Preferred term	好中球数減少
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 1119 / 755
Age at AE Onset	4[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	1211 / 847
Duration of AE	93 DAYS
Severity	MILD
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

Event #7: Serious Adverse Event, Event of Interest - Serious Infections

Event Description	COVID-19
Preferred term	COVID-19
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 1545 / 1181
Age at AE Onset	4[redacted]
Laboratory Testing	

[redacted]20[redacted] (RX DAY 1162): NPTST198-LACTATE DEHYDROGENASE: 322 [124 - 222] U/L; Potassium: 3.9 [3.6 - 4.8] MMOL/L; [redacted]20[redacted] (RX DAY 1183): Alanine Aminotransferase: 39 [10 - 42] U/L; Albumin: 45 [41 - 51] G/L; Alkaline Phosphatase: 71 [38 - 113] U/L; Aspartate Aminotransferase: 28 [13 - 30] U/L; Basophils/Leukocytes: 0.5 [0 - 4] %; Bilirubin: 8.551945 [6.841556 - 25.655835] UMOL/L; Blood Urea Nitrogen: 2.641578 [2.85576 - 7.1394] MMOL/L; Calcium: 2.24559 [2.195688 - 2.520051] MMOL/L; Chloride: 105 [101 - 108] MMOL/L; Creatine Kinase: 366 [59 - 248] U/L; Creatinine: 87.519227 [57.462119 - 94.591488] UMOL/L; Eosinophils/Leukocytes: 0.5 [1 - 6] %; Erythrocytes: 4.4 [4.35 - 5.55] 10^12/L; Glucose: 5.217658 [4.052011 - 6.050263] MMOL/L; Hematocrit: 0.411 [0.407 - 0.501] FRACTION OF 1; Hemoglobin: 138 [137 - 168] G/L; Leukocytes: 4.2 [3.3 - 8.6] 10^9/L; Lymphocytes/Leukocytes: 24.7 [14 - 55] %; Monocytes/Leukocytes: 8.1 [2 - 16] %; NPTST028-AMYLASE: 103 [44 - 132] U/L; NPTST108-CRP: 0.07 [0 - 0.14] MG/DL; NPTST140-FE: 60 [40 - 188] UG/DL; NPTST150-GAMMA-GLUTAMYLTRANSFERASE: 97 [13 - 64] U/L; NPTST198-LACTATE DEHYDROGENASE: 228 [124 - 222] U/L; NPTST211-MCH: 31.4 [27.5 - 33.2] PG; NPTST212-MCHC: 33.6 [31.7 - 35.3] G/DL; NPTST213-MCV: 93.4 [83.6 - 98.2] FL; NPTST220-MPV: 9.2 [NOT REPORTED - NOT REPORTED] fL; NPTST246-PDW: 9.5 [NOT REPORTED - NOT REPORTED] fL; NPTST272-RDW: 13.1 [11 - 14] %; Neutrophils/Leukocytes: 66.2 [36 - 74] %; Platelets: 304 [158 - 348] 10^9/L; Potassium: 4.3 [3.6 - 4.8] MMOL/L; Protein: 75 [66 - 81] G/L; Sodium: 143 [138 - 145] MMOL/L; Urate: 273.629666 [220.093427 - 463.980738] UMOL/L; [redacted]20[redacted] (RX DAY 1190): Alanine Aminotransferase: 120 [10 - 42] U/L; Albumin: 40 [41 - 51] G/L; Alkaline Phosphatase: 71 [38 - 113] U/L; Aspartate Aminotransferase: 71 [13 - 30] U/L; Basophils/Leukocytes: 0 [0 - 4] %; Bilirubin: 11.972723 [6.841556 - 25.655835] UMOL/L; Blood Urea Nitrogen: 3.534003 [2.85576 - 7.1394] MMOL/L; Chloride: 103 [101 - 108] MMOL/L; Creatine Kinase: 195 [59 - 248] U/L; Creatinine: 85.751162 [57.462119 - 94.591488] UMOL/L; Eosinophils/Leukocytes: 0 [1 - 6] %; Erythrocytes: 4.24 [4.35 - 5.55] 10^12/L; Hematocrit: 0.383 [0.407 - 0.501]

FRACTION OF 1; Hemoglobin: 135 [137 - 168] G/L; Leukocytes: 5.4 [3.3 - 8.6] 10^9/L; Lymphocytes/Leukocytes: 10 [14 - 55] %; Monocytes/Leukocytes: 4.5 [2 - 16] %; NPTST028-AMYLASE: 77 [44 - 132] U/L; NPTST089-CHOLINESTERASE: 345 [240 - 486] U/L; NPTST150-GAMMA-GLUTAMYLTRANSFERASE: 178 [13 - 64] U/L; NPTST198-LACTATE DEHYDROGENASE: 261 [124 - 222] U/L; NPTST211-MCH: 31.8 [27.5 - 35.3] PG; NPTST212-MCHC: 35.2 [31.7 - 35.3] G/DL; NPTST213-MCV: 90.3 [83.6 - 98.2] FL; NPTST220-MPV: 9.7 [NOT REPORTED - NOT REPORTED] fL; NPTST246-PDW: 10.7 [NOT REPORTED - NOT REPORTED] fL; NPTST272-RDW: 12.9 [11 - 14] %; Neutrophils/Leukocytes: 85.5 [36 - 74] %; Platelets: 233 [158 - 348] 10^9/L; Potassium: 4.1 [3.6 - 4.8] MMOL/L; Protein: 71 [66 - 81] G/L; Sodium: 139 [138 - 145] MMOL/L; Urate: 231.990369 [220.093427 - 463.980738] UMOL/L;
[redacted]20[redacted] (RX DAY 1192): Alanine Aminotransferase: 114 [10 - 42] U/L; Albumin: 34 [41 - 51] G/L; Alkaline Phosphatase: 81 [38 - 113] U/L; Aspartate Aminotransferase: 82 [13 - 30] U/L; Basophils/Leukocytes: 0 [NOT REPORTED - 4] %; Bilirubin: 8.551945 [6.841556 - 25.655835] UMOL/L; Blood Urea Nitrogen: 3.21273 [2.85576 - 7.1394] MMOL/L; Chloride: 102 [101 - 108] MMOL/L; Creatine Kinase: 179 [59 - 248] U/L; Creatinine: 90.171325 [57.462119 - 94.591488] UMOL/L; Eosinophils/Leukocytes: 0 [1 - 6] %; Erythrocytes: 3.99 [4.35 - 5.55] 10^12/L; Hematocrit: 0.363 [0.407 - 0.501] FRACTION OF 1; Hemoglobin: 127 [137 - 168] G/L; Leukocytes: 4.8 [3.3 - 8.6] 10^9/L; Lymphocytes/Leukocytes: 11 [14 - 55] %; Monocytes/Leukocytes: 5 [2 - 16] %; NPTST028-AMYLASE: 84 [44 - 132] U/L; NPTST037-APTT: 72.4 [80 - 120] %; NPTST041-ATYPICAL LYMPHOCYTE: 1.0 [NOT REPORTED - 0.9] %; NPTST089-CHOLINESTERASE: 294 [240 - 486] U/L; NPTST108-CRP: 4.90 [0 - 0.14] MG/DL; NPTST115-D-DIMER: >0.50 [NOT REPORTED - 1] UG/ML; NPTST143-FIBRINOGEN: 450 [200 - 400] MG/DL; NPTST150-GAMMA-GLUTAMYLTRANSFERASE: 199 [13 - 64] U/L; NPTST211-MCH: 31.8 [27.5 - 33.2] PG; NPTST212-MCHC: 35.0 [31.7 - 35.3] G/DL; NPTST213-MCV: 91.0 [83.6 - 98.2] FL; NPTST220-MPV: 10.4 [NOT REPORTED - NOT REPORTED] %; NPTST246-PDW: 11.5 [NOT REPORTED - NOT REPORTED] fL; NPTST266-PT: 88.5 [80 - 120] %; NPTST272-RDW: 12.9 [11 - 14] %; Neutrophils Band Form/Leukocytes: 9.0 [NOT REPORTED - 8] %; Neutrophils/Leukocytes: 74 [36 - 74] %; Platelets: 216 [158 - 348] 10^9/L; Protein: 64 [66 - 81] G/L; Sodium: 138 [138 - 145] MMOL/L; Urate: 226.041898 [220.093427 - 463.980738] UMOL/L

Microbiology

[redacted]20[redacted] (RX DAY 1190): OTHER SALIVA NPTST004-A NOVEL CORONAVIRUS?PCR TEST: Positive-A NOVEL CORONAVIRUS?

AE Stopped Initial Rx Day / Rx Day	1588 / 1224
Duration of AE	44 DAYS
Severity	MODERATE
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

Generated: [redacted]20[redacted]:16:51

Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は日本の 4[redacted] 歳男性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，逆流性食道炎の事象を発現した。関連する病歴は，潰瘍性大腸炎（左側），心窩部痛，元喫煙者（1 日 2 箱を 15 年間），咽頭炎及び現飲酒者（1 日 2 杯未満）であった。

Event 5 の臨床経過：

投与779日後＊，被験者は逆流性食道炎を発現した。

投与779日後＊ ，被験者は投与 60 週時の定期的な来院を行い，本事象は継続していた。被験者はテプレノンの服用を開始した。投与796日後＊ ，被験者は本事象に変化がないことを報告した。被験者は痛みを感じ，その痛みを過去に経験した急性膵炎に似ていると説明した。CT 検査及び検体検査が行われた。異常な所見は報告されなかった。被験者は急性胃炎と診断され，スルピリドを服用し，3 週間後に追跡調査を行うと告げられた。投与812日後＊，黒い嘔吐物及び黒い便があり，本事象は悪化していた。被験者は上腹部の圧痛があった。外来での検査及び診断は可能と考えられたが，被験者の不安が非常に強かったため，投与813日後＊ に入院することとなった。被験者は追加の検査及び静脈内投与での治療を受けた。投与817日後＊ ，被験者は経口摂取を再開し，軽度の心窩部痛のみが認められた。投与818日後＊ ，被験者は静脈内投与での治療を終了した。投与821日後＊ ，食事の際に軽度の心窩部痛のみはあるものの，食事を摂ることができるようになり，被験者は退院した。本事象は改善したと判断された。

投与された薬剤は，スルピリド，テプレノン及びソルデム 3A であった。

The patient's past medications include:

CEFDINIR for PHARYNGITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

ZITHROMAC SR for PHARYNGITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Open Label)

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1) Reflux esophagitis (10038262) (Gastrooesophageal reflux disease (10017885)) [v.22.1] [10038262]

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 (Open Label)

Event of REFLUX ESOPHAGITIS

- Investigator: Reflux espohagitis was occurred by dietary disorder and esophageal hernia. Thus, it was considered to have no relationship with the investigational agent.

- AbbVie: Event is more likely related to pre-existing epigastric pain since [redacted] 20[redacted].

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] ABDOMINAL ULTRASOUND:** No abnormal findings

[redacted] **20[redacted] ABDOMINAL ULTRASOUND:** Liver: No particular findings; Pancreas: No particular findings; Spleen: No particular findings; Gallbladder: No particular findings; Right kidney: Stone 5mm; Left kidney: No particular findings; GI tract: No particular findings; Paraortic lymph node: Swelling (-), AAA (-), Ascites (-)

[redacted] **20[redacted] AMYLASE:** 76 U/L (normal 44 to 132)

[redacted] **20[redacted] AMYLASE:** 86 U/L (normal 44 to 132)

[redacted] **20[redacted] BUN:** 10.3 mg/dL (normal 8 to 20)

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

[redacted] **20[redacted] CT ABDOMINAL:** No abnormal findings; acute gastritis

[redacted] **20[redacted] CT ABDOMINAL:** No abnormal findings

[redacted] **20[redacted] CT SCAN:** No particular findings

[redacted] **20[redacted] CT SCAN:** No particular findings

[redacted] **20[redacted] ENDOSCOPY:** Reflux esophagitis (Grade D), hiatal hernia

[redacted] **20[redacted] HB:** 14.7 G/DL (normal 13.7 to 16.8)

[redacted] **20[redacted] HB:** 14.9 G/DL (normal 13.7 to 16.8)

[redacted] **20[redacted] LIPASE:** 47 IU/L (normal 13 to 49)

[redacted] **20[redacted] LIPASE:** 37 U/L (normal 13 to 49)

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は日本の 4[redacted] 歳男性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，COVID-19 の事象を発現した。関連する病歴は，潰瘍性大腸炎，胸膜結核，元喫煙者（1 日 2 箱を 15 年間）及び現飲酒者（1 日 2 杯未満）であった。

Event 7 の臨床経過：

投与1545日後＊ ，被験者は COVID-19 を発現した。投与1588日後＊ ，COVID-19 は消失した。

投与1545日後＊ ，被験者は軽度の咳嗽と発熱を発現した。投与1547日後＊ ，被験者は臨床検査及び診断検査を受けた。発熱は上気道感染症に起因していた。被験者は在宅で薬物療法を受けたが発熱は続いた。

投与1554日後＊ ，被験者は継続的な熱，倦怠感及び咳嗽のため救急外来患者クリニックを受診した。被験者は同日入院し，COVID-19 と診断された。被験者は抗生物質療法を開始した。投与1556日後＊ に，被験者は再度診察を受け，発熱及びバイタルサインは安定していると診断された。投与1564日後＊ ，被験者はまだ症状はあるものの退院した。最終的に，自宅で症状は消失した

投与された薬剤は，セフトリアキソン，カロナール，アストミン及びベクルリーであった。

The patient's past medications include:

SALAZOPYRIN for ULCERATIVE COLITIS (19[redacted] - 20[redacted])

PENTASA for ULCERATIVE COLITIS (20[redacted] - 20[redacted])

PREDONINE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

IMURAN for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

HUMIRA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

PROGRAF for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

REMICADE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted], [redacted]

20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

NATURAL INDIGO for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

IRRIBOW OD for TREATMENT FOR ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

LOPEMIN for TREATMENT FOR ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Open Label)

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1) COVID-19 (10084268) (COVID-19 (10084268)) [v.24.0] [10084268]

Causality as per reporter (Drug/Vaccine): 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 (Open Label)

Event of COVID-19

- Investigator: Not Applicable

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

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] ALANINE AMINO TRANSFERASE:** 120 U/L (normal 10 to 42)

[redacted] **20[redacted] ALANINE AMINO TRANSFERASE:** 114 U/L (normal 10 to 42)

[redacted] **20[redacted] ALBUMIN:** 4.0 G/DL (normal 4.1 to 5.1)

[redacted] **20[redacted] ALKALINE PHOSPHATASE:** 71 U/L (normal 38 to 113)

[redacted] **20[redacted] ASPARTATE AMINO TRANSFERASE:** 28 U/L (normal 13 to 30)

[redacted] 20[redacted] **ASPARTATE AMINO TRANSFERASE:** 82 U/L (normal 13 to 30)

[redacted] 20[redacted] **BASOPHIL:** 0.0 % (normal 0 to 4)

[redacted] 20[redacted] **BILIRUBIN:** 0.7 mg/dL (normal 0.4 to 1.5)

[redacted] 20[redacted] **BLOOD PRESSURE:** 115/75 mmHg

[redacted] 20[redacted] **BLOOD PRESSURE:** 97/62 mmHg

[redacted] 20[redacted] **BLOOD UREA NITROGEN:** 7.4 mg/dL (normal 8.0 to20.0)

[redacted] 20[redacted] **BLOOD UREA NITROGEN:** 9.9 mg/dL (normal 8.0 to 20.0)

[redacted] 20[redacted] **BODY MASS INDEX:** 21.2 kg/m2

[redacted] 20[redacted] **BODY TEMPERATURE:** 38.0 Degrees C

[redacted] 20[redacted] **BODY TEMPERATURE:** 38.6 Degrees C

[redacted] 20[redacted] **BODY TEMPERATURE:** 36.7 Degrees C

[redacted] 20[redacted] **CALCIUM:** 9.0 mg/dL (normal 8.8 to 10.1)

[redacted] 20[redacted] **CHEST AND ABDOMINAL CT SCAN:** NO ACTIVE LESIONS DUE TO HEAT SOURCE OR ULCERATIVE COLITIS WERE OBSERVED

[redacted] 20[redacted] **CHEST AND ABDOMINAL CT SCAN:** INFILTRATION SHADOWS ARE OBSERVED FROM THE BILATERAL FROSTED GLASS, NO ACTIVE LESIONS OF ULCERATIVE COLITIS WERE OBSERVED, AND ESPECIALLY INFLAMMATION FINDINGS IN RIGHT LUNG WAS STRONG.

[redacted] 20[redacted] **CHEST XRAY:** PARTIAL CONSOLIDATION IN THE RIGHT SIDE LUNG

[redacted] 20[redacted] **CHEST XRAY:** Normal

[redacted] 20[redacted] **CHEST XRAY:** Normal

[redacted] 20[redacted] **CHLORIDE:** 105 MMOL/L (normal 101 to 108)

[redacted] 20[redacted] **CHLORIDE:** 103 MMOL/L (normal 101 to 108)

[redacted] 20[redacted] **CHOLINESTERASE:** 345 U/L (normal 240 to 486)

[redacted] 20[redacted] **COVID 19 SALIVA PCR TEST:**POSITIVE- A novel coronavirus

[redacted] 20[redacted] **CREATININE:** 0.99 mg/dL (normal 0.65 to 1.07)

[redacted] 20[redacted] **CREATININE KINASE:** 195 U/L (normal 59 to 248)

[redacted] 20[redacted] **CRP:** 3.21 mg/dL (normal <0.14)

[redacted] 20[redacted] **CRP:** 4.90 mg/dL (normal <0.14)

[redacted] 20[redacted] **EOSINOPHILS:** 0.0 % (normal 1 to 6)

[redacted] 20[redacted] **GAMMA-GLUTAMYLTRANSFERASE:** 178 U/L (normal 13 to 64)

[redacted] 20[redacted] **GAMMA-GLUTAMYLTRANSFERASE:** 199 U/L (normal 13 to 64)

[redacted] 20[redacted] **GLUCOSE:** 94 mg/dL (normal 73 to 109)

[redacted] 20[redacted] **HEMATOCRIT:** 38.3 % (normal 40.7 to 50.1)

[redacted] 20[redacted] **HEMOGLOBIN:** 13.5 G/DL (normal 13.7 to 16.8)

[redacted] 20[redacted] **LACTATE DEHYDROGENASE:** 261 U/L (normal 124 to 222)

[redacted] 20[redacted] **LACTATE DEHYDROGENASE:** 322 U/L (normal 124 to 222)

[redacted] 20[redacted] **LYMPHOCYTES:** 10 % (normal 14 to 55)

[redacted] 20[redacted] **MCH:** 31.8 PG (normal 27.5 to 35.3)

[redacted] 20[redacted] **MCHC:** 35.2 G/DL (normal 31.7 to 35.3)

[redacted] 20[redacted] **MCV:** 90.3 FL (normal 83.6 to 98.2)

[redacted] 20[redacted] **MONOCYTES:** 4.5 % (normal 2 to 16)

[redacted] 20[redacted] **MPV:** 9.7 FL

[redacted] 20[redacted] **NEUTROPHILS:** 85.5 % (normal 36 to 74)

[redacted] 20[redacted] **PLATELET COUNT:** 233x10**3/uL

[redacted] 20[redacted] **PLATELET DISTRIBUTION WIDTH:** 10.7 FL

[redacted] 20[redacted] **POTASSIUM:** 4.1 MMOL/L (normal 3.6 to 4.8)

[redacted] 20[redacted] **PROTEIN:** 7.1 G/DL (normal 6.6 to 8.1)

[redacted] 20[redacted] **PULSE RATE:** 92 /min

[redacted] 20[redacted] **RDW:** 12.9 % (normal 11 to 14)

[redacted] 20[redacted] **RED BLOOD CELLS:** 4.24X10**6/uL

[redacted] **20[redacted] SODIUM:** 139 MMOL/L (normal 138 to 145)

[redacted] **20[redacted] SP02:** 98 %

[redacted] **20[redacted] SP02:** 93-99%

[redacted] **20[redacted] SP02:** 96-100%

[redacted] **20[redacted] WBC:** 4200 ML (normal 3300 to 8600)

[redacted] **20[redacted] WHITE BLOOD CELLS:** 5.4X10**3/uL

NON SERIOUS EVENTS AND **OTHER AREAS OF SAFETY INTEREST

Aspartate aminotransferase increased: Asymptomatic.
Alanine aminotransferase increased: Asymptomatic.
Gamma-glutamyltransferase increased: Asymptomatic.

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
虫垂炎	X	X		X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 30 mg	2[redacted]	MALE	ASIAN

Medical History	Onset Year
HEADACHES	20[redacted]
INSOMNIA	20[redacted]
LEFT SIDED UC	20[redacted]
LEFT TALUS FRACTURE	20[redacted]
RIGHT CONTUSION OF EYEBALL	20[redacted]
RIGHT PREMACULAR MEMBRANE	20[redacted]
VERTIGO	20[redacted]

Prior Procedures	Procedure Year
PRIOR PROCEDURES: CAST APPLICATION	20[redacted]
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	CURRENT	0.5 PACK	1.75	
CIGARS	NEVER			
PIPES	NEVER			

Alcohol Use	Status	Number/Day
ALCOHOL	CURRENT	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-675 ABT-494 (IND)	45 mg	ORAL	QD	[redacted] / 1	[redacted] / 56	56
M14-234 SS3 ABT-494 (MAIN)	30 mg	ORAL	QD	[redacted] / 57	[redacted] / 417	361
M14-533 ABT-494 (LTE)	30 mg	ORAL	QD	[redacted] / 418	[redacted] / 435	18

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
MESALAZINE	1200 mg	TID	Y-M: 20[redacted]
MESALAZINE	1 g	QD	Y-M: 20[redacted]
BETAMETHASONE	1 mg	QD	Y-M: 20[redacted]
MESALAZINE	1 g	QD	Y-M: 20[redacted]
MESALAZINE	1 g	QD	Y-M: 20[redacted]
MESALAZINE	4800 mg	QD	Y-M: 20[redacted]
PREDNISOLONE	20 mg	OTHER: ONCE EVERY THREE DAYS	Y-M: 20[redacted]
MESALAZINE	2000 mg	BID	Y-M: 20[redacted]
PREDNISOLONE	5 mg	QD	Y-M: 20[redacted]
GOLIMUMAB	100 mg	OTHER: ONCE EVERY FOUR WEEKS	Y-M: 20[redacted]
BUDESONIDE	2 mg	BID	Y-M: 20[redacted]

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
MESALAZINE	2000 mg	BID	Y-M: 20[redacted]	ONGOING
BUPRENORPHINE	0.2 mg	PRN	Y-M: 20[redacted] / 19	Y-M: 20[redacted] / 19
CALCIUM CHLORIDE;GLUCOSE;POTASSIUM;SODIUM ACETATE;SODIUM CHLORIDE	500 mL	BID	Y-M: 20[redacted] / 19	Y-M: 20[redacted] / 19

CALCIUM CHLORIDE;MAGNESIUM CHLORIDE;POTASSIUM;SODIUM BICARBONATE;SODIUM CHLORIDE;SODIUM CITRATE	500 mL	PRN	Y-M: 20[redacted] / 19	Y-M: 20[redacted] / 19
CALCIUM CHLORIDE;POTASSIUM;SODIUM CHLORIDE;SODIUM LACTATE	500 mL	PRN	Y-M: 20[redacted] / 19	Y-M: 20[redacted] / 19
CEFMETAZOLE	1 g	BID	Y-M: 20[redacted] / 19	Y-M: 20[redacted] / 19
PENTAZOCINE	15 mg	PRN	Y-M: 20[redacted] / 19	Y-M: 20[redacted] / 19
SODIUM CHLORIDE	100 mL	BID	Y-M: 20[redacted] / 19	Y-M: 20[redacted] / 19
SODIUM CHLORIDE	20 mL	PRN	Y-M: 20[redacted] / 19	Y-M: 20[redacted] / 19
CALCIUM CHLORIDE;GLUCOSE;POTASSIUM;SODIUM ACETATE;SODIUM CHLORIDE	500 mL	OTHER: 6 TIMES IN A DAY	Y-M: 20[redacted] / 20	Y-M: 20[redacted] / 20
CEFMETAZOLE	1 g	QID	Y-M: 20[redacted] / 20	Y-M: 20[redacted] / 23
METRONIDAZOLE	500 mg	BID	Y-M: 20[redacted] / 20	Y-M: 20[redacted] / 20
OMEPRAZOLE	20 mg	BID	Y-M: 20[redacted] / 20	Y-M: 20[redacted] / 21
SODIUM CHLORIDE	100 mL	QID	Y-M: 20[redacted] / 20	Y-M: 20[redacted] / 23
SODIUM CHLORIDE	20 mL	BID	Y-M: 20[redacted] / 20	Y-M: 20[redacted] / 21
TEPRENONE	50 mg	TID	Y-M: 20[redacted] / 20	Y-M: 20[redacted] / 29
CALCIUM CHLORIDE;GLUCOSE;POTASSIUM;SODIUM ACETATE;SODIUM CHLORIDE	500 mL	BID	Y-M: 20[redacted] / 21	Y-M: 20[redacted] / 21
METRONIDAZOLE	500 mg	TID	Y-M: 20[redacted] / 21	Y-M: 20[redacted] / 23
LANSOPRAZOLE	15 mg	QD	Y-M: 20[redacted] / 22	Y-M: 20[redacted] / 29
ANTIBIOTICS-RESISTANT LACTIC ACID BACTERIAE	100 mg	TID	Y-M: 20[redacted] / 23	Y-M: 20[redacted] / 29
CEFCAPENE	100 mg	TID	Y-M: 20[redacted] / 24	Y-M: 20[redacted] / 29
METRONIDAZOLE	250 mg	TID	Y-M: 20[redacted] / 24	Y-M: 20[redacted] / 29

Event #1: Serious Adverse Event, AE Leading to Discontinuation of Study Drug, Event of Interest - Serious Infections

Event Description	ACUTE APPENDICITIS
Preferred term	虫垂炎
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 436 / 19 (1 DAY AFTER LAST TREATMENT)
Age at AE Onset	2[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	450 / 33 (15 DAYS AFTER LAST TREATMENT)
Duration of AE	15 DAYS
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	IN GENERAL,APPENDICITIS IS AN EVENT,WHICH REQUIRES HOSPITALIZATION.
Discontinued Study Drug Due to the Event	YES
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:16:51

Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は日本の 2[redacted] 歳男性であり，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，急性虫垂炎の事象を発現した。関連する病歴は，潰瘍性大腸炎，元喫煙者（1 日 0.5 箱を 1.75 年間）及び現飲酒者（1 日 2 杯未満）であった。

Event 1 の臨床経過：

投与436日後＊　，被験者は急性虫垂炎を発現した。投与450日後＊　，急性虫垂炎は消失した。

投与436日後＊　　の朝，被験者は腹痛，下痢及び嘔吐があり，同日，被験者は入院した。CT所見に基づき，被験者は暫定的に急性虫垂炎と診断された。被験者の症状が抗生物質による治療後に改善したため，投与441日後＊，被験者は退院した。

本事象により，治験薬の投与は完全に中止された。

投与された薬剤は，ソルラクト，ソセゴン，ビカネイト，レペタン，生理食塩液，セフメタゾール，ヴィーン D，オメプラゾール，アネメトロ，ランソプラゾール，耐性乳酸菌散，セフカペン ピボキシル塩酸塩，フラジール及びテプレノンであった。

The patient's past medications include:

ASACOL for ULCERATIVE COLITIS ([redacted])

RINDERON for ULCERATIVE COLITIS ([redacted])

LIALDA for ULCERATIVE COLITIS ([redacted])

PREDNISOLONE SODIUM PHOSPHATE for ULCERATIVE COLITIS ([redacted])

PREDONINE for ULCERATIVE COLITIS ([redacted])

SIMPONI for ULCERATIVE COLITIS ([redacted])

RECTABLE for ULCERATIVE COLITIS ([redacted])

Causality for UPADACITINIB (Blinded)

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1)　Acute appendicitis (10000677)　(Appendicitis (10003011))　[v.24.0]　[10000677]

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

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

Dechallenge: Yes

Rechallenge: No rechallenge was done, recurrence is not applicable

Alternative Etiology for UPADACITINIB (Blinded)

Event of ACUTE APPENDICITIS

- Investigator: In general, appendicitis is an event, which requires hospitalization.

- AbbVie: Event is common in the general population; lifetime incidence is 8.6 percent in males.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] CT:** THE APPENDIX IS SWALLOW TO A DIAMETER OF 10MM.THE APPENDICAL WALL IS THICKENED.THESE FINDINGS SUGGEST A DIAGNOSIS OF ACUTE APPENDICITIS.

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
サイトメガロウイルス感染	X			X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 30 mg	5[redacted]	MALE	ASIAN

Medical History	Onset Year
CYTOMEGALOVIRUS INFECTION	20[redacted]
ECZEMA NUMMULAR	20[redacted]
EOSINOPHILIC PNEUMONIA ACUTE	20[redacted]
HYPERLIPIDAEMIA	20[redacted]
IRON DEFICIENCY ANAEMIA	20[redacted]
LEFT SIDED UC	20[redacted]
RENAL FAILURE CHRONIC	20[redacted]
RHINITIS ALLERGIC	20[redacted]
SUDDEN HEARING LOSS	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	FORMER	1 PACK	16	19[redacted]
CIGARS	NEVER			
PIPES	NEVER			

Alcohol Use	Status	Number/Day
ALCOHOL	FORMER	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-675 ABT-494 (IND)	45 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 56	56
M14-234 SS3 ABT-494 (MAIN)	15 mg	ORAL	QD	[redacted]20[redacted] / 57	[redacted]20[redacted] / 414	358
M14-533 ABT-494 (LTE)	30 mg	ORAL	QD	[redacted]20[redacted] / 415		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
MESALAZINE	1500 mg	OTHER: UN	Y-M: 20[redacted]
PREDNISOLONE	20 mg	QD	Y-M: 20[redacted]
PREDNISOLONE	5 mg	QD	Y-M: 20[redacted]
RABEPRAZOLE	10 mg	QD	Y-M: 20[redacted]
SULFASALAZINE	4500 mg	TID	Y-M: 20[redacted]
MESALAZINE	1 g	QD	Y-M: 20[redacted]
MESALAZINE	750 mg	TID	Y-M: 20[redacted]
MESALAZINE	1 g	OTHER: QOD	Y-M: 20[redacted]
PREDNISOLONE	20 mg	OTHER: QOD	Y-M: 20[redacted]
PREDNISOLONE	2 mg	QD	Y-M: 20[redacted]
AZATHIOPRINE	25 mg	QD	Y-M: 20[redacted]
TACROLIMUS	4 mg	BID	Y-M: 20[redacted]
ADALIMUMAB	80 mg	OTHER: EVERY 2WEEKS	Y-M: 20[redacted]
ALL OTHER NON-THERAPEUTIC PRODUCTS	NOT REPORTED	NOT REPORTED	Y-M: 20[redacted]
AZATHIOPRINE	75 mg	QD	Y-M: 20[redacted]
PREDNISOLONE	25 mg	QD	Y-M: 20[redacted]
PREDNISOLONE	3 mg	QD	Y-M: 20[redacted]
TACROLIMUS	1 mg	BID	Y-M: 20[redacted]
AMOXICILLIN	1500 mg	TID	Y-M: 20[redacted]
FOSFOMYCIN	3000 mg	TID	Y-M: 20[redacted]
METRONIDAZOLE	750 mg	TID	Y-M: 20[redacted]
AZATHIOPRINE	75 mg	QD	Y-M: 20[redacted]

INFLIXIMAB	400 mg	OTHER: EVERY 6~8WEEKS	Y-M: 20[redacted]
ROSUVASTATIN	5 mg	QD	Y-M: 20[redacted]
TACROLIMUS	1 mg	BID	Y-M: 20[redacted]
TACROLIMUS	1 mg	BID	Y-M: 20[redacted]
CLOSTRIDIUM BUTYRICUM	3 g	TID	Y-M: 20[redacted]
MINODRONIC ACID	50 mg	OTHER: EVERY 4 WEEKS	Y-M: 20[redacted] / -189
LOXOPROFEN	100 mg	PRN	Y-M: 20[redacted] / -218

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
RABEPRAZOLE	10 mg	QD	Y-M: 20[redacted]	Not reported
ROSUVASTATIN	5 mg	QD	Y-M: 20[redacted]	Not reported
CLOSTRIDIUM BUTYRICUM	3 g	TID	Y-M: 20[redacted]	Not reported
MINODRONIC ACID	50 mg	OTHER: EVERY 4 WEEKS	Y-M: 20[redacted] / -189	Not reported
LOXOPROFEN	100 mg	PRN	Y-M: 20[redacted] / -218	Not reported
ESCHERICHIA COLI;HYDROCORTISONE	2 g	PRN	Y-M: 20[redacted] / 485	Not reported
LEVOFLOXACIN	500 mg	QD	Y-M: 20[redacted] / 485	Y-M: 20[redacted] / 496
VALGANCICLOVIR	900 mg	BID	Y-M: 20[redacted] / 497	Y-M: 20[redacted] / 503
GANCICLOVIR	350 mg	BID	Y-M: 20[redacted] / 504	Y-M: 20[redacted] / 519
GLYCEROL	60 mL	QD	Y-M: 20[redacted] / 518	Y-M: 20[redacted] / 518
FOSCARNET	4.5 g	BID	Y-M: 20[redacted] / 520	Y-M: 20[redacted] / 524
GANCICLOVIR	350 mg	BID	Y-M: 20[redacted] / 525	Y-M: 20[redacted] / 546
GLYCEROL	60 mL	QD	Y-M: 20[redacted] / 546	Y-M: 20[redacted] / 546
VALGANCICLOVIR	900 mg	BID	Y-M: 20[redacted] / 547	Y-M: 20[redacted] / 588
VALGANCICLOVIR	900 mg	QD	Y-M: 20[redacted] / 589	Y-M: 20[redacted] / 630

Event #1: Serious Adverse Event, Event of Interest - Serious Infections, Event of Interest - Opportunistic Infection excluding Tuberculosis and Herpes Zoster

Event Description	CYTOMEGALOVIRUS INFECTION
Preferred term	サイトメガロウイルス感染
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 877 / 463

Age at AE Onset	6[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
[redacted]20[redacted] (RX DAY 490): OTHER RECTUM NPTST176-HISTOPATHOLOGY: Positive-CYTOMEGALOVIRUS; [redacted]20[redacted] (RX DAY 518): OTHER RECTUM NPTST176-HISTOPATHOLOGY: Negative; [redacted]20[redacted] (RX DAY 549): OTHER RECTUM NPTST176-HISTOPATHOLOGY: Negative	
AE Stopped Initial Rx Day / Rx Day	NOT REPORTED
Duration of AE	NOT REPORTED
Severity	SEVERE
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

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は日本の 6[redacted] 歳男性であり，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，サイトメガロウイルス感染の事象を発現した。関連する病歴は，元喫煙者（1 日 1 箱を 16 年間），潰瘍性大腸炎，高脂血症，サイトメガロウイルス感染及び元飲酒者（1 日 2 杯未満）であった。

Event 1 の臨床経過：

投与877日後＊，被験者はサイトメガロウイルス感染を発現した。

投与877日後＊　，被験者は下痢を発現し，悪化していった。投与899日後＊　，被験者は抗生物質の投与を開始した。投与904日後＊　，被験者は，症状が改善しなかったため内視鏡検査及び生検を受けた。診断検査の結果，サイトメガロウイルス感染と判明し，被験者は抗生物質による治療を受けた。投与918日後＊　，被験者は，症状が改善しなかったため入院した。投与968日後＊，被験者は退院した。

投与された薬剤は，レボフロキサシン，バリキサ，デノシン及びホスカビルであった。

The patient's past medications include:

PENTASA for ULCERATIVE COLITIS ([redacted])

SALAZOPYRIN for ULCERATIVE COLITIS ([redacted])

PREDONEMA ENEMA for ULCERATIVE COLITIS ([redacted])

PREDONINE for ULCERATIVE COLITIS ([redacted])

IMURAN for ULCERATIVE COLITIS ([redacted])

PROGRAF for ULCERATIVE COLITIS ([redacted])

HUMIRA for ULCERATIVE COLITIS ([redacted])

ADACOLUMN for ULCERATIVE COLITIS ([redacted])

FLAGYL for ULCERATIVE COLITIS ([redacted])

FOSMICIN for ULCERATIVE COLITIS ([redacted])

SAWACILLIN for ULCERATIVE COLITIS ([redacted])

AZANIN for ULCERATIVE COLITIS ([redacted])

REMICADE for ULCERATIVE COLITIS ([redacted])

Causality for UPADACITINIB (Blinded)

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1) Cytomegalovirus infection (10011831) (Cytomegalovirus infection (10011831)) [v.24.0] [10011831]

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 CYTOMEGALOVIRUS INFECTION

- Investigator: Not applicable

- AbbVie: Risk factors include pre-existing cytomegalovirus infection and pre-existing ulcerative colitis.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] BIOPSY:** Not reported

[redacted] **20[redacted] CT SCAN:** Not reported

[redacted] **20[redacted] CT SCAN:** Not reported

[redacted] **20[redacted] CT SCAN:** Not reported

[redacted] **20[redacted] ENDOSCOPY:** Not reported

[redacted] **20[redacted] HISTOPATHOLOGY OF RECTUM:** Negative

[redacted] **20[redacted] HISTOPATHOLOGY OF RECTUM:** Positive Cytomegalovirus

[redacted] **20[redacted] HISTOPATHOLOGY OF RECTUM:** Negative

[redacted] **20[redacted] SIGMOIDOSCOPY:** Not Reported

[redacted] **20[redacted] SIGMOIDOSCOPY:** Not reported

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
貧血				X
肛門性器疣贅	X			X
血中クレアチンホスホキナーゼ増加				X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	4[redacted]	MALE	ASIAN

Medical History	Onset Year
ABDOMINAL DISTENSION	20[redacted]
EXTENSIVE UC/PANCOLITIS	20[redacted]
HAEMORRHOIDS	20[redacted]
HYPOZINCAEMIA	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	CURRENT	More than 4 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS2 Placebo (IND)		ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 56	56

M14-234 SS2 ABT-494 (OL)	45 mg	ORAL	QD	[redacted]20[redacted] / 57 [redacted]20[redacted] / 115	59
M14-234 SS3 Placebo (MAIN)		ORAL	QD	[redacted]20[redacted] / 116 [redacted]20[redacted] / 472	357
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted]20[redacted] / 473 [redacted]20[redacted] / 808	336

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
MESALAZINE	2250 mg	QD	Y-M: 20[redacted]
MESALAZINE	1 g	QD	Y-M: 20[redacted]
MESALAZINE	4800 mg	QD	Y-M: 20[redacted]
ZINC	25 mg	TID	Y-M: 20[redacted]
BUDESONIDE	2 mg	QD	Y-M: 20[redacted]
CLOSTRIDIUM BUTYRICUM	2 OTHER: TAB	TID	Y-M: 20[redacted]
ESCHERICHIA COLI;HYDROCORTISONE	OPTIMAL mg	PRN	Y-M: 20[redacted]
PREDNISOLONE	2.5 mg/kg	QD	Y-M: 20[redacted]
RABEPRAZOLE	10 mg	QD	Y-M: 20[redacted]
SULFAMETHOXAZOLE;TRIMETHOPRIM	1 OTHER: TAB	OTHER: 3TIMES A WEEK	Y-M: 20[redacted]
VANCOMYCIN	0.5 g	BID	Y-M: 20[redacted]
MESALAZINE	1 g	QD	Y-M: 20[redacted]
PARACETAMOL	400 mg	PRN	Y-M: 20[redacted] / -30
HYDROCORTISONE	OPTIMAL mg	PRN	Y-M: 20[redacted] / -52
ZINC	OPTIMAL mg	PRN	Y-M: 20[redacted] / -52

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
MESALAZINE	4800 mg	QD	Y-M: 20[redacted]	ONGOING
ZINC	25 mg	TID	Y-M: 20[redacted]	ONGOING
CLOSTRIDIUM BUTYRICUM	2 OTHER: TAB	TID	Y-M: 20[redacted]	ONGOING
ESCHERICHIA COLI;HYDROCORTISONE	OPTIMAL mg	PRN	Y-M: 20[redacted]	ONGOING
RABEPRAZOLE	10 mg	QD	Y-M: 20[redacted]	ONGOING
PARACETAMOL	400 mg	PRN	Y-M: 20[redacted] / -30	Y-M: 20[redacted] / 243

HYDROCORTISONE	OPTIMAL mg	PRN	Y-M: 20[redacted] / -52	ONGOING
ZINC	OPTIMAL mg	PRN	Y-M: 20[redacted] / -52	ONGOING
SODIUM PICOSULFATE	20 mL	OTHER: ONCE	Y-M: 20[redacted] / 49	Y-M: 20[redacted] / 49
DOMPERIDONE	10 mg	OTHER: ONCE	Y-M: 20[redacted] / 50	Y-M: 20[redacted] / 50
HYOSCINE	20 mg	OTHER: ONCE	Y-M: 20[redacted] / 50	Y-M: 20[redacted] / 50
MAGNESIUM CITRATE	100 g	OTHER: ONCE	Y-M: 20[redacted] / 50	Y-M: 20[redacted] / 50
METOCLOPRAMIDE	10 mg	OTHER: ONCE	Y-M: 20[redacted] / 50	Y-M: 20[redacted] / 50
MIDAZOLAM	2.5 mg	OTHER: ONCE	Y-M: 20[redacted] / 50	Y-M: 20[redacted] / 50
KETOPROFEN	20 mg	PRN	Y-M: 20[redacted] / 53	Y-M: 20[redacted] / 54
KETOPROFEN	20 mg	PRN	Y-M: 20[redacted] / 55	Y-M: 20[redacted] / 64
KETOPROFEN	20 mg	PRN	Y-M: 20[redacted] / 89	Y-M: 20[redacted] / 90
IMIQUIMOD	OPTIMAL mg	OTHER: THREE TIMES A WEEK	Y-M: 20[redacted] / 244	Y-M: 20[redacted] / 305
CALCIUM CHLORIDE;POTASSIUM;SODIUM CHLORIDE;SODIUM LACTATE	OPTIMAL mL	OTHER: ONCE	Y-M: 20[redacted] / 283	Y-M: 20[redacted] / 283
CEFDITOREN	100 mg	TID	Y-M: 20[redacted] / 283	Y-M: 20[redacted] / 284
LIDOCAINE	OPTIMAL mg	OTHER: ONCE	Y-M: 20[redacted] / 283	Y-M: 20[redacted] / 283
PARACETAMOL	400 mg	TID	Y-M: 20[redacted] / 283	Y-M: 20[redacted] / 285
VIDARABINE	OPTIMAL mg	PRN	Y-M: 20[redacted] / 284	Y-M: 20[redacted] / 290
SODIUM PICOSULFATE	20 mL	OTHER: ONCE	Y-M: 20[redacted] / 336	Y-M: 20[redacted] / 336
DOMPERIDONE	10 mg	OTHER: ONCE	Y-M: 20[redacted] / 337	Y-M: 20[redacted] / 337
HYOSCINE	20 mg	OTHER: ONCE	Y-M: 20[redacted] / 337	Y-M: 20[redacted] / 337
MAGNESIUM CITRATE	100 g	OTHER: ONCE	Y-M: 20[redacted] / 337	Y-M: 20[redacted] / 337
METOCLOPRAMIDE	10 mg	OTHER: ONCE	Y-M: 20[redacted] / 337	Y-M: 20[redacted] / 337
MIDAZOLAM	2.5 mg	OTHER: ONCE	Y-M: 20[redacted] / 337	Y-M: 20[redacted] / 337

Event #1: Event of Interest - Anemia

Event Description	ANEMIA
Preferred term	貧血
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 473 / 1
Age at AE Onset	4[redacted]

Laboratory Testing

NOT APPLICABLE

Microbiology

NOT APPLICABLE

AE Stopped Initial Rx Day / Rx Day	ONGOING
Duration of AE	ONGOING
Severity	MILD
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 #2: Event of Interest - Creatine Phosphokinase (CPK) Elevation

Event Description	CPK INCREASED
Preferred term	血中クレアチンホスホキナーゼ増加
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 638 / 166
Age at AE Onset	4[redacted]

Laboratory Testing

NOT APPLICABLE

Microbiology

NOT APPLICABLE

AE Stopped Initial Rx Day / Rx Day	ONGOING
Duration of AE	ONGOING
Severity	MILD
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

Event #3: Serious Adverse Event, Event of Interest - Serious Infections

Event Description	CONDYLOMA ACUMINATUM
Preferred term	肛門性器疣贅
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 716 / 244
Age at AE Onset	4[redacted]

Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	785 / 313
Duration of AE	70 DAYS
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	TIME LAG FROM THE START OF STUDY MEDICATION ADMINISTRATION TO THE ONSET OF SAE. THE SUBJECT REPORTED NO CLOSE CONTACT WITH INFECTED. THECAUSE REMAINED UNKNOWN.
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:16:51

Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。被験者は日本の 4[redacted] 歳男性であり，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，尖圭コンジローマの事象を発現した。関連する病歴は，潰瘍性大腸炎及び現飲酒者（1 日 4 杯以上）であった。

Event 3 の臨床経過：

投与716日後＊　，被験者は尖圭コンジローマを発現した。投与785日後＊　　，尖圭コンジローマは消失した。

投与716日後＊　，被験者は会陰疣贅と診断された。同日，被験者は尖圭コンジローマ（ヒトパピローマウイルス感染症）に対する治療を受けた。

投与755日後＊　　，被験者は，尖圭コンジローマ切除の予定された手術のために入院した。投与756日後＊，被験者は退院した。

投与された薬剤は，リドカイン，ラクテック，カロナール，セフジトレンピボキシル，ベセルナ及びビダラビンであった。

The patient's past medications include:

PENTASA for ULCERATIVE COLITIS ([redacted])

BACTRAMIN for ULCERATIVE COLITIS ([redacted])

PREDNISOLONE for ULCERATIVE COLITIS ([redacted])

RECTABUL for ULCERATIVE COLITIS ([redacted])

VANCOMYCIN HYDROCHLORIDE for ULCERATIVE COLITIS ([redacted])

PFIZER BIONTECH COVID-19 VACCINE for PROPHYLAXIS ([redacted])

Causality for UPADACITINIB (Blinded)

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1) Condyloma acuminatum (10010291) (Anogenital warts (10059313)) [v.24.1] [10010291]

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 CONDYLOMA ACUMINATUM

- Investigator: Time lag from the start of study medication administration to the onset of SAE. The subject reported no close contact with infected. The cause remained unknown.

