 mg	OTHER: TWO TIMES PER WEEK	Y-M: 20[redacted] / -210
FOLIC ACID	5 mg	OTHER: ONE A WEEK	Y-M: 20[redacted] / -92
METHOTREXATE	15 mg	OTHER: ONE A WEEK	Y-M: 20[redacted] / -92

Other Medications - Medications taken within 30 days prior to each narrative event until AE stopped or end of study

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day	Stop Year-Month / RX Day
DIENOGEST;ESTRADIOL VALERATE	1 OTHER: TABLET	QD	Y-M: 20[redacted]	ONGOING
PIROXICAM BETADEX	NOT REPORTED	QD	Y-M: 20[redacted] / -220	NOT REPORTED
FOLIC ACID	5 MG	OTHER: ONE A WEEK	Y-M: 20[redacted] / -92	NOT REPORTED
METHOTREXATE	15 MG	OTHER: ONE A WEEK	Y-M: 20[redacted] / -92	NOT REPORTED
CLOPIDOGREL	75 MG	QD	Y-M: 20[redacted] / 278	ONGOING
AMBROXOL	30 MG	TID	Y-M: 20[redacted] / 278	Y-M: 20[redacted] / 316
AZITHROMYCIN	500 MG	QD	Y-M: 20[redacted] / 278	Y-M: 20[redacted] / 316
CEFTRIAXONE SODIUM	1.0 G	BID	Y-M: 20[redacted] / 278	Y-M: 20[redacted] / 316
CITICOLINE	2000 MG	QD	Y-M: 20[redacted] / 278	Y-M: 20[redacted] / 316
DEXAMETHASONE	8 MG	QD	Y-M: 20[redacted] / 278	Y-M: 20[redacted] / 316
ENOXAPARIN SODIUM	0.4 ML	QD	Y-M: 20[redacted] / 278	Y-M: 20[redacted] / 316

LEVOFLOXACIN HEMIHYDRATE	500 MG	QD	Y-M: 20[redacted] / 278	Y-M: 20[redacted] / 316

Event #1: Serious Adverse Event, Event of Interest - Serious Infections

Event Description	BILATERAL COVID-19 PNEUMONIA
Preferred Term	COVID-19 肺炎
AE Onset Date / Rx Day	[redacted]20[redacted] / 277
Age at AE Onset	5[redacted]

Laboratory Testing

[redacted]20[redacted] (RX DAY 278): PROTEIN: 0.05 [0 - 0] MG/L; [redacted]20[redacted] (RX DAY 280): ALANINE AMINOTRANSFERASE: 21.4 [1 - 31] MMOL/L; ASPARTATE AMINOTRANSFERASE: 21.4 [0.1 - 31] MMOL/L; BILIRUBIN: 9600 [8400 - 20500] UMOL/L; [redacted]20[redacted] (RX DAY 287): ERYTHROCYTE SEDIMENTATION RATE: 37 [1 - 15] MM/H; ERYTHROCYTES: 3.5 [3.9 - 4.7] 10^12/L; HEMOGLOBIN: 110 [120 - 140] G/L; LEUKOCYTES: 14 [4 - 9] 10^9/L

Microbiology

NOT REPORTED

SAE Supplemental Procedure

[redacted]20[redacted] (RX DAY 277): X-RAY:BILATERAL PNEUMONIA; [redacted]20[redacted] (RX DAY 299): X-RAY:NORMAL

AE Stopped Rx Day	299
Duration of AE	23 DAYS
Severity	Grade 1
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	COLD
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:14:15
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M19-944

治験責任医師からの報告。本被験者はウクライナの 5[redacted] 歳女性で，米国アッヴィ社の ABT-494（ウパダシチニブ）の治験で盲検化された治験薬及びウパダシチニブが投与され，両側新型コロナウイルス肺炎を発現した。

Event 1 の臨床経過：

関連病歴は，再発虹彩毛様体炎，軸性脊椎関節炎，非喫煙者及び非飲酒者であった。

被験者は 14 週時までは盲検化プラセボ対照期に参加していた。投与開始から 98 日後，ウパダシチニブの非盲検投与期に移行した。

投与開始から 277 日後，被験者は両側新型コロナウイルス肺炎を発現した。投与開始から 299 日後，両側新型コロナウイルス肺炎は消散した。

被験者は新型コロナウイルス検査を受け陽性が認められた。症状は発熱，重度の脱力感，悪心，乾性咳嗽，息切れ，嗅覚の低下及び浮動性めまいであった。

投与された薬剤は，アジスロマイシン，セフトリアキソン，デキサメタゾン及びレボフロキサシンであった。

The patient's past medications include:

DICLOTOL for AXIAL SPONDYLOARTHRITIS ([redacted])

NAKLOFEN DUO for AXIAL SPONDYLOARTHRITIS ([redacted])

SALAZOPYRIN EN for AXIAL SPONDYLOARTHRITIS ([redacted])

LARFIX for AXIAL SPONDYLOARTHRITIS ([redacted])

BETASPAN for AXIAL SPONDYLOARTHRITIS ([redacted])

DICLOBERL RETARD for AXIAL SPONDYLOARTHRITIS ([redacted])