- AbbVie: Condyloma acuminatum is a manifestation of the human papilloma virus (HPV). HPV is the most common sexually transmitted infection worldwide, with 9 to 13 percent of the global population infected.

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
帯状疱疹	X			X

Treatment Group	Age at Induction Study Start	Sex	Race
Placebo	5[redacted]	MALE	ASIAN

Medical History	Onset Year
CHICKEN POX	NOT REPORTED
COLON POLYP	20[redacted]
GASTRIC ULCER	20[redacted]
HEADACHE	19[redacted]
HEMORRHAGIC DUODENAL ULCER	20[redacted]
LEFT SIDED UC	20[redacted]
LUMBAGO	19[redacted]
REFLUX ESOPHAGITIS	20[redacted]
STIFF SHOULDER	19[redacted]

Prior Procedures	Procedure Year
PRIOR PROCEDURES: POLYPECTOMY	20[redacted]
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	FORMER	1 PACK	26	20[redacted]
CIGARS	NEVER			
PIPES	NEVER			

Alcohol Use	Status	Number/Day
ALCOHOL	CURRENT	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS2 ABT-494 (IND)	45 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 54	54
M14-234 SS3 Placebo (MAIN)		ORAL	QD	[redacted]20[redacted] / 55	[redacted]20[redacted] / 413	359
M14-533 Placebo (LTE)		ORAL	QD	[redacted]20[redacted] / 414		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
MESALAZINE	2250 mg	TID	Y-M: 20[redacted]
MESALAZINE	1 g	QD	Y-M: 20[redacted]
MESALAZINE	2250 mg	TID	Y-M: 20[redacted]
MESALAZINE	2400 mg	TID	Y-M: 20[redacted]
MESALAZINE	4800 mg	QD	Y-M: 20[redacted]
MESALAZINE	1200 mg	TID	Y-M: 20[redacted]
PARACETAMOL	400 mg	PRN	Y-M: 20[redacted] / -190

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
MESALAZINE	1200 mg	TID	Y-M: 20[redacted]	Not reported
PARACETAMOL	400 mg	PRN	Y-M: 20[redacted] / -190	Not reported
GUAIAZULENE	1 OTHER: APPLICATION	QD	Y-M: 20[redacted] / 92	Y-M: 20[redacted] / 108
VALACICLOVIR	1000 mg	TID	Y-M: 20[redacted] / 92	Y-M: 20[redacted] / 97
ACICLOVIR	250 mg	TID	Y-M: 20[redacted] / 97	Y-M: 20[redacted] / 99
PREGABALIN	75 mg	BID	Y-M: 20[redacted] / 97	Y-M: 20[redacted] / 144
CAMPHOR;CAPSICUM SPP.;SALICYLIC ACID	20 g	QD	Y-M: 20[redacted] / 98	Y-M: 20[redacted] / 101

Event #1: Event of Interest - Herpes Zoster

Event Description	HERPES ZOSTER
Preferred term	帯状疱疹
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 504 / 91
Age at AE Onset	5[redacted]
Laboratory Testing	
NOT APPLICABLE	

Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	509 / 96
Duration of AE	6 DAYS
Severity	MODERATE
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 #2: Serious Adverse Event, Event of Interest - Serious Infections, Event of Interest - Herpes Zoster

Event Description	WORSENING OF HERPES ZOSTER
Preferred term	帯状疱疹
AE Onset Date / Initial Rx Day / Rx Day	[redacted] / 510 / 97
Age at AE Onset	[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	582 / 169
Duration of AE	73 DAYS
Severity	SEVERE
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

Generated: [redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は日本の 5[redacted] 歳男性であり，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，帯状疱疹の悪化の事象を発現した。関連する病歴は，元喫煙者（1 日 1 箱を 26 年間），潰瘍性大腸炎，現飲酒者（1 日 2 杯未満）及び水疱瘡であった。

Event 2 の臨床経過：

投与510日後＊　，被験者は，帯状疱疹の悪化を発現した。投与582日後＊　，帯状疱疹の悪化は消失した。

入院前，被験者は帯状疱疹（非重篤）を経験していた。被験者は右上背部の発疹を発見し，バラシクロビルを服用し，アズノール軟膏を塗布していた。

投与510日後＊　，被験者は帯状疱疹の悪化のため入院した。徴候及び症状には，右上背部の発疹，並びに胸部痛及び背部痛が含まれた。投与513日後＊　，被験者は快方に向かっていたため，退院した。転帰は回復と考えられた。帯状疱疹が痂皮化した後，治験薬の投与を再開する予定である。

被験者の帯状疱疹は，1 つの皮膚分節に発現した。詳細不明な診察が行われ，被験者は保存的局所療法，抗ウイルス薬，非麻薬性及び/又は麻薬性鎮痛薬で治療された。

投与された薬剤は，リリカ及びアシクロビルであった。

The patient's past medications include:

PENTASA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

ASACOL for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

LIALDA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Blinded)

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1)　Herpes zoster (10019974)　(Herpes zoster (10019974))　[v.24.0]　[10019974]

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

Causality as per Mfr. (Drug/Vaccine): Reasonable possibility

Dechallenge: Yes

Rechallenge: rechallenge was done, reaction did not recur

Alternative Etiology for UPADACITINIB (Blinded)

Event of WORSENING OF HERPES ZOSTER

- Investigator: Not applicable.

- AbbVie: Not applicable.

NON SERIOUS EVENTS and **OTHER AREAS OF SAFETY INTEREST

Herpes zoster ([redacted]20[redacted]): History of chicken pox. One dermatone. 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
大脳障害	X			
帯状疱疹				X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	5[redacted]	MALE	ASIAN

Medical History	Onset Year
ACUTE HEPATATITIS B	20[redacted]
ANEMIA	20[redacted]
APHASIA MOTOR	20[redacted]
CHRONIC GASTRITIS	20[redacted]
CHRONIC SINUSITIS	20[redacted]
COMPLETE LOSS OF VISION(RIGHT EYE)	20[redacted]
HEMIPLEGIA(LEFT)	20[redacted]
HERPES ZOSTER	20[redacted]
HIGHER BRAIN DYSFUNCTION	20[redacted]
LEFT SIDED UC	20[redacted]
LEFT TROCHANTERIC FEMORAL FRACTURE	20[redacted]
RIGHT OPTIC ATROPHY	20[redacted]
RIGHT PUTAMEN HEAMORRHAGE	20[redacted]
SYMPTOMATIC EPIDEPSY	20[redacted]
THIRD AND FOURTH RIB FRACTURE	20[redacted]

Prior Procedures	Procedure Year
PRIOR PROCEDURES: CRANIOTOMY REMOVAL OF HEMATOMA	20[redacted]
PRIOR PROCEDURES: LEFT TROCHANTERIC FEMORAL FRACTURE	20[redacted]
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	FORMER	1 PACK	31	20[redacted]

CIGARS	NEVER
PIPES	NEVER

Alcohol Use	Status	Number/Day
ALCOHOL	FORMER	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS2 Placebo (IND)		ORAL	QD	[redacted] / 1	[redacted] / 58	58
M14-234 SS2 ABT-494 (OL)	45 mg	ORAL	QD	[redacted] / 59	[redacted] / 114	56
M14-234 SS3 Placebo (MAIN)		ORAL	QD	[redacted] / 115	[redacted] / 210	96
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted] / 211		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
MESALAZINE	4000 mg	BID	Y-M: [redacted]
SULFASALAZINE	500 mg	PRN	Y-M: [redacted]
CLOSTRIDIUM BUTYRICUM	NOT REPORTED	NOT REPORTED	Y-M: [redacted]
PREDNISOLONE	10 mg	QD	Y-M: [redacted]
MESALAZINE	4800 mg	QD	Y-M: [redacted]
FAMOTIDINE	10 mg	BID	Y-M: [redacted]
AZATHIOPRINE	50 mg	QD	Y-M: [redacted]
PREDNISOLONE	5 mg	QD	Y-M: [redacted] / -40
LEVETIRACETAM	750 mg	BID	Y-M: [redacted] / -17

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
MESALAZINE	4800 mg	QD	Y-M: [redacted]	Not reported
FAMOTIDINE	10 mg	BID	Y-M: [redacted]	Not reported
LEVETIRACETAM	1000 mg	BID	Y-M: [redacted] / 63	Not reported
AMLODIPINE	2.5 mg	QD	Y-M: [redacted] / 243	Not reported

KETOCONAZOLE	PROPER QUANTITY OTHER: PROPER QUANTITY	OTHER: TWICE A WEEK	Y-M: 20[redacted] / 329	Not reported
SODIUM PICOSULFATE	10 OTHER: DROPS	QD	Y-M: 20[redacted] / 391	Y-M: 20[redacted] / 392
SODIUM PICOSULFATE	PROPER QUANTITY OTHER: PROPER QUANTITY	PRN	Y-M: 20[redacted] / 406	Not reported
ACICLOVIR	PROPER QUANTITY OTHER: PROPER QUANTITY	PRN	Y-M: 20[redacted] / 437	Y-M: 20[redacted] / 445
VALACICLOVIR	500 mg	TID	Y-M: 20[redacted] / 437	Y-M: 20[redacted] / 437
VALACICLOVIR	1000 mg	TID	Y-M: 20[redacted] / 438	Y-M: 20[redacted] / 445
INFLUENZA VACCINE	0.5 mL	QD	Y-M: 20[redacted] / 445	Y-M: 20[redacted] / 445

Event #1: Serious Adverse Event

Event Description	HIGHER BRAIN DYSFUNCTION
Preferred term	大脳障害
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 616 / 406
Age at AE Onset	5[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	627 / 417
Duration of AE	12 DAYS
Severity	MILD
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	THIS EVENT IS A HOSPITALIZATION FOR TREATMENT OF COMPLICATIONS.
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Event #2: Event of Interest - Herpes Zoster

Event Description	HERPES ZOSTER(FACE, LEFT OCCIPITAL)
Preferred term	帯状疱疹
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 647 / 437

Age at AE Onset	5[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	655 / 445
Duration of AE	9 DAYS
Severity	MILD
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]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は日本の 5[redacted] 歳男性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，高次脳機能障害の事象を発現した。関連する病歴は，潰瘍性大腸炎，元喫煙者（1 日 1 箱を 31 年間），運動性失語症，開頭血腫除去術，片麻痺（左），高次脳機能障害，右被殻出血，貧血，症候性てんかん，慢性胃炎及び元飲酒者（1 日 2 杯未満）であった。

Event 1 の臨床経過：

投与616日後＊　，被験者は高次脳機能障害を発現した。投与627日後＊　，高次脳機能障害は消失した。

被験者は，症状の変化を伴わない高次脳機能障害の病歴があった。投与616日後＊　，被験者は，高次脳機能障害の状態の確認及びリハビリテーションのために入院した。被験者は次のリハビリテーション活動を受けた：ストレッチ，下肢/体幹筋促通法，立位練習，ウォーキング，認知機能評価及び訓練並びに神経心理学検査。投与627日後＊　　，被験者は何も変化を伴わず退院した。

治験責任医師によると，被験者には，右被殻出血，片麻痺，症候性てんかん及び運動性失語症を含む危険因子があった。

The patient's past medications include:

SALAZOPYRIN for ULCERATIVE COLITIS ([redacted])

PENTASA for ULCERATIVE COLITIS ([redacted])

MIYA-BM for ULCERATIVE COLITIS ([redacted])

PREDONINE for ULCERATIVE COLITIS ([redacted])

AZANIN for ULCERATIVE COLITIS ([redacted])

PFIZER-BIONTECH COVID-19 VACCINE for PROPHYLAXIS ([redacted])

PICOSULFATE NA ORAL SOLUTION 0.75% for CONSTIPATION ([redacted])

Causality for UPADACITINIB (Open Label)

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1) Brain disorder NOS (10006120) (Cerebral disorder (10054938)) [v.24.1] [10006120]

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 (Open Label)

Event of HIGHER BRAIN DYSFUNCTION

- Investigator: This event is a hospitalization for treatment of complications.

- AbbVie: Event more likely related to pre-existing higher brain dysfunction.

NON SERIOUS EVENTS AND **OTHER AREAS OF SAFETY INTEREST

Herpes zoster: One dermatome.

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
胆嚢炎	X			
肺挫傷	X			
胸椎骨折	X			

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 30 mg	3[redacted]	MALE	ASIAN

Medical History	Onset Year
ALLERGIC RHINITIS	20[redacted]
COMMON COLD	20[redacted]
DUODENITIS	20[redacted]
EXTENSIVE UC/PANCOLITIS	20[redacted]
NASH	20[redacted]

Prior Procedures	Procedure Year
SAE SUPPLEMENTAL PROCEDURE: SURGERY	20[redacted]
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	FORMER	1 PACK	3	20[redacted]
CIGARS	FORMER			
PIPES	NEVER			

Alcohol Use	Status	Number/Day
ALCOHOL	CURRENT	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-675 Placebo (IND)		ORAL	QD	[redacted] / 1	[redacted] / 57	57
M14-675 ABT-494 (OL)	45 mg	ORAL	QD	[redacted] / 58	[redacted] / 113	56
M14-234 SS3 ABT-494 (MAIN)	15 mg	ORAL	QD	[redacted] / 114	[redacted] / 471	358
M14-533 ABT-494 (LTE)	30 mg	ORAL	QD	[redacted] / 472		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
CLOSTRIDIUM BUTYRICUM	3 OTHER: TAB.	BID	Y-M: 20[redacted]
MESALAZINE	3600 mg	QD	Y-M: 20[redacted]
MESALAZINE	2000 mg	BID	Y-M: 20[redacted]
MESALAZINE	2000 mg	BID	Y-M: 20[redacted]
MESALAZINE	2000 mg	BID	Y-M: 20[redacted]
MESALAZINE	3600 mg	QD	Y-M: 20[redacted]
PREDNISOLONE	5 mg	QD	Y-M: 20[redacted]
MESALAZINE	1000 mg	BID	Y-M: 20[redacted]
MESALAZINE	1000 mg	QD	Y-M: 20[redacted]
MESALAZINE	2000 mg	QD	Y-M: 20[redacted]
FEXOFENADINE	60 mg	BID	Y-M: 20[redacted]
PREDNISOLONE	20 mg	QD	Y-M: 20[redacted]
CAMPHOR;ENOXOLONE;MENTHOL;SALICYLIC ACID	UNK OTHER: UNK	PRN	Y-M: 20[redacted] / -315
PARACETAMOL;TRAMADOL	1 OTHER: TAB.	PRN	Y-M: 20[redacted] / -184

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
CLOSTRIDIUM BUTYRICUM	3 OTHER: TAB.	BID	Y-M: 20[redacted]	Not reported
MESALAZINE	1000 mg	QD	Y-M: 20[redacted]	Y-M: 20[redacted] / 81
MESALAZINE	2000 mg	QD	Y-M: 20[redacted]	Y-M: 20[redacted] / 80
FEXOFENADINE	60 mg	BID	Y-M: 20[redacted]	Not reported

CAMPHOR;ENOXOLONE;MENTHOL;SALICYLIC ACID	UNK OTHER: UNK	PRN	Y-M: 20[redacted] / -315	Y-M: 20[redacted] / 60
PARACETAMOL;TRAMADOL	1 OTHER: TAB.	PRN	Y-M: 20[redacted] / -184	Y-M: 20[redacted] / 60
RABEPRAZOLE	10 mg	QD	Y-M: 20[redacted] / 1	Not reported
RAMOSETRON	5 ug	QD	Y-M: 20[redacted] / 27	Not reported
URSODEOXYCHOLIC ACID	100 mg	TID	Y-M: 20[redacted] / 27	Not reported
PARACETAMOL	600 mg	QD	Y-M: 20[redacted] / 62	Y-M: 20[redacted] / 62
TRAMADOL	50 mg	BID	Y-M: 20[redacted] / 62	Not reported
PARACETAMOL	600 mg	TID	Y-M: 20[redacted] / 63	Not reported
CROTAMITON	UNK OTHER: UNK	PRN	Y-M: 20[redacted] / 66	Y-M: 20[redacted] / 69
PARACETAMOL	200 mg	QD	Y-M: 20[redacted] / 72	Y-M: 20[redacted] / 72
CAMPHOR;ENOXOLONE;MENTHOL;SALICYLIC ACID	UNK OTHER: UNK	QD	Y-M: 20[redacted] / 74	Not reported
MESALAZINE	2000 mg	QD	Y-M: 20[redacted] / 81	Y-M: 20[redacted] / 81
SODIUM CHLORIDE	500 mL	QD	Y-M: 20[redacted] / 81	Y-M: 20[redacted] / 81
AMINO ACIDS NOS;ELECTROLYTES NOS;GLUCOSE;THIAMINE	1000 mL	QD	Y-M: 20[redacted] / 82	Y-M: 20[redacted] / 85
CARBOHYDRATES NOS;POTASSIUM;SODIUM CHLORIDE;SODIUM LACTATE	500 mL	QD	Y-M: 20[redacted] / 82	Y-M: 20[redacted] / 82
ELECTROLYTES NOS	500 mL	QD	Y-M: 20[redacted] / 82	Y-M: 20[redacted] / 82
HYDROXOCOBALAMIN;PYRIDOXINE;THIAMINE	10 mL	QD	Y-M: 20[redacted] / 82	Y-M: 20[redacted] / 86
MANGANESE	250 mL	QD	Y-M: 20[redacted] / 82	Y-M: 20[redacted] / 82
MESALAZINE	1000 mg	QD	Y-M: 20[redacted] / 82	Y-M: 20[redacted] / 82
MESALAZINE	2000 mg	QD	Y-M: 20[redacted] / 82	Not reported
ASCORBIC ACID	500 mg	QD	Y-M: 20[redacted] / 83	Y-M: 20[redacted] / 85
CARBOHYDRATES NOS;POTASSIUM;SODIUM CHLORIDE;SODIUM LACTATE	1000 mL	QD	Y-M: 20[redacted] / 83	Y-M: 20[redacted] / 85
MESALAZINE	1000 mg	QD	Y-M: 20[redacted] / 83	Not reported

CARBOHYDRATES NOS;POTASSIUM;SODIUM CHLORIDE;SODIUM LACTATE	500 mL	QD	Y-M: 20[redacted] / 86	Y-M: 20[redacted] / 86

Event #1: Serious Adverse Event

Event Description	PULMONARY CONTUSION
Preferred term	肺挫傷
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 127 / -345 DAYS BEFORE TREATMENT
Age at AE Onset	3[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	545 / 74
Duration of AE	419 DAYS
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	FALL FROM HIGH PLACE
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Event #2: Serious Adverse Event

Event Description	THORACIC VERTEBRAL FRACTURE (TH2-6)
Preferred term	胸椎骨折
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 127 / -345 DAYS BEFORE TREATMENT
Age at AE Onset	3[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	545 / 74
Duration of AE	419 DAYS
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY

Investigator Alternative Etiology	FALL FROM HIGH PLACE
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Event #3: Serious Adverse Event

Event Description	CHOLECYSTITIS
Preferred term	胆嚢炎
AE Onset Date / Initial Rx Day / Rx Day	[redacted] / 552 / 81
Age at AE Onset	3[redacted]

Laboratory Testing

[redacted] (RX DAY 82): Alanine Aminotransferase: 656 [9 - 44] U/L; Alkaline Phosphatase: 119 [38 - 113] U/L; Aspartate Aminotransferase: 381 [13 - 36] U/L; Leukocytes: 7.69 [3.9 - 9.8] 10^9/L; NPTST002-?-GTP: 646 [12 - 82] IU/L; NPTST077-CH-E: 501 [185 - 431] IU/L; NPTST114-D-BIL: 0.63 [0 - 0.03] MG/DL; NPTST179-I-BIL: 2.62 [0.3 - 0.8] MG/DL; NPTST201-LDH: 457 [124 - 222] IU/L; NPTST313-T-BIL: 3.25 [0.3 - 1.1] MG/DL; NPTST314-T-CHO: 273 [132 - 219] MG/DL; Triglycerides: 1.7402 [0.3729 - 1.6837] MMOL/L; [redacted] (RX DAY 83): Leukocytes: 6.93 [3.9 - 9.8] 10^9/L; [redacted] (RX DAY 85): Alanine Aminotransferase: 387 [9 - 44] U/L; Alkaline Phosphatase: 99 [38 - 113] U/L; Aspartate Aminotransferase: 130 [13 - 36] U/L; Leukocytes: 5.97 [3.9 - 9.8] 10^9/L; NPTST002-?-GTP: 360 [12 - 82] IU/L; NPTST077-CH-E: 447 [185 - 431] IU/L; NPTST114-D-BIL: 0.29 [0 - 0.03] MG/DL; NPTST179-I-BIL: 1.70 [0.3 - 0.8] MG/DL; NPTST201-LDH: 220 [124 - 222] IU/L; NPTST313-T-BIL: 1.99 [NOT REPORTED - 1.1] mg/dL; [redacted] (RX DAY 88): Alanine Aminotransferase: 257 [9 - 44] U/L; Alkaline Phosphatase: 99 [38 - 113] U/L; Aspartate Aminotransferase: 76 [13 - 36] U/L; Leukocytes: 6.54 [3.9 - 9.8] 10^9/L; NPTST002-?-GTP: 279 [12 - 82] IU/L; NPTST077-CH-E: 438 [185 - 431] IU/L; NPTST114-D-BIL: 0.17 [0 - 0.03] MG/DL; NPTST179-I-BIL: 1.06 [0.3 - 0.8] MG/DL; NPTST201-LDH: 182 [124 - 222] IU/L; NPTST313-T-BIL: 1.23 [0.3 - 1.1] MG/DL; [redacted] (RX DAY 90): Alanine Aminotransferase: 200 [9 - 44] U/L; Alkaline Phosphatase: 95 [38 - 113] U/L; Aspartate Aminotransferase: 57 [13 - 36] U/L; Leukocytes: 6.3 [3.9 - 9.8] 10^9/L; NPTST002-?-GTP: 232 [12 - 82] IU/L; NPTST077-CH-E: 421 [185 - 431] IU/L; NPTST114-D-BIL: 0.19 [0 - 0.03] MG/DL; NPTST179-I-BIL: 1.05 [0.3 - 0.8] MG/DL; NPTST201-LDH: 167 [124 - 222] IU/L; NPTST313-T-BIL: 1.24 [0.3 - 1.1] MG/DL

Microbiology

NOT REPORTED

AE Stopped Initial Rx Day / Rx Day	561 / 90
Duration of AE	10 DAYS
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	UC NASH
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]:16:51

Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-234

治験責任医師からの報告。本被験者は日本の 3[redacted] 歳男性であり，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，肺挫傷及び胸椎骨折（Th2–6）の事象を発現した。

Event 1 及び 2 の臨床経過：

投与127日後＊，被験者は肺挫傷及び胸椎骨折（Th2–6）を発現した。

被験者は 4 メートルの高さから落下した。被験者は胸椎骨折及び肺挫傷のために治療中であった。投与139日後＊　，被験者は転院し，手術を受ける予定であった。投与141日後＊　，被験者は骨折（T6）に対する脊椎後方固定術を受けた。被験者は，疼痛管理を目的としてロキソプロフェンナトリウムを投与された。被験者の手術部位は治癒し，感染の徴候は認められなかった。投与206日後＊，被験者は退院した。

投与された薬剤は，ルネスタ，スチックゼノール A，トアラセット，セフカペン及びロキソプロフェンであった。

The patient's past medications include:

ASACOL for ULCERATIVE COLITIS ([redacted])

PREDNISOLONE for ULCERATIVE COLITIS ([redacted])

Causality for UPADACITINIB (Blinded)

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1) Pulmonary contusion (10037370) (Pulmonary contusion (10037370)) [v.23.0] [10037370]

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

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

Dechallenge: No

2) Thoracic vertebral fracture (10049948) (Thoracic vertebral fracture (10049948)) [v.23.0] [10049948]

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

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

Dechallenge: No

Alternative Etiology for UPADACITINIB (Blinded)

Event of PULMONARY CONTUSION

- Investigator: Fall from high place

- AbbVie: Event is more likely an unexpected and unintentional incident (fall from 4 meters, per PI).

Event of THORACIC VERTEBRAL FRACTURE (TH2-6)

- Investigator: Fall from high place

- AbbVie: Event is more likely an unexpected and unintentional incident (fall from 4 meters, per PI).

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は日本の 3[redacted] 歳男性であり，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，胆嚢炎の事象を発現した。関連する病歴は，元喫煙者（1 日 1 箱を 3 年間），潰瘍性大腸炎，非アルコール性脂肪性肝炎（NASH），現飲酒者（1 日 2 杯未満）及び元煙草使用者（葉巻）であった。

Event 3 の臨床経過：

投与552日後＊，被験者は胆嚢炎を発現した。投与561日後＊，胆嚢炎は消失した。

投与552日後＊　　，被験者は右季肋部があり入院した。CT スキャン検査及び腹部超音波検査が実施され，異常所見は認められなかった。投与553日後＊　　，被験者は退院した。被験者はその後，同日に別の病院を受診した。MRI 検査が実施された結果，胆嚢炎が疑われ，被験者は，結石が胆嚢内に散在していると知らされた。被験者は同時に，非重篤な胆石の事象を発現した。血液検査の結果から，被験者は再び入院した。投与556日後＊　　，被験者の腹痛は軽減し，血液検査の結果は改善した。投与559日後＊　　，被験者の腹痛は消失した。投与561日後＊　　，被験

者は退院した。

治験責任医師によると，本事象に関連する危険因子は，潰瘍性大腸炎及び非アルコール性脂肪性肝炎（NASH）であった。

投与された薬剤は，YD ソリタ-T3 号輸液，ソルデム 3A 輸液，リメファー3B 注射液，ビタミン C，生理食塩液及びビーフリードであった。

The patient's past medications include:

ASACOL for ULCERATIVE COLITIS ([redacted])

PENTASA for ULCERATIVE COLITIS ([redacted])

PREDNISOLONE for ULCERATIVE COLITIS ([redacted])

Causality for UPADACITINIB (Blinded)

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1) Cholecystitis (10008612) (Cholecystitis (10008612)) [v.24.0] [10008612]

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 CHOLECYSTITIS

- Investigator: Ulcerative colitis, non-alcoholic steatohepatitis (NASH)

- AbbVie: Gallbladder attacks or cholecystitis most frequently arises from gallstone disease. Risk factors for gallstone formation include obesity (BMI = 33) and pre-existing non-alcoholic steatohepatitis and ulcerative colitis.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] ABDOMINAL ULTRASOUND:** no obvious abnormalities

[redacted] **20[redacted] ALANINE AMINOTRANSFERASE:** 656 IU/L (normal 9 to 44)

[redacted] **20[redacted] ALANINE AMINOTRANSFERASE:** 387 IU/L (normal 9 to 44)

[redacted] **20[redacted] ALANINE AMINOTRANSFERASE**: 99 IU/L (normal 38 to 113)

[redacted] **20[redacted] ALKALINE PHOSPHATASE:** 95 IU/L (normal 38 to 113)

[redacted] **20[redacted] ALKALINE PHOSPHATASE:** 119 IU/L (normal 38 to 113)

[redacted] **20[redacted] ALKALINE PHOSPHATASE:** 99 IU/L (normal 38 to 113)

[redacted] **20[redacted] ALKALINE PHOSPHATASE:** 257 IU/L (normal 9 to 44)

[redacted] **20[redacted] ALANINE AMINOTRANSFERASE:** 200 IU/L (normal 9 to 44)

[redacted] **20[redacted] ASPARTATE AMINOTRANSFERASE:** 381 IU/L (normal 13 to 36)

[redacted] **20[redacted] ASPARTATE AMINOTRANSFERASE:** 130 IU/L (normal 13 to 36)

[redacted] **20[redacted] ASPARTATE AMINOTRANSFERASE:** 76 IU/L (normal 13 to 36)

[redacted] **20[redacted] ASPARTATE AMINOTRANSFERASE:** 57 IU/L (normal 13 to 36)

[redacted] **20[redacted] BMI:** 32.95 kg/m2

[redacted] **20[redacted] CHOLESTEROL:** 273 mg/dL (normal 132 to 219)

[redacted] **20[redacted] CHOLINESTERASE:** 501 IU/L (normal 185 to 431)

[redacted] **20[redacted]CHOLINESTERASE:** 447 IU/L (normal 185 to 431)

[redacted] **20[redacted] CHOLINESTERASE:** 438 IU/L (normal 185 to 431)

[redacted] **20[redacted] CHOLINESTERASE:** 421 IU/L (normal 185 to 431)

[redacted] **20[redacted] CT SCAN:** no obvious abnormalities

[redacted] **20[redacted] DIRECT BILIRUBIN:** 0.63 mg/dL (normal 0 to 0.03)

[redacted] **20[redacted] DIRECT BILIRUBIN:** 0.29 mg/dL (normal 0 to 0.03)

[redacted] 20[redacted] **DIRECT BILIRUBIN:** 0.17 mg/dL (normal 0 to 0.03)

[redacted] 20[redacted] **DIRECT BILIRUBIN:** 0.19 mg/dL (normal 0 to 0.03)

[redacted] 20[redacted] **GAMMA GLUTAMYL TRANSPEPTIDASE:** 646 IU/L (normal 12 to 82)

[redacted] 20[redacted] **GAMMA GLUTAMYL TRANSPEPTIDASE:** 360 IU/L (normal 12 to 82)

[redacted] 20[redacted] **GAMMA GLUTAMYL TRANSPEPTIDASE:** 279 IU/L (normal 12 to 82)

[redacted] 20[redacted] **GAMMA GLUTAMYL TRANSPEPTIDASE:** 232 IU/L (normal 12 to 82)

[redacted] 20[redacted] **INDIRECT BILIRUBIN:** 2.62 mg/dL (normal 0.30 to 0.8)

[redacted] 20[redacted] **INDIRECT BILIRUBIN:** 1.70 mg/dL (normal 0.30 to 0.8)

[redacted] 20[redacted] **INDIRECT BILIRUBIN:** 1.06 mg/dL (normal 0.30 to 0.8)

[redacted] 20[redacted] **INDIRECT BILIRUBIN**: 1.05 mg/dL (normal 0.30 to 0.8)

[redacted] 20[redacted] **LDH:** 457 IU/L (normal 124 to 222)

[redacted] 20[redacted] **LDH:** 220 IU/L (normal 124 to 222)

[redacted] 20[redacted] **LDH:** 182 IU/L (normal 124 to 222)

[redacted] 20[redacted] **LDH:** 167 IU/L (normal 124 to 222)

[redacted] 20[redacted] **MRI:** STONES ARE SCATTERED IN THE GALLBLADDER. THE AREA AROUND THE GALLBLADDER IS EDEMATOUS AND CHOLECYSTITIS CANNOT BE RULED OUT.

[redacted] 20[redacted] **TOTAL BILI:** 3.25 mg/dL (normal 0.30 to 1.10)

[redacted] 20[redacted] **TOTAL BILI:** 1.99 mg/dL (normal 0.30 to 1.10)

[redacted] 20[redacted] **TOTAL BILI:** 1.23 mg/dL (normal 0.30 to 1.10)

[redacted] 20[redacted] **TOTAL BILI:** 1.24 mg/dL (normal 0.30 to 1.10)

[redacted] 20[redacted] **TRIGLYCERIDES:** 154 mg/dL (normal 33 to 149)

[redacted] 20[redacted] **WHITE BLOOD CELLS:** 7690 /uL (normal 3900 to 9800)

[redacted] 20[redacted] **WHITE BLOOD CELLS:** 6930 /uL (normal 3900 to 9800)

[redacted] 20[redacted] **WHITE BLOOD CELLS:** 5970 /uL (normal 3900 to 9800)

[redacted] 20[redacted] **WHITE BLOOD CELLS:** 6540 /uL (normal 3900 to 9800)

[redacted] **20[redacted] WHITE BLOOD CELLS:** 6300 /uL (normal 3900 to 9800)

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
胸痛	X			

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 30 mg	4[redacted]	MALE	ASIAN

Medical History	Onset Year
CHEST PAIN	20[redacted]
CHRONIC GASTRITIS	20[redacted]
HEADACHES	20[redacted]
INSOMNIA	20[redacted]
LEFT SIDED UC	20[redacted]
REFLUX OESOPHAGITIS	20[redacted]

Prior Procedures	Procedure Year
SAE SUPPLEMENTAL PROCEDURE: ATHEROSCLEROSIS TESTS	20[redacted]
SAE SUPPLEMENTAL PROCEDURE: CHEST X-RAYS	20[redacted]
SAE SUPPLEMENTAL PROCEDURE: CORONARY ANGIOGRAPHY	20[redacted]
SAE SUPPLEMENTAL PROCEDURE: ECHOCARDIOGRAPHY	20[redacted]
SAE SUPPLEMENTAL PROCEDURE: ELECTROCARDIOGRAMS	20[redacted]
SAE SUPPLEMENTAL PROCEDURE: LABORATORY VALUES	20[redacted]
SAE SUPPLEMENTAL PROCEDURE: THE TEST FOR INDUCTION OF CORONARY SPASM	20[redacted]
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	FORMER	1 PACK	20	20[redacted]
CIGARS	FORMER			
PIPES	NEVER			

Alcohol Use	Status	Number/Day
ALCOHOL	CURRENT	More than 4 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-675 ABT-494 (IND)	45 mg	ORAL	QD	[redacted] / 1	[redacted] / 57	57
M14-234 SS3 ABT-494 (MAIN)	30 mg	ORAL	QD	[redacted] / 58	[redacted] / 435	378
M14-533 ABT-494 (LTE)	30 mg	ORAL	QD	[redacted] / 436		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
MESALAZINE	4000 mg	BID	Y-M: [redacted]
BIFIDOBACTERIUM NOS	NOT REPORTED	NOT REPORTED	Y-M: [redacted]
MESALAZINE	4800 mg	QD	Y-M: [redacted]
MESALAZINE	4800 mg	QD	Y-M: [redacted]
MESALAZINE	1 g	QD	Y-M: [redacted]
PARACETAMOL	500 mg	PRN	Y-M: [redacted]
RIZATRIPTAN	10 mg	PRN	Y-M: [redacted]
GLYCERYL TRINITRATE	0.3 mg	PRN	Y-M: [redacted]
ESZOPICLONE	2 mg	PRN	Y-M: [redacted]
ACOTIAMIDE	100 mg	TID	Y-M: [redacted] / -125
FEXOFENADINE	60 mg	BID	Y-M: [redacted] / -87
VONOPRAZAN	20 mg	QD	Y-M: [redacted] / -78

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
MESALAZINE	4800 mg	QD	Y-M: [redacted]	Not reported
PARACETAMOL	500 mg	PRN	Y-M: [redacted]	Not reported
RIZATRIPTAN	10 mg	PRN	Y-M: [redacted]	Not reported
GLYCERYL TRINITRATE	0.3 mg	PRN	Y-M: [redacted]	Not reported
ESZOPICLONE	2 mg	PRN	Y-M: [redacted]	Not reported
ACOTIAMIDE	100 mg	TID	Y-M: [redacted] / -125	Not reported
FEXOFENADINE	60 mg	BID	Y-M: [redacted] / -87	Not reported
VONOPRAZAN	20 mg	QD	Y-M: [redacted] / -78	Not reported

GLYCEROL	120 mL	OTHER: ONCE	Y-M: 20[redacted] / 65	Y-M: 20[redacted] / 65
LIDOCAINE	30 mL	OTHER: ONCE	Y-M: 20[redacted] / 65	Y-M: 20[redacted] / 65
LIDOCAINE	5 mL	OTHER: ONCE	Y-M: 20[redacted] / 65	Y-M: 20[redacted] / 65
PREGABALIN	75 mg	BID	Y-M: 20[redacted] / 108	Y-M: 20[redacted] / 114
BROTIZOLAM	0.25 mg	PRN	Y-M: 20[redacted] / 246	Not reported
SODIUM PICOSULFATE	10 mL	OTHER: ONCE	Y-M: 20[redacted] / 329	Y-M: 20[redacted] / 329

Event #1: Serious Adverse Event

Event Description	CHEST PAIN
Preferred term	胸痛
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 45 / -391 DAYS BEFORE TREATMENT
Age at AE Onset	4[redacted]

Laboratory Testing

[redacted]20[redacted] (RX DAY -390): Aspartate Aminotransferase: 27 [13 - 30] U/L; Leukocytes: 4.73 [3.3 - 8.6] 10^9/L; NPTST105-CREATINE KINASE: 115 [59 - 248] U/L; NPTST200-LACTIC DEHYDROGENAGE: 160 [124 - 222] U/L; NPTST228-N-TERMINAL PRO-BRAIN NATRIURETI: 5 [0 - 125] 099,PG/ML; NPTST327-TROPONIN T: 0.005 [0.01 - 0.1] NG/ML

Microbiology

NOT REPORTED

AE Stopped Initial Rx Day / Rx Day	NOT REPORTED
Duration of AE	NOT REPORTED
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	HE OCCASIONALLY HAD CHEST PAIN BEFORE THE STUDY DRUG ADMINISTRATION AND WAS ADMITTED FOR SCRUTINY.
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:16:51

Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-675

治験責任医師からの報告。本被験者は日本の 4[redacted] 歳男性であり，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，胸痛の事象を発現した。関連する病歴は，潰瘍性大腸炎，元喫煙者（1 日 1 箱を 20 年間），不眠症，慢性胃炎，逆流性食道炎，電子タバコの現喫煙者（1 日 0.5 回を 1 年間）及び現飲酒者（1 日 4 杯超）であった。

Event 1 の臨床経過：

投与45日後＊，被験者は胸痛を発現した。

投与45日後＊　　，被験者は胸痛を発現した。被験者はニトロペンを使用し，症状は消失した。同日，被験者は専門医に狭心症の疑いと診断された。投与46日後＊　　，被験者は精密検査のために入院した。同日，被験者は心カテーテル検査を受けた。すべての臨床検査及び診断法の結果は正常であった。被験者は病歴に基づき冠攣縮性狭心症の疑いと診断された。被験者は，治療の必要がなく，胸痛に対してニトロペンを使用することとされた。投与48日後＊　　，被験者は退院した。

投与された薬剤はニトロペンであった。

The patient's past medications include:

PENTASA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

BIOFERMIN ([redacted] 20[redacted] - [redacted] 20[redacted])

INFLUENZA VACCINE HA for PREVENTION OF INFLUENZA ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Blinded)

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1)　Chest pain (10008479)　(Chest pain (10008479))　[v.22.1]　[10008479]

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 CHEST PAIN

- Investigator: He occasionally had chest pain before the study drug administration and was admitted for scrutiny.

- AbbVie: Event is common in the general population. The mean annual prevalence of non-cardiac chest pain in 6 population-based studies was approximately 25%. Risk factors for cardiac chest pain include chronic gastritis and reflux esophagitis.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] ASPARTATE AMINO TRANSFERASE:** 27 U/L (normal 13 to 30)

[redacted] **20[redacted] ATHEROSCLEROSIS TESTS:** No abnormalities.

[redacted] **20[redacted] CHEST X-RAYS:** No abnormalities.

[redacted] **20[redacted] CORONARY ANGIOGRAPHY:** No significant stenosis.

[redacted] **20[redacted] CREATINE KINASE:** 115 U/L (normal 59 to 248)

[redacted] **20[redacted] ECHOCARDIOGRAPHY:** No abnormalities.

[redacted] **20[redacted] ELECTROCARDIOGRAM:** Screening ECG: Normal

[redacted] **20[redacted] ELECTROCARDIOGRAM:** No abnormalities.

[redacted] **20[redacted] LACTIC DEHYDROGENASE:** 160 U/L (normal 124 to 222)

[redacted] **20[redacted] N-TERMINAL PRO-BRAIN NATRIURETIC PEPTIDE:** 5 PG/ML (normal 0 to 125)

[redacted] **20[redacted] THE TEST FOR INDUCTION OF CORONARY SPASM:** Borderline type.

[redacted] **20[redacted] TROPONIN T:** 0.0005 NG/ML (normal 0.01 to 0.1)

[redacted] **20[redacted] WHITE BLOOD CELLS:** 4.73 10^3/uL (normal 3.3 to 8.6)

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
アスパラギン酸アミノトランスフェラーゼ増加				X
腓骨骨折	X			
肝障害				X
脛骨骨折	X			

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	5[redacted]	FEMALE	ASIAN

Medical History	Onset Year
ANEMIA: IRON DEFICIENCY ANEMIA	20[redacted]
EXTENSIVE UC/PANCOLITIS	20[redacted]
GASTROESOPHAGEAL REFLUX DISEASE	20[redacted]
OTHER: GASTRITIS	20[redacted]
OTHER: NONORGANIC INSOMNIA	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	NEVER	

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 ABT-494 (IND)	45 mg	ORAL	QD	[redacted] / 1	[redacted] / 54	54
M14-234 SS3 Placebo (MAIN)		ORAL	QD	[redacted] / 55	[redacted] / 218	164
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted] / 219		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
AZATHIOPRINE	50 mg	QD	Y-M: [redacted]
FOLIC ACID	1 mg	QD	Y-M: [redacted]
LACTOBACILLUS ACIDOPHILUS	300 mg	TID	Y-M: [redacted]
MESALAZINE	1200 mg	TID	Y-M: [redacted]
PREDNISOLONE	10 mg	QD	Y-M: [redacted]
VEDOLIZUMAB	300 mg	OTHER: EVERY 8 WEEKS	Y-M: [redacted]
MESALAZINE	4800 mg	QD	Y-M: [redacted] / -268
ZOLPIDEM	6.25 mg	PRN	Y-M: [redacted] / -79

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
FOLIC ACID	1 mg	QD	Y-M: [redacted]	ONGOING
LACTOBACILLUS ACIDOPHILUS	300 mg	TID	Y-M: [redacted]	Y-M: [redacted] / 761
MESALAZINE	4800 mg	QD	Y-M: [redacted] / -268	ONGOING
ZOLPIDEM	6.25 mg	PRN	Y-M: [redacted] / -79	ONGOING
ACHILLEA MILLEFOLIUM;ACONITUM SPP.;ARNICA SPP.;ATROPA BELLADONNA;BELLIS PERENNIS;CALENDULA SPP.;ECHINACEA ANGUSTIFOLIA;ECHINACEA PURPUREA;HAMAMELIS SPP.;HERBAL NOS;HYPERICUM	1 OTHER: AMPOULE	BID	Y-M: [redacted] / 133	Y-M: [redacted] / 136

SPP.;SULFURATED POTASH;SY				
ASCORBIC ACID;BIOTIN;CYANOCOBALAMIN;DEXPANTHENOL;ERGOCALCIFEROL;FOLIC ACID;NICOTINAMIDE;PYRIDOXINE;RETINOL;RIBOFLAVIN;THIAMINE;TOCOPHEROL	1 OTHER: VIAL	QD	Y-M: 20[redacted] / 133	Y-M: 20[redacted] / 136
GALLAMINE	10 mg	BID	Y-M: 20[redacted] / 133	Y-M: 20[redacted] / 136
KETOROLAC	30 mg	QD	Y-M: 20[redacted] / 133	Y-M: 20[redacted] / 135
SODIUM CHLORIDE	1 L	QD	Y-M: 20[redacted] / 133	Y-M: 20[redacted] / 136
ATROPINE	1 mL	OTHER: ONCE	Y-M: 20[redacted] / 134	Y-M: 20[redacted] / 134
BUPIVACAINE	4 mL	OTHER: ONCE	Y-M: 20[redacted] / 134	Y-M: 20[redacted] / 134
BUPRENORPHINE	5 ug	OTHER: ONCE A WEEK	Y-M: 20[redacted] / 134	Y-M: 20[redacted] / 136
CALCIUM CHLORIDE;POTASSIUM;SODIUM LACTATE	1 L	QD	Y-M: 20[redacted] / 134	Y-M: 20[redacted] / 134
CEFAZEDONE	2 g	BID	Y-M: 20[redacted] / 134	Y-M: 20[redacted] / 140
DEXMEDETOMIDINE	2 mL	OTHER: ONCE	Y-M: 20[redacted] / 134	Y-M: 20[redacted] / 134
FENTANYL	2 mL	PRN	Y-M: 20[redacted] / 134	Y-M: 20[redacted] / 136
GLYCOPYRRONIUM	0.2 mg	OTHER: ONCE	Y-M: 20[redacted] / 134	Y-M: 20[redacted] / 134
NEFOPAM	10 mg	BID	Y-M: 20[redacted] / 134	Y-M: 20[redacted] / 136
NEFOPAM	2 mL	PRN	Y-M: 20[redacted] / 134	Y-M: 20[redacted] / 136
RAMOSETRON	0.3 mg	QD	Y-M: 20[redacted] / 134	Y-M: 20[redacted] / 135
BENZOCAINE;POTASSIUM CHLORATE;SODIUM BICARBONATE	1 OTHER: TABLET	BID	Y-M: 20[redacted] / 135	Y-M: 20[redacted] / 154
CITRULLINE	1 mL	TID	Y-M: 20[redacted] / 135	Y-M: 20[redacted] / 138
EPERISONE	75 mg	BID	Y-M: 20[redacted] / 135	Y-M: 20[redacted] / 154
MELOXICAM	7.5 mg	BID	Y-M: 20[redacted] / 135	Y-M: 20[redacted] / 154
METOCLOPRAMIDE	4.231 mg	QD	Y-M: 20[redacted] / 135	Y-M: 20[redacted] / 136
PARACETAMOL;TRAMADOL	1 OTHER: TABLET	BID	Y-M: 20[redacted] / 135	Y-M: 20[redacted] / 154
PREDNICARBATE	0.1 g	OTHER: ONCE	Y-M: 20[redacted] / 139	Y-M: 20[redacted] / 139
CEFALEXIN	500 mg	TID	Y-M: 20[redacted] / 141	Y-M: 20[redacted] / 146

ISONIAZID	300 mg	QD	Y-M: 20[redacted] / 343	Y-M: 20[redacted] / 618
PYRIDOXINE	50 mg	QD	Y-M: 20[redacted] / 343	Y-M: 20[redacted] / 618
URSODEOXYCHOLIC ACID	100 mg	TID	Y-M: 20[redacted] / 379	Y-M: 20[redacted] / 407
URSODEOXYCHOLIC ACID	100 mg	BID	Y-M: 20[redacted] / 408	Y-M: 20[redacted] / 618
ACHILLEA MILLEFOLIUM;ACONITUM SPP.;ARNICA SPP.;ATROPA BELLADONNA;BELLIS PERENNIS;CALENDULA SPP.;ECHINACEA ANGUSTIFOLIA;ECHINACEA PURPUREA;HAMAMELIS SPP.;HERBAL NOS;HYPERICUM SPP.;SULFURATED POTASH;SY	1 OTHER: AMPOULE	BID	Y-M: 20[redacted] / 512	Y-M: 20[redacted] / 514
ASCORBIC ACID;BIOTIN;CYANOCOBALAMIN;DEXPANTHENOL;ERGOCALCIFEROL;FOLIC ACID;NICOTINAMIDE;PYRIDOXINE;RETINOL;RIBOFLAVIN;THIAMINE;TOCOPHEROL	1 OTHER: VIAL	QD	Y-M: 20[redacted] / 512	Y-M: 20[redacted] / 514
ATROPINE	0.5 mg	OTHER: ONCE	Y-M: 20[redacted] / 512	Y-M: 20[redacted] / 512
BUPIVACAINE	20 mg	OTHER: ONCE	Y-M: 20[redacted] / 512	Y-M: 20[redacted] / 512
CALCIUM CHLORIDE;POTASSIUM;SODIUM CHLORIDE;SODIUM LACTATE	1 L	OTHER: ONCE	Y-M: 20[redacted] / 512	Y-M: 20[redacted] / 512
CEFAZEDONE	2 g	BID	Y-M: 20[redacted] / 512	Y-M: 20[redacted] / 518
DEXMEDETOMIDINE	236 ug	OTHER: ONCE	Y-M: 20[redacted] / 512	Y-M: 20[redacted] / 512
GLYCOPYRRONIUM	0.1 mg	OTHER: ONCE	Y-M: 20[redacted] / 512	Y-M: 20[redacted] / 512
METHOCARBAMOL	500 mg	BID	Y-M: 20[redacted] / 512	Y-M: 20[redacted] / 514
METOCLOPRAMIDE	4.231 mg	QD	Y-M: 20[redacted] / 512	Y-M: 20[redacted] / 512
MIDAZOLAM	5 mg	OTHER: ONCE	Y-M: 20[redacted] / 512	Y-M: 20[redacted] / 512

NEFOPAM	10 mg	BID	Y-M: 20[redacted] / 512	Y-M: 20[redacted] / 514
SODIUM CHLORIDE	1000 mL	QD	Y-M: 20[redacted] / 512	Y-M: 20[redacted] / 514
SODIUM CHLORIDE	2 L	QD	Y-M: 20[redacted] / 512	Y-M: 20[redacted] / 512
SODIUM CHLORIDE	500 mL	OTHER: ONCE	Y-M: 20[redacted] / 512	Y-M: 20[redacted] / 512
TRAMADOL	50 mg	QD	Y-M: 20[redacted] / 512	Y-M: 20[redacted] / 514
CITRULLINE	1 mL	TID	Y-M: 20[redacted] / 513	Y-M: 20[redacted] / 519
EPERISONE	75 mg	BID	Y-M: 20[redacted] / 513	Y-M: 20[redacted] / 519
NIZATIDINE	150 mg	BID	Y-M: 20[redacted] / 513	Y-M: 20[redacted] / 519
PARACETAMOL	650 mg	BID	Y-M: 20[redacted] / 513	Y-M: 20[redacted] / 519
HYALURONIC ACID	2 OTHER: DROP	TID	Y-M: 20[redacted] / 736	ONGOING
PIRENOXINE	2 OTHER: DROP	TID	Y-M: 20[redacted] / 736	ONGOING
FISH OIL	1200 mg	QD	Y-M: 20[redacted] / 762	ONGOING
PROBIOTICS NOS	2000 mg	QD	Y-M: 20[redacted] / 762	ONGOING
BORON;CALCIUM;CALCIUM CARBONATE;CALCIUM GLUCONATE;MAGNESIUM;MAGNESIUM CITRATE;MAGNESIUM OXIDE	1 OTHER: TABLET	QD	Y-M: 20[redacted] / 789	ONGOING
VITAMIN B12 NOS	1000 OTHER: MCG	QD	Y-M: 20[redacted] / 789	ONGOING
IBANDRONIC ACID	3.375 mg	OTHER: EVERY 3 MONTH	Y-M: 20[redacted] / 834	ONGOING
MAGNESIUM SULFATE;POTASSIUM SULFATE;SIMETICONE;SODIUM SULFATE	14 OTHER: TABLET	QD	Y-M: 20[redacted] / 1016	Y-M: 20[redacted] / 1017
MIDAZOLAM	3 mg	OTHER: ONCE	Y-M: 20[redacted] / 1017	Y-M: 20[redacted] / 1017
PETHIDINE	25 mg	OTHER: ONCE	Y-M: 20[redacted] / 1017	Y-M: 20[redacted] / 1017
PROPOFOL	70 mg	OTHER: ONCE	Y-M: 20[redacted] / 1017	Y-M: 20[redacted] / 1017
SODIUM CHLORIDE	250 mL	OTHER: ONCE	Y-M: 20[redacted] / 1017	Y-M: 20[redacted] / 1017
PARACETAMOL	500 mg	QD	Y-M: 20[redacted] / 1053	Y-M: 20[redacted] / 1055
PARACETAMOL	500 mg	BID	Y-M: 20[redacted] / 1130	Y-M: 20[redacted] / 1131
INFLUENZA VACCINE	0.5 mL	OTHER: ONCE	Y-M: 20[redacted] / 1177	Y-M: 20[redacted] / 1177

Event #1: Serious Adverse Event

Event Description	LEFT DISTAL TIBIOFIBULA FRACTURE
Preferred term	腓骨骨折，脛骨骨折
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 350 / 132
Age at AE Onset	5[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	365 / 147
Duration of AE	16 DAYS
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	FELL DOWN THE STAIRS.
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Event #2: Event of Interest - Hepatic Disorder

Event Description	アラニンアミノトランスフェラーゼ増加
Preferred term	Alanine aminotransferase increased
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 597 / 379
Age at AE Onset	5[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	779 / 561
Duration of AE	183 DAYS
Severity	MILD
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

Event #3: Event of Interest - Hepatic Disorder

Event Description	ASPARTATE AMINOTRANSFERASE INCREASED

Preferred term	アスパラギン酸アミノトランスフェラーゼ増加
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 597 / 379
Age at AE Onset	5[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	779 / 561
Duration of AE	183 DAYS
Severity	MILD
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

Event #4: Event of Interest - Hepatic Disorder

Event Description	CHRONIC LIVER DISEASE
Preferred term	肝障害
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 1185 / 967
Age at AE Onset	6[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	ONGOING
Duration of AE	ONGOING
Severity	MILD
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]:16:51

Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は韓国の 5[redacted] 歳女性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，左遠位脛腓骨骨折の事象を発現した。関連する病歴は，広範囲な潰瘍性大腸炎（全大腸炎型），非器質性不眠症，非喫煙者及び禁酒であった。

Event 1 の臨床経過：

投与350日後＊ ，被験者は左遠位脛腓骨骨折を発現した。投与365日後＊，左遠位脛腓骨骨折は消失した。

投与350日後＊，被験者は階段から転落し，足首の痛み及び浮腫があり，入院した。左遠位脛腓骨骨折と診断された。投与352日後＊，観血的整復及び内固定の手術を受けた。被験者は軽度の足首の痛みがあったが，日常生活に影響はなかった。投与730日後＊，被験者は退院した。

投与729日後＊，被験者は予定された左遠位脛腓骨のインプラント除去のために入院した。投与730日後＊，手術が行われた。投与737日後＊，被験者は退院した。投与745日後＊，抜糸が行われ，合併症は認められなかった。

投与された薬剤は，nefopam hydrochloride，citrulline malate，ブプレノルフィン，taracet semi，メロキシカム，methylol cefalexin lysinate，gallamine triethiodide，s-multi vita，グリコピロニウム臭化物，ketorolac tromethamine，エペリゾン及び prednicarbate cream 0.25%であった。

The patient's past medications include:

ASACOL DR for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

IMMUTHERA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

SOLONDO for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

VEDOLIZUMAB for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Open Label)

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1) Fibula fracture (10016667)　(Fibula fracture (10016667))　[v.22.1]　[10016667]

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

2)　Tibia fracture (10043827)　(Tibia fracture (10043827))　[v.22.1]　[10043827]

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 (Open Label)

Event of LEFT DISTAL TIBIOFIBULA FRACTURE

- Investigator: Fell down on the stairs.

- AbbVie: Event is more likely related to trauma when the subject fell down the stairs.

NON SERIOUS EVENTS AND **OTHER AREAS OF SAFETY INTEREST

Liver disorder: Asymptomatic.

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
挫傷	X			
椎間板障害	X			
脊柱変形	X			

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	4[redacted]	FEMALE	ASIAN

Medical History	Onset Year
LEFT SIDED UC	20[redacted]
OTHER: DERMATITIS	20[redacted]
OTHER: NUMMULAR DERMATITIS	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	NEVER	

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 ABT-494 (IND)	30 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 55	55
M14-234 SS3 Placebo (MAIN)		ORAL	QD	[redacted]20[redacted] / 56	[redacted]20[redacted] / 161	106

M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted]20[redacted] / 162

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
MESALAZINE	1200 mg	BID	Y-M: 20[redacted]
MESALAZINE	1200 mg	BID	Y-M: 20[redacted]
MESALAZINE	1000 mg	QD	Y-M: 20[redacted]
PREDNISOLONE	5 mg	QD	Y-M: 20[redacted]
BLINDED THERAPY	225 mg	OTHER: Q4WEEKS	Y-M: 20[redacted]
MESALAZINE	4800 mg	QD	Y-M: 20[redacted] / -237
PREDNISOLONE	10 mg	QD	Y-M: 20[redacted] / -238
DESOGESTREL;ETHINYLESTRADIOL	0.17 mg	OTHER: QD IN 21 DAYS OF EVERY 28 DAYS MENSTRUATION CYCLE	Y-M: 20[redacted] / -137

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
DESOGESTREL;ETHINYLESTRADIOL	0.17 mg	OTHER: QD IN 21 DAYS OF EVERY 28 DAYS MENSTRUATION CYCLE	Y-M: 20[redacted] / -137	ONGOING
MESALAZINE	2400 mg	QD	Y-M: 20[redacted] / 85	ONGOING
CLEBOPRIDE;SIMETICONE	1 OTHER: CAP.	TID	Y-M: 20[redacted] / 647	Y-M: 20[redacted] / 649
CODEINE;PARACETAMOL	25 mg	TID	Y-M: 20[redacted] / 647	Y-M: 20[redacted] / 649
GALLAMINE	2 mL	QD	Y-M: 20[redacted] / 647	Y-M: 20[redacted] / 649
GLUCOSE	500 mL	QD	Y-M: 20[redacted] / 647	Y-M: 20[redacted] / 649
PIROXICAM	50 mg	TID	Y-M: 20[redacted] / 647	Y-M: 20[redacted] / 649
TRAMADOL	50 mg	QD	Y-M: 20[redacted] / 647	Y-M: 20[redacted] / 649

Event #1: Serious Adverse Event

Event Description	DISTORTION OF THE LUMBAR VERTEBRA., CONTUSION OF THE LEFT KNEE, CONTUSION OF THE BOTH SHOULDER AND UPPER ARM, TENSION OF THE LUMBAR VERTEBRA
Preferred term	挫傷，挫傷，椎間板障害，脊柱変形

AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 808 / 647
Age at AE Onset	4[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	810 / 649
Duration of AE	3 DAYS
Severity	MILD
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	TRAFFIC ACCIDENT
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は韓国の 4[redacted] 歳女性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，腰椎の歪み，左膝の挫傷，両肩部及び両上腕部の挫傷，並びに腰椎の緊張の事象を発現した。関連する病歴は，潰瘍性大腸炎，非喫煙者及び非飲酒者であった。

Event 1 の臨床経過：

投与808日後＊，被験者は腰椎の歪み，左膝の挫傷，両肩部及び両上腕部の挫傷，並びに腰椎の緊張を発現した。投与810日後＊，腰椎の歪み，左膝の挫傷，両肩部及び両上腕部の挫傷，並びに腰椎の緊張は消失した。

投与808日後＊，被験者は交通事故に遭い，入院した。被験者は頭痛，左膝及び背部の痛み，並びに全身の脱力感があった。X線検査及び血液検査を行ったが，結果は提供されなかった。投与810日後＊，被験者は退院した。

投与された薬剤は，erexin，gastin，gallonin，depain，トラマドール及び dextrose 5%であった。

The patient's past medications include:

PREDNISOLONE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Open Label)

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1) Spinal deformity (10058907) (Spinal deformity (10058907)) [v.24.0] [10058907]

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

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

Dechallenge: Not Applicable

2) Contusion of knee (10010860) (Contusion (10050584)) [v.24.0] [10010860]

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

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

Dechallenge: Not Applicable

3) Contusion (10050584) (Contusion (10050584)) [v.24.0] [10050584]

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

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

Dechallenge: Not Applicable

4) Intervertebral disc disorder (10061521) (Intervertebral disc disorder (10061521)) [v.24.0] [10061521]

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 (Open Label)

Event of DISTORTION OF THE LUMBAR VERTEBRA

- Investigator: Traffic accident.

- AbbVie: Event is more likely related to trauma sustained from a traffic accident.

Event of CONTUSION OF THE LEFT KNEE

- Investigator: Traffic accident.

- AbbVie: Event is more likely related to trauma sustained from a traffic accident.

Event of CONTUSION OF THE BOTH SHOULDER AND UPPER ARM

- Investigator: Traffic accident.

- AbbVie: Event is more likely related to trauma sustained from a traffic accident.

Event of TENSION OF THE LUMBAR VERTEBRA

- Investigator: Traffic accident.

- AbbVie: Event is more likely related to trauma sustained from a traffic accident.

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
異形成	X	X		

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	6[redacted]	MALE	ASIAN

Medical History	Onset Year
BENIGN PROSTATIC HYPERPLASIA: NA	20[redacted]
EYE DISEASE/DISORDER: UVEITIS	20[redacted]
EYE DISEASE/DISORDER: VITREOUS OPACITY	20[redacted]
LEFT SIDED UC	20[redacted]
OTHER: ADENOMA OF STOMACH WITH HG-DYSPLASIA	20[redacted]
OTHER: CHORONIC ATROPHIC GASTRITIS	20[redacted]
OTHER: EROSIVE GASTRITIS	20[redacted]
OTHER: HERNIATED NUCLEUS PULPOSUS	20[redacted]
OTHER: L-STENOSIS(L4-5)	20[redacted]
OTHER: TUBULAR ADENOMA	20[redacted]
OTHER: TUBULAR ADENOMA	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	FORMER			
CIGARETTES	FORMER	1 PACK	20	20[redacted]
CIGARS	NEVER			
PIPES	NEVER			

Alcohol Use	Status	Number/Day
ALCOHOL	FORMER	2 - 4 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 Placebo (IND)		ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 57	57
M14-234 SS3 Placebo (MAIN)		ORAL	QD	[redacted]20[redacted] / 58	[redacted]20[redacted] / 252	195
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted]20[redacted] / 253	[redacted]20[redacted] / 1291	1039

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
FOLIC ACID	1 mg	QD	Y-M: 20[redacted]
MESALAZINE	500 mg	QD	Y-M: 20[redacted]
PREDNISOLONE	5 mg	QD	Y-M: 20[redacted]
SULFASALAZINE	3 OTHER: TABLET	TID	Y-M: 20[redacted]
SULFASALAZINE	3 OTHER: TABLET	TID	Y-M: 20[redacted]
SULFASALAZINE	2 OTHER: TABLET	TID	Y-M: 20[redacted]
MESALAZINE	1 g	QD	Y-M: 20[redacted]
PREDNISOLONE	30 mg	QD	Y-M: 20[redacted]
SULFASALAZINE	3 OTHER: TABLET	TID	Y-M: 20[redacted]
PREDNISOLONE	10 mg	QD	Y-M: 20[redacted]
BUDESONIDE;SODIUM CHLORIDE	1 OTHER: EA	QD	Y-M: 20[redacted]
PREDNISOLONE	15 mg	QD	Y-M: 20[redacted]
AZATHIOPRINE	25 mg	QD	Y-M: 20[redacted]
PREDNISOLONE	10 mg	QD	Y-M: 20[redacted]
MESALAZINE	4 g	QD	Y-M: 20[redacted]
INFLIXIMAB	400 mg	OTHER: EVERY 8 WEEKS	Y-M: 20[redacted]
PREDNISOLONE	5 mg	QD	Y-M: 20[redacted]
BECLOMETASONE	5 mg	QD	Y-M: 20[redacted]
BUDESONIDE;SODIUM CHLORIDE	1 OTHER: EA	QD	Y-M: 20[redacted]
GOLIMUMAB	100 mg	OTHER: EVERY 4WEEKS	Y-M: 20[redacted]
SULFASALAZINE	2000 mg	TID	Y-M: 20[redacted]
MESALAZINE	1 g	QD	Y-M: 20[redacted]
IRON;PROTEASE NOS	256.26 mg	BID	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 / Stop Year-Month / RX Day	RX Day
FOLIC ACID	1 mg	QD	Y-M: 20[redacted]	ONGOING
SULFASALAZINE	2000 mg	TID	Y-M: 20[redacted]	ONGOING
TAMSULOSIN	0.2 mg	QD	Y-M: 20[redacted] / 240	Y-M: 20[redacted] / 1030
CITRIC ACID;MAGNESIUM OXIDE;SODIUM PICOSULFATE	170 mL	QD	Y-M: 20[redacted] / 1002	Y-M: 20[redacted] / 1003
LACTULOSE	60 mL	QD	Y-M: 20[redacted] / 1002	Y-M: 20[redacted] / 1002
MIDAZOLAM	4 mg	QD	Y-M: 20[redacted] / 1003	Y-M: 20[redacted] / 1003
PETHIDINE	25 mg	QD	Y-M: 20[redacted] / 1003	Y-M: 20[redacted] / 1003
ASCORBIC ACID;MACROGOL 3350;POTASSIUM;SODIUM CHLORIDE;SODIUM SULFATE	1 L	QD	Y-M: 20[redacted] / 1031	Y-M: 20[redacted] / 1032
TAMSULOSIN	0.4 mg	QD	Y-M: 20[redacted] / 1031	ONGOING
MIDAZOLAM	3 mg	QD	Y-M: 20[redacted] / 1032	Y-M: 20[redacted] / 1032
PETHIDINE	25 mg	QD	Y-M: 20[redacted] / 1032	Y-M: 20[redacted] / 1032

Event #1: Serious Adverse Event, AE Leading to Discontinuation of Study Drug

Event Description	HIGH GRADE DYSPLASIA
Preferred term	異形成
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 1256 / 1004
Age at AE Onset	6[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	1285 / 1033
Duration of AE	30 DAYS
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	ULCERATIVE COLITIS

Discontinued Study Drug Due to the Event	YES
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted] 20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は韓国の 6[redacted] 歳男性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，高度異形成の事象を発現した。関連する病歴は，高度異形成を伴う胃腺腫，元喫煙者（1 日 1 箱を 20 年間），慢性萎縮性胃炎，びらん性胃炎，潰瘍性大腸炎，管状腺腫，噛みタバコの元喫煙者及び元飲酒者（1 日 2–4 杯）であった。

Event 1 の臨床経過：

投与1256日後＊，被験者は高度異形成を発現した。投与1285日後＊，高度異形成は消失した。

入院前の 投与1255日後＊，被験者は結腸内視鏡検査を受けた。ポリープが確認され，S 状結腸で生検が行われた。生検の結果は管状腺腫であったが，完全には除去されなかった。

投与1283 日後＊，被験者は内視鏡下での粘膜下層剥離術のため入院し，直腸 S 状結腸移行部の残存病変の除去を受けた。投与1285日後＊，被験者は退院した。

本事象により，治験薬の投与は完全に中止された。

The patient's past medications include:

ASACOL for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

SOLONDO for ULCERATIVE COLITIS ([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])

ZOPYRIN for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

PENTASA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

ENTOCORT for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

AZATHIOPRINE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

SALOFALK for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

INFLIXIMAB for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

CLIPPER SR for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

GOLIMUMAB for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Open Label)

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1) Dysplasia (10058314) (Dysplasia (10058314)) [v.24.0] [10058314]

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 (Open Label)

Event of HIGH GRADE DYSPLASIA

- Investigator: Ulcerative colitis.

- AbbVie: Risk factors for gastrointestinal dysplasia include pre-existing tubular adenomas in 20[redacted] and 20[redacted], advanced age and pre-existing ulcerative colitis.

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
貧血				X
COVID-19	X			X
γ-グルタミルトランスフェラーゼ増加				X
好中球数減少				X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	6[redacted]	MALE	ASIAN

Medical History	Onset Year
CMV COLITIS	20[redacted]
ECZEMA	20[redacted]
EPILEPSY	20[redacted]
GASTRO-ESOPHAGEAL REFLUX DISEASE	20[redacted]
HYPERTENSION	20[redacted]
HYPOTHYROIDISM	20[redacted]
INSOMNIA	20[redacted]
LEFT SIDED UC	20[redacted]
SPINAL STENOSIS L4,L5	20[redacted]
TINEA PEDIS	20[redacted]

Prior Procedures	Procedure Year
PRIOR PROCEDURES: HEMITHYROIDECTOMY	20[redacted]
PRIOR PROCEDURES: PARTIAL HEMILAMINECTOMY L4, LEFT	20[redacted]
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	FORMER	1 PACK	30	20[redacted]
CIGARS	NEVER			
PIPES	NEVER			

Alcohol Use	Status	Number/Day
ALCOHOL	CURRENT	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS2 Placebo (IND)		ORAL	QD	[redacted] / 1	[redacted] / 57	57
M14-234 SS3 Placebo (MAIN)		ORAL	QD	[redacted] / 58	[redacted] / 363	306
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted] / 364		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
CILNIDIPINE	5 mg	QD	Y-M: [redacted]
ASCORBIC ACID;BIOTIN;CYANOCOBALAMIN;FOLIC ACID;FURSULTIAMINE;IRON;NICOTINAMIDE;PYRIDOXINE;RIBOFLAVIN;SELENIUM;TOCOPHEROL;ZINC	1 OTHER: TAB	BID	Y-M: [redacted]
LAMOTRIGINE	200 mg	BID	Y-M: [redacted]
PANCREATIN	500 mg	TID	Y-M: [redacted]
MESALAZINE	1 g	QD	Y-M: [redacted]
MESALAZINE	2400 mg	QD	Y-M: [redacted]
MESALAZINE	4800 mg	QD	Y-M: [redacted]
MESALAZINE	1 g	QD	Y-M: [redacted]
ESOMEPRAZOLE	20 mg	QD	Y-M: [redacted]
PREDNISOLONE	2.5 mg	QD	Y-M: [redacted]
ATENOLOL	75 mg	QD	Y-M: [redacted]
MESALAZINE	500 mg	QD	Y-M: [redacted]
VALGANCICLOVIR	900 mg	BID	Y-M: [redacted]
LACTOBACILLUS RHAMNOSUS	500 mg	BID	Y-M: [redacted] / -249
FEXOFENADINE	180 mg	PRN	Y-M: [redacted] / -221
TRIAMCINOLONE	10 mg	PRN	Y-M: [redacted] / -130
ZOLPIDEM	6.25 mg	PRN	Y-M: [redacted] / -25
LEVOTHYROXINE	0.15 mg	QD	Y: [redacted]

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
ASCORBIC ACID;BIOTIN;CYANOCOBALAMIN;FOLIC ACID;FURSULTIAMINE;IRON;NICOTINAMIDE;PYRIDOXINE;RIBOFLAVIN;SELENIUM;TOCOPHEROL;ZINC	1 OTHER: TAB	BID	Y-M: 20[redacted]	Not reported
LAMOTRIGINE	200 mg	BID	Y-M: 20[redacted]	Not reported
PANCREATIN	500 mg	TID	Y-M: 20[redacted]	Y-M: 20[redacted] / 336
MESALAZINE	4800 mg	QD	Y-M: 20[redacted]	Not reported
MESALAZINE	1 g	QD	Y-M: 20[redacted]	Not reported
ESOMEPRAZOLE	20 mg	QD	Y-M: 20[redacted]	Not reported
ATENOLOL	75 mg	QD	Y-M: 20[redacted]	Y-M: 20[redacted] / 670
LACTOBACILLUS RHAMNOSUS	500 mg	BID	Y-M: 20[redacted] / -249	Not reported
AMLODIPINE;LOSARTAN	1 OTHER: TAB	QD	Y-M: 20[redacted] / 221	Y-M: 20[redacted] / 311
ZOLPIDEM	10 mg	PRN	Y-M: 20[redacted] / 284	ONGOING
AMLODIPINE;OLMESARTAN;ROSUVASTATIN	1 OTHER: TAB	QD	Y-M: 20[redacted] / 312	Y-M: 20[redacted] / 670
PROPOFOL	90 mg	QD	Y-M: 20[redacted] / 331	Y-M: 20[redacted] / 331
DESOXIMETASONE	20 mL	QD	Y-M: 20[redacted] / 396	Y-M: 20[redacted] / 584
PREDNICARBATE	20 g	BID	Y-M: 20[redacted] / 396	Y-M: 20[redacted] / 584
SERTACONAZOLE	60 g	BID	Y-M: 20[redacted] / 396	Y-M: 20[redacted] / 584
TRIAMCINOLONE	10 mg	QD	Y-M: 20[redacted] / 396	Y-M: 20[redacted] / 396
POLIDERIBOTIDE	5.625 mg	QD	Y-M: 20[redacted] / 417	Y-M: 20[redacted] / 417
IVERMECTIN	15 g	QD	Y-M: 20[redacted] / 585	Not reported
NADIFLOXACIN	10 g	QD	Y-M: 20[redacted] / 585	Not reported
LEVOTHYROXINE	0.15 mg	QD	Y: 20[redacted]	Not reported

Event #1: Event of Interest - Anemia

Event Description	ANEMIA
Preferred term	貧血
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 701 / 338

Age at AE Onset	6[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	791 / 428
Duration of AE	91 DAYS
Severity	MILD
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 #2: Event of Interest - Hepatic Disorder

Event Description	GGT INCREASED
Preferred term	γ-グルタミルトランスフェラーゼ増加
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 701 / 338
Age at AE Onset	6[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	791 / 428
Duration of AE	91 DAYS
Severity	MODERATE
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 - Neutropenia

Event Description	NEUTROPHIL COUNT DECREASED
Preferred term	好中球数減少
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 701 / 338
Age at AE Onset	6[redacted]

Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	791 / 428
Duration of AE	91 DAYS
Severity	MILD
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 #4: Serious Adverse Event, Event of Interest - Serious Infections

Event Description	COVID-19 INFECTION
Preferred term	COVID-19
AE Onset Date / Initial Rx Day / Rx Day	[redacted] / 1014 / 651
Age at AE Onset	[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	NOT REPORTED
Duration of AE	NOT REPORTED
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	DROPLET INFECTION FROM FAMILY
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は韓国の 6[redacted] 歳男性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，COVID-19 の感染症，気胸（右肺）及び肺炎の事象を発現した。関連する病歴は，甲状腺機能低下症，高血圧，元喫煙者（1 日 1 箱を 30 年間），潰瘍性大腸炎，不眠症及び現飲酒者（1 日 2 杯未満）であった。

Event 4 の臨床経過：

投与1014日後＊，被験者は COVID-19 の感染症を発現した。投与1026日後＊，被験者は気胸（右肺）及び肺炎を発現した。

事象発現に先立ち，被験者の息子は COVID-19 の感染症の病歴が 10 日間あり，自宅療養していた。被験者は，悪寒，疲労，筋肉痛及び咳嗽の病歴が 4–5 日間あると報告した。 投与1017日後＊，被験者は COVID-19 検査陽性であった。投与1018日後＊，被験者は治療のために入院した。投与1028日後＊，被験者は退院した。

退院後，被験者は胸痛及び呼吸困難の症状があった。投与1029日後＊，胸部 CT 検査の結果，肺炎及び右肺の気胸が認められた。投与1031日後＊，被験者は治療のために再入院した。被験者の症状は減少し，投与1037日後＊，被験者は退院した。

投与された薬剤は，tazolactam，クラビット，酸素，regkirona，synatura，lukio，fexonadine，potastin OD，sulfolase 及び tacenol ER であった。

The patient's past medications include:

PENTASA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

MEZAVANT XL for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

SOLONDO for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

ASACOL for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

VALCYTE for CMV COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

AZD1222 ASTRAZENECA COVID-19 VACCINE for PROPHYLAXIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Open Label)

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1) COVID-19 (10084268) (COVID-19 (10084268)) [v.24.1] [10084268]

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

2) Pneumothorax (10035759) (Pneumothorax (10035759)) [v.24.1] [10035759]

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

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

Dechallenge: Not Applicable

3) Pneumonia (10035664) (Pneumonia (10035664)) [v.24.1] [10035664]

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 (Open Label)

Event of COVID-19 INFECTION

- Investigator: Droplet infection from family

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

Event of PNEUMOTHRAX, RT

- Investigator: COVID-19 INFECTION

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

Event of PNEUMONIA

- Investigator: COVID-19 INFECTION

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

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] CHEST CT:** HR Study (Contrast) - newly seen multifocal subsegmental or subpleural consolidation and ggo in both lungs. Mild emphysmea and bullae. Small amount of rt pneumothorax. No mediastinal lne. Imp: 1. Newly seen pneumonia, more likely from other organisms than covid-19 (e.g. bacteria, etc). 2. Small amount of rt pneumothorax.