ETANERCEPT for AXIAL SPONDYLOARTHRITIS ([redacted])

Causality for UPADACITINIB (Blinded)

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1) COVID-19 pneumonia (10084380) (COVID-19 pneumonia (10084380)) [v.24.0] [10084380]

Causality as per reporter (Drug/Vaccine): No reasonable possibility

Causality as per Mfr. (Drug/Vaccine): No reasonable possibility

Dechallenge: Not Applicable

Causality for UPADACITINIB (Open Label)

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1) COVID-19 pneumonia (10084380) (COVID-19 pneumonia (10084380)) [v.24.0] [10084380]

Causality as per reporter (Drug/Vaccine): No reasonable possibility

Causality as per Mfr. (Drug/Vaccine): No reasonable possibility

Dechallenge: Yes

Rechallenge: rechallenge was done, reaction did not recur

Alternative Etiology for UPADACITINIB (Blinded)

Event of BILATERAL COVID-19 PNEUMONIA

- Investigator: Cold

- AbbVie: Event is more likely related to the COVID-19 pandemic outbreak.

Alternative Etiology for UPADACITINIB (Open Label)

Event of BILATERAL COVID-19 PNEUMONIA

- Investigator: Cold

- AbbVie: Event is more likely related to the COVID-19 pandemic outbreak.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] BMI:** 25.67 kg/m2

[redacted] **20[redacted] BODY WEIGHT:** 69.9 KG

[redacted] **20[redacted] CHEST X-RAY:** normal

[redacted] **20[redacted] SARS-COV-2 TEST:** Positive

被験者番号 [redacted] (Investigator [redacted])

Reason for Narrative

Adverse Event Preferred Term(s)	Serious Adverse Event	Adverse Event Leading to Discontinuation of Study Drug	Death	Event of Interest
アラニンアミノトランスフェラーゼ増加				X
COVID-19 肺炎	X			X
好中球減少症				X

Treatment Group	Age at Study Start	Sex	Race
P1:ABT-494 15 MG QD /P2:ABT-494 15 MG QD	2[redacted]	MALE	WHITE

Medical History	Onset Year
AXIAL SPONDYLOARTHRITIS DISEASE HISTORY: AXIAL SPONDYLOARTHRITIS	20[redacted]
MEDICAL HISTORY: LEFT-SIDED SCOLIOSIS OF THE LUMBAR SPINE	20[redacted]
MEDICAL HISTORY: OSTEOARTHROSIS	20[redacted]
MEDICAL HISTORY: VERTEBRAL OSTEOCHONDROSIS	20[redacted]
MEDICAL HISTORY: RIGHT-SIDED SCOLIOSIS OF THE CERVICAL SPINE	20[redacted]
MEDICAL HISTORY: OSTEOPOROSIS	20[redacted]

Prior Procedures	Procedure Year
NOT REPORTED	

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	NEVER			
CIGARS	NEVER			
E-CIGARETTES	NEVER			
PIPES	NEVER			

Alcohol Use	Status	Number/Day
ALCOHOL	CURRENT	LESS THAN 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
ABT-494	15 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 98	98
ABT-494	15 mg	ORAL	QD	[redacted]20[redacted] / 99	/	

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
BCG Vaccine	NOT REPORTED	NOT REPORTED	Y-M: 19[redacted]
INFLIXIMAB	400 mg	QD	Y-M: 20[redacted]-[redacted] / -273
ETORICOXIB	90 mg	QD	Y-M: 20[redacted]-[redacted] / -258
ETANERCEPT	50 mg	OTHER: WEEKLY	Y-M: 20[redacted]-[redacted] / -202
DICLOFENAC	75 mg	BID	Y-M: 20[redacted]-[redacted] / -111
MELOXICAM	NOT REPORTED	QD	Y-M: 20[redacted]-[redacted] / -83
SULFASALAZINE	500 mg	QD	Y-M: 20[redacted]-[redacted] / -53

Other Medications - Medications taken within 30 days prior to each narrative event until AE stopped or end of study

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day	Stop Year-Month / RX Day
MELOXICAM	NOT REPORTED	QD	Y-M: 20[redacted]-[redacted] / -83	NOT REPORTED
DEXAMETHASONE	8 MG	QD	Y-M: 20[redacted]-[redacted] / 44	Y-M: 20[redacted]-[redacted] / 46
ACETYLCYSTEINE	600 MG	QD	Y-M: 20[redacted]-[redacted] / 44	Y-M: 20[redacted]-[redacted] / 51
AMBROXOL	2.0 ML	QD	Y-M: 20[redacted]-[redacted] / 44	Y-M: 20[redacted]-[redacted] / 51
LEVOFLOXACIN	500 MG	QD	Y-M: 20[redacted]-[redacted] / 44	Y-M: 20[redacted]-[redacted] / 51
MEROPENEM	1.0 G	TID	Y-M: 20[redacted]-[redacted] / 44	Y-M: 20[redacted]-[redacted] / 51
DEXAMETHASONE	4 MG	QD	Y-M: 20[redacted]-[redacted] / 47	Y-M: 20[redacted]-[redacted] / 51
AMOXICILLIN TRIHYDRATE;CLAVULANATE POTASSIUM	1000 MG	BID	Y-M: 20[redacted]-[redacted] / 52	Y-M: 20[redacted]-[redacted] / 56
ARGININE CITRATE;BETAINE;BETAINE HYDROCHLORIDE	10 ML	QD	Y-M: 20[redacted]-[redacted] / 52	Y-M: 20[redacted]-[redacted] / 61
SACCHAROMYCES BOULARDII	1 OTHER: CAPSULE	QD	Y-M: 20[redacted]-[redacted] / 52	Y-M: 20[redacted]-[redacted] / 61
SILICON DIOXIDE	2 G	TID	Y-M: 20[redacted]-[redacted] / 168	NOT REPORTED