[redacted] **20[redacted] CHEST X-RAY:** AP, LAT - Newly developed multifocal GGOS in right lung

[redacted] **20[redacted] COVID-19 TESTING:** Positive

[redacted] **20[redacted] CRP:** 11.5 mg/dL (normal 0 to 8)

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
手根管症候群	X			
胃腸炎	X			X
変形性脊椎症	X			

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	6[redacted]	FEMALE	ASIAN

Medical History	Onset Year
ASTHMA	20[redacted]
DIABETES MELLITUS	20[redacted]
HEARING DISORDER: SENSORINEURAL HEARING LOSS	20[redacted]
HYPERTENSION	20[redacted]
LEFT SIDED UC	20[redacted]
OTHER: ENTEROPATHIC ARTHRITIS SECONDARY TO UC	20[redacted]
OTHER: HYPERCHOLESTEROLEMIA	20[redacted]
OTHER: THALASSAEMIA TRAIT	19[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	CURRENT	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 ABT-494 (IND)	7.5 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 58	58
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted]20[redacted] / 59		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
AZATHIOPRINE	50 mg	BID	Y-M: 20[redacted]
MESALAZINE	2 g	BID	Y-M: 20[redacted]
SULFASALAZINE	1000 mg	BID	Y-M: 20[redacted] / -351
INFLIXIMAB	300 mg	OTHER: EVERY 8 WEEKS	Y-M: 20[redacted] / -344
AMLODIPINE	10 mg	QD	Y: 20[redacted]
GLICLAZIDE	30 mg	QD	Y: 20[redacted]
METFORMIN	250 mg	BID	Y: 20[redacted]
SIMVASTATIN	20 mg	QD	Y: 20[redacted]
SULFASALAZINE	1500 mg	TID	Y: 20[redacted]
PREDNISOLONE	5 mg	QD	Y: 20[redacted]
LATANOPROST	1 OTHER: DROP	QD	Y: 20[redacted] / -318

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	1000 mg	BID	Y-M: 20[redacted] / -351	ONGOING
CALCIUM	600 mg	QD	Y-M: 20[redacted] / 1	Y-M: 20[redacted] / 840
CYANOCOBALAMIN;PYRIDOXINE;THIAMINE	1 OTHER: TABLET	QD	Y-M: 20[redacted] / 143	Y-M: 20[redacted] / 391
DICLOFENAC	75 mg	OTHER: STAT	Y-M: 20[redacted] / 143	Y-M: 20[redacted] / 143
DICLOFENAC	75 mg	OTHER: STAT	Y-M: 20[redacted] / 147	Y-M: 20[redacted] / 147
NAPROXEN	550 mg	OTHER: 1 DOSE	Y-M: 20[redacted] / 147	Y-M: 20[redacted] / 147
CELECOXIB	200 mg	BID	Y-M: 20[redacted] / 148	Y-M: 20[redacted] / 155
SALICYLIC ACID	1 OTHER: APPLICATION	TID	Y-M: 20[redacted] / 148	Y-M: 20[redacted] / 149
DICLOFENAC	50 mg	OTHER: STAT	Y-M: 20[redacted] / 150	Y-M: 20[redacted] / 150
GABAPENTIN	300 mg	QD	Y-M: 20[redacted] / 150	Y-M: 20[redacted] / 152
PARACETAMOL	1000 mg	QID	Y-M: 20[redacted] / 150	Y-M: 20[redacted] / 163
TRAMADOL	25 mg	OTHER: TDS	Y-M: 20[redacted] / 150	Y-M: 20[redacted] / 156

		WHEN REQUIRED		
CELECOXIB	200 mg	PRN	Y-M: 20[redacted] / 156	Y-M: 20[redacted] / 163
PARACETAMOL	UNKNOWN OTHER: UNKNOWN	OTHER: UNKNOWN	Y-M: 20[redacted] / 171	Y-M: 20[redacted] / 172
PARACETAMOL;TRAMADOL	UNKNOWN OTHER: UNKNOWN	OTHER: UNKNOWN	Y-M: 20[redacted] / 171	Y-M: 20[redacted] / 172
PERINDOPRIL	4 mg	QD	Y-M: 20[redacted] / 171	Y-M: 20[redacted] / 201
OMEPRAZOLE	20 mg	QD	Y-M: 20[redacted] / 191	Y-M: 20[redacted] / 197
TELMISARTAN	40 mg	QD	Y-M: 20[redacted] / 202	Y-M: 20[redacted] / 246
ALPRAZOLAM	500 ug	QD	Y-M: 20[redacted] / 210	Y-M: 20[redacted] / 292
FLUNARIZINE	5 OTHER: MG	QD	Y-M: 20[redacted] / 217	Y-M: 20[redacted] / 221
MECOBALAMIN	500 OTHER: MCG	OTHER: UNKNOWN	Y-M: 20[redacted] / 217	Y-M: 20[redacted] / 259
PARACETAMOL;TRAMADOL	PARACETAMOL 325MG + TRAMADOL HCL 37.5MG mg	OTHER: UNKNOWN	Y-M: 20[redacted] / 217	Y-M: 20[redacted] / 221
PREGABALIN	50 mg	OTHER: UNKNOWN	Y-M: 20[redacted] / 217	Y-M: 20[redacted] / 221
ESOMEPRAZOLE	40 mg	QD	Y-M: 20[redacted] / 410	Y-M: 20[redacted] / 410
METOCLOPRAMIDE	10 mg	QD	Y-M: 20[redacted] / 410	Y-M: 20[redacted] / 410
CEFOPERAZONE	2 g	OTHER: STAT	Y-M: 20[redacted] / 411	Y-M: 20[redacted] / 411
CYANOCOBALAMIN;PYRIDOXINE;THIAMINE	1 OTHER: TAB	QD	Y-M: 20[redacted] / 412	Y-M: 20[redacted] / 418
MAGNESIUM TRISILICATE	15 mL	TID	Y-M: 20[redacted] / 412	Y-M: 20[redacted] / 418
CEFUROXIME	250 mg	BID	Y-M: 20[redacted] / 413	Y-M: 20[redacted] / 418
AMLODIPINE	10 mg	QD	Y: 20[redacted]	ONGOING
GLICLAZIDE	30 mg	QD	Y: 20[redacted]	ONGOING
METFORMIN	250 mg	BID	Y: 20[redacted]	Y-M: 20[redacted] / 1197
SIMVASTATIN	20 mg	QD	Y: 20[redacted]	ONGOING
LATANOPROST	1 OTHER: DROP	QD	Y: 20[redacted] / -318	ONGOING

Event #1: Serious Adverse Event

Event Description	WORSENING SYMPTOMS OF CARPAL TUNNEL SYNDROME
Preferred term	手根管症候群
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 229 / 171
Age at AE Onset	6[redacted]
Laboratory Testing	
NOT REPORTED	

Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	230 / 172
Duration of AE	2 DAYS
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	ENTEROPATHIC ARTHRITIS SECONDARY TO UC
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Event #2: Serious Adverse Event

Event Description	CERVICAL SPONDYLOSIS
Preferred term	変形性脊椎症
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 275 / 217
Age at AE Onset	6[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	279 / 221
Duration of AE	5 DAYS
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	OLD AGE, UNDERLYING RHEUMATOID ARTHRITIS
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Event #3: Serious Adverse Event, Event of Interest - Serious Infections

Event Description	ACUTE GASTROENTERITIS
Preferred term	胃腸炎
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 467 / 409
Age at AE Onset	6[redacted]
Laboratory Testing	

[redacted]20[redacted] (RX DAY 411): Alanine Aminotransferase: 104 [10 - 49] U/L; Albumin: 36 [32 - 48] G/L; Alkaline Phosphatase: 85 [45 - 129] U/L; Aspartate Aminotransferase: 125 [NOT REPORTED - 34] U/L; Bilirubin: 21 [NOT REPORTED - 17] umol/L; Creatinine: 64 [44 - 71] UMOL/L; Erythrocytes: 4.66 [3.8 - 4.8] 10^12/L; Hematocrit: 0.28 [0.36 - 0.46] FRACTION OF 1; Hemoglobin: 90 [120 - 150] G/L; Leukocytes: 9.6 [4 - 10] 10^9/L; Lymphocytes: 0.78 [1 - 3] 10^9/L; NPTST029-AMYLASE (SERUM): 57 [30 - 118] U/L; NPTST108-CRP: 1.2 [NOT REPORTED - 0.3] mg/dL; NPTST147-G-GLUTAMYL TRANSFERASE: 37 [NOT REPORTED - 38] U/L; NPTST211-MCH: 19.3 [27 - 32] PG;

NPTST212-MCHC: 326 [315 - 345] G/L; NPTST213-MCV: 59 [77 - 97] FL; NPTST272-RDW: 16 [11.6 - 14] %; NPTST335-UREA (SERUM): 5.5 [3.2 - 8.2] MMOL/L; Neutrophils: 8.17 [2 - 7] 10^9/L; Platelets: 328 [150 - 400] 10^9/L; Potassium: 4.1 [3.6 - 5.2] MMOL/L; Sodium: 135 [136 - 145] MMOL/L; [redacted]20[redacted] (RX DAY 412): NPTST092-CLOSTRIDIUM DIFFICILE TOXIN AND: NOT DETECTED [NOT REPORTED - NOT REPORTED] NOT DETECTED

Microbiology

NOT REPORTED

AE Stopped Initial Rx Day / Rx Day	476 / 418
Duration of AE	10 DAYS
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	MOST PROBABLY CAUSED BY FOOD POISONING FOLLOWING A CHRISTMAS PARTY
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:16:51

Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はマレーシアの 6[redacted] 歳女性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，頚椎症の事象を発現した。関連する病歴は，糖尿病，潰瘍性大腸炎，潰瘍性大腸炎に続発する腸疾患性関節炎，非喫煙者及び現飲酒者（1 日 2 杯未満）であった。

Event 2 の臨床経過：

投与275日後＊，被験者は頚椎症の事象を発現した。投与279日後＊，頚椎症は消失した。

投与275日後＊，被験者は顔面のしびれ感，頚部痛及び両手のしびれ感があり，入院した。危険因子には，年齢及び基礎疾患である腸疾患性関節炎が含まれた。投与279日後＊，被験者は退院した。

投与された薬剤は，ultracet，フルナリジン，プレガバリン及びメコバラミンであった。

Causality for UPADACITINIB (Open Label)

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1) Cervical spondylosis (10008315) (Spinal osteoarthritis (10041591)) [v.23.0] [10008315]

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 (Open Label)

Event of CERVICAL SPONDYLOSIS

- Investigator: OLD AGE, UNDERLYING RHEUMATOID ARTHRITIS

- AbbVie: RISK FACTOR INCLUDES SUBJECT'S AGE. ADDITIONALLY PER PI SUBJECT HAS UNDERLYING RHEUMATOID ARTHIRTIS.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] CERVIAL SPINE MRI:** CERVICAL SPONDYLIOSIS WITH C5/6 POST DISC HERNIATION

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

[redacted] **20[redacted] SPINE LUMBAR MRI:** LUMBAR SPONDYLOSIS. L54/5 AND L5/S1 MINOR DISC PROLAPSE WITHL5/S1 ANNULAR TEAR
Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はマレーシアの 6[redacted] 歳女性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，急性胃腸炎の事象を発現した。関連する病歴は，高コレステロール血症，高血圧，潰瘍性大腸炎，及び潰瘍性大腸炎に続発する腸疾患性関節炎であった。

Event 3 の臨床経過：

投与467日後＊，被験者は急性胃腸炎を発現した。投与476日後＊，急性胃腸炎は消失した。

投与469日後＊，被験者はクリスマスパーティーの後の3 日間，下痢及び嘔吐があり，入院した。入院時の身体検査では，両肺，心血管及び腹部は正常であった。被験者は 投与470日後＊に退院した。

投与された薬剤は，ネキシウム，maxolon，セフロキシム，セフォペラゾン，三ケイ酸マグネシウム化合物及びビタミン B 化合物であった。

Causality for ABT-494 (Open Label)

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1) Acute gastroenteritis (10066762) (Gastroenteritis (10017888)) [v.21.1] [10066762]

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

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

Dechallenge: Not Applicable

Alternative Etiology for ABT-494 (Open Label)

Event of ACUTE GASTROENTERITIS

- Investigator: Most probably caused by food poisoning following a Christmas party.

- AbbVie: Event is common in the general population. Additionally, risk factor includes probable food consumption at Christmas party per PI.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] ALANINE AMINO TRANSFERASE:** 104 U/L (normal 10 to 49)

[redacted] **20[redacted] ASPARTATE AMINO TRANSFERASE:** 125 U/L (normal <34)

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

[redacted] 20[redacted] **COLONOSCOPY:** Was a clear demarcation between normal and inflamed colonic mucosa seen.

[redacted] 20[redacted] **CRP:** 1.2 mg/dL (normal <0.3)

[redacted] 20[redacted] **HEMOGLOBIN:** 90 G/L (normal 120 to 150)

[redacted] 20[redacted] **LYMPHOCYTES ABS:** 0.78 X10**9/L (normal 1.00 to 3.00)

[redacted] 20[redacted] **NEUTROPHILS ABS:** 8.17 X10**9/L (normal 2.00 to 7.00)

[redacted] 20[redacted] **STOOL CULTURE:** Clostridium difficile, Not detected, Negative

[redacted] 20[redacted] **WHITE BLOOD CELLS:** 9.6 X10**9/L (normal 4.0 to 10.0)
Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はマレーシアの 6[redacted] 歳女性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，手根管症候群の症状の悪化の事象を発現した。関連する病歴は，糖尿病，潰瘍性大腸炎（左側），潰瘍性大腸炎に続発する腸疾患性関節炎，非喫煙者及び現飲酒者（1 日 2 杯未満）であった。

Event 1 の臨床経過：

投与229日後＊，被験者は手根管症候群の症状の悪化を発現した。投与230日後＊，手根管症候群の症状の悪化は消失した。

本事象発現前の 投与197日後＊，被験者は手根管症候群（非重篤）を経験した。

投与229日後＊，被験者は軽傷を負い，右中指を骨折した。この症状が悪化し，右手首及び右手のしびれ感及び疼痛が発現した。同日，被験者は疼痛管理のために入院した。投与230日後＊， 被験者は症状が改善し，退院した。

投与された薬剤は，dynacet 及び ultracet であった。

The patient's past medications include:

SALOFALK for ULCERATIVE COLITIS (20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

PREDNISOLONE for ULCERATIVE COLITIS (20[redacted] - [redacted] 20[redacted])

AZATHIOPRINE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

INFLIXIMAB for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

VOLTAREN for CARPAL TUNNEL SYNDROME AND PRONATOR TERES SYNDROME and CARPAL TUNNEL SYNDROME AND PRONATOR TERES SYNDROME ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

NAPROXEN for CARPAL TUNNEL SYNDROME ([redacted] 20[redacted] - [redacted] 20[redacted])

METHYL SALICYLATE for CARPAL TUNNEL SYNDROME ([redacted] 20[redacted] - [redacted] 20[redacted])

GABAPENTIN for CARPAL TUNNEL SYNDROME AND PRONATOR TERES SYNDROME and CARPAL TUNNEL SYNDROME AND PRONATOR TERES SYNDROME ([redacted] 20[redacted] - [redacted] 20[redacted])

PARACETAMOL for CARPAL TUNNEL SYNDROME AND PRONATOR TERES SYNDROME and CARPAL TUNNEL SYNDROME AND PRONATOR TERES SYNDROME ([redacted] 20[redacted] - [redacted] 20[redacted])

TRAMADOL for CARPAL TUNNEL SYNDROME AND PRONATOR TERES SYNDROME and CARPAL TUNNEL SYNDROME AND PRONATOR TERES SYNDROME ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Open Label)

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1) Carpal tunnel syndrome (10007697) (Carpal tunnel syndrome (10007697)) [v.24.0] [10007697]

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 (Open Label)

Event of WORSENING SYMPTOMS OF CARPAL TUNNEL SYNDROME

- Investigator: Enteropathic arthritis secondary to UC

- AbbVie: RISK FACTORS INCLUDE FEMALE GENDER, PRE-EXISTING DIABETES MELLITUS AND ENTEROPATHIC ARTHRITIS.

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
胃腸炎	X			X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	5[redacted]	MALE	WHITE

Medical History	Onset Year
INFLAMMATORY BOWEL DISEASE: ULCERATIVE COLITIS	20[redacted]
LEFT SIDED UC	20[redacted]
LIVER DISEASE (EXCLUDING HEPATITIS): STEATOSIS HEPATIS	20[redacted]
OTHER: DERMATOMYCOSE	20[redacted]

Prior Procedures	Procedure Year
SURGERY: TONSILLECTOMY	19[redacted]
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	FORMER	0.5 PACK	3	19[redacted]
CIGARS	NEVER			
PIPES	NEVER			

Alcohol Use	Status	Number/Day
ALCOHOL	CURRENT	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 ABT-494 (IND)	30 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 56	56
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted]20[redacted] / 57		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
MESALAZINE	4 g	QD	Y-M: 20[redacted]
MESALAZINE	30 g	QD	Y-M: 20[redacted]
AZATHIOPRINE	150 mg	QD	Y-M: 20[redacted] / -314
MERCAPTOPURINE	50 mg	QD	Y-M: 20[redacted] / -284
BECLOMETASONE;MESALAZINE	1 OTHER: KLYSMA	QD	Y-M: 20[redacted] / -253
PREDNISONE	10 mg	QD	Y-M: 20[redacted] / -212
INFLIXIMAB	400 mg	OTHER: FOLLOWING SCHEDULE	Y-M: 20[redacted] / -182
PARACETAMOL	500 mg	PRN	Y-M: 20[redacted] / -20
MESALAZINE	4000 mg	BID	Y: 20[redacted]
MESALAZINE	4800 mg	QD	Y: 20[redacted]
PREDNISONE	5 mg	QD	Y: 20[redacted]

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
MESALAZINE	4 g	QD	Y-M: 20[redacted]	Y-M: 20[redacted] / 352
PARACETAMOL	500 mg	PRN	Y-M: 20[redacted] / -20	ONGOING
COLECALCIFEROL	50000 IU	OTHER: EVERY 4 WEEKS	Y-M: 20[redacted] / 62	ONGOING
METOCLOPRAMIDE	10 mg	PRN	Y-M: 20[redacted] / 62	Y-M: 20[redacted] / 67
METRONIDAZOLE	500 mg	TID	Y-M: 20[redacted] / 62	Y-M: 20[redacted] / 62
PARACETAMOL	100 mL	PRN	Y-M: 20[redacted] / 62	Y-M: 20[redacted] / 62
SODIUM CHLORIDE	42 OTHER: ML/HOUR	OTHER: CONTINUE	Y-M: 20[redacted] / 62	Y-M: 20[redacted] / 67
ALFENTANIL	0.25 mg	PRN	Y-M: 20[redacted] / 63	Y-M: 20[redacted] / 63
CEFTRIAXONE	2000 mg	PRN	Y-M: 20[redacted] / 63	Y-M: 20[redacted] / 64
MIDAZOLAM	3 mg	PRN	Y-M: 20[redacted] / 63	Y-M: 20[redacted] / 63
NADROPARIN	2850 IU	QD	Y-M: 20[redacted] / 63	Y-M: 20[redacted] / 63
PARACETAMOL	1000 mg	PRN	Y-M: 20[redacted] / 63	Y-M: 20[redacted] / 68
PHOSPHORIC ACID;SODIUM PHOSPHATE	1 OTHER: KLYSMA	PRN	Y-M: 20[redacted] / 63	Y-M: 20[redacted] / 63
CEFTRIAXONE	1000 mg	PRN	Y-M: 20[redacted] / 64	Y-M: 20[redacted] / 66

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

Event Description	GASTROENTERITIS
Preferred term	胃腸炎
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 118 / 62
Age at AE Onset	5[redacted]
Laboratory Testing	

[redacted]20[redacted] (RX DAY 62): NPTST203-LEUCOCYTEN: 14.4 [4 - 11] 10^9/L; [redacted]20[redacted] (RX DAY 63): NPTST108-CRP: 33 [0 - 10] MG/L; [redacted]20[redacted] (RX DAY 65): NPTST108-CRP: 11 [0 - 10] MG/L; NPTST204-LEUCOCYTES: 6.4 [4 - 11] 10^9/L

Microbiology

NOT REPORTED

AE Stopped Initial Rx Day / Rx Day	122 / 66
Duration of AE	5 DAYS
Severity	MODERATE
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

Generated: [redacted]20[redacted]:16:51

Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はオランダの 5[redacted] 歳男性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，胃腸炎の事象を発現した。関連する病歴は，潰瘍性大腸炎及び脂肪性肝炎であった。

Event 1 の臨床経過：

投与118日後＊，被験者は胃腸炎を発現した。投与122日後＊，胃腸炎は消失した。

投与118日後＊ の朝から，被験者は発熱及び全身倦怠感を訴えた。被験者は，朝に多量の直腸出血を伴う頻回な排便（5 回）があり，悪心を訴えた。体温は摂氏39.4°C まで上昇し，全身の不調を感じた。被験者は救急科を受診した。身体検査では，左下腹部の軽度の痛みを除いて，

異常は認められなかった。被験者は入院し，抗生物質及び輸液の静脈内投与を開始した。入院中，被験者は抗生物質の投与を継続した。臨床経過では改善が認められ，投与122日後 ＊，被験者は退院した。

投与された薬剤は，paracetamol，メトクロプラミド，塩化ナトリウム，メトロニダゾール，nadroparine 及びセフトリアキソンであった。

The patient's past medications include:

SALOFALK for ULCERATIVE COLITIS (20[redacted] - 20[redacted])

MEZAVANT for ULCERATIVE COLITIS (20[redacted] - 20[redacted])

MESALAZINE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

PREDNISON for ULCERATIVE COLITIS (20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

AZATHIOPRINE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

6-MP for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

BECLOMETASONE W/MESALAZINE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

INFLIXIMAB for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for ABT-494 (Open Label)

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1) Gastroenteritis (10017888) (Gastroenteritis (10017888)) [v.20.0] [10017888]

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

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

Dechallenge: Not Applicable

Alternative Etiology for ABT-494 (Open Label)

Event of GASTROENTERITIS

- Investigator: Not applicable.

- AbbVie: Event likely due to disease flare and/or acute infectious etiology.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] BLOOD CULTURE:** Not reported

[redacted] **20[redacted] BODY TEMPERATURE:** 39.4 Degrees C

[redacted] **20[redacted] CHEST X-RAY:** No abnormalities.

[redacted] **20[redacted] LAB TEST:** Mild leukocytosis (12.97 10^9/1). No further abnormalities.

[redacted] **20[redacted] SIGMOIDOSCOPY:** Revealed ulcerative colitis activity from 45 cm "ab ano" increasing distally; Mayo score was 2-3

[redacted] **20[redacted] URINE CULTURE:** Not reported

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
血中クレアチンホスホキナーゼ増加				X
COVID-19 肺炎	X			X
医療機器関連敗血症	X			X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	5[redacted]	MALE	WHITE

Medical History	Onset Year
INFLAMMATORY BOWEL DISEASE: ULCERATIVE COLITIS	20[redacted]
LEFT SIDED UC	20[redacted]
LIVER DISEASE (EXCLUDING HEPATITIS): PRIMARY SCLEROSING CHOLANGITIS	20[redacted]
OTHER: AXIAL ARTHROPATHY	NOT REPORTED
OTHER: BARRET OESOPHAGUS	20[redacted]
OTHER: ERCP WITH STONEEXTRACTION	20[redacted]
OTHER: URINARY TRACT INFECTION	20[redacted]

Prior Procedures	Procedure Year
SURGERY: CHOLESTECTOMY	20[redacted]
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	UNKNOWN			
CIGARETTES	FORMER	1 PACK	32	20[redacted]
CIGARS	UNKNOWN			
PIPES	UNKNOWN			

Alcohol Use	Status	Number/Day
ALCOHOL	CURRENT	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 ABT-494 (IND)	45 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 56	56
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted]20[redacted] / 57		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
PREDNISONE	25 mg	QD	Y-M: 20[redacted]
AZATHIOPRINE	50 mg	QD	Y-M: 20[redacted]
AZATHIOPRINE	50 mg	QD	Y-M: 20[redacted] / -314
INFLIXIMAB	5 mg/kg	OTHER: FOLLOWING SCHEDULE	Y-M: 20[redacted] / -273
ESOMEPRAZOLE	20 mg	QD	Y-M: 20[redacted] / -231
VEDOLIZUMAB	300 mg	OTHER: FOLLOWING SCHEDULE	Y-M: 20[redacted] / -217
CYANOCOBALAMIN	1 mg	OTHER: SCEDULE FROM GENERAL PRACTITIONER	Y-M: 20[redacted] / -104
MESALAZINE	4 g	QD	Y-M: 20[redacted] / -115
BUDESONIDE	2 mg	QD	Y-M: 20[redacted] / -126
CIPROFLOXACIN	500 mg	BID	Y-M: 20[redacted] / -126
URSODEOXYCHOLIC ACID	600 mg	QD	Y-M: 20[redacted] / -97
CALCIUM;CALCIUM PHOSPHATE;ERGOCALCIFEROL	500/440 OTHER: 500MG/440 IU	BID	Y-M: 20[redacted] / -98
PREDNISOLONE	10 mg	QD	Y-M: 20[redacted] / -70
CALCIUM	NOT REPORTED	NOT REPORTED	Y: 20[redacted]
COLECALCIFEROL	NOT REPORTED	NOT REPORTED	Y: 20[redacted]
MESALAZINE	4 g	QD	Y: 20[redacted]
MESALAZINE	NOT REPORTED	NOT REPORTED	Y: 20[redacted]
BECLOMETASONE	NOT REPORTED	NOT REPORTED	Y: 20[redacted]
MESALAZINE	NOT REPORTED	NOT REPORTED	Y: 20[redacted]

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
ESOMEPRAZOLE	20 mg	QD	Y-M: 20[redacted] / -231	ONGOING

CYANOCOBALAMIN	1 mg	OTHER: SCEDULE FROM GENERAL PRACTITIONER	Y-M: 20[redacted] / -104	ONGOING
MESALAZINE	4 g	QD	Y-M: 20[redacted] / -115	ONGOING
URSODEOXYCHOLIC ACID	600 mg	QD	Y-M: 20[redacted] / -97	ONGOING
ASCORBIC ACID	1000 mg	QD	Y-M: 20[redacted] / 142	Not reported
VITAMINS NOS	1 OTHER: B1 50 MG, B2 50 MG, B3 50 MG, B5 50 MG, B6 6 MG, B8 50 MCG, B11 400 MCG, B12 50 MCG, CHOLIN	QD	Y-M: 20[redacted] / 142	Not reported
BISACODYL	10 mg	QD	Y-M: 20[redacted] / 339	Y-M: 20[redacted] / 339
CITRIC ACID;MAGNESIUM OXIDE;SODIUM PICOSULFATE	1 OTHER: SACHET	QD	Y-M: 20[redacted] / 339	Y-M: 20[redacted] / 340
ALUMINIUM POTASSIUM SULFATE;LIDOCAINE;PROPYLPARABEN	1 OTHER: TABLET	PRN	Y-M: 20[redacted] / 570	Not reported
COLECALCIFEROL;MAGNESIUM CITRATE;PYRIDOXINE;VIBURNUM OPULUS	2 OTHER: TABLETS	PRN	Y-M: 20[redacted] / 635	Not reported
BISACODYL	10 mg	QD	Y-M: 20[redacted] / 665	Y-M: 20[redacted] / 665
CITRIC ACID;MAGNESIUM OXIDE;SODIUM PICOSULFATE	1 OTHER: SACHET	QD	Y-M: 20[redacted] / 665	Y-M: 20[redacted] / 666
ALFENTANIL	0.5 mg	QD	Y-M: 20[redacted] / 666	Y-M: 20[redacted] / 666
MIDAZOLAM	2.5 mg	QD	Y-M: 20[redacted] / 666	Y-M: 20[redacted] / 666
DEXAMETHASONE	UNKNOWN OTHER: UNKNOWN	OTHER: UNKNOWN	Y-M: 20[redacted] / 868	Y-M: 20[redacted] / 883
CLONIDINE	UNKNOWN OTHER: UNKNOWN	OTHER: UNKNOWN	Y-M: 20[redacted] / 875	Y-M: 20[redacted] / 904
HALOPERIDOL	UNKNOWN OTHER: UNKNOWN	OTHER: UNKNOWN	Y-M: 20[redacted] / 875	Y-M: 20[redacted] / 904
MACROGOL;POTASSIUM;SODIUM BICARBONATE;SODIUM CHLORIDE	1 OTHER: SACHET	PRN	Y-M: 20[redacted] / 875	Y-M: 20[redacted] / 935

METOPROLOL	25 mg	TID	Y-M: 20[redacted] / 875	Y-M: 20[redacted] / 901
MIRTAZAPINE	UNKNOWN OTHER: UNKNOWN	OTHER: UNKNOWN	Y-M: 20[redacted] / 875	Y-M: 20[redacted] / 904
NADROPARIN	2850 IU	BID	Y-M: 20[redacted] / 875	Y-M: 20[redacted] / 935
ZOPICLONE	UNKNOWN OTHER: UNKNOWN	OTHER: UNKNOWN	Y-M: 20[redacted] / 875	Y-M: 20[redacted] / 904
AMOXICILLIN	UNKNOWN OTHER: UNKNOWN	OTHER: UNKNOWN	Y-M: 20[redacted] / 880	Y-M: 20[redacted] / 886
CIPROFLOXACIN	UNKNOWN OTHER: UNKNOWN	OTHER: UNKNOWN	Y-M: 20[redacted] / 881	Y-M: 20[redacted] / 890
CLINDAMYCIN	UNKNOWN OTHER: UNKNOWN	OTHER: UNKNOWN	Y-M: 20[redacted] / 890	Y-M: 20[redacted] / 904
FLUCLOXACILLIN	UNKNOWN OTHER: UNKNOWN	OTHER: UNKNOWN	Y-M: 20[redacted] / 890	Y-M: 20[redacted] / 890
AMLODIPINE	10 mg	QD	Y-M: 20[redacted] / 902	Y-M: 20[redacted] / 990
METOPROLOL	200 mg	QD	Y-M: 20[redacted] / 902	Y-M: 20[redacted] / 990
ETORICOXIB	30 mg	PRN	Y-M: 20[redacted] / 970	Y-M: 20[redacted] / 1045
ASCORBIC ACID;MACROGOL 3350;POTASSIUM;SODIUM CHLORIDE;SODIUM SULFATE	1 OTHER: SACHET	QD	Y-M: 20[redacted] / 1015	Y-M: 20[redacted] / 1016
BISACODYL	10 mg	QD	Y-M: 20[redacted] / 1015	Y-M: 20[redacted] / 1015
ALFENTANIL	0.5 mg	QD	Y-M: 20[redacted] / 1016	Y-M: 20[redacted] / 1016
MIDAZOLAM	2.5 mg	QD	Y-M: 20[redacted] / 1016	Y-M: 20[redacted] / 1016
BECLOMETASONE;MESALAZINE	1 OTHER: KLYSMA	QD	Y-M: 20[redacted] / 997	Y-M: 20[redacted] / 1011
BUDESONIDE	9 mg	QD	Y-M: 20[redacted] / 997	Y-M: 20[redacted] / 1025
MOMETASONE	1 OTHER: NOT SPECIFIED	PRN	Y-M: 20[redacted] / 1076	Y-M: 20[redacted] / 1090
PARACETAMOL	500 mg	PRN	Y-M: 20[redacted] / 1081	Y-M: 20[redacted] / 1117
INFLUENZA VACCINE	0.5 mg	QD	Y-M: 20[redacted] / 1256	Y-M: 20[redacted] / 1256

Event #1: Event of Interest - Creatine Phosphokinase (CPK) Elevation

Event Description	ELEVATED CK (665)
Preferred term	血中クレアチンホスホキナーゼ増加
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 396 / 340
Age at AE Onset	5[redacted]
Laboratory Testing	

NOT APPLICABLE

Microbiology

NOT APPLICABLE

AE Stopped Initial Rx Day / Rx Day	ONGOING
Duration of AE	ONGOING
Severity	MILD
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 #2: Serious Adverse Event, Event of Interest - Serious Infections

Event Description	COVID-19 PNEUMONIA INFECTION
Preferred term	COVID-19 肺炎
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 917 / 861
Age at AE Onset	5[redacted]

Laboratory Testing

[redacted]20[redacted] (RX DAY 900): NPTST071-CALPROTECTIN: 420 [0 - 50] MG/KG/DAY; [redacted]20[redacted] (RX DAY 901): Alanine Aminotransferase: 84 [0 - 45] U/L; Alkaline Phosphatase: 200 [0 - 115] U/L; Leukocytes: 12.3 [4 - 11] 10^9/L; NPTST108-CRP: 27 [0 - 10] MG/L; NPTST150-GAMMA-GLUTAMYLTRANSFERASE: 419 [0 - 55] U/L

Microbiology

[redacted]20[redacted] (RX DAY 878): BLOOD NPTST052-BLOOD CULTURE: Positive-STREPTOCOCCUS THERMOPHILUS; 20[redacted] (RX DAY 879): SPUTUM NPTST305-SPUTUM CULTURE: Positive-ENTEROBACTER CLOACAE; 20[redacted] (RX DAY 892): OTHER PCR NPTST104-COVID-19 PCR: Positive-COVID-19 POSITIVE; [redacted]20[redacted] (RX DAY 895): WOUND NPTST347-WOUND CULTURE: Negative; [redacted]20[redacted] (RX DAY 897): OTHER PCR NPTST104-COVID-19 PCR: Negative

AE Stopped Initial Rx Day / Rx Day	969 / 913
Duration of AE	53 DAYS
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	COVID-19
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION, IMPORTANT MEDICAL EVENT REQUIRING MEDICAL OR SURGICAL INTERVENTION

Event #3: Serious Adverse Event, Event of Interest - Serious Infections

Event Description	CATHETER RELATED SEPSIS

Preferred term	医療機器関連敗血症
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 934 / 878
Age at AE Onset	5[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
[redacted]20[redacted] (RX DAY 878): BLOOD NPTST109-CULTURE: Positive-STREPTOCOCCUS THERMOPHILAE	
AE Stopped Initial Rx Day / Rx Day	942 / 886
Duration of AE	9 DAYS
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	COVID-19 INFECTION
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION, IMPORTANT MEDICAL EVENT REQUIRING MEDICAL OR SURGICAL INTERVENTION

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はオランダの 5[redacted] 歳男性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，COVID-19 肺炎の感染症及びカテーテル関連敗血症の事象を発現した。関連する病歴は，元喫煙者（1 日 1 箱を 32 年間），潰瘍性大腸炎及び現飲酒者（1 日 2 杯未満）であった。

Event 2 及び 3 の臨床経過：

投与917日後＊，被験者は COVID-19 肺炎の感染症を発現した。投与934日後＊，被験者はカテーテル関連敗血症を発現した。投与942日後＊，カテーテル関連敗血症は消失した。投与969日後＊，COVID-19 肺炎の感染症は消失した。

入院前，被験者は呼吸困難，咳嗽及び発熱を経験していた。投与921日後＊，被験者は COVID-19 の検査で陽性であった。被験者は抗生物質の投与を開始した。

投与924日後＊，被験者は呼吸不全のため入院した。被験者は呼吸困難の症状を呈しており，酸素飽和度が 93%–94%，呼吸数が 26 回/分，両肺底部の轟音があり，体温が摂氏 38.6°C であった。投与929日後＊，被験者は集中治療室に移され，人工呼吸器が装着された。投与946日後＊，被験者は膿瘍の切開及び排膿を受け，最終的に治癒した。被験者は，カテーテル関連敗血症，切開及び排膿を必要とする膿瘍を伴う静脈炎，洞性頻脈並びに譫妄があり，集中治療室での治療は複雑化した。投与969日後＊，被験者は退院した。

投与された薬剤は，メトプロロール，nadroparine，movicolon，アムロジピン，ゾピクロン，ミルタザピン，クロニジン，クリンダマイシン，シプロフロキサシン，amoxicilline，haldol，flucloxacilline 及びデキサメタゾンであった。

The patient's past medications include:

PREDNISOLON for ULCERATIVE COLITIS ([redacted])

Causality for UPADACITINIB (Open Label)

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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

2) Catheter sepsis (10053212) (Device related sepsis (10069802)) [v.23.1] [10053212]

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 (Open Label)

Event of COVID-19 PNEUMONIA INFECTION- Investigator: Covid-19.

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

Event of CATHETER RELATED SEPSIS

- Investigator: COVID-19 INFECTION

- AbbVie: Event is more likely a complication arising from hospitalization for the concurrent COVID-19 pneumonia infection.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] ALAT:** 84 U/L (normal 0 to 45)

[redacted] **20[redacted] ALP:** 200 U/L (normal 0 to 15)

[redacted] **20[redacted] ALP:** 114 U/L (normal 0 to 15)

[redacted] **20[redacted] ASAT:** 23 U/L

[redacted] **20[redacted] BLOOD CULTURE:** STREPTOCOCCUS THERMOPHILUS

[redacted] **20[redacted] BMI:** 26.8 kg/m2

[redacted] **20[redacted] CALPRO:** 420 mg/kg (normal 0 to 50)

[redacted] **20[redacted] CHEST CT:** No sign of pulmonary embolism. Bilateral multifocal ground glass opacities, CO-RADS 5.