Event #1: Serious Adverse Event, Event of Interest - Serious Infections

Event Description	COVID-19 PNEUMONIA INFECTION
Preferred Term	COVID-19 肺炎

AE Onset Date / Rx Day	[redacted]20[redacted] / 43
Age at AE Onset	2[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
SAE Supplemental Procedure	
01SEP2020 (RX DAY 43): CHEST CT:BILATERAL POLYSEGMETAL (VIRAL?) PNEUMONIA.	
AE Stopped Rx Day	66
Duration of AE	24 DAYS
Severity	Grade 2
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	POSSIBLE DUE TO COVID-19.
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Event #2: Event of Interest - Hematological Toxicity - Neutropenia

Event Description	NEUTROPENIA
Preferred Term	好中球減少症
AE Onset Date / Rx Day	[redacted]20[redacted] / 99
Age at AE Onset	2[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
SAE Supplemental Procedure	
NOT APPLICABLE	
AE Stopped Rx Day	108
Duration of AE	10 DAYS
Severity	Grade 2
Relation to Study Drug by Investigator	REASONABLE POSSIBILITY
Investigator Alternative Etiology	NOT APPLICABLE
Discontinued Study Drug Due to the Event	NO
SAE Criteria	NONE

Event #3: Event of Interest - Drug Related Hepatic Disorders

Event Description	BLOOD ALT LEVEL ELEVATION
Preferred Term	アラニンアミノトランスフェラーゼ増加
AE Onset Date / Rx Day	[redacted]20[redacted] / 220
Age at AE Onset	3[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
SAE Supplemental Procedure	
NOT APPLICABLE	
AE Stopped Rx Day	NOT REPORTED
Duration of AE	NOT REPORTED
Severity	Grade 1
Relation to Study Drug by Investigator	REASONABLE POSSIBILITY
Investigator Alternative Etiology	NOT APPLICABLE
Discontinued Study Drug Due to the Event	NO
SAE Criteria	NONE

Generated: [redacted]20[redacted]:14:15

Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M19-944

治験責任医師からの報告。本被験者はウクライナの 2[redacted] 歳男性で，米国アッヴィ社の ABT-494（ウパダシチニブ）の治験で盲検化された治験薬が投与され，新型コロナウイルス肺炎を発現した。

Event 1 の臨床経過：

関連病歴は，軸性脊椎関節炎，非喫煙者及び現飲酒者（1 日 2 杯未満）であった。

投与開始から 43 日後，被験者は新型コロナウイルス肺炎を発現した。投与開始から 66 日後，新型コロナウイルス肺炎は消散した。

投与開始から 44 日後，被験者は発熱，咳嗽及び脱力感により入院した。投与開始から 49 日後，被験者は新型コロナウイルス陽性であった。治験責任医師によると，被験者の母親及び妻も同様に新型コロナウイルス検査陽性であった。投与開始から 51 日後，被験者は退院した。

治験責任医師によると，強直性脊椎炎が肺感染のリスク要因であった。

投与された薬剤は，アセチルシステイン，デキサメタゾン，アンブロキソール，メロペネム，オーグメンチン，betargin，lacidoenter 及びレボフロキサシンであった。

The patient's past medications include:

INFLIXIMAB for AXIAL SPONDYLOARTHRITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

ARCOXIA for AXIAL SPONDYLOARTHRITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

ENBREL for AXIAL SPONDYLOARTHRITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

DICLOFENAC for AXIAL SPONDYLOARTHRITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

SULFASALAZINE for AXIAL SPONDYLOARTHRITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Blinded)

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1) COVID-19 pneumonia (10084380) (COVID-19 pneumonia (10084380)) [v.23.1] [10084380]

Causality as per reporter (Drug/Vaccine): No reasonable possibility

Causality as per Mfr. (Drug/Vaccine): No reasonable possibility

Dechallenge: Yes

Rechallenge: rechallenge was done, reaction did not recur

Alternative Etiology for UPADACITINIB (Blinded)

Event of COVID-19 PNEUMONIA INFECTION

- **Investigator:** Possible due to COVID-19

- **AbbVie:** Event is more likely related to concurrent COVID-19 infection.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] CHEST CT:** Bilateral poly segmental (viral?) pneumonia

[redacted] **20[redacted] NASOPHARYNGEAL SWAB:** COVID-19 TEST: Positive