[redacted] **20[redacted] CHEST X-RAY:** Bilateral infiltrates right > left

[redacted] **20[redacted] COVID-19 PCR TEST:** Positive

[redacted] **20[redacted] COVID-19 PCR TEST:** Negative

[redacted] **20[redacted] CRP:** 27 MG/L (normal 0 to 10)

[redacted] **20[redacted] CRP:** 7 MG/L (normal 1 to 10)

[redacted] **20[redacted] ECG:** Normal

[redacted] **20[redacted] GGT:** 419 U/L (normal 0 to 55)

[redacted] **20[redacted] GGT:** 157 U/L (normal 0 to 55)

[redacted] **20[redacted] LACTATE DEHYDROGENASE:** 250 U/L

[redacted] **20[redacted] LACTATE DEHYDROGENASE:** 231 U/L

[redacted] **20[redacted] NASOPHARYNGEAL SWAB - COVID:** COVID POSITIVE

[redacted] **20[redacted] SPUTUM CULTURE:** ENTEROBACTER CLOACAE

[redacted] **20[redacted] WBC:** 12.3 X10**9/L (normal 4 to 11)

[redacted] **20[redacted] WBC:** 8.9 X10**9/L (normal 4 to 11)

[redacted] **20[redacted] WOUND CULTURE:** Negative

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
健忘	X	X		
潰瘍性大腸炎	X			
下痢	X			
疲労	X			
頭痛	X	X		
倦怠感	X			
悪心	X	X		
発作様現象	X	X		
嘔吐	X			

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	3[redacted]	FEMALE	WHITE

Medical History	Onset Year
DEPRESSION: DEPRESSION AND PANIC	20[redacted]
EXTENSIVE UC/PANCOLITIS	20[redacted]
INFLAMMATORY BOWEL DISEASE: COLITIS ULCEROSA	20[redacted]
INFLAMMATORY BOWEL DISEASE: HOSPITAL ADMISSION FOR UC	20[redacted]
MIGRAINE HEADACHE	20[redacted]
OTHER: AUTO-IMMUNE BULLOUS SKIN DISEASE	20[redacted]
OTHER: BASAL CELL CARCINOMA ON FOREHEAD. CURRENT TREATMENT: FLUOROURACIL CREAM 3-4 WEEKS.	20[redacted]
OTHER: BRIEF LOSS OF CONSCIOUSNESS	20[redacted]
OTHER: HERPES ZOSTER INFECTION	20[redacted]
OTHER: INFECTION OF WOUND	20[redacted]
OTHER: LOW VITAMIN B12	20[redacted]
OTHER: SUICIDE ATTEMPT	20[redacted]
SEIZURE DISORDER/CONVULSIONS: PSYCHOGENE NON - EPILEPTIC SEIZURES	20[redacted]

Prior Procedures	Procedure Year
SURGERY: APPENDECTOMY	20[redacted]
SURGERY: EXISION OF BASAL CELL CARCINOMA ON CHEST	20[redacted]
SURGERY: EXISION OF BASAL CELL CARCINOMA ON LEFT FACE (PRE-AURICULAR)	20[redacted]
SURGERY: EXISION OF BASAL CELL CARCINOMA ON RIGHT ABDOMEN	20[redacted]
SURGERY: EXISION OF BASAL CELL CARCINOMA ON RIGHT SCAPULA	20[redacted]
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	CURRENT	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 ABT-494 (IND)	7.5 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 53	53
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted]20[redacted] / 54	[redacted]20[redacted] / 99	46

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
ETHINYLESTRADIOL;LEVONORGESTREL	30 mg	QD	Y-M: 20[redacted]-[redacted]
CALCIUM CARBONATE	1000 mg	QD	Y-M: 20[redacted]-[redacted]
PREDNISOLONE	30 mg	QD	Y-M: 20[redacted]-[redacted]
PREDNISOLONE	NOT REPORTED	NOT REPORTED	Y-M: 20[redacted]-[redacted]
AZATHIOPRINE	50 mg	QD	Y-M: 20[redacted]-[redacted]
BUDESONIDE	9 mg	QD	Y-M: 20[redacted]-[redacted]
HYDROXOCOBALAMIN	500 uL	OTHER: FIRST MONTH 2X, THEREAFTER ONCE EVERY 2 MONTHS	Y-M: 20[redacted]-[redacted]
FOLIC ACID	0.5 mg	QD	Y-M: 20[redacted]-[redacted] / -183

BUDESONIDE	9 mg	OTHER: EVERY OTHER DAY	Y-M: 20[redacted] / -127
BUDESONIDE	9 mg	QD	Y-M: 20[redacted] / -130
LOPERAMIDE	2 mg	PRN	Y-M: 20[redacted] / -77
PROPRANOLOL	10 mg	QD	Y-M: 20[redacted] / -42
OXAZEPAM	10 mg	PRN	Y-M: 20[redacted] / -14
TEMAZEPAM	UNK mg	PRN	Y-M: 20[redacted] / -14
INFLIXIMAB	NOT REPORTED	NOT REPORTED	Y: 20[redacted]
ADALIMUMAB	40 mg	OTHER: EVERY TWO WEEKS	Y: 20[redacted]
PARACETAMOL	500 mg	PRN	Y: 20[redacted] / -257
QUETIAPINE	25 mg	QD	Y: 20[redacted] / -257

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	30 mg	QD	Y-M: 20[redacted]	ONGOING
CALCIUM CARBONATE	1000 mg	QD	Y-M: 20[redacted]	ONGOING
HYDROXOCOBALAMIN	500 uL	OTHER: FIRST MONTH 2X, THEREAFTER ONCE EVERY 2 MONTHS	Y-M: 20[redacted]	ONGOING
FOLIC ACID	0.5 mg	QD	Y-M: 20[redacted] / -183	ONGOING
LOPERAMIDE	2 mg	PRN	Y-M: 20[redacted] / -77	ONGOING
PROPRANOLOL	10 mg	QD	Y-M: 20[redacted] / -42	Y-M: 20[redacted] / 47
OXAZEPAM	10 mg	PRN	Y-M: 20[redacted] / -14	ONGOING
TEMAZEPAM	UNK mg	PRN	Y-M: 20[redacted] / -14	ONGOING
BUDESONIDE	9 mg	QD	Y-M: 20[redacted] / 12	ONGOING
METOCLOPRAMIDE	10 mg	TID	Y-M: 20[redacted] / 14	Y-M: 20[redacted] / 15
SODIUM CHLORIDE	1 OTHER: L/24H	OTHER: ONCE	Y-M: 20[redacted] / 14	Y-M: 20[redacted] / 15
CONTRAST MEDIA	UNK OTHER: UNK	OTHER: UNK	Y-M: 20[redacted] / 15	Y-M: 20[redacted] / 15
NADROPARIN	2850 IU	QD	Y-M: 20[redacted] / 15	Y-M: 20[redacted] / 18
ONDANSETRON	8 mg	PRN	Y-M: 20[redacted] / 15	ONGOING
QUETIAPINE	50 mg	QD	Y-M: 20[redacted] / 42	ONGOING
ONDANSETRON	4 mg	OTHER: ONCE	Y-M: 20[redacted] / 46	Y-M: 20[redacted] / 46
PARACETAMOL	1000 mg	OTHER: ONCE	Y-M: 20[redacted] / 46	Y-M: 20[redacted] / 46

SODIUM CHLORIDE	1,5 L	OTHER: ONCE	Y-M: 20[redacted] / 46	Y-M: 20[redacted] / 46
TRAMADOL	50 mg	OTHER: ONCE	Y-M: 20[redacted] / 46	Y-M: 20[redacted] / 46
PARACETAMOL	500 mg	PRN	Y: 20[redacted] / -257	ONGOING
QUETIAPINE	25 mg	QD	Y: 20[redacted] / -257	Y-M: 20[redacted] / 40

Event #1: Serious Adverse Event

Event Description	GENERAL DISCOMFORT (MALAISE), DIARRHOEA, VOMITING, FATIGUE
Preferred term	下痢，疲労，倦怠感，嘔吐
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 67 / 14
Age at AE Onset	3[redacted]
Laboratory Testing	
[redacted]20[redacted] (RX DAY 14): Platelets: 446 [150 - 400] 10^9/L	
Microbiology	
[redacted]20[redacted] (RX DAY 14): STOOL NPTST109-CULTURE: Negative	
AE Stopped Initial Rx Day / Rx Day	68 / 15
Duration of AE	2 DAYS
Severity	MODERATE
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: Serious Adverse Event, AE Leading to Discontinuation of Study Drug

Event Description	SEIZURE-LIKE EPISODE, AMNESIA, HEADACHE, NAUSEA
Preferred term	健忘，頭痛，悪心，発作様現象
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 99 / 46
Age at AE Onset	3[redacted]
Laboratory Testing	
[redacted]20[redacted] (RX DAY 46): Erythrocytes: 466 [0 - 18] /uL; Glucose: 7.9 [3.1 - 6.4] MMOL/L; HDL Cholesterol: 2.56 [1.16 - 1.68] MMOL/L; Leukocytes: 0.019 [0 - 0.01] 10^9/L; NPTST146-FREE T4: 25.8 [12 - 22] PMOL/L; NPTST149-GAMMA GT: 54 [0 - 38] U/L; NPTST307-SQUAMOUS CELL EPITHELIUM: 42 [0 - 4] /UL	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	100 / 47 (1 DAY AFTER LAST TREATMENT)
Duration of AE	2 DAYS

Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	PNES
Discontinued Study Drug Due to the Event	YES
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Event #3: Serious Adverse Event

Event Description	ONGOING UC, NO IMPROVEMENT FROM TREATMENT
Preferred term	潰瘍性大腸炎
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 109 / 56 (10 DAYS AFTER LAST TREATMENT)
Age at AE Onset	3[redacted]

Laboratory Testing

[redacted]20[redacted] (RX DAY 62): NPTST108-CRP: 136.6 [0 - 5] MG/L; [redacted]20[redacted] (RX DAY 63): NPTST108-CRP: 54.1 [0 - 5] MG/L; [redacted]20[redacted] (RX DAY 67): NPTST108-CRP: 103.7 [0 - 5] MG/L

Microbiology

NOT REPORTED

AE Stopped Initial Rx Day / Rx Day	123 / 70 (24 DAYS AFTER LAST TREATMENT)
Duration of AE	15 DAYS
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	ONGOING UC
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はオランダの 3[redacted] 歳女性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，全身不快感（倦怠感），下痢，嘔吐及び疲労の事象を発現した。関連する病歴は，潰瘍性大腸炎であった。

Event 1 の臨床経過：

投与67日後＊，被験者は全身不快感（倦怠感），下痢，嘔吐及び疲労を発現した。投与68日後＊，全身不快感（倦怠感），下痢，嘔吐及び疲労は消失した。

投与67日後＊，被験者は入院し，倦怠感，疲労，下痢，悪心及び嘔吐があった。被験者は自分の身の回りのことができなかった。血圧及び脈拍は正常範囲内であり，摂氏 38℃ の発熱があった。被験者は，中心ラインを挿入され，1.5 L の生理食塩水及び制吐薬の投与を受けた。投与68日後＊，MRI 検査が実施され，瘢痕を伴う汎大腸炎が認められたが，重度の活動性炎症の徴候は認められなかった。投与68日後＊の終わりに，被験者は退院した。

投与された薬剤は，生理食塩水，temazepam，fraxiparine，メトクロプラミド，オンダンセトロン及びオキサゼパムであった。

The patient's past medications include:

HUMIRA for DRUG USED FOR UNKNOWN INDICATION

Causality for ABT-494 (Open Label)

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1) Malaise (10025482) (Malaise (10025482)) [v.20.1] [10025482]

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

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

Dechallenge: Not Applicable

2) Diarrhea (10012727) (Diarrhoea (10012735)) [v.20.1] [10012727]

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

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

Dechallenge: Not Applicable

3) Vomiting (10047700) (Vomiting (10047700)) [v.20.1] [10047700]

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

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

Dechallenge: Not Applicable

4) Fatigue (10016256) (Fatigue (10016256)) [v.20.1] [10016256]

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

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

Dechallenge: Not Applicable

Alternative Etiology for ABT-494 (Open Label)

Event of GENERAL DISCOMFORT (MALAISE), DIARRHOEA, VOMITING, FATIGUE

- Investigator: Not applicable

- AbbVie: Event likely represents worsening UC and Disease Flare.

Relevant Laboratory & Other Diagnostic Tests

Unknown date BLOOD PRESSURE: normal

Unknown date BODY TEMPERATURE: 38 Degrees C

[redacted] **20[redacted] MRI:** showed pancolitis with scarring, but no signs of severe active inflammation

[redacted] **20[redacted] PLATELET COUNT:** 446 X10**9/L (normal 150 to 400)

Unknown date PULSE: normal

[redacted] **20[redacted] STOOL CULTURE:** negative
Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はオランダの 3[redacted] 歳女性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，発作様エピソード，健忘，頭痛及び悪心の事象を発現した。関連する病歴は，潰瘍性大腸炎，基底細胞癌，心因性非てんかん発作，断眠からの発作，うつ病，短時間の意識消失及び片頭痛であった。

Event 2 の臨床経過：

投与99日後＊，被験者は発作様エピソード，健忘，頭痛及び悪心を発現した。投与100日後＊，発作様エピソード，健忘，頭痛及び悪心は消失した。

投与99日後＊ ，被験者は，父親とともに自家用車に向かって歩いていた。被験者は，少しの荒々しい動作の後，倒れた。約3 分間意識を失い，その後意識を取り戻した。発作後，被験者は混乱し，何が起こったのか思い出せなかった。被験者は救急治療室を受診し，医師の診察を受けた。医師が部屋を出た際，別の発作を起こし，発作は約 1.5 分間持続した。症状には，荒々しい動作の後の体の硬直，及び口から出たピンク色の泡が含まれた。被験者は意識を取りし，その後少し混乱した。被験者は精査のために入院した。悪心の他に異常は認められなかった。投与100日後＊，被験者は退院した。

治験責任医師によると，断眠が危険因子であった。

投与された薬剤は，トラマドールであった。

The patient's past medications include:

METOCLOPRAMIDE for NAUSEA ([redacted] 20[redacted] - [redacted] 20[redacted])

FRAXIPARINE for NAUSEA ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Open Label)

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1) Seizure like phenomena (10071048) (Seizure like phenomena (10071048)) [v.23.1] [10071048]

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

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

Dechallenge: Yes

Rechallenge: No rechallenge was done, recurrence is not applicable

2) Amnesia (10001949) (Amnesia (10001949)) [v.23.1] [10001949]

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

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

Dechallenge: Yes

Rechallenge: No rechallenge was done, recurrence is not applicable

3) Headache (10019211) (Headache (10019211)) [v.23.1] [10019211]

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

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

Dechallenge: Yes

Rechallenge: No rechallenge was done, recurrence is not applicable

4) Nausea (10028813) (Nausea (10028813)) [v.23.1] [10028813]

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

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

Dechallenge: Yes

Rechallenge: No rechallenge was done, recurrence is not applicable

Alternative Etiology for UPADACITINIB (Open Label)

Event of SEIZURE-LIKE EPISODE, AMNESIA, HEADACHE, NAUSEA

- Investigator: PNES

- AbbVie: Risk factors include concurrent sleep deprivation and seizure-like episode in a patient with pre-existing seizures from sleep deprivation, psychogenic non-epileptic seizures, loss of consciousness and migraine headache.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] BLOOD PRESSURE (AT TIME OF ADMISSION):** 130/80 mmHg

[redacted] **20[redacted] FREE T4:** Results: 25.8 PMOL/L Lower normal range: >=12.0 Upper normal range: <=22.0

[redacted] **20[redacted] GAMMA GT:** 54 U/L (normal 0 to 38)

[redacted] **20[redacted] GLUCOSE:** 7.9 MMOL/L (normal 3.1 to 6.4)

[redacted] **20[redacted] HDL CHOLESTEROL:** 2.56 MMOL/L (normal 1.16 to 1.68)

[redacted] **20[redacted] HEART RATE (AT TIME OF ADMISSION):** 98 bpm

[redacted] **20[redacted] PHYSICAL EXAM:** Not reported

[redacted] **20[redacted] PHYSICAL EXAM:**

[redacted] **20[redacted] RED BLOOD CELLS (URINE):** Results: 466/uL Lower normal range: >=0 Upper normal range: <=18

[redacted] **20[redacted] RESPIRATIONS (AT TIME OF ADMISSION):** 17 /min

[redacted] **20[redacted] SPO2 (AT TIME OF ADMISSION):** 99 %

[redacted] **20[redacted] SQUAMOUS CELL EPITHELIUM (URINE):** Results: 42/uL Lower normal range: >=0 Upper normal range: 4

[redacted] **20[redacted] TEMPERATURE (AT TIME OF ADMISSION):** 37.7 Degrees C

[redacted] **20[redacted] WHITE BLOOD CELLS (URINE):** Results: 19/uL Lower normal range: >=0 Upper normal range: 10

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はオランダの 3[redacted] 歳女性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，継続中の潰瘍性大腸炎，及び治療による改善なしの事象を発現した。関連する病歴は，潰瘍性大腸炎及び潰瘍性大腸炎による入院であった。

Event 3 の臨床経過：

投与109日後＊，被験者は継続中の潰瘍性大腸炎，及び治療による改善なしを発現した。投与123日後＊，継続中の潰瘍性大腸炎，及び治療による改善なしは消失した。

投与109日後＊，被験者は今後の手術のために入院した。本事象に関連する徴候及び症状には，治療にもかかわらず継続中の潰瘍性大腸炎の症状が含まれた。投与114日後＊ ，回腸瘻造設を伴う結腸亜全摘術及びハルトマン手術又は回腸直腸吻合術に成功した。被験者は回復し，入院中に合併症はなかった。投与123日後＊，被験者は退院した。

Causality for UPADACITINIB (Open Label)

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1) Ulcerative colitis (10045365) (Colitis ulcerative (10009900)) [v.23.1] [10045365]

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 (Open Label)

Event of ONGOING UC, NO IMPROVEMENT FROM TREATMENT

- Investigator: Ongoing UC.

- AbbVie: Event is more likely related to pre-existing ulcerative colitis.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] CRP:** 136.6 MG/L (normal 0 to 5)

[redacted] **20[redacted] CRP:** 54.1 MG/L (normal 0 to 5)

[redacted] **20[redacted] CRP:** 103.7 MG/L (normal 0 to 5)

[redacted] **20[redacted] X-RAY:** No deviations were found

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
結腸腺癌	X	X		X
基底細胞癌	X			X
血中クレアチンホスホキナーゼ増加				X
深部静脈血栓症	X			X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	5[redacted]	MALE	WHITE

Medical History	Onset Year
INFLAMMATORY BOWEL DISEASE: ULCERATIVE COLITIS	20[redacted]
LEFT SIDED UC	20[redacted]
OTHER: DERMATOMYCOSE	20[redacted]
OTHER: FATIGUE	20[redacted]
OTHER: LEUCOPENIA	20[redacted]
OTHER: LUNG EMBOLISM	20[redacted]
OTHER: RENAL FUNCTION LAB ABNORMALITIES	20[redacted]
OTHER: THROMBOPENIA	20[redacted]
PERIPHERAL VASCULAR DISEASE-VENOUS: PAIN LEFT CALF EVERY YEAR SINCE 20[redacted]	20[redacted]

Prior Procedures	Procedure Year
SURGERY: APPENDECTOMY DUE TO APPENDICITIS	20[redacted]
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	CURRENT	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 ABT-494 (IND)	30 mg	ORAL	QD	[redacted] / 1	[redacted] / 56	56
M14-234 SS3 Placebo (MAIN)		ORAL	QD	[redacted] / 57	[redacted] / 109	53
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted] / 110	[redacted] / 1170	1061

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
TIOGUANINE	NOT REPORTED	NOT REPORTED	Y-M: [redacted]
BECLOMETASONE;MESALAZINE	NOT REPORTED	NOT REPORTED	Y-M: [redacted]
TIOGUANINE	NOT REPORTED	NOT REPORTED	Y-M: [redacted]
ADALIMUMAB	40 mg	OTHER: ONCE WEEKLY	Y-M: [redacted]
BECLOMETASONE;MESALAZINE	NOT REPORTED	NOT REPORTED	Y-M: [redacted]
BUDESONIDE	NOT REPORTED	NOT REPORTED	Y-M: [redacted]
VEDOLIZUMAB	300 mg	OTHER: EVERY 8 WEEKS	Y-M: [redacted]
TIOGUANINE	20 mg	QD	Y-M: [redacted]
MIRIKIZUMAB	600 mg	OTHER: EVERY MONTH	Y-M: [redacted] / -336
MICONAZOLE	1 OTHER: APPLICATION	BID	Y-M: [redacted] / -49
PHOSPHORIC ACID;SODIUM PHOSPHATE	10 mL	TID	Y-M: [redacted] / -49
MESALAZINE	2 g	QD	Y: [redacted]
MESALAZINE	NOT REPORTED	NOT REPORTED	Y: [redacted]
CALCIUM CARBONATE;COLECALCIFEROL	500/400 OTHER: MG/IU	QD	Y: [redacted]
PANTOPRAZOLE	40 mg	PRN	Y: [redacted]
PREDNISONE	15 mg	QD	Y: [redacted]
MERCAPTOPURINE	NOT REPORTED	NOT REPORTED	Y: [redacted]

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
MICONAZOLE	1 OTHER: APPLICATION	BID	Y-M: 20[redacted] / -49	ONGOING
MESALAZINE	1 g	QD	Y-M: 20[redacted] / 236	Y-M: 20[redacted] / 753
TRAMADOL	50 mg	PRN	Y-M: 20[redacted] / 540	Y-M: 20[redacted] / 584
BISACODYL	10 mg	QD	Y-M: 20[redacted] / 667	Y-M: 20[redacted] / 667
ASCORBIC ACID;MACROGOL 3350;POTASSIUM;SODIUM CHLORIDE;SODIUM SULFATE	1 OTHER: SACHET	QD	Y-M: 20[redacted] / 668	Y-M: 20[redacted] / 669
FENTANYL	100 ug	QD	Y-M: 20[redacted] / 669	Y-M: 20[redacted] / 669
MIDAZOLAM	2.5 mg	QD	Y-M: 20[redacted] / 669	Y-M: 20[redacted] / 669
NADROPARIN	15200 IU	QD	Y-M: 20[redacted] / 723	Y-M: 20[redacted] / 724
RIVAROXABAN	15 mg	BID	Y-M: 20[redacted] / 724	Y-M: 20[redacted] / 745
RIVAROXABAN	20 mg	QD	Y-M: 20[redacted] / 746	ONGOING
BISACODYL	10 mg	QD	Y-M: 20[redacted] / 1052	Y-M: 20[redacted] / 1052
ASCORBIC ACID;MACROGOL 3350;POTASSIUM;SODIUM CHLORIDE;SODIUM SULFATE	2 L	QD	Y-M: 20[redacted] / 1053	Y-M: 20[redacted] / 1053
MIDAZOLAM	2.5 mg	QD	Y-M: 20[redacted] / 1054	Y-M: 20[redacted] / 1054
MESALAZINE	2 g	QD	Y: 20[redacted]	Y-M: 20[redacted] / 235
CALCIUM CARBONATE;COLECALCIFEROL	500/400 OTHER: MG/IU	QD	Y: 20[redacted]	ONGOING
PANTOPRAZOLE	40 mg	PRN	Y: 20[redacted]	ONGOING

Event #1: Event of Interest - Creatine Phosphokinase (CPK) Elevation

Event Description	ELEVATED CK
Preferred term	血中クレアチンホスホキナーゼ増加

AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 362 / 253
Age at AE Onset	5[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	ONGOING
Duration of AE	ONGOING
Severity	MILD
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 #2: Event of Interest - Possible Malignancies, Event of Interest - Malignancy, Event of Interest - Non-melanoma Skin Cancer (NMSC)

Event Description	SKIN BASAL CELL CARCINOMA ON TOP OF THE HEAD
Preferred term	基底細胞癌
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 832 / 723
Age at AE Onset	5[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	893 / 784
Duration of AE	62 DAYS
Severity	MILD
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: Serious Adverse Event, Event of Interest - Adjudicated Cardiovascular events, Event of Interest - Adjudicated Venous Thromboembolic Event

Event Description	DEEP VEIN THROMBOSIS OF THE LOWER RIGHT LIMB

Preferred term	深部静脈血栓症
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 832 / 723
Age at AE Onset	5[redacted]
Laboratory Testing	
[redacted]20[redacted] (RX DAY 724): NPTST115-D-DIMER: 3647 [NOT REPORTED - 500] ug/L	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	ONGOING
Duration of AE	ONGOING
Severity	MODERATE
Relation to Study Drug by Investigator	REASONABLE POSSIBILITY
Investigator Alternative Etiology	NOT REPORTED
Discontinued Study Drug Due to the Event	NO
SAE Criteria	IMPORTANT MEDICAL EVENT REQUIRING MEDICAL OR SURGICAL INTERVENTION

Event #4: Serious Adverse Event, Event of Interest - Possible Malignancies, Event of Interest - Malignancy, Event of Interest - Non-melanoma Skin Cancer (NMSC)

Event Description	SKIN BASAL CELL CARCINOMA ON TOP OF THE HEAD
Preferred term	基底細胞癌
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 984 / 875
Age at AE Onset	5[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	1127 / 1018
Duration of AE	144 DAYS
Severity	MODERATE
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, IMPORTANT MEDICAL EVENT REQUIRING MEDICAL OR SURGICAL INTERVENTION

Event #5: Serious Adverse Event, AE Leading to Discontinuation of Study Drug, Event of Interest-Possible Malignancies, Event of Interest-Malignancy, Event of Interest-Malignancies Excl NMSC

Event Description	ADENOMACARCINOMA SIGMOID COLON
Preferred term	結腸腺癌
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 1163 / 1054
Age at AE Onset	5[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	ONGOING
Duration of AE	ONGOING
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	ULCERATIVE COLITIS
Discontinued Study Drug Due to the Event	YES
SAE Criteria	IMPORTANT MEDICAL EVENT REQUIRING MEDICAL OR SURGICAL INTERVENTION

Generated: [redacted]20[redacted]:16:51

Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はオランダの 5[redacted] 歳男性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，右下肢の深部静脈血栓症の事象を発現した。関連する病歴は，疲労，炎症性腸疾患，潰瘍性大腸炎，肺塞栓症，血小板減少症，非喫煙者，現飲酒者（1 日 2 杯未満），血栓症の家族歴（母親）及び 20[redacted] 年以降毎年の右ふくらはぎ痛であった。

Event 3 の臨床経過：

投与832日後＊，被験者は右下肢の深部静脈血栓症を発現した。

被験者は，脚の圧痛，痛み，腫れ及び皮膚の紅斑があった。D ダイマーの上昇が認められ，超音波検査で血栓症が確認された。投与833日後＊ ，被験者は血管内視鏡検査を受けた。投与 833

日後＊，被験者は退院した。

カルテによると，被験者は過去 2 週間半，上腿に疲労感があり，後に疲労感は右脚の膝窩及びふくらはぎに移動した。

投与された薬剤は，リバーロキサバン及び nadroparine であった。

The patient's past medications include:

MESALAZINE for ULCERATIVE COLITIS (20[redacted] - 20[redacted])

PREDNISONE for ULCERATIVE COLITIS (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])

PURINETHOL for ULCERATIVE COLITIS (20[redacted] - 20[redacted])

THIOSIX for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

BECLOMETHASON/MESALAZINE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - 20[redacted])

BECLOMETHASON/MESALAZINE ENEMA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - 20[redacted])

ADALIMUMAB for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

BUDESONIDE for ULCERATIVE COLITIS ([redacted] 20[redacted] - 20[redacted])

VEDOLIZUMAB for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

MIRIKIZUMAB for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

PREDNISONE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Open Label)

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1) Deep vein thrombosis leg (10065052) (Deep vein thrombosis (10051055)) [v.22.1] [10065052]

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

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

Dechallenge: Not Applicable

Alternative Etiology for UPADACITINIB (Open Label)

Event of DEEP VEIN THROMBOSIS OF THE LOWER RIGHT LIMB

- Investigator: Not applicable.

- AbbVie: Event is more likely related to pre-existing history of lung embolism. Additional risk factors include pre-existing ulcerative colitis and history of thrombosis in his mother.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] ALP:** 52 U/L (normal <11)

[redacted] **20[redacted] D-DIMER:** 3647 micrograms/liter (normal <500)

[redacted] **20[redacted] HEMATOCRIT:** 0.40 % (normal 0.41 to 0.53)

[redacted] **20[redacted] HEMOGLOBIN:** 8.7 MMOL/L (normal 8.4 to 10.8)

[redacted] **20[redacted] SEDIMENTATION RATE:** 2 MM/HR (normal 1 to 20)

[redacted] **20[redacted] THROMBOCYTE:** 183 X10**9/L (normal 150 to 400)

20[redacted] ULTRASOUND: Confirmed thrombosis.

[redacted] **20[redacted] VASULAR ENDOSCOPY:** thrombosis right calf

[redacted] **20[redacted] VENOUS DOPPLER:** Proximal DVT with thrombus in the distal VPS, v. poplitea, v.gastroanemia, prox/mid. VTP

[redacted] **20[redacted] WEIGHT:** 9[redacted] KG
Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はオランダの 5[redacted] 歳男性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，頭頂部の基底細胞癌の事象を発現した。関連する病

歴は，潰瘍性大腸炎及び皮膚真菌症であった。

Event 4 の臨床経過：

投与の約33ヵ月後＊，被験者は頭頂部の基底細胞癌を発現した。投与1127日後＊，頭頂部の基底細胞癌は消失した。

本事象発現前の投与の約28ヵ月後＊，被験者は基底細胞癌（非重篤）を発現した。病変を切除したが，最初，医療過誤のため病変は完全には切除されず，傷は回復しなかった。

投与1126日後＊，被験者は，頭頂部への皮膚移植のため入院した。基底細胞癌の外科的治療の傷が回復しなかったため，右大腿から採取した皮膚片の移植手術を受けた。投与1127日後＊，被験者は退院し，傷はきれいに回復した。

The patient's past medications include:

MESALAZINE for ULCERATIVE COLITIS (20[redacted] - 20[redacted], 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

PREDNISONE for ULCERATIVE COLITIS (20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

PURINETHOL for ULCERATIVE COLITIS (20[redacted] - 20[redacted])

THIOSIX for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

BECLOMETHASON/MESALAZINE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - 20[redacted])

ADALIMUMAB for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

BUDESONIDE for ULCERATIVE COLITIS ([redacted] 20[redacted] - 20[redacted])

VEDOLIZUMAB for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

MIRIKIZUMAB for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

PREDNISON for UC ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Open Label)

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1) Basal cell carcinoma (10004146) (Basal cell carcinoma (10004146)) [v.23.0] [10004146]

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

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

Dechallenge: Not Applicable

Alternative Etiology for UPADACITINIB (Open Label)

Event of BASAL CELL CARCINOMA ON TOP OF HEAD

- Investigator: Not applicable

- AbbVie: Basal cell carcinoma is the most common cancer occurring worldwide, with incidence rate in European countries of 129.3 in men per 100,000 person-years, European standard. Caucasian race is an additional risk factor.

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はオランダの 5[redacted] 歳男性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，S 状結腸腺癌の事象を発現した。関連する病歴は，炎症性腸疾患，非喫煙者，現飲酒者（1 日 2 杯未満）及び潰瘍性大腸炎であった。

Event 5 の臨床経過：

投与1163日後＊，被験者は S 状結腸腺癌を発現した。

投与1210日後＊，被験者は S 状結腸腺癌の治療処置のため入院した。投与1212日後＊，被験者は回腸嚢肛門吻合術を伴う直腸結腸切除術を受けた。合併症はなく，手術は成功した。投与1223日後＊，被験者は退院した。

治験薬の投与は完全に中止された。

The patient's past medications include:

MESALAZINE for ULCERATIVE COLITIS (20[redacted] - 20[redacted], 20[redacted] - [redacted] 20[redacted])

PREDNISONE for ULCERATIVE COLITIS (20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

PURINOL for ULCERATIVE COLITIS (20[redacted] - 20[redacted])

THIOSIX for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

BECLOMETHASON/MESALAZINE ENEMA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - 20[redacted])

ADALIMUMAB for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

BUDESONIDE for ULCERATIVE COLITIS ([redacted] 20[redacted] - 20[redacted])

VEDOLIZUMAB for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

MIRIKIZUMAB for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

MESALAZINE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Open Label)

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1) Adenocarcinoma of sigmoid colon (10075432) (Adenocarcinoma of colon (10001167)) [v.23.1] [10075432]

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

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

Dechallenge: No

Alternative Etiology for UPADACITINIB (Open Label)

Event of ADENOMACARCINOMA SIGMOID COLON

- Investigator: Ulcerative Colitis.

- AbbVie: risk factors include pre-existing ulcerative colitis and subject's age.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] COLONOSCOPY:** No inflammation seen (normal mucosa).

[redacted] **20[redacted] FLEXIBLE SIGMOIDOSCOPY:** No inflammation seen (normal mucosa).

[redacted] **20[redacted] FLEXIBLE SIGMOIDOSCOPY:** No inflammation seen (normal mucosa).

NON SERIOUS EVENTS AND **OTHER AREAS OF SAFETY INTEREST

Blood creatine phosphokinase increased: Symptom of muscle pain, related to vigorous physical activity.

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
貧血				X
潰瘍性大腸炎	X	X		

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	4[redacted]	MALE	WHITE

Medical History	Onset Year
EXTENSIVE UC/PANCOLITIS	20[redacted]
OTHER: ARTHROPATHY	NOT REPORTED
OTHER: CLOSTRIDIUM INFECTION	20[redacted]
OTHER: CMV COLITIS	20[redacted]
OTHER: OBSTIPATION	20[redacted]
OTHER: PNEUMOTHORAX	20[redacted]
PERIPHERAL VASCULAR DISEASE-ARTERIAL: LUNG EMBOLISM	NOT REPORTED
PERIPHERAL VASCULAR DISEASE-VENOUS: THROMBOSIS	NOT REPORTED

Prior Procedures	Procedure Year
SURGERY: TONSILLECTOMY	19[redacted]
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	FORMER	1 PACK	3	19[redacted]
CIGARS	NEVER			
PIPES	NEVER			

Alcohol Use	Status	Number/Day
ALCOHOL	FORMER	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 ABT-494 (IND)	30 mg	ORAL	QD	[redacted] / 1	[redacted] / 55	55
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted] / 56	[redacted] / 98	43

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
MESALAZINE	NOT REPORTED	OTHER: UNKNOWN	Y-M: [redacted] / -304
PANTOPRAZOLE	40 mg	QD	Y-M: [redacted] / -304
PREDNISONE	5 mg	QD	Y-M: [redacted] / -274
APIXABAN	5 mg	BID	Y-M: [redacted] / -236
BUDESONIDE	2 mg	QD	Y-M: [redacted] / -243
INFLIXIMAB	300 mg	OTHER: 0 AND 2 WEEKS	Y-M: [redacted] / -213
MESALAZINE	1 OTHER: BOTTLE	QD	Y-M: [redacted] / -213
ADALIMUMAB	40 mg	OTHER: ONCE ONLY	Y-M: [redacted] / -182
AZATHIOPRINE	NOT REPORTED	NOT REPORTED	Y-M: [redacted] / -182
TIOGUANINE	20 mg	QD	Y-M: [redacted] / -151
VANCOMYCIN	NOT REPORTED	QD	Y-M: [redacted] / -99
BUDESONIDE	9 mg	QD	Y-M: [redacted] / -69
PARACETAMOL	500 mg	PRN	Y-M: [redacted] / -43
VALGANCICLOVIR	450 mg	BID	Y-M: [redacted] / -60
LOPERAMIDE	2 mg	PRN	Y-M: [redacted] / -26
PLANTAGO OVATA	3,4 g	QD	Y-M: [redacted] / -26

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
PANTOPRAZOLE	40 mg	QD	Y-M: [redacted] / -304	Y-M: [redacted] / 70
APIXABAN	5 mg	BID	Y-M: [redacted] / -236	Y-M: [redacted] / 42
TIOGUANINE	20 mg	QD	Y-M: [redacted] / -151	Y-M: [redacted] / -70
VANCOMYCIN	NOT REPORTED	QD	Y-M: [redacted] / -99	Y-M: [redacted] / -68
BUDESONIDE	9 mg	QD	Y-M: [redacted] / -69	Y-M: [redacted] / 43
PARACETAMOL	500 mg	PRN	Y-M: [redacted] / -43	ONGOING
VALGANCICLOVIR	450 mg	BID	Y-M: [redacted] / -60	ONGOING

LOPERAMIDE	2 mg	PRN	Y-M: 20[redacted] / -26	ONGOING
PLANTAGO OVATA	3,4 g	QD	Y-M: 20[redacted] / -26	Y-M: 20[redacted] / 3
FENTANYL	100 ug	OTHER: 1 TIME ONLY	Y-M: 20[redacted] / 1	Y-M: 20[redacted] / 2
MIDAZOLAM	5 mg	OTHER: 1 TIME ONLY	Y-M: 20[redacted] / 1	Y-M: 20[redacted] / 2
CALCIUM CARBONATE;COLECALCIFEROL	1.25/400 OTHER: GRAM/IU	BID	Y-M: 20[redacted] / 29	ONGOING
IRON	1000 mg	OTHER: 1 TIME ONLY	Y-M: 20[redacted] / 29	Y-M: 20[redacted] / 30
TRAMADOL	50 mg	TID	Y-M: 20[redacted] / 3	Y-M: 20[redacted] / 10
FLUCLOXACILLIN	1000 mg	OTHER: 6X DAILY	Y-M: 20[redacted] / 6	Y-M: 20[redacted] / 9
GENTAMICIN	368 mg	QD	Y-M: 20[redacted] / 6	Y-M: 20[redacted] / 9
CELECOXIB	200 mg	BID	Y-M: 20[redacted] / 7	Y-M: 20[redacted] / 21
OXYCODONE	5 mg	OTHER: 6X DAILY	Y-M: 20[redacted] / 8	Y-M: 20[redacted] / 10
OXYGEN	2 OTHER: LITER PER HOUR	OTHER: CONSTANTLY	Y-M: 20[redacted] / 31	Y-M: 20[redacted] / 52
TEMAZEPAM	10 mg	PRN	Y-M: 20[redacted] / 31	Y-M: 20[redacted] / 49
OXYCODONE	5 mg	PRN	Y-M: 20[redacted] / 33	Y-M: 20[redacted] / 49
SODIUM CHLORIDE	2,5 L	QD	Y-M: 20[redacted] / 33	Y-M: 20[redacted] / 34
SODIUM CHLORIDE	1,5 L	QD	Y-M: 20[redacted] / 35	Y-M: 20[redacted] / 36
FENTANYL	100 ug	OTHER: 1 TIME ONLY	Y-M: 20[redacted] / 36	Y-M: 20[redacted] / 36
SULFASALAZINE	1000 mg	BID	Y-M: 20[redacted] / 38	Y-M: 20[redacted] / 46
TRIAMCINOLONE	UNKNOWN OTHER: UNKNOWN	OTHER: 1 TIME ONLY	Y-M: 20[redacted] / 38	Y-M: 20[redacted] / 38
SODIUM CHLORIDE	1 L	QD	Y-M: 20[redacted] / 40	Y-M: 20[redacted] / 63
TRAMADOL	50 mg	TID	Y-M: 20[redacted] / 44	Y-M: 20[redacted] / 45
CLONIDINE	150 OTHER: MICROGRAM	OTHER: 1 TIME ONLY	Y-M: 20[redacted] / 45	Y-M: 20[redacted] / 45
MORPHINE	14 mg	OTHER: 1 TIME ONLY	Y-M: 20[redacted] / 45	Y-M: 20[redacted] / 45
MORPHINE	UNKNOWN OTHER: UNKNOWN	PRN	Y-M: 20[redacted] / 45	Y-M: 20[redacted] / 48
NADROPARIN	2850 IU	QD	Y-M: 20[redacted] / 45	Y-M: 20[redacted] / 48
ONDANSETRON	2 OTHER: MG/ML	OTHER: 1 TIME ONLY	Y-M: 20[redacted] / 45	Y-M: 20[redacted] / 46
ONDANSETRON	8 mg	PRN	Y-M: 20[redacted] / 45	Y-M: 20[redacted] / 64
METAMIZOLE	1000 mg	PRN	Y-M: 20[redacted] / 46	Y-M: 20[redacted] / 55

SULFASALAZINE	1000 mg	BID	Y-M: 20[redacted] / 47	Y-M: 20[redacted] / 52
APIXABAN	5 mg	BID	Y-M: 20[redacted] / 48	Y-M: 20[redacted] / 49
CLONIDINE	75 OTHER: MICROGRAM	BID	Y-M: 20[redacted] / 48	Y-M: 20[redacted] / 59
ONDANSETRON	2 OTHER: MG.ML	QD	Y-M: 20[redacted] / 48	Y-M: 20[redacted] / 64
BUPRENORPHINE	0,2 mg	PRN	Y-M: 20[redacted] / 49	ONGOING
CEFTRIAXONE	2000 mg	QD	Y-M: 20[redacted] / 49	Y-M: 20[redacted] / 54
ESOMEPRAZOLE	80 mg	PRN	Y-M: 20[redacted] / 49	ONGOING
METRONIDAZOLE	5 OTHER: MG/ML	TID	Y-M: 20[redacted] / 49	Y-M: 20[redacted] / 54
MORPHINE	1 OTHER: MG/ML	PRN	Y-M: 20[redacted] / 49	Y-M: 20[redacted] / 55
NADROPARIN	5700 IU	BID	Y-M: 20[redacted] / 49	Y-M: 20[redacted] / 52
SULFAMETHOXAZOLE;TRIMETHOPRIM	960 mg	BID	Y-M: 20[redacted] / 49	Y-M: 20[redacted] / 52
APIXABAN	5 mg	BID	Y-M: 20[redacted] / 52	ONGOING
CELECOXIB	200 mg	BID	Y-M: 20[redacted] / 52	Y-M: 20[redacted] / 64
BLOOD AND RELATED PRODUCTS	1 OTHER: BAG	OTHER: 1 TIME ONLY	Y-M: 20[redacted] / 54	Y-M: 20[redacted] / 55
SULFASALAZINE	500 mg	BID	Y-M: 20[redacted] / 56	ONGOING
METOCLOPRAMIDE	10 mg	PRN	Y-M: 20[redacted] / 57	ONGOING
PANTOPRAZOLE	20 mg	QD	Y-M: 20[redacted] / 71	ONGOING

Event #1: Serious Adverse Event, AE Leading to Discontinuation of Study Drug

Event Description	WORSENING OF UC
Preferred term	潰瘍性大腸炎
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 12 / -44 DAYS BEFORE TREATMENT
Age at AE Onset	4[redacted]

Laboratory Testing

[redacted]20[redacted] (RX DAY 34): Hemoglobin: 96.6804 [104.7371 - 119.23916] G/L

Microbiology

[redacted]20[redacted] (RX DAY 35): STOOL NPTST310-STOOL CULTURE: Negative; [redacted]20[redacted] (RX DAY 37): BLOOD NPTST052-BLOOD CULTURE: Positive-GRAM+; [redacted]20[redacted] (RX DAY 39): STOOL NPTST310-STOOL CULTURE: Negative; URINE NPTST338-URINE CULTURE: Negative; [redacted]20[redacted] (RX DAY 49): SPUTUM NPTST305-SPUTUM CULTURE: Negative; [redacted]20[redacted] (RX DAY 52): OTHER ABCESS FOOT NPTST109-CULTURE: Negative

AE Stopped Initial Rx Day / Rx Day	100 / 45 (2 DAYS AFTER LAST TREATMENT)
Duration of AE	89 DAYS
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY

Investigator Alternative Etiology	WORSENING OF DISEASE
Discontinued Study Drug Due to the Event	YES
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Event #2: Event of Interest - Anemia

Event Description	ANEMIA
Preferred term	貧血
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 84 / 29
Age at AE Onset	5[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	ONGOING
Duration of AE	ONGOING
Severity	MILD
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]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はオランダの 5[redacted] 歳男性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，潰瘍性大腸炎の悪化の事象を発現した。関連する病歴は，元喫煙者（1 日 1 箱を 3 年間），サイトメガロウイルス性大腸炎，潰瘍性大腸炎及び少量の元飲酒者（1 日 2 杯未満）であった。

Event 1 の臨床経過：

投与12日後＊，被験者は潰瘍性大腸炎の悪化を発現した。投与100日後＊，潰瘍性大腸炎の悪化は消失した。

投与88日後＊，被験者は，悪心，体重減少，下痢及び腹痛があり入院した。投与100日後＊，被験者は結腸亜全摘術を受けた。投与101日後＊，尿道カテーテルが挿入され，同日，抜去された。この被験者の入院で併発がみられたのは，投与105日後＊から 投与119日後＊（すべて非重篤）までに関節痛，全身状態悪化，左踵の皮下組織膿瘍，投与105日後＊から 投与119日後＊（非重篤）までの右下腿の皮下組織膿瘍，投与105日後＊から 投与119日後＊（非重篤）までの左前腕の皮下組織膿瘍，及び投与104日後＊から投与140日後＊までにおける右側の腫脹した hemiscrotum（非重篤）であった。投与119日後＊，被験者は退院した。

投与された薬剤は，ロペラミド及び metamucil であった。

Causality for UPADACITINIB (Open Label)

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1) Colitis ulcerative aggravated (10009901) (Colitis ulcerative (10009900)) [v.22.1] [10009901]

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

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

Dechallenge: Yes

Rechallenge: No rechallenge was done, recurrence is not applicable

Alternative Etiology for UPADACITINIB (Open Label)

Event of WORSENING OF UC

- Investigator: Worsening of disease

- AbbVie: Event is more likely related to progression of pre-existing ulcerative colitis

Relevant Laboratory & Other Diagnostic Tests

[redacted] 20[redacted] **BLOOD CULTURE:** GRAM+

[redacted] 20[redacted] **CT-ABDOMEN WITH CONTRAST FLUID:** POSTOPERATIVE GAS IN ABDOMEN,DILATION OF ILEUM, PROBABLY PARALYTIC, FLUID IN RIGHT SCROTUM, POSSIBLY HYDROCELE.

[redacted] 20[redacted] **ECG:** BIGEMINI PATTERN

[redacted] 20[redacted] **HEMOGLOBIN:** 6 MMOL/L (normal 6.5 to 7.4)

[redacted] 20[redacted] **SIGMOIDOSCOPY:** MAYO 3

[redacted] 20[redacted] **SPUTUM CULTURE:** Negative

[redacted] 20[redacted] **STOOL CULTURE:** Negative

[redacted] 20[redacted] **STOOL CULTURE:** Negative

[redacted] 20[redacted] **ULTRASOUND OF TESTICLES:** HYDROCELE

[redacted] 20[redacted] **URINE CULTURE:** Negative

[redacted] 20[redacted] **X-RAY ABDOMEN:** NO ABNORMALITIES

[redacted] 20[redacted] **X-RAY THORAX:** POSSIBLE PNEUMONIA

NON SERIOUS EVENTS AND **OTHER AREAS OF SAFETY INTEREST

Anaemia: Intermittent.

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
貧血				X
毛巣嚢胞	X			X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	2[redacted]	MALE	WHITE

Medical History	Onset Year
ANEMIA: FERRIPRIVE ANEMIA	20[redacted]
EXTENSIVE UC/PANCOLITIS	20[redacted]
NEPHROLITHIASIS	20[redacted]
OTHER: ACNE IN FACE	20[redacted]
OTHER: CMV INFECTION	20[redacted]
OTHER: FOLIC ACID DEFICIENCY	20[redacted]
OTHER: PYROSIS	20[redacted]
OTHER: VITAMIN D DEFICIENCY	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	NEVER	

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 ABT-494 (IND)	7.5 mg	ORAL	QD	[redacted] / 1	[redacted] / 59	59
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted] / 60		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
AZATHIOPRINE	125 mg	QD	Y-M: [redacted]
PREDNISONE	40 mg	QD	Y-M: [redacted]
PREDNISONE	60 mg	QD	Y-M: [redacted]
IRON	NOT REPORTED	NOT REPORTED	Y-M: [redacted]
PREDNISONE	20 mg	OTHER: EVERY OTHER DAY	Y-M: [redacted]
MESALAZINE	3 g	BID	Y-M: [redacted]
PREDNISOLONE	5 mg	QD	Y-M: [redacted]
INFLIXIMAB	350 mg	OTHER: PER PROTOCOL	Y-M: [redacted]
IRON	NOT REPORTED	NOT REPORTED	Y-M: [redacted]
IRON	NOT REPORTED	NOT REPORTED	Y-M: [redacted]
MESALAZINE	4	NOT REPORTED	Y-M: [redacted]
MESALAZINE	4 g	QD	Y-M: [redacted]
BUDESONIDE	9 mg	QD	Y-M: [redacted]
PREDNISONE	40 mg	QD	Y-M: [redacted]
BECLOMETASONE;MESALAZINE	100 g	QD	Y-M: [redacted]
IRON	NOT REPORTED	NOT REPORTED	Y-M: [redacted]
PREDNISONE	20 mg	QD	Y-M: [redacted]
PREDNISONE	5 mg	QD	Y-M: [redacted]
VEDOLIZUMAB	300 mg	OTHER: 1X/8 WKS	Y-M: [redacted]
IRON	NOT REPORTED	NOT REPORTED	Y-M: [redacted]
METHOTREXATE	25 mg	1 time per week	Y-M: [redacted]
FOLIC ACID	1 mg	QD	Y-M: [redacted] / -103
VITAMIN D NOS	25.000 IU	OTHER: 1X/WEEK	Y-M: [redacted] / -103
OMEPRAZOLE	20 mg	QD	Y-M: [redacted] / -83

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
SERTRALINE	50 mg	QD	Y-M: 20[redacted] / 86	Y-M: 20[redacted] / 1059
IRON	1000 mg	QD	Y-M: 20[redacted] / 156	Y-M: 20[redacted] / 156
IRON	1000 mg	QD	Y-M: 20[redacted] / 270	Y-M: 20[redacted] / 270
PARACETAMOL	500 mg	PRN	Y-M: 20[redacted] / 906	Y-M: 20[redacted] / 910
PARACETAMOL	500 mg	PRN	Y-M: 20[redacted] / 934	ONGOING
MORPHINE	2.5 mg	OTHER: AS NEEDED	Y-M: 20[redacted] / 935	Y-M: 20[redacted] / 935
MACROGOL	13.8 g	OTHER: AS NEEDED	Y-M: 20[redacted] / 1153	Not reported
CALCIUM CARBONATE	500 mg	QD	Y-M: 20[redacted] / 1160	Not reported
OMEPRAZOLE	20 mg	QD	Y-M: 20[redacted] / 1173	Not reported
BUDESONIDE	200 ug	PRN	Y-M: 20[redacted] / 1187	Not reported
ASCORBIC ACID;MACROGOL 3350;POTASSIUM;SODIUM CHLORIDE;SODIUM SULFATE	1 L	QD	Y-M: 20[redacted] / 1428	Y-M: 20[redacted] / 1429
BISACODYL	10 mg	QD	Y-M: 20[redacted] / 1428	Y-M: 20[redacted] / 1429

Event #1: Event of Interest - Anemia

Event Description	ANAEMIA
Preferred term	貧血
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 153 / 94
Age at AE Onset	2[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	ONGOING
Duration of AE	ONGOING
Severity	MODERATE
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

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

Event Description	SINUS PILONIDALIS ABSCESS

Preferred term	毛巣嚢胞
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 993 / 934
Age at AE Onset	2[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	995 / 936
Duration of AE	3 DAYS
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	HOSPITALIZATION DUE TO SURGICAL INTERVENTION
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はオランダの 2[redacted] 歳男性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，毛巣洞の膿瘍の事象を発現した。関連する病歴は，潰瘍性大腸炎，非喫煙者及び非飲酒者であった。

Event 2 の臨床経過：

投与993日後＊，被験者は毛巣洞の膿瘍を発現した。投与995日後＊，毛巣洞の膿瘍は消失した。

本事象発現前の投与から約32ヵ月目の＊上旬に，被験者は肛門周囲膿瘍（非重篤）の排膿を経験していた。

投与994日後＊，被験者は毛巣洞の排膿のために入院した。処置は成功した。投与995日後＊，被験者は退院した。

投与された薬剤は，paracetamol 及びモルヒネであった。

The patient's past medications include:

PREDNISONE for ULCERATIVE COLITIS ([redacted])

AZATHIOPRINE for ULCERATIVE COLITIS ([redacted])

FERRIC CARBOXYMALTOSE for ANEMIA ([redacted])

PENTASA for ULCERATIVE COLITIS ([redacted])

PREDNISOLON for ULCERATIVE COLITIS ([redacted])

INFLIXIMAB for ULCERATIVE COLITIS ([redacted])

SALOFALK for ULCERATIVE COLITIS ([redacted])

CORTIMENT for ULCERATIVE COLITIS ([redacted])

ISOMALTOSE, FERRIC COMPLEX for ANEMIA ([redacted])

VEDOLIZUMAB for ULCERATIVE COLITIS ([redacted])

BECLOMETASONE;MESALAZINE for ULCERATIVE COLITIS ([redacted])

METHOTREXATE for ULCERATIVE COLITIS ([redacted])

Causality for UPADACITINIB (Open Label)

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1) Pilonidal abscess (10035041) (Pilonidal cyst (10035043)) [v.24.0] [10035041]

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 (Open Label)

Event of SINUS PILONIDALIS ABSCESS

- Investigator: HOSPITALIZATION DUE TO SURGICAL INTERVENTION

- AbbVie: risk factors include age(early twenties) , male gender and obesity (BMI 31.7).

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] BODY WEIGHT:** 9[redacted] kg

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

NON SERIOUS EVENTS AND **OTHER AREAS OF SAFETY INTEREST

Anaemia: Intermittent.

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
失神	X			

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	2[redacted]	MALE	WHITE

Medical History	Onset Year
EXTENSIVE UC/PANCOLITIS	20[redacted]
INFLAMMATORY BOWEL DISEASE: ULCERATIVE COLITIS	20[redacted]
OTHER: GRAVES	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	CURRENT	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 ABT-494 (IND)	30 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 59	59
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted]20[redacted] / 59	[redacted]20[redacted] / 169	111

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
MESALAZINE	2.4 g	BID	Y-M: 20[redacted]
PREDNISONE	5 mg	QD	Y-M: 20[redacted]
HYDROCORTISONE	100 mg	TID	Y-M: 20[redacted]
IRON	NOT REPORTED	NOT REPORTED	Y-M: 20[redacted]
MESALAZINE	2 g	QD	Y-M: 20[redacted]
MESALAZINE	4.8 g	QD	Y-M: 20[redacted]
AZATHIOPRINE	100 mg	QD	Y-M: 20[redacted]
INFLIXIMAB	400 mg	OTHER: 8 WEEKS	Y-M: 20[redacted]
METRONIDAZOLE	400 mg	BID	Y-M: 20[redacted]
VEDOLIZUMAB	300 mg	OTHER: 4 WEEKS	Y-M: 20[redacted]
MESALAZINE	4 g	QD	Y-M: 20[redacted] / -337
PREDNISONE	5 mg	QD	Y-M: 20[redacted] / -139

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
MESALAZINE	4 g	QD	Y-M: 20[redacted] / -337	ONGOING

Event #1: Serious Adverse Event

Event Description	REFLEX SYNCOPE
Preferred term	失神
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 172 / 114 (3 DAYS AFTER LAST TREATMENT)
Age at AE Onset	2[redacted]

Laboratory Testing

[redacted]20[redacted] (RX DAY 114): Albumin: 47 [36 - 48] G/L; Calcium: 2.55 [2.15 - 2.51] MMOL/L; Hemoglobin: 146 [134 - 170] G/L; NPTST206-LEUKOCYTES: 12.8 [3.5 - 8.8] 10^9/L; NPTST323-TROPONIN: 7 [0 - 15] NG/L; Sodium: 135 [137 - 145] MMOL/L

Microbiology

NOT REPORTED

AE Stopped Initial Rx Day / Rx Day	173 / 115 (4 DAYS AFTER LAST TREATMENT)
Duration of AE	2 DAYS
Severity	MILD
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	SUBJECT HAS A SERIOUS UC AND WERE VERY DEHYDRATED AND THAT WAS THE REASON FOR THE PASIENT FAINTED.SUBJECT WAS IN

	HOSPITAL FOR OBSERVATION ONE DAY, AND HE GOT FLUID THERE.
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]#[redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はノルウェーの 2[redacted] 歳男性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，反射性失神の事象を発現した。関連する病歴は，グレーブス病，潰瘍性大腸炎，非喫煙者及び現飲酒者（1 日 2 杯未満）であった。

Event 1 の臨床経過：

投与172日後＊，被験者は反射性失神を発現した。投与173日後＊，反射性失神は消失した。

投与172日後＊，被験者は治験責任医師の診察を受けた。被験者は時折，胸部の下に痛みがあると訴えた。治験責任医師は，この痛みは重篤な汎大腸炎から来るものと述べた。

同日，被験者が診察から帰宅した後，自宅で約 10–15 秒間続く失神を発現した。被験者の母親が救急車を呼び，被験者は救急治療室に運ばれた。

被験者は重症の潰瘍性大腸炎があり，1 日 20 回程度の排便があるため，脱水症状であると指摘された。

医療記録より：投与172日後＊，被験者は入院した。被験者は午後 3 時頃，台所に立っているときに気が遠くなり，座り込んだ。被験者は視力喪失（失神したときによくあるように視界が黒くなった）に気づき，その状態は座った状態でも続いており ，横になろうとした。被験者は数歩進んだところで気を失い，前頭部を打ち，腹部に 2 箇所の切り傷を負った。被験者は失神からのことを何も覚えていなかった。失神時に一緒にいた母親は，被験者は 10–15 秒ほど気を失っていたと述べた。失神前，被験者の心拍数は増加していなかった。被験者が目覚めた時，母親は救急治療室に電話していた。被験者は体を起こそうとしたが，新たな視力喪失があり，横にならざるを得なかった。その後，被験者は気分が良くなり，トイレに行き，ゆっくりと歩いた。被験者は辛うじてトイレに辿り着いたが ，排便はなかった。その後，被験者は徐々に気分

が良くなった。

失神の後，被験者は以前よりも強い腹痛を経験した。被験者は，胸部の左側に断続的な痛みがあったと述べ，その後，両肺の基底部及び心窩部から来ていると思われる鋭い痛みを経験した。どちらの痛みも，体を動かすと始まり，体の動きを止めると多少改善した。痛みは背部に広がり，腕や頚部/喉にはなかった。診察時，被験者は，漏斗胸があり，四肢は温かく華奢であり，両側の後脛骨動脈の脈拍は良好であった。被験者は，治験薬の投与開始前からこれらの種類の痛みを経験していたが，治験薬を服用すると悪化すると表現した。治験薬の投与を中止していた前週は，痛みが軽減されていた。結論として，反射性失神であり，心臓に起因する疑いはないと診断された。投与173日後＊，被験者は退院した。

Causality for ABT-494 (Open Label)

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1) Syncope (10042772) (Syncope (10042772)) [v.21.0] [10042772]

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

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

Dechallenge: Not Applicable

Alternative Etiology for ABT-494 (Open Label)

Event of REFLEX SYNCOPE

- Investigator: SUBJECT HAS A SERIOUS UC AND WERE VERY DEHYDRATED AND THAT WAS THE REASON FOR THE PASIENT FAINTED.SUBJECT WAS IN HOSPITAL FOR OBSERVATION ONE DAY, AND HE GOT FLUID THERE.

- AbbVie: Development of the event is not consistent with study drug's mechanism of action. Additional risk factors include subject's age and pre-existing UC.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] BLOOD PRESSURE:** . 158/93

[redacted] **20[redacted] BODY TEMPERATURE:** 36.2 Degrees C

[redacted] **20[redacted] CHOLESTEROL:** 3.7 mmol/l

[redacted] **20[redacted] ECG:** Sinus, frequency 54/min. No significant ST changes. Narrow QRS complexes. Upright T waves. Good R-progression on frontal wall

[redacted] **20[redacted] HDL:** 1.1 MMOL/L (normal 0.8 to 2.1)

[redacted] **20[redacted] HEMOGLOBIN:** 14.6 G/DL (normal 13.4 to 17.0)

[redacted] **20[redacted] PULSE:** 58 No units

[redacted] **20[redacted] RESPIRATION:** 16 /min

[redacted] **20[redacted] SPO2:** 98 %

[redacted] **20[redacted] TRIGLYCERIDES:** 0.69 MMOL/L (normal 0.45 to 2.60)

[redacted] **20[redacted] TROPONIN T:** 7 ng/l (normal 0 to 15)

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	X			X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	3[redacted]	FEMALE	WHITE

Medical History	Onset Year
EXTENSIVE UC/PANCOLITIS	20[redacted]
OTHER: ANXIETY ATTACK WITH PALPITATIONS	20[redacted]
OTHER: ATOPIC DERMATITIS	NOT REPORTED
OTHER: MIGRAINE	20[redacted]
OTHER: RIGHT SIDE DERMOID CYST	20[redacted]

Prior Procedures	Procedure Year
SURGERY: APPENDECTOMY	20[redacted]
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	CURRENT	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 ABT-494 (IND)	45 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 56	56
M14-234 SS3 ABT-494 (MAIN)	15 mg	ORAL	QD	[redacted]20[redacted] / 57	[redacted]20[redacted] / 314	258

M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted]20[redacted] / 315

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
MESALAZINE	1 g	QD	Y-M: 20[redacted]
LACTULOSE	20 mL	PRN	Y-M: 20[redacted]
MESALAZINE	1 g	BID	Y-M: 20[redacted]
MESALAZINE	1 g	QD	Y-M: 20[redacted]
MESALAZINE	3 g	QD	Y-M: 20[redacted]
AZATHIOPRINE	25 mg	BID	Y-M: 20[redacted]
METHYLPREDNISOLONE	20 mg	TID	Y-M: 20[redacted]
PREDNISONE	25 mg	QD	Y-M: 20[redacted]
PREDNISONE	5 mg	QD	Y-M: 20[redacted]
PREDNISOLONE	5 mg	QD	Y-M: 20[redacted]
MESALAZINE	1.5 g	QD	Y-M: 20[redacted]
PREDNISONE	5 mg	QD	Y-M: 20[redacted]
PARACETAMOL	1 g	PRN	Y-M: 20[redacted] / -275
ETHINYLESTRADIOL;LEVONORGESTREL	1 ug	QD	Y: 20[redacted]

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
LACTULOSE	20 mL	PRN	Y-M: 20[redacted]	ONGOING
MESALAZINE	1.5 g	QD	Y-M: 20[redacted]	ONGOING
PARACETAMOL	1 g	PRN	Y-M: 20[redacted] / -275	ONGOING
MECILLINAM	400 mg	TID	Y-M: 20[redacted] / 470	Y-M: 20[redacted] / 472
SULFAMETHOXAZOLE;TRIMETHOPRIM	2 OTHER: TABLET	BID	Y-M: 20[redacted] / 472	Y-M: 20[redacted] / 475
CLARITHROMYCIN	500 mg	QD	Y-M: 20[redacted] / 476	ONGOING
IPRATROPIUM	0.25 OTHER: MG/ML	PRN	Y-M: 20[redacted] / 477	ONGOING
SALBUTAMOL	1 OTHER: MG/ML	PRN	Y-M: 20[redacted] / 477	ONGOING
ETHINYLESTRADIOL;LEVONORGESTREL	1 ug	QD	Y: 20[redacted]	ONGOING

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

Event Description	COVID 19
Preferred term	COVID-19
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 781 / 467
Age at AE Onset	3[redacted]
Laboratory Testing	
[redacted]20[redacted] (RX DAY 476): Alanine Aminotransferase: 66 [10 - 45] U/L; Aspartate Aminotransferase: 74 [15 - 35] U/L; NPTST108-CRP: 60 [0 - 5] MG/L; NPTST294-SARS-COV-2: POSITIV [NOT REPORTED - NOT REPORTED] UNIT NOT REPORTED; [redacted]20[redacted] (RX DAY 477): NPTST142-FERRITIN: 1127 [10 - 170] UG/L; NPTST163-HAPTOGLOBIN: 2.9 [0.4 - 1.9] G/L; [redacted]20[redacted] (RX DAY 486): NPTST108-CRP: 2 [0 - 5] MG/L	
Microbiology	
[redacted]20[redacted] (RX DAY 476): SPUTUM NPTST294-SARS-COV-2: Positive-NO RELEVANT FINDINGS	
AE Stopped Initial Rx Day / Rx Day	835 / 521
Duration of AE	55 DAYS
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	COV 19
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:16:51

Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はノルウェーの 3[redacted] 歳女性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，COVID-19 の事象を発現した。関連する病歴は，潰瘍性大腸炎，アトピー性皮膚炎，現飲酒者（1 日 2 杯未満），非喫煙者及び喘息であった。

Event 1 の臨床経過：

投与781日後＊，被験者は COVID-19 を発現した。投与の約28ヵ月後＊，COVID-19 は消失した。

投与780日後＊，被験者は，発熱，咳嗽及び喘鳴を伴う呼吸器症状，頭痛，疲労，並びに若干の下痢を経験した。投与784日後＊，被験者は selexid を開始したが効果がなかったため，

bactrim を開始した。1 日後に発疹（非重篤）が発現したため，投与789日後＊ に bactrim を中止した。治験薬の投与は中止された。症状が常に悪化していたため，投与790 日後＊に被験者は入院した。被験者は，全身状態の悪化，呼吸困難及び疲労感があった。また，高熱，乾性咳嗽，肺の痛み，頭部及び頚部の痛みがあった。当初は尿路感染症が疑われたが，抗生物質の投与で変化がなく，症状が悪化したため，COVID-19 と診断された。血液ガスは I 型呼吸不全を示していた。被験者は，右側に減弱した肺音が確認され，X 線検査では両肺底部で感染の妥当性を示す密度が認められた。klacid が開始された。酸素飽和度は，1 L の酸素を投与して 93%であった。酸素を 2 L に増やしたところ，酸素飽和度は 95%に上昇した。被験者は，安静時には呼吸努力をしていなかったが，起床時には呼吸状態が悪化した。被験者はアトロベント及び ventoline による噴霧器での治療を受け，良好な効果を得た。投与800日後＊，被験者は退院した。

投与された薬剤は，klacid，selexid，bactrim，アトロベント及び ventoline であった。

The patient's past medications include:

MESALAZIN for ULCERATIVE COLITIS ([redacted])

MESALAZIN ENEMA for ULCERATIVE COLITIS ([redacted])

PREDNISONE for ULCERATIVE COLITIS ([redacted])

SOLU-MEDROL for ULCERATIVE COLITIS ([redacted])

AZATIOPRIN for ULCERATIVE COLITIS ([redacted])

PREDNISOLON for ULCERATIVE COLITIS ([redacted])

Causality for UPADACITINIB (Open Label)

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1) COVID-19 (10084268) (COVID-19 (10084268)) [v.23.1] [10084268]

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

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

Dechallenge: Yes

Rechallenge: No rechallenge was done, recurrence is not applicable

Alternative Etiology for UPADACITINIB (Open Label)

Event of COVID 19

- Investigator: COVID 19

- AbbVie: Event is more likely related to a pandemic outbreak that has spread worldwide. Additional risk factor includes pre-existing asthma.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] ALANINE AMINO TRANSFERASE:** 66 U/L (normal 10 to 45)

[redacted] **20[redacted] ASPARTATE AMINO TRANSFERASE:** 74 U/L (normal 15 to 35)

[redacted] **20[redacted] BLOOD GAS:** respiratory failure type 1, po2 8.2.

[redacted] **20[redacted] CRP:** 60 MG/L (normal 0 to 5)

[redacted] **20[redacted] CRP:** 2 MG/L (normal 0 to 5)

[redacted] **20[redacted] LUNG X-RAY:** Densities bibasally appropriate with infection

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

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

[redacted] **20[redacted] SPO2:** 93 %

[redacted] **20[redacted] SPO2:** 95 %

[redacted] **20[redacted] U-STIX:** Slightly 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
虫垂炎	X			X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 30 mg	3[redacted]	MALE	WHITE

Medical History	Onset Year
EXTENSIVE UC/PANCOLITIS	20[redacted]
OTHER: EARDRUM RUPTUR	20[redacted]
OTHER: GILBERTS SYNDROME	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	CURRENT	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 ABT-494 (IND)	45 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 53	53
M14-234 SS3 ABT-494 (MAIN)	15 mg	ORAL	QD	[redacted]20[redacted] / 54	[redacted]20[redacted] / 418	365
M14-533 ABT-494 (LTE)	30 mg	ORAL	QD	[redacted]20[redacted] / 419		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
SULFASALAZINE	1000 mg	BID	Y-M: 20[redacted]
MESALAZINE	4 g	QD	Y-M: 20[redacted]
MESALAZINE	1 g	QD	Y-M: 20[redacted]
BUDESONIDE	3 mg	QD	Y-M: 20[redacted]
BUDESONIDE	3 mg	QD	Y-M: 20[redacted]
BUDESONIDE	3 mg	QD	Y-M: 20[redacted]
BLINDED THERAPY	NOT REPORTED	NOT REPORTED	Y-M: 20[redacted]
FISH OIL	1 OTHER: CAPSEL	QD	Y: 20[redacted]
VITAMIN D NOS	20 ug	QD	Y: 20[redacted]

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
MESALAZINE	4 g	QD	Y-M: 20[redacted]	ONGOING
BUPIVACAINE	75 mg	OTHER: ONCE	Y-M: 20[redacted] / 520	Y-M: 20[redacted] / 520
DALTEPARIN	5000 IU	QD	Y-M: 20[redacted] / 520	Y-M: 20[redacted] / 520
DEXAMETHASONE	8 mg	OTHER: ONCE	Y-M: 20[redacted] / 520	Y-M: 20[redacted] / 520
FENTANYL	350 ug	PRN	Y-M: 20[redacted] / 520	Y-M: 20[redacted] / 520
GLYCOPYRRONIUM;NEOSTIGMINE	1 OTHER: ML	OTHER: ONCE	Y-M: 20[redacted] / 520	Y-M: 20[redacted] / 520
METRONIDAZOLE	1.5 g	OTHER: ONCE	Y-M: 20[redacted] / 520	Y-M: 20[redacted] / 520
ONDANSETRON	4 mg	OTHER: ONCE	Y-M: 20[redacted] / 520	Y-M: 20[redacted] / 520
PARACETAMOL	1000 mg	BID	Y-M: 20[redacted] / 520	Y-M: 20[redacted] / 520
PROPOFOL	1598 mg	OTHER: ONCE	Y-M: 20[redacted] / 520	Y-M: 20[redacted] / 520
REMIFENTANIL	3.59 mg	OTHER: ONCE	Y-M: 20[redacted] / 520	Y-M: 20[redacted] / 520
ROCURONIUM	140 mg	PRN	Y-M: 20[redacted] / 520	Y-M: 20[redacted] / 520
THIOPENTAL	600 mg	OTHER: ONCE	Y-M: 20[redacted] / 520	Y-M: 20[redacted] / 520
TRAMADOL	50 mg	TID	Y-M: 20[redacted] / 520	Y-M: 20[redacted] / 532
DALTEPARIN	5000 IU	OTHER: ONCE	Y-M: 20[redacted] / 521	Y-M: 20[redacted] / 521
FISH OIL	1 OTHER: CAPSEL	QD	Y: 20[redacted]	ONGOING
VITAMIN D NOS	20 ug	QD	Y: 20[redacted]	ONGOING

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

Event Description	ACUTE APPENDICITIS
Preferred term	虫垂炎
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 936 / 518

Age at AE Onset	4[redacted]

Laboratory Testing

[redacted]20[redacted] (RX DAY 519): Bilirubin: 74 [0 - 25] UMOL/L; NPTST108-CRP: 19 [0 - 5] MG/L; [redacted]20[redacted] (RX DAY 520): Bilirubin: 90 [0 - 25] UMOL/L; NPTST108-CRP: 29 [0 - 5] MG/L; [redacted]20[redacted] (RX DAY 521): Bilirubin: 130 [0 - 25] UMOL/L; NPTST108-CRP: 100 [0 - 5] MG/L

Microbiology

NOT REPORTED

AE Stopped Initial Rx Day / Rx Day	939 / 521
Duration of AE	4 DAYS
Severity	MILD
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	UNKNOWN AT THE MOMENT
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はノルウェーの 4[redacted] 歳男性であり，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，急性虫垂炎の事象を発現した。関連する病歴は，広範囲な潰瘍性大腸炎（全大腸炎型），ジルベール症候群，非喫煙者及び現飲酒者（1 日 2 杯未満）であった。

Event 1 の臨床経過：

投与936日後＊，被験者は急性虫垂炎を発現した。投与939日後＊，急性虫垂炎は消失した。

投与936日後＊，被験者は右下腹部の腹痛を発現し，その痛みには発現と消失の波があった。

投与937日後＊，被験者は右下腹部の中等度/重度の持続性の痛みのために入院した。被験者は腹部 CT 検査を受け，虫垂炎が確認された。投与938日後＊，被験者は虫垂切除術を受け，順調に経過した。投与939日後＊，被験者は退院した。

投与された薬剤は，ダルテパリン，フラジール，フラグミン，トラマドール及びレミフェンタニルであった。

The patient's past medications include:

SULFAZALAZIN for IBD-U ([redacted] 20[redacted] - [redacted] 20[redacted])

MESALAZIN for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

BUDESONID for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

MONGERSEN for IBD ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Blinded)

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1) Acute appendicitis (10000677) (Appendicitis (10003011)) [v.23.1] [10000677]

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 ACUTE APPENDICITIS

- Investigator: UNKNOWN AT THE MOMENT

- AbbVie: Event is common in the general population; lifetime incidence is 8.6 percent in males.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] BILIRUBIN:** 74 umol/L (normal 0 to 25)

[redacted] **20[redacted] BILIRUBIN:** 130 umol/L (normal 0 to 25)

[redacted] **20[redacted] C-REACTIVE PROTEIN:** 19 MG/L (normal 0 to 5)

[redacted] **20[redacted] C-REACTIVE PROTEIN:** 100 MG/L (normal 0 to 5)

[redacted] **20[redacted] CT ABDOMEN:** Appendicitis

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
潰瘍性大腸炎	X	X		

Treatment Group	Age at Induction Study Start	Sex	Race
Placebo	3[redacted]	FEMALE	WHITE

Medical History	Onset Year
EXTENSIVE UC/PANCOLITIS	20[redacted]
ULCERATIVE COLITIES	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	CURRENT	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS2 ABT-494 (IND)	45 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 62	62
M14-234 SS3 Placebo (MAIN)		ORAL	QD	[redacted]20[redacted] / 63	[redacted]20[redacted] / 426	364
M14-533 Placebo (LTE)		ORAL	QD	[redacted]20[redacted] / 427	[redacted]20[redacted] / 866	440

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
MESALAZINE	1.5 mg	QD	Y-M: 20[redacted]
BUDESONIDE	3 mg	QD	Y-M: 20[redacted]
MESALAZINE	2.4 g	BID	Y-M: 20[redacted]
PREDNISONE	5 mg	QD	Y-M: 20[redacted]
MESALAZINE	4.8 g	QD	Y-M: 20[redacted]
BUDESONIDE	3 mg	QD	Y-M: 20[redacted]
ETHINYLESTRADIOL;LEVONORGESTREL	100 ug	QD	Y: 20[redacted]

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
MESALAZINE	4.8 g	QD	Y-M: 20[redacted]	ONGOING
MESALAZINE	1 g	QD	Y-M: 20[redacted] / 318	ONGOING
PREDNISOLONE	31,25 mg	QD	Y-M: 20[redacted] / 329	Y-M: 20[redacted] / 346
ASCORBIC ACID;MACROGOL 3350;POTASSIUM;SODIUM CHLORIDE;SODIUM SULFATE	2 OTHER: DOSEBAGS	OTHER: ONCE	Y-M: 20[redacted] / 343	Y-M: 20[redacted] / 344
ALFENTANIL	0.5 mg	OTHER: TWICE	Y-M: 20[redacted] / 344	Y-M: 20[redacted] / 344
MIDAZOLAM	2.5 mg	OTHER: ONCE	Y-M: 20[redacted] / 344	Y-M: 20[redacted] / 344
PARACETAMOL	1000 mg	PRN	Y-M: 20[redacted] / 358	Y-M: 20[redacted] / 359
ALFENTANIL	0.5 mg	QD	Y-M: 20[redacted] / 359	Y-M: 20[redacted] / 359
METHYLPREDNISOLONE	20 mg	TID	Y-M: 20[redacted] / 359	Y-M: 20[redacted] / 363
MIDAZOLAM	2.5 mg	QD	Y-M: 20[redacted] / 359	Y-M: 20[redacted] / 359
DALTEPARIN	10000 IU	QD	Y-M: 20[redacted] / 360	Y-M: 20[redacted] / 360
PIPERACILLIN;TAZOBACTAM	2 g	QID	Y-M: 20[redacted] / 360	Y-M: 20[redacted] / 362
DALTEPARIN	5000 IU	QD	Y-M: 20[redacted] / 361	Y-M: 20[redacted] / 362
CALCIUM CARBONATE;COLECALCIFEROL	1000 mg	QD	Y-M: 20[redacted] / 363	Y-M: 20[redacted] / 432
PREDNISOLONE	40 mg	QD	Y-M: 20[redacted] / 363	Y-M: 20[redacted] / 432
ALFENTANIL	0.5 mg	OTHER: ONCE	Y-M: 20[redacted] / 441	Y-M: 20[redacted] / 441
ALFENTANIL	0.5 mg	QD	Y-M: 20[redacted] / 441	Y-M: 20[redacted] / 441
INFLIXIMAB	550 mg	PRN	Y-M: 20[redacted] / 441	ONGOING

INFLIXIMAB	550 mg	QD	Y-M: 20[redacted] / 441	Y-M: 20[redacted] / 441
IRON	1 g	QD	Y-M: 20[redacted] / 441	Y-M: 20[redacted] / 441
METHYLPREDNISOLONE	20 mg	OTHER: ONCE	Y-M: 20[redacted] / 441	Y-M: 20[redacted] / 441
METHYLPREDNISOLONE	20 mg	QD	Y-M: 20[redacted] / 441	Y-M: 20[redacted] / 441
MIDAZOLAM	2.5 mg	OTHER: ONCE	Y-M: 20[redacted] / 441	Y-M: 20[redacted] / 441
MIDAZOLAM	2.5 mg	QD	Y-M: 20[redacted] / 441	Y-M: 20[redacted] / 441
METHOTREXATE	25 mg	OTHER: ONCE PER WEEK	Y-M: 20[redacted] / 442	ONGOING
FOLIC ACID	1 mg	OTHER: 5 DAYS A WEEK	Y-M: 20[redacted] / 444	ONGOING
ETHINYLESTRADIOL;LEVONORGESTREL	100 ug	QD	Y: 20[redacted]	ONGOING

Event #1: Serious Adverse Event

Event Description	WORSENING ULCERATIVE COLITIES
Preferred term	潰瘍性大腸炎
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 740 / 314
Age at AE Onset	3[redacted]

Laboratory Testing

[redacted]20[redacted] (RX DAY 357): Leukocytes: 22.4 [3.5 - 8.8] 10*9/L; NPTST108-CRP: 40 [0 - 5] MG/L; Platelets: 732 [145 - 390] 10*9/L; [redacted]20[redacted] (RX DAY 358): NPTST071-CALPROTECTIN: 950 [0 - 50] MG/KG; [redacted]20[redacted] (RX DAY 359): Albumin: 36 [36 - 48] G/L; [redacted]20[redacted] (RX DAY 360): NPTST108-CRP: 68 [0 - 5] MG/L; [redacted]20[redacted] (RX DAY 363): Albumin: 34 [36 - 48] G/L; NPTST108-CRP: 6.7 [0 - 5] MG/L; [redacted]20[redacted] (RX DAY 366): Leukocytes: 17.0 [3.5 - 8.8] 10*9/L

Microbiology

[redacted]20[redacted] (RX DAY 358): STOOL NPTST216-MICROBIOLOGY: Negative; [redacted]20[redacted] (RX DAY 359): OTHER BIOPSY NPTST095-CMV-DNA: Negative

AE Stopped Initial Rx Day / Rx Day	798 / 372
Duration of AE	59 DAYS
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	WORSENING UC
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Event #2: Serious Adverse Event, AE Leading to Discontinuation of Study Drug

Event Description	WORSENING ULCERATIVE COLITIES
Preferred term	潰瘍性大腸炎
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 862 / 436
Age at AE Onset	3[redacted]
Laboratory Testing	
[redacted]20[redacted] (RX DAY 440): Leukocytes: 23.5 [3.5 - 8.8] 10^9/L; NPTST071-CALPROTECTIN: 1920 [0 - 50] MG/KG; NPTST108-CRP: 64 [0 - 5] MG/L	
Microbiology	
[redacted]20[redacted] (RX DAY 440): STOOL NPTST091-CLOSTRIDIUM DIFFICILE: Negative	
AE Stopped Initial Rx Day / Rx Day	ONGOING
Duration of AE	ONGOING
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	WORSENING ULCERATIVE COLITIES
Discontinued Study Drug Due to the Event	YES
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はノルウェーの 3[redacted] 歳女性であり，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，潰瘍性大腸炎の悪化の事象を発現した。関連する病歴は，潰瘍性大腸炎，非喫煙者及び現飲酒者（1 日 2 杯未満）であった。

Event 1 の臨床経過：

投与740日後＊，被験者は潰瘍性大腸炎の悪化を発現した。

投与783日後＊，被験者はゆるい便の増加を訴え，CRP（C 反応性蛋白）高値があり入院した。投与789日後＊，被験者は退院した。投与の約27ヵ月後＊に，潰瘍性大腸炎の悪化は消失した。

投与された薬剤は，ペンタサ，prednisolon unimedic，ソル・メドロール，プレドニゾロン，calcigran forte，paracet，ピペラシリン・タゾバクタム合剤及びフラグミンであった。

The patient's past medications include:

SALOFALK for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

ENTOCORT for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

PREDNISONE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

IRON CHEWABLE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

MODERNA COVID-19 VACCINE for PROPHYLAXIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Blinded)

---

1) Colitis ulcerative aggravated (10009901) (Colitis ulcerative (10009900)) [v.24.1] [10009901]

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 WORSENING ULCERATIVE COLITIS

- Investigator: Worsening UC

- AbbVie: The event is more likely related to the pre-existing ulcerative colitis.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] ALBUMIN:** 36 G/L (normal 36 to 48)

[redacted] 20[redacted] **ALBUMIN:** 34 G/L (normal 36 to 48)

[redacted] 20[redacted] **BIOPSY:** CMV-DNA negative

[redacted] 20[redacted] **CALPROTECTIN:** 950 mg/kg (normal 0 to 50)

[redacted] 20[redacted] **COLONOSCOPY:** Clear demarcation between normal and inflamed colonic mucosa was seen. Distance of demarcation from the anal verge: 60.

[redacted] 20[redacted] **CRP:** 40 MG/L (normal 0 to 5)

[redacted] 20[redacted] **CRP:** 68 MG/L (normal 0 to 5)

[redacted] 20[redacted] **CRP:** 6.7 MG/L (normal 0 to 5)

[redacted] 20[redacted] **PLATELET COUNT:** 732 X10**9/L (normal 145 to 390)

[redacted] 20[redacted] **STOOL TEST:** Microbiology - Negative

[redacted] 20[redacted] **WHITE BLOOD CELLS:** 22.4 X10**9/L (normal 3.5 to 8.8)

[redacted] 20[redacted] **WHITE BLOOD CELLS:** 17.0 X10**9/L (normal 3.5 to 8.8)

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はノルウェーの 3[redacted] 歳女性であり，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，潰瘍性大腸炎の悪化の事象を発現した。関連する病歴は，潰瘍性大腸炎，非喫煙者及び現飲酒者（1 日 2 杯未満）であった。

Event 2 の臨床経過：

投与862日後＊，被験者は潰瘍性大腸炎の悪化を発現した。

投与866日後＊，被験者は，ゆるい血便の増加及び CRP 検査高値があり入院した。被験者は結腸内視鏡検査で Mayo スコアは 3 と評価された。被験者はインフリキシマブ静注を開始し，投与868日後＊，被験者は退院した。

本事象により治験薬の投与は中止された。

投与された薬剤はソル・メドロールであった。

The patient's past medications include:

SALOFALK for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

ENTOCORT for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

PREDNISONE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

IRON CHEWABLE TABLET for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

MODERNA COVID-19 VACCINE for PROPHYLAXIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

PREDNISOLON UNIMEDIC for ULCERATIVE COLITIS RESCUE THERAPY ([redacted] 20[redacted] - [redacted] 20[redacted])

PARACET for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

SOLU-MEDROL for ULCERATIVE COLITIS RESCUE THERAPY ([redacted] 20[redacted] - [redacted] 20[redacted])

FRAGMIN for ULCERATIVE COLITIS RESCUE THERAPY ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

PIPERACILLIN/TAZOBACTAM for ULCERATIVE COLITIS RESCUE THERAPY ([redacted] 20[redacted] - [redacted] 20[redacted])

PREDNISOLON for ULCERATIVE COLITIS RESCUE THERAPY ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Blinded)

---

1) Colitis ulcerative aggravated (10009901) (Colitis ulcerative (10009900)) [v.24.1] [10009901]

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

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

Dechallenge: No

Alternative Etiology for UPADACITINIB (Blinded)

Event of WORSENING ULCERATIVE COLITIS

- Investigator: Worsening Ulcerative Colities

- AbbVie: Event more likely related to pre-existing ulcerative colitis.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] CALPROTECTIN:** 1920 mg/kg (normal 0 to 50)

[redacted] **20[redacted] COLONOSCOPY:** No normal mucosa (pancolitis) MAYO 3

[redacted] **20[redacted] CRP**: 64 MG/L (normal 0 to 5)

[redacted] **20[redacted] STOOL TEST:** CLOSTRIDIUM DIFFICILE- Negative

[redacted] **20[redacted] THORAX X-RAY:** Normal

[redacted] **20[redacted] WHITE BLOOD CELLS:** 23.5 X10**9/L (normal 3.5 to 8.8)

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
頭痛	X			

Treatment Group	Age at Induction Study Start	Sex	Race
Placebo	4[redacted]	MALE	WHITE

Medical History	Onset Year
ALLERGY	19[redacted]
FRACTURE RIGHT 5 METACARP	20[redacted]
HYDROCEPHALUS	20[redacted]
LEFT SIDED UC	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	CURRENT	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-675 Placebo (IND)		ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 60	60
M14-234 SS3 Placebo (MAIN)		ORAL	QD	[redacted]20[redacted] / 61	[redacted]20[redacted] / 416	356
M14-533 Placebo (LTE)		ORAL	QD	[redacted]20[redacted] / 417		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
MESALAZINE	1 g	QD	Y-M: 20[redacted]
MESALAZINE	1 g	QD	Y-M: 20[redacted]
BUDESONIDE	2 mg	QD	Y-M: 20[redacted]
OLSALAZINE	NOT REPORTED	NOT REPORTED	Y-M: 20[redacted]
MESALAZINE	2 g	QD	Y-M: 20[redacted]
MESALAZINE	3 g	QD	Y-M: 20[redacted]
PREDNISOLONE	31.25 mg	QD	Y-M: 20[redacted]
BUDESONIDE	2 mg	QD	Y-M: 20[redacted]
MESALAZINE	1.5 g	QD	Y-M: 20[redacted]
MESALAZINE	1 g	QD	Y-M: 20[redacted]
MESALAZINE	4.8 g	QD	Y-M: 20[redacted]
MESALAZINE	1 g	QD	Y-M: 20[redacted]
FEXOFENADINE	180 mg	QD	Y-M: 20[redacted]
BUDESONIDE	9 mg	QD	Y-M: 20[redacted]
BUDESONIDE;SODIUM CHLORIDE	2 mg	QD	Y-M: 20[redacted]
TRIAMCINOLONE	40 mg	PRN	Y: 19[redacted]

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
FEXOFENADINE	180 mg	QD	Y-M: 20[redacted]	Not reported
ELETRIPTAN	40 mg	PRN	Y-M: 20[redacted] / 388	Not reported
TRIAMCINOLONE	40 mg	PRN	Y: 19[redacted]	Not reported

Event #1: Serious Adverse Event

Event Description	HEADACHE
Preferred term	頭痛
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 800 / 384
Age at AE Onset	4[redacted]

Laboratory Testing

[redacted]20[redacted] (RX DAY 388): Alanine Aminotransferase: 42 [10 - 70] U/L; Aspartate Aminotransferase: 25 [15 - 45] U/L; Creatinine: 93 [60 - 105] UMOL/L; Erythrocytes: 229 [145 - 390] 10*9/L; Hemoglobin: 167 [134 - 170] G/L; Leukocytes: 6.0 [3.5 - 8.8] 10*9/L; NPTST108-CRP: 0.6 [0 - 5] MG/L; NPTST327-TROPONIN T: 6 [0 - 15] NG/L

Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	805 / 389
Duration of AE	6 DAYS
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	HYDROCEPHALUS
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はノルウェーの 4[redacted] 歳男性であり，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，頭痛の事象を発現した。関連する病歴は，潰瘍性大腸炎，水頭症，現煙草使用者（葉巻）及び現飲酒者（1 日 2 杯未満）であった。

Event 1 の臨床経過：

投与800日後＊，被験者は頭痛を発現した。投与805日後＊，頭痛は消失した。

投与800日後＊，被験者は頭痛があり，その重症度は上昇したが，悪心，頭部ふらふら感及び拍動性は伴わず，運動によって悪化しなかった。投与804日後＊，被験者は入院し，診断検査を受けた。投与805日後＊，被験者は退院した。

治験責任医師によると，投与の8年前＊に，被験者は頭痛があり，レルパックスを投与され，結果は良好であった。被験者の危険因子は水頭症であった。

投与された薬剤はレルパックスであった。

The patient's past medications include:

PENTASA for ULCERATIVE COLITIS ([redacted] 20[redacted] - 20[redacted])

PENTASA ENEMA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

DIPENTUM for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

ENTOCORT for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

PENTASA SACHET for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

PRED-CLYSMA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

SALOFALK GRANULATE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

SALOFALK ENEMA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

MEZAVANT for ULCERATIVE COLITIS ([redacted] 20[redacted] - 20[redacted])

CORTIMENT for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

ENTOCORT ENEMA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Blinded)

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1) Headache (10019211) (Headache (10019211)) [v.24.0] [10019211]

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 HEADACHE

- Investigator: Hydrocephalus

- AbbVie: Event is more likely related to pre-existing Hydrocephalus

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] ALANINE AMINO TRANSFERASE:** 42 U/L (normal 10 to 70)

[redacted] **20[redacted] ASPARTATE AMINO TRANSFERASE:** 25 U/L (normal 15 to 45)

[redacted] **20[redacted] CREATININE:** 93 MMOL/L (normal 60 to 105)

[redacted] **20[redacted] CRP:** 0.6 MG/L (normal 0 to 5.0)

[redacted] **20[redacted] CT CAPUT:** HYDROCEPHALUS WHERE THE HORN WIDTH MEASURES 70 MM. PREVIOUS PHOTOS ARE COMPARED AND NO CHANGES IN CONDITION. NO CHANGE IN VENTRICULAR SIZE.

[redacted] **20[redacted] HEMOGLOBIN:** 16.7 G/DL (normal 13.4 to 17.0)

[redacted] **20[redacted] RED BLOOD CELLS:** 229 X10**9/L (normal 145 to 390)

[redacted] **20[redacted] TROPONIN:** 6 NG/L (normal 0 to 15)

[redacted] **20[redacted] WHITE BLOOD CELLS:** 6.0 X10**9/L (normal 3.5 to 8.8)

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
肛門膿瘍	X			X
血中クレアチンホスホキナーゼ増加				X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 30 mg	1[redacted]	MALE	WHITE

Medical History	Onset Year
EXTENSIVE UC/PANCOLITIS	20[redacted]
ULCERATIVE COLITIES	20[redacted]
YERSINIA INFECTION	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	FORMER	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-675 ABT-494 (IND)	45 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 56	56
M14-234 SS3 ABT-494 (MAIN)	30 mg	ORAL	QD	[redacted]20[redacted] / 57	[redacted]20[redacted] / 419	363
M14-533 ABT-494 (LTE)	30 mg	ORAL	QD	[redacted]20[redacted] / 420		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
MESALAZINE	4 g	QD	Y-M: 20[redacted]
PREDNISOLONE	5 mg	QD	Y-M: 20[redacted]
INFLIXIMAB	600 mg	PRN	Y-M: 20[redacted]
MESALAZINE	1 g	QD	Y-M: 20[redacted]
METHOTREXATE	25 mg	1 time per week	Y-M: 20[redacted]
AMPICILLIN	2 g	QID	Y-M: 20[redacted]
CIPROFLOXACIN	500 mg	BID	Y-M: 20[redacted]
GENTAMICIN	360 mg	QD	Y-M: 20[redacted]
MESALAZINE	2.4 g	QD	Y-M: 20[redacted]
METHOTREXATE	10 mg	1 time per week	Y-M: 20[redacted]
METHYLPREDNISOLONE	10 mg	BID	Y-M: 20[redacted]
METRONIDAZOLE	450 mg	TID	Y-M: 20[redacted]
SULFAMETHOXAZOLE;TRIMETHOPRIM	2 OTHER: TABLET	BID	Y-M: 20[redacted]
PREDNISOLONE	10 mg	QD	Y-M: 20[redacted]
VEDOLIZUMAB	300 mg	OTHER: EVERY 4 WEEKS	Y-M: 20[redacted]
MESALAZINE	1 g	QD	Y-M: 20[redacted]
MESALAZINE	4 g	QD	Y-M: 20[redacted]

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
MESALAZINE	1 g	QD	Y-M: 20[redacted] / 61	ONGOING
MORPHINE	UNK mg	PRN	Y-M: 20[redacted] / 234	Y-M: 20[redacted] / 235
TRAMADOL	50 mg	PRN	Y-M: 20[redacted] / 235	Y-M: 20[redacted] / 237
DOCUSATE;SORBITOL	360 OTHER: ML	OTHER: ONCE	Y-M: 20[redacted] /345	Y-M: 20[redacted] / 345

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

Event Description	PERIANAL ABSCESS
Preferred term	肛門膿瘍
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 624 / 205
Age at AE Onset	2[redacted]

Laboratory Testing

NOT REPORTED

Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	NOT REPORTED
Duration of AE	NOT REPORTED
Severity	MILD
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	CAUSE OF EVENT IS PATEINT ULCERATIVE COLITIES, AND THERE ARE NO KNOWN RISK FACTORS
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION, IMPORTANT MEDICAL EVENT REQUIRING MEDICAL OR SURGICAL INTERVENTION

Event #2: Event of Interest - Creatine Phosphokinase (CPK) Elevation

Event Description	INCREASED CREATINE PHOSPHOKINASE DUE TO HEAVY WEIGHT LIFTING/EXERCISE
Preferred term	血中クレアチンホスホキナーゼ増加
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 839 / 420
Age at AE Onset	2[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	ONGOING
Duration of AE	ONGOING
Severity	MILD
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]:16:51

Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はノルウェーの 2[redacted] 歳男性であり，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，肛門周囲膿瘍の事象を発現した。関連する病歴は，潰瘍性大腸炎，エルシニア感染，非喫煙者及び元飲酒者（1 日 2 杯未満）であった。

Event 1 の臨床経過：

投与の約33ヵ月後＊，被験者は肛門周囲膿瘍を発現した。

投与653日後＊，被験者は発熱，膿瘍部周辺の局所的な痛み，及び腫脹のために入院した。被験者は全般的に良好な状態であった。投与654日後＊，被験者は肛門周囲膿瘍の切開手術を受けた。同日，被験者は良好な状態で退院した。

投与された薬剤は，トラマドール及びモルヒネであった。

The patient's past medications include:

PREDNISOLON for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

INFLIXIMAB for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

METEX for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

ASACOL for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

SOLU-MEDROL for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

ENTYVIO for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Blinded)

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1) Perianal abscess (10034447) (Anal abscess (10048946)) [v.24.0] [10034447]

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 PERIANAL ABSCESS

- Investigator: CAUSE OF EVENT IS PATEINT ULCERATIVE COLITIES, AND THERE ARE NO KNOWN RISK FACTORS.

- AbbVie: Event more likely related to pre-existing ulcerative colitis.

NON SERIOUS EVENTS AND **OTHER AREAS OF SAFETY INTEREST

Blood creatine phosphokinase increased: Muscle pain, related to exercise of weight training.

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	X			X
好中球減少症				X
トランスアミナーゼ上昇				X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 30 mg	3[redacted]	FEMALE	WHITE

Medical History	Onset Year
HAY FEVER	20[redacted]
HEADACHE	20[redacted]
LEFT SIDED UC	20[redacted]
MENSTRUAL PAIN	19[redacted]
NEPHROLITHIASIS	20[redacted]

Prior Procedures	Procedure Year
PRIOR PROCEDURES: SIGMOIDOSCOPY	20[redacted]
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	NEVER	

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS2 Placebo (IND)		ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 53	53

M14-234 SS2 ABT-494 (OL)	45 mg	ORAL	QD	[redacted]20[redacted] / 54	[redacted]20[redacted] / 109	56
M14-234 SS3 ABT-494 (MAIN)	15 mg	ORAL	QD	[redacted]20[redacted] / 110	[redacted]20[redacted] / 473	364
M14-533 ABT-494 (LTE)	30 mg	ORAL	QD	[redacted]20[redacted] / 474		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
MESALAZINE	2 g	BID	Y-M: 20[redacted]
PREDNISONE	2.5 mg	QD	Y-M: 20[redacted]
MESALAZINE	1 g	QD	Y-M: 20[redacted]
MESALAZINE	4 g	QD	Y-M: 20[redacted]
METHYLPREDNISOLONE	4 mg	QD	Y-M: 20[redacted]
MESALAZINE	2 g	QD	Y-M: 20[redacted]
MESALAZINE	8 OTHER: TABLET	QD	Y-M: 20[redacted] / -335

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
MESALAZINE	8 OTHER: TABLET	QD	Y-M: 20[redacted] / -335	Not reported
VITAMIN D NOS	2 g	QD	Y-M: 20[redacted] / 2	Not reported
DEXAMETHASONE	NOT REPORTED	NOT REPORTED	Y-M: 20[redacted] / 110	Y-M: 20[redacted] / 113
ENOXAPARIN	NOT REPORTED	NOT REPORTED	Y-M: 20[redacted] / 110	Y-M: 20[redacted] / 113
METAMIZOLE	NOT REPORTED	NOT REPORTED	Y-M: 20[redacted] / 110	Y-M: 20[redacted] / 113
PARACETAMOL	NOT REPORTED	NOT REPORTED	Y-M: 20[redacted] / 110	Y-M: 20[redacted] / 113
BUDESONIDE	400 OTHER: MCG	BID	Y-M: 20[redacted] / 113	Not reported
DEXAMETHASONE	8 mg	QD	Y-M: 20[redacted] / 114	Y-M: 20[redacted] / 116

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

Event Description	COVID-19 INFECTION
Preferred term	COVID-19
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 572 / 99
Age at AE Onset	3[redacted]

Laboratory Testing

[redacted]20[redacted] (RX DAY 110): Basophils: 0 [0 - 0.2] 10^9/L; Blood Urea Nitrogen: 3.319821 [2.820063 - 8.317401] MMOL/L; Creatine Kinase MB: 0.34 [0.1 - 2.88] UG/L; Creatinine: 58.346152 [44.20163 - 79.562934] UMOL/L; Eosinophils: 0.01 [0 - 0.5] 10^9/L; Erythrocytes: 4.16 [3.9 - 5.1] 10^12/L; Glucose: 5.273165 [3.88549 - 5.495193]

MMOL/L; Hematocrit: 0.371 [0.34 - 0.43] FRACTION OF 1; Hemoglobin: 125 [123 - 153] G/L; Leukocytes: 4.91 [4 - 10] 10^9/L; Lymphocytes: 0.54 [0.9 - 5] 10^9/L; Monocytes: 0.3 [0.2 - 1.2] 10^9/L; NPTST037-APTT: 30.3 [26 - 40] SEC; NPTST038-APTT RATIO: 1.04 [0.75 - 1.25] UNIT NOT REPORTED; NPTST108-CRP: 73.0 [0 - 5] MG/L; NPTST122-EGFR CKD-EPI: >60.0 [60 - NOT REPORTED] mL/min/1.73m2; NPTST183-IMMATURE GRANULOCYTES: 0.03 [0 - 0.09] 10^3/UL; NPTST189-INR: 1.07 [0.75 - 1.3] UNIT NOT REPORTED; NPTST211-MCH: 30.0 [28 - 33] PG; NPTST212-MCHC: 33.7 [33 - 36] G/DL; NPTST213-MCV: 89.2 [80 - 96] FL; NPTST220-MPV: 9.1 [8 - 12] FL; NPTST236-P-LCR: 17.8 [13 - 47] %; NPTST245-PCT: 0.27 [NOT REPORTED - NOT REPORTED] %; NPTST246-PDW: 9.7 [9 - 16] FL; NPTST261-PROTHROMBIN INDEX: 94.2 [75 - 110] %; NPTST263-PROTHROMBIN TIME: 13.7 [11.2 - 17.2] SEC; NPTST275-RDW-CV: 12.0 [11.5 - 14.5] %; NPTST276-RDW-SD: 39.9 [37 - 50] FL; NPTST328-TROPONIN T HS: 0.004 [0 - 0.014] NG/ML; NPTST334-UREA: 20 [17 - 50] MG/DL; Neutrophils: 4.06 [1.9 - 8] 10^9/L; Platelets: 292 [130 - 400] 10^9/L; Potassium: 4.01 [3.7 - 5.4] MMOL/L; Sodium: 140 [133 - 145] MMOL/L; [redacted]20[redacted] (RX DAY 112): Alanine Aminotransferase: 104 [5 - 31] U/L; Aspartate Aminotransferase: 78 [5 - 31] U/L; Basophils: 0 [0 - 0.2] 10^9/L; Blood Urea Nitrogen: 3.998064 [2.820063 - 8.317401] MMOL/L; Creatinine: 50.389858 [44.20163 - 79.562934] UMOL/L; Eosinophils: 0 [0 - 0.5] 10^9/L; Erythrocytes: 3.73 [3.9 - 5.1] 10^12/L; Glucose: 8.32605 [3.88549 - 5.495193] MMOL/L; Hematocrit: 0.324 [0.34 - 0.43] FRACTION OF 1; Hemoglobin: 114 [123 - 153] G/L; Leukocytes: 4.45 [4 - 10] 10^9/L; Lymphocytes: 0.55 [0.9 - 5] 10^9/L; Monocytes: 0.19 [0.2 - 1.2] 10^9/L; NPTST108-CRP: 46.2 [0 - 5] MG/L; NPTST122-EGFR CKD-EPI: >60.0 [60 - NOT REPORTED] ML/MIN/1.73M^2; NPTST183-IMMATURE GRANULOCYTES: 0.02 [0 - 0.09] 10^3/UL; NPTST211-MCH: 30.6 [28 - 33] PG; NPTST212-MCHC: 35.2 [33 - 36] G/DL; NPTST213-MCV: 86.9 [80 - 96] FL; NPTST220-MPV: 9.8 [8 - 12] FL; NPTST236-P-LCR: 23.1 [13 - 47] %; NPTST245-PCT: 0.32 [NOT REPORTED - NOT REPORTED] %; NPTST246-PDW: 11.0 [9 - 16] FL; NPTST275-RDW-CV: 11.6 [11.5 - 14.5] %; NPTST276-RDW-SD: 38.0 [37 - 50] FL; NPTST331-TSH: 0.167 [0.27 - 4.2] UIU/ML; NPTST334-UREA: 24 [17 - 50] MG/DL; Neutrophils: 3.71 [1.9 - 8] 10^9/L; Platelets: 329 [130 - 400] 10^9/L; Potassium: 4.66 [3.7 - 5.4] MMOL/L; Sodium: 139 [133 - 145] MMOL/L

Microbiology

[redacted]20[redacted] (RX DAY 110): OTHER UNKNOWN NPTST292-SARS COV 2 RNA REAL TIME PCR: Positive-SARS-COV-2; [redacted]20[redacted] (RX DAY 112): URINE NPTST338-URINE CULTURE: Negative; [redacted]20[redacted] (RX DAY 113): OTHER UNKNOWN NPTST295-SARS-COV-2 ANTIGEN TEST: Negative

AE Stopped Initial Rx Day / Rx Day	586 / 113
Duration of AE	15 DAYS
Severity	MODERATE
Relation to Study Drug by Investigator	REASONABLE POSSIBILITY
Investigator Alternative Etiology	SARS-COV-2 INFECTION
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Event #2: Event of Interest - Hepatic Disorder

Event Description	ELEVATED TRANSAMINASES
Preferred term	トランスアミナーゼ上昇
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 585 / 112
Age at AE Onset	3[redacted]
Laboratory Testing	

NOT APPLICABLE

Microbiology

NOT APPLICABLE

AE Stopped Initial Rx Day / Rx Day	606 / 133
Duration of AE	22 DAYS
Severity	MILD
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 - Neutropenia

Event Description	NEUTROPENIA
Preferred term	好中球減少症
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 606 / 133
Age at AE Onset	3[redacted]
Laboratory Testing	

NOT APPLICABLE

Microbiology

NOT APPLICABLE

AE Stopped Initial Rx Day / Rx Day	642 / 169
Duration of AE	37 DAYS
Severity	MODERATE
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]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はポーランドの 3[redacted] 歳女性であり，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，COVID-19 の感染症の事象を発現した。関連す

る病歴は，潰瘍性大腸炎，非喫煙者及び非飲酒者であった。

Event 1 の臨床経過：

投与572日後＊，被験者は COVID-19 の感染症を発現した。投与586日後＊，COVID-19 の感染症は消失した。

投与572日後＊，被験者は重度のインフルエンザ様症状及び持続的な咳嗽を経験し始めた。投与583日後＊，被験者は入院した。同日，被験者はCOVID-19 の検査で陽性となり，胸部CT検査ですりガラス状陰影が認められた。被験者はステロイド薬及び非ステロイド性抗炎症薬での治療を受けた。被験者は呼吸不全の徴候を経験せず，被験者の全身状態は徐々に改善した。投与586日後＊，被験者は COVID-19 の検査で陰性となり，退院した。

投与された薬剤は，pyralgina，paracetamol，dexaven，クレキサン，デキサメタゾン及びパルミコートタービュヘイラーであった。

The patient's past medications include:

ASAMAX for ULCERATIVE COLITIS ([redacted])

ENCORTON for ULCERATIVE COLITIS ([redacted])

METYPRED for ULCERATIVE COLITIS ([redacted])

PENTASA for ULCERATIVE COLITIS ([redacted])

Causality for UPADACITINIB (Blinded)

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1) COVID-19 (10084268) (COVID-19 (10084268)) [v.23.1] [10084268]

Causality as per reporter (Drug/Vaccine): 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 INFECTION

- Investigator: SARS-COV-2 infection.

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

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] ALT:** 104 U/L (normal 5 to 31)

[redacted] **20[redacted] AST:** 78 U/L (normal 5 to 31)

[redacted] **20[redacted] BMI:** 27 kg/m2

[redacted] **20[redacted] BUN:** 9.3 mg/dL (normal 7.9 to 23.3)

[redacted] **20[redacted] CHEST CT:** GROUND-GLASS OPACITIES, SCATTERED, PERIPHERALLY LOCATED, WITHOUT SIGNS OF ENLARGED MEDIASTINAL LYMPH NODES, NO FEATURES OF FLUID IN THE PLEURAL CAVITIES, MAY CORRESPOND TO INFLAMMATORY CHANGES IN THE COURSE OF COVID WITH AN INTENSITY OF ABOUT 15-18/40 POINTS ON THE CT SS SCALE

[redacted] **20[redacted] CKMB:** 0.34 NG/ML (normal 0.10 to 2.88)

[redacted] **20[redacted] CREATININE:** 0.66 mg/dL (normal 0.50 to 0.90)

[redacted] **20[redacted] CRP:** 73.0 MG/L (normal 0.0 to 5.0)

[redacted] **20[redacted] CRP:** 46.2 MG/L (normal 0.0 to 5.0)

[redacted] **20[redacted] GLUCOSE:** 95 mg/dL (normal 70 to 99)

[redacted] **20[redacted] HEMATOCRIT:** 37.1 % (normal 34.0 to 43.0)

[redacted] **20[redacted] HEMOGLOBIN:** 12.5 G/DL (normal 12.3 to 15.3)

[redacted] **20[redacted] NASOPHARYNGEAL SWAB SARS-COV-2:** Positive

[redacted] **20[redacted] NASOPHARYNGEAL SWAB SARS-COV-2:** Negative

[redacted] **20[redacted] PLT:** 292 X10**3/MCL (normal 130 to 400)

[redacted] **20[redacted] POTASSIUM:** 4.0 MMOL/L (normal 3.7 to 5.4)

[redacted] **20[redacted] SODIUM:** 140 MMOL/L (normal 133 to 145)

[redacted] **20[redacted] TROPONIN T:** 0.004 NG/ML (normal 0.000 to 0.014)

[redacted] **20[redacted] URINE CULTURE:** Negative

[redacted] **20[redacted] WBC:** 4.91 X10**3/MCL (normal 4.00 to 10.00)

NON SERIOUS EVENTS AND **OTHER AREAS OF SAFETY INTEREST

Transaminases increased: Intermittent.

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
静脈瘤	X			

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	2[redacted]	FEMALE	WHITE

Medical History	Onset Year
ANEMIA: IRON DEFICIENCY ANEMIA	20[redacted]
EXTENSIVE UC/PANCOLITIS	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	NEVER	

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 ABT-494 (IND)	7.5 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 54	54
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted]20[redacted] / 55		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
INFLIXIMAB	5 mg/kg	OTHER: 8/8 WEEKS	Y-M: 20[redacted]

VEDOLIZUMAB	300 mg	OTHER: 8/8 WEEKS	Y-M: 20[redacted]
BUDESONIDE	2 mg	QD	Y-M: 20[redacted] / -296
MESALAZINE	4 g	QD	Y-M: 20[redacted] / -296
MESALAZINE	3 mg	QD	Y-M: 20[redacted] / -143
DESOGESTREL	75 ug	QD	Y: 20[redacted]

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
MESALAZINE	3 mg	QD	Y-M: 20[redacted] / -143	ONGOING
ETHINYLESTRADIOL;GESTODENE	0.105 mg	QD	Y-M: 20[redacted] / 599	Y-M: 20[redacted] / 1083
ASCORBIC ACID;MACROGOL 3350;POTASSIUM;SODIUM CHLORIDE;SODIUM SULFATE	2 OTHER: SACHETS	QD	Y-M: 20[redacted] / 1011	Y-M: 20[redacted] / 1012
PROPOFOL	170 mg	QD	Y-M: 20[redacted] / 1012	Y-M: 20[redacted] / 1012
ETHINYLESTRADIOL;ETONOGESTREL	0,120 + 0,015 mg	OTHER: ONGOING	Y-M: 20[redacted] / 1091	ONGOING
RIVAROXABAN	10 mg	QD	Y-M: 20[redacted] / 1120	Y-M: 20[redacted] / 1130

Event #1: Serious Adverse Event

Event Description	LOWER LIMBS VARICOSE VEINS
Preferred term	静脈瘤
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 1080 / 1026
Age at AE Onset	2[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	1174 / 1120
Duration of AE	95 DAYS
Severity	MILD
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	LOWER LIMBS INSUFFICIENCY
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はポルトガルの 2[redacted] 歳女性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，下肢静脈瘤の事象を発現した。関連する病歴は，潰瘍性大腸炎，鉄欠乏性貧血，非喫煙者，非飲酒者及び母方の静脈瘤の家族歴であった。家族歴は，母方の静脈瘤であった。

Event 1 の臨床経過：

投与1080日後＊，被験者は下肢静脈瘤を発現した。投与1174日後＊，下肢静脈瘤は消失した。

被験者は，夏場の下肢の痛み及び静脈瘤の存在を訴えていた。

投与1173日後＊，被験者は入院した。被験者は左大伏在静脈の結紮術及びストリッピング手術を受けた。投与1174日後＊，被験者は退院した。

投与された薬剤は，イグザレルトであった。

The patient's past medications include:

INFLIXIMAB for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

VEDOLIZUMAB for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

BUDESONIDA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Open Label)

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1) Varicose veins of lower extremities (10047013) (Varicose vein (10046996)) [v.24.0] [10047013]

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 (Open Label)

Event of LOWER LIMBS VARICOSE VEINS

- Investigator: Lower limbs insufficiency

- AbbVie: Risk factors include maternal history of varicose veins and female gender. Additionally, lower limb varicose veins are common in the general population with reported prevalence ranging between 10% and 30% worldwide.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] BODY WEIGHT:** 5[redacted] KG

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
潰瘍性大腸炎	X			

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	5[redacted]	FEMALE	WHITE

Medical History	Onset Year
ADJUSTABLE UMBILICAL HERNIA	20[redacted]
CHRONIC ANAL FISSURE	20[redacted]
CHRONIC ANEMIA	20[redacted]
CHRONIC CHOLECYSTITIS	20[redacted]
CHRONIC CYSTITIS	19[redacted]
CHRONIC GASTRITIS	20[redacted]
CHRONIC PANCREATITIS	20[redacted]
DUODENAL ULCER	20[redacted]
EXTENSIVE UC/PANCOLITIS	20[redacted]
HEMANGIOMA OF THE RIGHT LOBE OF THE LIVER	20[redacted]
HYPERPLASTIC POLYP OF THE STOMACH	20[redacted]
HYPERTENSION	20[redacted]
NON-ALCOHOLIC FATTY LIVER DISEASE	20[redacted]
ULCERATIVE COLITIS	20[redacted]

Prior Procedures	Procedure Year
PRIOR PROCEDURES: COLONOSCOPY WITH BIOPSY	20[redacted]
PRIOR PROCEDURES: COLONOSCOPY WITH BIOPSY	20[redacted]
PRIOR PROCEDURES: MAYO UMBILICAL RING PLASTIC	20[redacted]
PRIOR PROCEDURES: RECTOROMANOSCOPY	20[redacted]
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	NEVER			

CIGARS	NEVER
PIPES	NEVER

Alcohol Use	Status	Number/Day
ALCOHOL	NEVER	

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS2 ABT-494 (IND)	45 mg	ORAL	QD	[redacted] / 1	[redacted] / 37	37
M14-234 SS3 ABT-494 (MAIN)	15 mg	ORAL	QD	[redacted] / 57	[redacted] / 307	251
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted] / 308		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
MESALAZINE	3.0 g	TID	Y-M: [redacted]
METRONIDAZOLE	250 mg	TID	Y-M: [redacted]
PREDNISOLONE	180 mg	QD	Y-M: [redacted]
PREDNISOLONE	5 mg	QD	Y-M: [redacted]
MESALAZINE	2.0 g	TID	Y-M: [redacted]
CIPROFLOXACIN	500 mg	BID	Y-M: [redacted]
HYDROCORTISONE	125 mg	QD	Y-M: [redacted]
MESALAZINE	3.0 g	TID	Y-M: [redacted]
METRONIDAZOLE	250 mg	TID	Y-M: [redacted]
PREDNISOLONE	5 mg	QD	Y-M: [redacted]
PREDNISOLONE	90 mg	QD	Y-M: [redacted]
CIPROFLOXACIN	500 mg	BID	Y-M: [redacted]
MESALAZINE	3.0 g	TID	Y-M: [redacted]
MESALAZINE	6.0 g	TID	Y-M: [redacted]
METRONIDAZOLE	250 mg	TID	Y-M: [redacted]
MESALAZINE	3.6 g	QD	Y-M: [redacted]
METRONIDAZOLE	250 mg	TID	Y-M: [redacted]
HYDROCORTISONE	125 mg	QD	Y-M: [redacted]
MERCAPTOPURINE	125 mg	QD	Y-M: [redacted]

METRONIDAZOLE	250 mg	TID	Y-M: 20[redacted]
PREDNISOLONE	5 mg	QD	Y-M: 20[redacted]
PREDNISOLONE	60 mg	QD	Y-M: 20[redacted]
MERCAPTOPURINE	75 mg	QD	Y-M: 20[redacted]
MERCAPTOPURINE	100 mg	QD	Y-M: 20[redacted]
PREDNISOLONE	5 mg	QD	Y-M: 20[redacted]
PREDNISOLONE	60 mg	QD	Y-M: 20[redacted]
CIPROFLOXACIN	500 mg	BID	Y-M: 20[redacted]
HYDROCORTISONE	125 mg	QD	Y-M: 20[redacted]
METRONIDAZOLE	250 mg	TID	Y-M: 20[redacted]
MESALAZINE	1.0 g	QD	Y-M: 20[redacted]
CIPROFLOXACIN	500 mg	BID	Y-M: 20[redacted]
METRONIDAZOLE	500 mg	TID	Y-M: 20[redacted]
PREDNISOLONE	120 mg	QD	Y-M: 20[redacted]
PREDNISOLONE	5 mg	QD	Y-M: 20[redacted]
MESALAZINE	1.0 g	QID	Y-M: 20[redacted] / -22

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
MESALAZINE	1.0 g	QID	Y-M: 20[redacted] / -22	Not reported
METRONIDAZOLE	500 mg	TID	Y-M: 20[redacted] / 15	Y-M: 20[redacted] / 65
PREDNISOLONE	70 mg	QD	Y-M: 20[redacted] / 29	Y-M: 20[redacted] / 35
CIPROFLOXACIN	500 mg	BID	Y-M: 20[redacted] / 5	Y-M: 20[redacted] / 65
DROTAVERINE	2.0 mL	BID	Y-M: 20[redacted] / 5	Y-M: 20[redacted] / 65
ETAMSILATE	2.0 mL	BID	Y-M: 20[redacted] / 5	Y-M: 20[redacted] / 65
HYDROCORTISONE	125 mg	QD	Y-M: 20[redacted] / 5	Y-M: 20[redacted] / 65
OMEPRAZOLE	20 mg	BID	Y-M: 20[redacted] / 5	Y-M: 20[redacted] / 65
POTASSIUM	250 mL	QD	Y-M: 20[redacted] / 5	Y-M: 20[redacted] / 65
PREDNISOLONE	65 mg	QD	Y-M: 20[redacted] / 36	Y-M: 20[redacted] / 42
PREDNISOLONE	60 mg	QD	Y-M: 20[redacted] / 43	Y-M: 20[redacted] / 49
PREDNISOLONE	55 mg	QD	Y-M: 20[redacted] / 50	Y-M: 20[redacted] / 56
PREDNISOLONE	50 mg	QD	Y-M: 20[redacted] / 57	Y-M: 20[redacted] / 63
PREDNISOLONE	45 mg	QD	Y-M: 20[redacted] / 64	Y-M: 20[redacted] / 70
PREDNISOLONE	40 mg	QD	Y-M: 20[redacted] / 71	Y-M: 20[redacted] / 77
PREDNISOLONE	35 mg	QD	Y-M: 20[redacted] / 78	Y-M: 20[redacted] / 84
PREDNISOLONE	30 mg	QD	Y-M: 20[redacted] / 85	Y-M: 20[redacted] / 91

PREDNISOLONE	25 mg	QD	Y-M: 20[redacted] / 92	Y-M: 20[redacted] / 98
PREDNISOLONE	15 mg	QD	Y-M: 20[redacted] / 106	Y-M: 20[redacted] / 112
PREDNISOLONE	10 mg	QD	Y-M: 20[redacted] / 113	Y-M: 20[redacted] / 119
PREDNISOLONE	5 mg	QD	Y-M: 20[redacted] / 120	Y-M: 20[redacted] / 126
PREDNISOLONE	20 mg	QD	Y-M: 20[redacted] / 99	Y-M: 20[redacted] / 105

Event #1: Serious Adverse Event

Event Description	ULCERATIVE COLITIS WORSENING
Preferred term	潰瘍性大腸炎
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 341 / 34
Age at AE Onset	5[redacted]

Laboratory Testing

[redacted]20[redacted] (RX DAY 36): Hemoglobin: 107 [117 - 160] G/L; Lymphocytes/Leukocytes: 29.8 [20 - 44] %; Monocytes/Leukocytes: 10,4 [2 - 9] %; NPTST133-ERYTHROCYTE SEDIMENTATION RATE: 38 [NOT REPORTED - NOT REPORTED] mm/h; Neutrophils/Leukocytes: 59,2 [50 - 70] %

Microbiology

NOT REPORTED

AE Stopped Initial Rx Day / Rx Day	434 / 127
Duration of AE	94 DAYS
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	ULCERATIVE COLITIS WORSENING
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はロシアの 6[redacted] 歳女性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，潰瘍性大腸炎の悪化の事象を発現した。関連する病歴は，慢性膀胱炎，慢性裂肛，慢性胆嚢炎，慢性胃炎，高血圧，潰瘍性大腸炎，十二指腸潰瘍，胃の

過形成性ポリープ，非アルコール性脂肪性肝疾患，慢性膵炎，非喫煙者及び禁酒であった。

Event 1 の臨床経過：

潰瘍性大腸炎の悪化の先行事象（投与340日後＊に消失）は非重篤と判断された。

投与341日後＊，被験者は潰瘍性大腸炎の悪化を発現した。投与434日後＊，潰瘍性大腸炎の悪化は消失した。

投与314日後＊，被験者は，健康状態の低下，全身脱力，直腸出血，腹痛及び排便回数増加（1 日 7–9 回）があり，被験者の潰瘍性大腸炎に関連して入院した。被験者は腹部超音波検査及び胸部 X 線検査を受け，抗生物質及びステロイドによる治療を受けた。投与349日後＊，被験者は退院した。

投与された薬剤は，シプロフロキサシン，メトロニダゾール，プレドニゾロン，ヒドロコルチゾン，オメプラゾール，drotaverinum，エタンシラート，塩化カリウム及び salofalk（メサラジン）であった。

The patient's past medications include:

METRONIDAZOLE for ULCERATIVE COLITIS ([redacted])

PREDNISOLON for ULCERATIVE COLITIS ([redacted])

SALOFALK for ULCERATIVE COLITIS ([redacted])

CIPROFLOXACIN for ULCERATIVE COLITIS ([redacted])

HYDROCORTISONUM for ULCERATIVE COLITIS ([redacted])

METROGYL for ULCERATIVE COLITIS ([redacted])

MEZAVANT for ULCERATIVE COLITIS ([redacted])

MERCAPTOPURINE for ULCERATIVE COLITIS ([redacted])

PENTASA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Open Label)

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1) Colitis ulcerative aggravated (10009901) (Colitis ulcerative (10009900)) [v.24.0] [10009901]

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 (Open Label)

Event of ULCERATIVE COLITIS WORSENING

- Investigator: Ulcerative colitis worsening.

- AbbVie: The event is more likely related to the pre-existing ulcerative colitis

Relevant Laboratory & Other Diagnostic Tests

[redacted] 20[redacted] **ABDOMINAL ULTRASOUND:** DIFFUSE CHANGES IN THE PARENCHYMA OF THE PANCREAS AND LIVER BY THE TYPE OF LIPODYSTROPHY; FOCAL FORMATION OF THE RIGHT LOBE OF THE LIVER (HEMANGIOMA); DIFFUSE CHANGES OF A PARENCHYMA OF THE KIDNEYS, THE SMALL CYSTS OF THE SINUSES

[redacted] 20[redacted] **CHEST XRAY:** CHEST X-RAY PERFORMED ON POSTERIOR-ANTERIOR VIEW, LANG IS NORMAL: NO INFILTRATION, NO FOCAL CHANGES. HEMODYNAMICS NORMAL, DIAPHRAGM NORMAL, SINUSES NORMAL. HEART HAS AORTAL SHAPE WITH SMALL LEFT EXPANSION, AORTA IS ELONGATED.

[redacted] 20[redacted] **ESR:** 38 MM/HR

[redacted] 20[redacted] **HEMOGLOBIN:** 107 G/L

[redacted] 20[redacted] **LYMPHOCYTES:** 29.8 %

[redacted] **20[redacted] MONOCYTES:** 10.4 %

[redacted] **20[redacted] NEUTROPHILS:** 59.2 %

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 Induction Study Start	Sex	Race
ABT-494 30 mg	5[redacted]	MALE	WHITE

Medical History	Onset Year
ALLERGIC RHINITIS	20[redacted]
BILATERAL GONARTHROSIS	20[redacted]
CHRONIC ANEMIA	20[redacted]
CHRONIC CHOLECYSTITIS	20[redacted]
CHRONIC GASTRITIS	20[redacted]
CHRONIC PANCREATITIS	20[redacted]
CHRONIC RHINOSINUSITIS	20[redacted]
DORSOPATHY OF THE LUMBAR SPINE	20[redacted]
HERNIATED DISK L5-S1	20[redacted]
HYPERTENSION	20[redacted]
LEFT SIDED UC	20[redacted]
ULCERATIVE COLITIS	20[redacted]

Prior Procedures	Procedure Year
PRIOR PROCEDURES: COLONOSCOPY WITH BIOPSY	20[redacted]
PRIOR PROCEDURES: COLONOSCOPY WITH BIOPSY	20[redacted]
PRIOR PROCEDURES: NASAL SEPTUM CURVATURE SURGERY	20[redacted]
PRIOR PROCEDURES: RECTOROMANOSCOPY	20[redacted]
PRIOR PROCEDURES: RECTOROMANOSCOPY	20[redacted]
PRIOR PROCEDURES: REMOVAL OF HERNIATED DISC L5-S1	20[redacted]
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	NEVER			

CIGARS	NEVER
PIPES	NEVER

Alcohol Use	Status	Number/Day
ALCOHOL	NEVER	

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS2 ABT-494 (IND)	45 mg	ORAL	QD	[redacted] / 1	[redacted] / 63	63
M14-234 SS2 ABT-494 (OL)	45 mg	ORAL	QD	[redacted] / 64	[redacted] / 112	49
M14-234 SS3 ABT-494 (MAIN)	15 mg	ORAL	QD	[redacted] / 113	[redacted] / 476	364
M14-533 ABT-494 (LTE)	30 mg	ORAL	QD	[redacted] / 477		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
MESALAZINE	1 g	TID	Y-M: [redacted]
MESALAZINE	2 g	BID	Y-M: [redacted]
METHYLPREDNISOLONE	150 mg	NOT REPORTED	Y-M: [redacted]
METHYLPREDNISOLONE	4 mg	QD	Y-M: [redacted]
PREDNISOLONE	5 mg	QD	Y-M: [redacted]
AZATHIOPRINE	50 mg	QD	Y-M: [redacted]
HYDROCORTISONE	125 mg	QD	Y-M: [redacted]
AZATHIOPRINE	150 mg	TID	Y-M: [redacted]
PREDNISOLONE	5 mg	QD	Y-M: [redacted]
AZATHIOPRINE	150 mg	TID	Y-M: [redacted]
HYDROCORTISONE	125 mg	QD	Y-M: [redacted]
HYDROCORTISONE	125 mg	QD	Y-M: [redacted]
METRONIDAZOLE	750 mg	TID	Y-M: [redacted]
AMLODIPINE	5 mg	QD	Y-M: [redacted]
LOSARTAN	50 mg	BID	Y-M: [redacted]
BISOPROLOL	5 mg	QD	Y: [redacted]

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
MESALAZINE	1 g	TID	Y-M: 20[redacted]	Not reported
AMLODIPINE	5 mg	QD	Y-M: 20[redacted]	Not reported
LOSARTAN	50 mg	BID	Y-M: 20[redacted]	Not reported
DEXAMETHASONE	20 mg	QD	Y-M: 20[redacted] / 189	Y-M: 20[redacted] / 249
FAVIPIRAVIR	200 mg	OTHER: ACCORDING TO THE SCHEME	Y-M: 20[redacted] / 189	Y-M: 20[redacted] / 249
HEPARIN	7500 OTHER: ACTION UNITS	TID	Y-M: 20[redacted] / 189	Y-M: 20[redacted] / 249
OMEPRAZOLE	20 mg	BID	Y-M: 20[redacted] / 189	Y-M: 20[redacted] / 249
SODIUM CHLORIDE	500 mL	QD	Y-M: 20[redacted] / 189	Y-M: 20[redacted] / 249
SPIRONOLACTONE	50 mg	QD	Y-M: 20[redacted] / 189	Y-M: 20[redacted] / 249
BISOPROLOL	5 mg	QD	Y: 20[redacted]	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 / Initial Rx Day / Rx Day	[redacted]20[redacted] / 683 / 207
Age at AE Onset	5[redacted]

Laboratory Testing

[redacted]20[redacted] (RX DAY 217): Alanine Aminotransferase: 30 [0 - 41] U/L; Aspartate Aminotransferase: 80 [0 - 35] U/L; Bilirubin: 23.2 [0 - 20.5] UMOL/L; Creatinine: 137 [53 - 97] UMOL/L; Erythrocytes: 3.5 [3.9 - 3.7] 10^12/L; Glucose: 6.1 [3.3 - 6.3] MMOL/L; Hemoglobin: 107 [120 - 150] G/L; Leukocytes: 4 [4.8 - 8.8] 10^9/L; Lymphocytes/Leukocytes: 9 [NOT REPORTED - 23] %; NPTST133-ERYTHROCYTE SEDIMENTATION RATE: 48 [1 - 16] MM/H; [redacted]20[redacted] (RX DAY 223): Alanine Aminotransferase: 43 [0 - 41] U/L; Aspartate Aminotransferase: 18 [0 - 35] U/L; Bilirubin: 16.9 [0 - 20.5] UMOL/L; Creatinine: 0,115 [0.053 - 0.097] mmol/L; Erythrocytes: 3.7 [3.9 - 4.7] 10^12/L; Glucose: 6.5 [3.3 - 6.3] MMOL/L; Hemoglobin: 113 [120 - 150] G/L; Leukocytes: 10.4 [4 - 8.8] 10^9/L; Lymphocytes/Leukocytes: 3 [NOT REPORTED - 23] %; NPTST133-ERYTHROCYTE SEDIMENTATION RATE: 52 [1 - 16] MM/H

Microbiology

NOT REPORTED

AE Stopped Initial Rx Day / Rx Day	701 / 225
Duration of AE	19 DAYS
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	COVID-19 PNEUMONIA INFECTION

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

Generated: [redacted]20[redacted]:16:51

Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はロシアの 5[redacted] 歳男性であり，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，COVID-19 肺炎の感染症の事象を発現した。関連する病歴は，潰瘍性大腸炎，高血圧，アレルギー性鼻炎，非喫煙者及び非飲酒者であった。

Event 1 の臨床経過：

投与683日後＊，被験者は COVID-19 肺炎の感染症を発現した。投与701日後＊，COVID-19 肺炎の感染症は消失した。

投与683日後＊，被験者は COVID に対する検査で陽性であり，発熱，悪寒，脱力，乾性咳嗽及び呼吸困難の徴候及び症状があった。

投与693日後＊，被験者は39.8°C の発熱，悪寒，脱力，乾性咳嗽及び呼吸困難を訴えて救急治療室を受診した。同日，被験者は入院した。被験者は抗生物質及び抗ウイルス薬による治療を受けた。投与701日後＊，被験者は，改善し，発熱は無く，息切れ及び脱力は減少し，退院した。

投与された薬剤は，ヘパリンナトリウム，塩化ナトリウム，ファビピラビル，デキサメタゾン，スピロノラクトン及びオメプラゾールであった。

The patient's past medications include:

METIPRED for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

PREDNISOLON for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

AZATHIOPRINE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

HYDROCORTISONUM for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

METRONIDAZOLE for ULCERATIVE COLITIS ([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: Yes

Rechallenge: rechallenge was done, reaction did not recur

Alternative Etiology for UPADACITINIB (Blinded)

Event of COVID-19 PNEUMONIA INFECTION

- Investigator: COVID-19 PNEUMONIA INFECTION

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

Relevant Laboratory & Other Diagnostic Tests

[redacted] 20[redacted] **ALANINE AMINO TRANSFERASE:** 30 U/L (normal 0 to 41)

[redacted] 20[redacted] **ALANINE AMINO TRANSFERASE:** 43 U/L (normal 0 to 41)

[redacted] 20[redacted] **ASPARTATE AMINO TRANSFERASE:** 80 U/L (normal 0 to 35)

[redacted] 20[redacted] **ASPARTATE AMINO TRANSFERASE:** 18 U/L (normal 0 to 35)

[redacted] 20[redacted] **BILIRUBIN:** 23.2 umol/L (normal 0 to 20.5)

[redacted] 20[redacted] **BILIRUBIN:** 16.9 umol/L (normal 0 to 20.5)

12 Au20[redacted] BMI: 28.5 kg/m2

Unknown date BODY TEMPERATURE: 39.8 Degrees C

[redacted] **20[redacted] BODY WEIGHT:** 8[redacted] KG

[redacted] **20[redacted] CHEST CT:** BILATERAL POLYSEGMENTAL INTERSTITIAL PNEUMONIA, COVID-19 HIGH PROBABILITY

[redacted] **20[redacted] CREATININE:** 0.137 MMOL/L (normal 0.053 to 0.097)

[redacted] **20[redacted] CREATININE:** 0.115 MMOL/L (normal 0.053 to 0.097)

[redacted] **20[redacted] ECG:** SINUS TACHYCARDIA, HEART RATE 107, NORMAL POSITION OF THE ELECTRICAL AXIS OF THE HEART, CHANGES IN THE MYOCARDIUM WITH SIGNS OF CHRONIC CORONARY INSUFFICIENCY

[redacted] **20[redacted] ECG:** SINUS RHYTHM, HEART RATE 54 - 57, HORIZONTAL POSITION OF THE ELECTRICAL AXIS OF THE HEART

[redacted] **20[redacted] ERYTHROCYTE SEDIMENTATION RATE:** 48 MM/HR (normal 1 to 16)

[redacted] **20[redacted] ERYTHROCYTE SEDIMENTATION RATE:** 52 MM/HR (normal 1 to 16)

[redacted] **20[redacted] GLUCOSE:** 6.1 MMOL/L (normal 3.3 to 6.3)

[redacted] **20[redacted] GLUCOSE:** 6.5 MMOL/L (normal 3.3 to 6.3)

[redacted] **20[redacted] HEMOGLOBIN:** 107 G/L (normal 120 to 150)

[redacted] **20[redacted] HEMOGLOBIN:** 113 G/L (normal 120 to 150)

[redacted] **20[redacted] LYMPHOCYTES %:** 9 % (normal <23)

[redacted] **20[redacted] LYMPHOCYTES %:** 3 % (normal <23)

[redacted] **20[redacted] POLYMERASE CHAIN REACTION:** Covid NASOPHARYNGEAL SWAB-positive

[redacted] **20[redacted] POLYMERASE CHAIN REACTION:** Covid NASOPHARYNGEAL SWAB-positive

[redacted] **20[redacted] POLYMERASE CHAIN REACTION:** Covid NASOPHARYNGEAL SWAB-positive

[redacted] **20[redacted] POLYMERASE CHAIN REACTION:** Covid NASOPHARYNGEAL SWAB-Negative

[redacted] **20[redacted] RED BLOOD CELLS:** 3.5 X10**12/L (normal 3.9 to 4.7)

[redacted] **20[redacted] RED BLOOD CELLS:** 3.7 X10**12/L (normal 3.9 to 4.7)

[redacted] **20[redacted] WHITE BLOOD CELLS:** 4.0 X10**9/L (normal 4.8 to 8.8)

[redacted] **20[redacted] WHITE BLOOD CELLS:** 10.4 X10**9/L (normal 4.8 to 8.8)

[redacted] **20[redacted] X-RAY:** BILATERAL POLYSEGMENTAL INTERSTITIAL PNEUMONIA, COVID-19 HIGH PROBABILITY

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
潰瘍性大腸炎	X			

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	3[redacted]	MALE	WHITE

Medical History	Onset Year
CYTOMEGALOVIRUS INFECTION	20[redacted]
DUODENAL ULCER	20[redacted]
EPSTEIN-BARRA VIRUS	20[redacted]
GASTROESOPHAGEAL REFLUX DISEASE	20[redacted]
HEAD INJURY	19[redacted]
HEPATITIS A	19[redacted]
LABIAL HERPES	20[redacted]
LEFT SIDED UC	20[redacted]
MYOPIA	19[redacted]
PROTRUSION OF THE LUMBAR SPINE	20[redacted]
TOXIC HEPATITIS	20[redacted]
ULCERATIVE COLITIS, CHRONIC RECURRENT COURSE, TOTAL LESION	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	FORMER	0.3 PACK	15	20[redacted]
CIGARS	NEVER			
PIPES	NEVER			

Alcohol Use	Status	Number/Day
ALCOHOL	FORMER	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-675 ABT-494 (IND)	45 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 58	58
M14-234 SS3 ABT-494 (MAIN)	15 mg	ORAL	QD	[redacted]20[redacted] / 59	[redacted]20[redacted] / 142	84
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted]20[redacted] / 143		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
METHYLPREDNISOLONE	4 mg	QD	Y: 20[redacted]
SULFASALAZINE	1.5 g	BID	Y: 20[redacted]
MESALAZINE	2 g	BID	Y: 20[redacted]
MESALAZINE	3 g	QD	Y: 20[redacted]

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
ASCORBIC ACID;MACROGOL 3350;POTASSIUM;SODIUM CHLORIDE;SODIUM SULFATE	111.896 g	BID	Y-M: 20[redacted]-[redacted] / 209	Y-M: 20[redacted]-[redacted] / 209
GADOPENTETIC ACID	16.6 mL	QD	Y-M: 20[redacted]-[redacted] / 209	Y-M: 20[redacted]-[redacted] / 209
PROPOFOL	UNKNOWN mg	QD	Y-M: 20[redacted]-[redacted] / 210	Y-M: 20[redacted]-[redacted] / 210
MESALAZINE	3 g	QD	Y: 20[redacted]	Not reported

Event #1: Serious Adverse Event

Event Description	EXACERBATION OF ULCERATIVE COLITIS
Preferred term	潰瘍性大腸炎
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 351 / 209
Age at AE Onset	3[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	353 / 211
Duration of AE	3 DAYS
Severity	MODERATE

Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	LACK OF EFFECTIVENESS OF THE STUDY DRUG
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はロシア連邦の 3[redacted] 歳男性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，潰瘍性大腸炎の悪化の事象を発現した。関連する病歴は，元喫煙者（1 日 0.3 箱を 15 年間），十二指腸潰瘍，潰瘍性大腸炎（慢性的な再燃の経過，全病変部），胃食道逆流性疾患及び元飲酒者（1 日 2 杯未満）であった。

Event 1 の臨床経過：

投与351日後＊，被験者は潰瘍性大腸炎の悪化を発現した。

本事象発現前，被験者は肛門科医の診察を受け，生検を伴う内視鏡検査を受けた。被験者は結腸内視鏡検査も受け，潰瘍性大腸炎の悪化が確認された。

投与351日後＊，被験者は更なる検査及び管理のために入院した。被験者は肛門管の痛み及び不快感を経験し，粘液及び血塊を伴う便が 1 日3–4 回認められた。被験者は外科の診察も受けた。投与353日後＊，被験者は，居住地で治療を続けることを勧められ，退院した。

投与された薬剤は，prednisone，cortiment 及びメサラジンであった。

The patient's past medications include:

METIPRED for ULCERATIVE COLITIS (20[redacted] - 20[redacted])

SULFASALAZINE for ULCERATIVE COLITIS (20[redacted] - 20[redacted])

SALOFALK for ULCERATIVE COLITIS (20[redacted] - 20[redacted])

Causality for UPADACITINIB (Open Label)

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1) Colitis ulcerative aggravated (10009901) (Colitis ulcerative (10009900)) [v.23.1] [10009901]

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 (Open Label)

Event of EXACERBATION OF ULCERATIVE COLITIS

- Investigator: LACK OF EFFECTIVENESS OF THE STUDY DRUG

- AbbVie: Event more likely related to pre-existing ulcerative colitis.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] CHEST XRAY:** Normal

[redacted] **20[redacted] COLONOSCOPY WITH EXAMINATION OF THE TERMINAL ILEUM:** UC moderate form (moderate degree of inflammation activity)

[redacted] **20[redacted] FIBROESOPHAGEAL GASTRODUODENOSCOPY**: Superficial gastritis. Superficial duodenitis.

[redacted] **20[redacted] MR-PICTURE OF THE SMALL PELVIS WITH CONTRAST ENHANCEMENT:** The mri picture may correspond to mild inflammatory changes in the rectum and partially visualized parts of the sigmoid colon. Quantitative and mildly expressed qualitative increase in parorectal, sacral and gluteal lymph nodes. The mri picture may correspond to inflammatory changes (probably chronic) of the prostate gland. Theabove changes in the peripheral zone correspond to 2 points on the scale pi-radsv 2.

[redacted] **20[redacted] WEIGHT:** 8[redacted] KG

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
食道カンジダ症				X
甲状腺腺腫	X			

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	3[redacted]	MALE	WHITE

Medical History	Onset Year
LEFT SIDED UC	20[redacted]
RECTAL PSEUDOPOLYPOSIS	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	NEVER	

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-675 Placebo (IND)		ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 56	56
M14-675 ABT-494 (OL)	45 mg	ORAL	QD	[redacted]20[redacted] / 57	[redacted]20[redacted] / 111	55
M14-234 SS3 ABT-494 (MAIN)	15 mg	ORAL	QD	[redacted]20[redacted] / 112	[redacted]20[redacted] / 202	91
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted]20[redacted] / 203		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
PREDNISONE	5 mg	QD	Y-M: 20[redacted]
MESALAZINE	1 g	TID	Y-M: 20[redacted]
MESALAZINE	2.5 g	QD	Y-M: 20[redacted]
MESALAZINE	1.2 g	BID	Y-M: 20[redacted]
MESALAZINE	3 g	QD	Y: 20[redacted]
MESALAZINE	2 g	QD	Y: 20[redacted]

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
MESALAZINE	1.2 g	BID	Y-M: 20[redacted]	Not reported

Event #1: Event of Interest - Opportunistic Infection excluding Tuberculosis and Herpes Zoster

Event Description	CANDIDA ESOPHAGITIS
Preferred term	食道カンジダ症
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 112 / -91 DAYS BEFORE TREATMENT
Age at AE Onset	3[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	293 / 91
Duration of AE	182 DAYS
Severity	MILD
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

Event #2: Serious Adverse Event

Event Description	FOLLICULAR ADENOMA OF THE LEFT LOBE OF THE THYROID GLAND
Preferred term	甲状腺腺腫
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 306 / 104

Age at AE Onset	3[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	307 / 105
Duration of AE	2 DAYS
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	DIFFUSE NODULAR GOITER
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はロシア連邦の 3[redacted] 歳男性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，甲状腺左葉の濾胞性腺腫の事象を発現した。関連する病歴は，潰瘍性大腸炎，直腸の偽性ポリポーシス，非喫煙者及び非飲酒者であった。

Event 2 の臨床経過：

投与306日後＊，被験者は甲状腺左葉の濾胞性腺腫を発現した。投与307日後＊，甲状腺左葉の濾胞性腺腫は消失した。

投与241日後＊から投与305日後＊に，被験者は非重篤な甲状腺左葉の濾胞性腺腫を発現した。

投与306日後＊ ，被験者は入院した。投与307日後＊，被験者は右側甲状腺切除術及び甲状腺の組織学的検査を受けた。術後期間は特に問題はなかった。制御喉頭鏡検査法で，声帯は機能しており左右対称形で完全に閉じていた。投与308日後＊，被験者は万全の状態により退院し，外来診療に切り替えられた。

The patient's past medications include:

SALOFALK for ULCERATIVE COLITIS (20[redacted] - 20[redacted], 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

PREDNISONE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Open Label)

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1) Thyroid adenoma (10043688) (Thyroid adenoma (10043688)) [v.24.1] [10043688]

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

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

Dechallenge: Yes

Alternative Etiology for UPADACITINIB (Open Label)

Event of FOLLICULAR ADENOMA OF THE LEFT LOBE OF THE THYROID GLAND

- Investigator: Diffuse nodular goiter

- AbbVie: Follicular adenoma is a common neoplasm of the thyroid gland with incident rate of 3-4.3%. Most cases arise sporadically but known risk factors include iodine deficiency and genetic alterations.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] HISTOLOGY EXAMINATION OF THE THYROID GLAND:** FOLLICULAR ADENOMA (4.0 CM) OF THE LEFT LOBE OF THE THYROID GLAND

[redacted] **20[redacted] VIDEO LARYNGOSCOPY:** FROM THE SIDE OF THE NASOPHARYNX AND OROPHARYNX WITHOUT INFLAMMATORY AND ORGANIC PATHOLOGY. CHERPANONADLARYNGEAL FOLDS AND PIRIFORM SINUSES WITHOUT VISIBLE PATHOLOGICAL CHANGES. LARYNX - THE MUCOUS MEMBRANE IS HYPEREMIC, SMOOTH. THE GLOTTIS IS TRIANGULAR, SYMMETRICAL. THE VOCAL CORDS ARE MOBILE, COMPLETELY CLOSED DURING PHONATION.

[redacted] **20[redacted] WEIGHT:** 6[redacted] KG

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
COBID-19 肺炎	X			X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 30 mg	4[redacted]	FEMALE	WHITE

Medical History	Onset Year
LEFT SIDED UC	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	NEVER	

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-675 ABT-494 (IND)	45 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 55	55
M14-234 SS3 ABT-494 (MAIN)	30 mg	ORAL	QD	[redacted]20[redacted] / 56	[redacted]20[redacted] / 422	367
M14-533 ABT-494 (LTE)	30 mg	ORAL	QD	[redacted]20[redacted] / 423		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
MESALAZINE	1.5 g	BID	Y-M: 20[redacted]
MESALAZINE	250 mg	QD	Y-M: 20[redacted]
MESALAZINE	1.5 g	BID	Y-M: 20[redacted]
MESALAZINE	2.5 g	QD	Y-M: 20[redacted]
MESALAZINE	1.5 g	BID	Y: 20[redacted]

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
PARACETAMOL	500 mg	BID	Y-M: 20[redacted] / 36	Y-M: 20[redacted] / 48
APIXABAN	2.5 mg	BID	Y-M: 20[redacted] / 39	Y-M: 20[redacted] / 42
FAVIPIRAVIR	1600 mg	BID	Y-M: 20[redacted] / 39	Y-M: 20[redacted] / 39
FAVIPIRAVIR	600 mg	BID	Y-M: 20[redacted] / 40	Y-M: 20[redacted] / 47
AMBROXOL	30 mg	BID	Y-M: 20[redacted] / 43	Y-M: 20[redacted] / 53
APIXABAN	5 mg	BID	Y-M: 20[redacted] / 43	Y-M: 20[redacted] / 53
HEPARIN	5000 IU	QID	Y-M: 20[redacted] / 43	Y-M: 20[redacted] / 53
INTERFERON ALFA-2B	3 gtt	OTHER: 5 TIMES A DAY	Y-M: 20[redacted] / 43	Y-M: 20[redacted] / 53
LEVOFLOXACIN	500 mg	QD	Y-M: 20[redacted] / 43	Y-M: 20[redacted] / 53
OMEPRAZOLE	20 mg	QD	Y-M: 20[redacted] / 43	Y-M: 20[redacted] / 53
MESALAZINE	1.5 g	BID	Y: 20[redacted]	Not reported

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

Event Description	COVID-19 PNEUMONIA
Preferred term	COVID-19 肺炎
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 465 / 43
Age at AE Onset	4[redacted]

Laboratory Testing

[redacted]20[redacted] (RX DAY 44): NPTST286-RNA2019-NCOV: POSITIVE [NOT REPORTED - NOT REPORTED] UNIT NOT REPORTED; [redacted]20[redacted] (RX DAY 46): NPTST286-RNA2019-NCOV: POSITIVE [NOT REPORTED - NOT REPORTED] UNIT NOT REPORTED; [redacted]20[redacted] (RX DAY 47): NPTST115-D-DIMER: 250 [NOT REPORTED - NOT REPORTED] ng/mL; [redacted]20[redacted] (RX DAY 51): NPTST286-RNA2019-NCOV: POSITIVE [NOT REPORTED - NOT REPORTED] UNIT NOT REPORTED; [redacted]20[redacted] (RX DAY 52): NPTST286-RNA2019-NCOV: POSITIVE [NOT REPORTED - NOT REPORTED] UNIT NOT REPORTED

Microbiology

NOT REPORTED

AE Stopped Initial Rx Day / Rx Day	475 / 53
Duration of AE	11 DAYS
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	COVID-19 INFECTION
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はロシアの 4[redacted] 歳女性であり，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，COVID-19 肺炎の事象を発現した。

Event 1 の臨床経過：

投与445日後＊，被験者はCOVID-19 肺炎を発現した。投与475日後＊，COVID-19 肺炎は消失した。

この被験者は，先行の M14-234 試験では，被験者番号 [redacted] であり，20[redacted] 年 [redacted] 月 [redacted] 日から 20[redacted] 年 [redacted] 月 [redacted] 日まで盲検化された治験薬を投与された。

投与458日後＊，被験者は，無力感の増加，咳嗽，少量の粘液分泌及び発熱の症状があり，体調不良を感じた。投与461日後＊，被験者はCOVID-19 検査陽性であった。治験責任医師は被験者の居住地へ電話し，薬剤が処方された。投与463日後＊，被験者は胸部 CT 検査を受け，急性間質性肺障害の徴候が認められた。投与465日後＊，被験者は咽喉痛，鼻汁，発熱，乾性咳嗽，全身脱力及び胸痛があり入院した。被験者は以前にこの事象を発現したことはなかったとのことであった。被験者は精密診断を受けた。入院中を通して被験者の状態は安定していた。投与475日後＊，被験者は，室内気で酸素飽和度は安定しており，満足な状態で退院した。被験者は入院での治療を中止するよう要望したとのことであった。

投与された薬剤は，grippferon，ファビピラビル，paracetamol，ヘパリン，エリキュース，アンブロキソール，omez 及びレボフロキサシンであった。

The patient's past medications include:

ASAMAX for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Blinded)

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1) COVID-19 pneumonia (10084380) (COVID-19 pneumonia (10084380)) [v.24.1] [10084380]

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 COVID-19 PNEUMONIA

- Investigator: Covid-19 Infection

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

Relevant Laboratory & Other Diagnostic Tests

Unknown date BIOCHEMICAL BLOOD TEST: no clinically significant findings

[redacted] **20[redacted] BMI:** 21.2 m2

[redacted] **20[redacted] BODY TEMPERATURE:** 39 Degrees C

[redacted] **20[redacted] BODY TEMPERATURE:** 38.5 Degrees C

Unknown date CLINICAL BLOOD TEST: no clinically significant findings

Unknown date COAGULATION: no clinically significant findings

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

[redacted] **20[redacted] CT CHEST:** THE VOLUME OF DAMAGE TO THE RIGHT LUNG IS APPROXIMATELY 8%, THE LEFT LUNG IS 5%. CT SIGNS OF ACUTE INTERSTITIAL LUNG LESION, HIGH PROBABILITY COVID-19 ARE DETERMINED AT THE TIME OF THE STUDY.

[redacted] **20[redacted] D DIMER:** 250 NG/ML

[redacted] **20[redacted] ECHOCARDIOGRAM:** THE CAVITIES ARE NOT WIDENED. THE WALLS OF THE LEFT VENTRICLE ARE NOT THICKENED. THE PRESSURE IN THE PULMONARY ARTERY IS NORMAL. LVDF EJECTION FRACTION 64%

[redacted] **20[redacted] EKG:** SINUS RHYTHM 75 PER MINUTE, IMPAIRED REPOLARIZATION OF THE ANTERIOR WALL OF THE LEFT VENTRICLE

[redacted] **20[redacted] EKG:** COMPARED TO THE ECG FROM [redacted]/[redacted]/20[redacted] WITHOUT SIGNIFICANT DYNAMICS

Unknown date HEPATITIS B TEST: no clinically significant findings

Unknown date HIV TEST: no clinically significant findings

[redacted] **20[redacted] OXYGEN SATURATION**: 97 %

[redacted] **20[redacted] RNA2019-NCOV NASOPHARYNGEAL SWAB:** Positive

[redacted] **20[redacted] RNA2019-NCOV NASOPHARYNGEAL SWAB:** Positive

[redacted] **20[redacted] RNA2019-NCOV NASOPHARYNGEAL SWAB:** Positive

[redacted] **20[redacted] RNA2019-NCOV NASOPHARYNGEAL SWAB:** Positive

Unknown date URINALYSIS: no clinically significant findings

[redacted] **20[redacted] WEIGHT:** 5[redacted] KG

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
COVIC-19 肺炎	X	X		X
肺塞栓症	X			X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	4[redacted]	MALE	WHITE

Medical History	Onset Year
EXTENSIVE UC/PANCOLITIS	20[redacted]
GASTRODUODENITIS	20[redacted]
PANCREATITIS	20[redacted]
STEATOHEPATITIS	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	FORMER	1 PACK	20	20[redacted]
CIGARS	NEVER			
PIPES	NEVER			

Alcohol Use	Status	Number/Day
ALCOHOL	CURRENT	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS2 Placebo (IND)		ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 53	53
M14-234 SS2 ABT-494 (OL)	45 mg	ORAL	QD	[redacted]20[redacted] / 54	[redacted]20[redacted] / 109	56

M14-234 SS3 ABT-494 (MAIN)	15 mg	ORAL	QD	[redacted]20[redacted] / 110[redacted]20[redacted] / 473	364
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted]20[redacted] / 474 [redacted]20[redacted] / 516	43

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
AZATHIOPRINE	100 mg	QD	Y-M: 20[redacted]
ADALIMUMAB	40 mg	OTHER: EVERY 2 WEEKS	Y-M: 20[redacted]
MESALAZINE	3 g	QD	Y-M: 20[redacted]
METHYLPREDNISOLONE	48 mg	QD	Y-M: 20[redacted]
PREDNISOLONE	5 mg	QD	Y-M: 20[redacted]

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
RIVAROXABAN	15 mg	QD	Y-M: 20[redacted] / 38	Y-M: 20[redacted] / 49
FAVIPIRAVIR	200 mg	QD	Y-M: 20[redacted] / 41	Y-M: 20[redacted] / 48
LEVOFLOXACIN	500 mg	BID	Y-M: 20[redacted] / 41	Y-M: 20[redacted] / 48
BROMHEXINE	8 mg	TID	Y-M: 20[redacted] / 50	Y-M: 20[redacted] / 59
CEFTRIAXONE	2 g	QD	Y-M: 20[redacted] / 50	Y-M: 20[redacted] / 59
DEXAMETHASONE	8 mg	QD	Y-M: 20[redacted] / 50	Y-M: 20[redacted] / 53
FAVIPIRAVIR	1600 mg	BID	Y-M: 20[redacted] / 50	Y-M: 20[redacted] / 51
FENOTEROL;IPRATROPIUM	3 mL	BID	Y-M: 20[redacted] / 50	Y-M: 20[redacted] / 59
HEPARIN	UNK IU	QD	Y-M: 20[redacted] / 50	Y-M: 20[redacted] / 52
OMEPRAZOLE	20 mg	BID	Y-M: 20[redacted] / 50	Y-M: 20[redacted] / 59
FAVIPIRAVIR	600 mg	BID	Y-M: 20[redacted] / 52	Y-M: 20[redacted] / 59
RIVAROXABAN	15 mg	BID	Y-M: 20[redacted] / 53	Y-M: 20[redacted] / 66
RIVAROXABAN	20 mg	QD	Y-M: 20[redacted] / 67	ONGOING

Event #1: Serious Adverse Event, AE Leading to Discontinuation of Study Drug, Event of Interest - Serious Infections

Event Description	COVID19 PNEUMONIA
Preferred term	COVID-19 肺炎

AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 511 / 38
Age at AE Onset	4[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
[redacted]20[redacted] (RX DAY 43): OTHER NASOPHARYNGEAL SWAB (COVID-19) NPTST230-NASOPHARYNGEAL SWAB (COVID-19): Positive-COVID-19	
AE Stopped Initial Rx Day / Rx Day	ONGOING
Duration of AE	ONGOING
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	COVID-19
Discontinued Study Drug Due to the Event	YES
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Event #2: Serious Adverse Event, Event of Interest - Adjudicated Cardiovascular events, Event of Interest - Adjudicated Venous Thromboembolic Event

Event Description	PULMONARY EMBOLISM
Preferred term	肺塞栓症
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 523 / 50 (7 DAYS AFTER LAST TREATMENT)
Age at AE Onset	4[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
[redacted]20[redacted] (RX DAY 51): OTHER NASOPHARYNGEAL SWAB (COVID-19) NPTST230-NASOPHARYNGEAL SWAB (COVID-19): Positive-COVID-19; [redacted]20[redacted] (RX DAY 53): OTHER NASOPHARYNGEAL SWAB (COVID-19) NPTST230-NASOPHARYNGEAL SWAB (COVID-19): Negative	
AE Stopped Initial Rx Day / Rx Day	532 / 59 (16 DAYS AFTER LAST TREATMENT)
Duration of AE	10 DAYS
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	COVID-19
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION, LIFE THREATENING

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はロシアの 4[redacted] 歳男性であり，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，肺塞栓症及び COVID-19 肺炎の事象を発現した。関連する病歴は，潰瘍性大腸炎，元喫煙者（1 日 1 箱を 20 年間）及び現飲酒者（1 日 2 杯未満）であった。

Event 1 及び 2 の臨床経過：

投与511日後＊ ，被験者は COVID-19 肺炎を発現した。投与523日後＊，被験者は肺塞栓症を発現した。投与532日後＊，肺塞栓症は消失した。

投与511日後＊ ，被験者は発熱し始めた。投与514日後＊ ，被験者は，発熱，咳嗽及び脱力の症状があり入院した。肺の CT スキャン検査が実施され， 両側の多区域肺炎が認められた。投与516日後＊，被験者はCOVID-19 検査陽性であった。投与517日後＊，COVID-19 検査は陰性であった。投与519日後＊，発熱は消失した。投与521日後＊，被験者は退院した。

投与523日後＊ ，被験者は重度の息切れがあり再入院した。CT スキャン検査で，両側性肺炎及び肺動脈の血栓塞栓症が認められた。投与524日後＊，COVID-19 検査は陽性であった。血栓溶解療法が開始された。投与526日後＊ ，COVID-19 検査は陰性であった。投与532日後＊，positive dynamics が認められ，被験者は退院した。

治験責任医師によると， 関連する危険因子は，COVIC-19 感染，40 歳超の年齢及び炎症性腸疾患であった。

投与された薬剤は，ヘパリン，イグザレルト，ブロムヘキシン，berodual，セフトリアキソン，デキサメタゾン及びファビピラビルであった。

The patient's past medications include:

AZATHIOPRIN for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

HUMIRA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

PENTASA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

METIPRED for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

PREDNISOLON for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Blinded)

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1) Pulmonary embolism (10037377) (Pulmonary embolism (10037377)) [v.24.0] [10037377]

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

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

Dechallenge: Not Applicable

2) 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: No

Alternative Etiology for UPADACITINIB (Blinded)

Event of PULMONARY EMBOLISM

- Investigator: COVID-19

- AbbVie: Event more likely related to recent 8 day hospitalization with discharge just 2 days prior to event onset. Additional risk factors include concurrent COVID-19 Pneumonia, pre-existing obesity and pre-existing ulcerative colitis.

Event of COVID-19 PNEUMONIA

- Investigator: COVID-19

- AbbVie: Event is more likely related to reported COVID-19 infection due to the COVID-19 pandemic outbreak

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] BMI:** 32.2 kg/m2

[redacted] **20[redacted] BODY WEIGHT:** 11[redacted].[redacted] KG

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

[redacted] **20[redacted] COVID-19 NASOPHARYNGEAL SWAB:** Negative

[redacted] **20[redacted] CT SCAN:** CT signs of bilateral polysegmental pneumonia, lesion 60%, thromboembolism of individual segmental and subsegmental branches of the right pulmonary artery and individual subsegmental branches of the left pulmonary artery

[redacted] **20[redacted] CT SCAN:** CT signs of bilateral polysegmental pneumonia, affection up to 40%, positive dynamics

[redacted] **20[redacted] CT SCAN OF LUNGS:** Pneumonia: 20% lung lesion

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

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

[redacted] **20[redacted] NASOPHARYNGEAL SWAB (COVID-19):** Negative

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
クロストリジウム・ディフィシレ感染	X			X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	3[redacted]	FEMALE	WHITE

Medical History	Onset Year
ANEMIA	20[redacted]
LEFT SIDED UC	20[redacted]
ULCERATIVE COLITIS	20[redacted]

Prior Procedures	Procedure Year
PRIOR PROCEDURES: LAPAROSCOPIC PUNCTION AND ENUCLEATION OF RIGHT OVARIAN ENDOMETRIOMA	20[redacted]
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	NEVER	

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS2 ABT-494 (IND)	45 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 57	57
M14-234 SS2 ABT-494 (OL)	45 mg	ORAL	QD	[redacted]20[redacted] / 58	[redacted]20[redacted] / 113	56

M14-234 SS3 ABT-494 (MAIN)	15 mg	ORAL	QD	[redacted]20[redacted] / 114 [redacted]20[redacted] / 156	43
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted]20[redacted] / 157	

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
AZATHIOPRINE	100 mg	QD	Y-M: 20[redacted]
GOLIMUMAB	100 mg	OTHER: 1 PER MONTH	Y-M: 20[redacted]
MESALAZINE	1 g	QD	Y-M: 20[redacted]
METHOTREXATE	15 mg	1 time per week	Y-M: 20[redacted]
MESALAZINE	2000 mg	BID	Y-M: 20[redacted]
VEDOLIZUMAB	300 mg	OTHER: 1 PER MONTH	Y-M: 20[redacted]
BIFIDOBACTERIUM BREVE;BIFIDOBACTERIUM INFANTIS;BIFIDOBACTERIUM LONGUM;LACTOBACILLUS ACIDOPHILUS;LACTOBACILLUS BULGARICUS;LACTOBACILLUS PARACASEI;LACTOBACILLUS PLANTARUM;STREPTOCOCCUS THERMOPHILUS	NOT REPORTED	NOT REPORTED	Y-M: 20[redacted] / -202
MESALAZINE	1 g	QD	Y-M: 20[redacted] / -202
PREDNISONE	40 mg	QD	Y-M: 20[redacted] / -202
IRON	15/60 mg	QD	Y-M: 20[redacted] / -85
MESALAZINE	4 g	BID	Y: 20[redacted]

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
MESALAZINE	2000 mg	BID	Y-M: 20[redacted]	Not reported
IRON	15/60 mg	QD	Y-M: 20[redacted] / -85	Not reported
SACCHAROMYCES BOULARDII	500 mg	BID	Y-M: 20[redacted] / 441	Y-M: 20[redacted] / 495
VANCOMYCIN	250 mg	QID	Y-M: 20[redacted] / 441	Y-M: 20[redacted] / 450

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

Event Description	CLOSTRIDIUM DIFFICILE INFECTION
Preferred term	クロストリジウム・ディフィシレ感染
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 590 / 434
Age at AE Onset	3[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
[redacted]20[redacted] (RX DAY 436): STOOL NPTST315-TEST FOR CLOSTRIDIUM DIFFICILE: Positive-TEST FOR CLOSTRIDIUM DIFFICILE TOXIN A POSITIVE	
AE Stopped Initial Rx Day / Rx Day	NOT REPORTED
Duration of AE	NOT REPORTED
Severity	MILD
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	CLOSTRIDIUM DIFFICILE INFECTION IS MORE COMMON IN PATIENTS WITH IBD
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はセルビアの 3[redacted] 歳女性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，クロストリジウム・ディフィシレ感染の事象を発現した。関連する病歴は，潰瘍性大腸炎，非喫煙者及び非飲酒者であった。

Event 1 の臨床経過：

投与590日後＊，被験者はクロストリジウム・ディフィシレ感染を発現した。

投与597日後＊，被験者は排便回数増加及びクロストリジウム・ディフィシレ毒素 A 検査陽性のために入院した。同日，被験者は退院した。被験者の排便回数は治療実施中に改善してい

った。

治験責任医師によると，被験者の危険因子は潰瘍性大腸炎であった。事象に関連する家族歴は認められなかった。

投与された薬剤は，*Saccharomyces boulardii* 及びバンコマイシンであった。

The patient's past medications include:

SALOFALK for ULCERATIVE COLITIS (20[redacted] - [redacted] 20[redacted])

IMURAN for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

SIMPONI for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

METOTREXAT for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

SALOFALK for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

PENTASA for ULCERATIVE COLITIS (Started [redacted] 20[redacted])

ENTYVIO for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

PENTASA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

PRONISON for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

VSL#3 for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Open Label)

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1) Clostridium difficile infection (10054236) (Clostridium difficile infection (10054236)) [v.24.1] [10054236]

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 (Open Label)

Event of CLOSTRIDIUM DIFFICILE INFECTION

- Investigator: Clostridium difficile infection is more common in patients with IBD.

- AbbVie: The event is more likely a C. difficile related enteritis which occurs in up to 10 percent of patients with underlying inflammatory bowel disease at some point in their disease. Link: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3837256/

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] CLOSTRIDIUM DIFFICILE TOXIN A:** 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
COVID-19 肺炎	X			X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 30 mg	5[redacted]	FEMALE	WHITE

Medical History	Onset Year
ANAEMIA	20[redacted]
LEFT SIDED UC	19[redacted]
MENOPAUSA	20[redacted]
ULCERATIVE COLITIS	19[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	NEVER	

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS2 ABT-494 (IND)	45 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 57	57
M14-234 SS3 ABT-494 (MAIN)	15 mg	ORAL	QD	[redacted]20[redacted] / 58	[redacted]20[redacted] / 415	358

M14-533 ABT-494 (LTE)	30 mg	ORAL	QD	[redacted]20[redacted] / 416

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
FOLIC ACID	10 mg	QD	Y-M: 20[redacted]
SULFASALAZINE	1 g	TID	Y-M: 20[redacted]
MESALAZINE	2 g	OTHER: EOD	Y-M: 20[redacted]
PREDNISONE	5 mg	QD	Y-M: 20[redacted]
HYDROCORTISONE	100 mg	QD	Y-M: 20[redacted]
MESALAZINE	1 g	QD	Y-M: 20[redacted]
AZATHIOPRINE	125 mg	QD	Y-M: 20[redacted]
ETROLIZUMAB	105 mg	OTHER: ONCE A MONTH	Y-M: 20[redacted]
MESALAZINE	2 g	OTHER: EOD	Y-M: 20[redacted]
PREDNISONE	5 mg	QD	Y-M: 20[redacted]
PREDNISONE	5 mg	QD	Y-M: 20[redacted]
PREDNISONE	10 mg	QD	Y-M: 20[redacted]
GOLIMUMAB	50 mg	OTHER: ONCE A MONTH	Y: 20[redacted]

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
FOLIC ACID	10 mg	QD	Y-M: 20[redacted]	Not reported
SULFASALAZINE	1 g	TID	Y-M: 20[redacted]	Not reported
ALFACALCIDOL	2 OTHER: MCG	QD	Y-M: 20[redacted] / 588	Y-M: 20[redacted] / 646
ASCORBIC ACID	1 g	QD	Y-M: 20[redacted] / 588	Y-M: 20[redacted] / 646
PARACETAMOL	500 mg	PRN	Y-M: 20[redacted] / 588	ONGOING
CLARITHROMYCIN	500 mg	BID	Y-M: 20[redacted] / 593	Y-M: 20[redacted] / 596
FENOTEROL;IPRATROPIUM	1 OTHER: INHALATION	PRN	Y-M: 20[redacted] / 593	Y-M: 20[redacted] / 593
METRONIDAZOLE	400 mg	TID	Y-M: 20[redacted] / 593	Y-M: 20[redacted] / 606
METHYLPREDNISOLONE	40 mg	BID	Y-M: 20[redacted] / 596	Y-M: 20[redacted] / 604
NADROPARIN	0.6 mL	QD	Y-M: 20[redacted] / 596	Y-M: 20[redacted] / 617
VANCOMYCIN	1 g	BID	Y-M: 20[redacted] / 596	Y-M: 20[redacted] / 604
PANTOPRAZOLE	20 mg	BID	Y-M: 20[redacted] / 604	ONGOING

PREDNISONE	40 mg	OTHER: (30+0+10 MG)	Y-M: 20[redacted] / 604	Y-M: 20[redacted] / 606
PROBIOTICS NOS	1 OTHER: CAPS.	QD	Y-M: 20[redacted] / 604	Y-M: 20[redacted] / 646

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 / Initial Rx Day / Rx Day	[redacted]20[redacted] / 1003 / 588
Age at AE Onset	5[redacted]
Laboratory Testing	[redacted]20[redacted] (RX DAY 596): Albumin: 31 [35 - 52] G/L; Hemoglobin: 130 [120 - 160] G/L; Leukocytes: 5.5 [4.8 - 10.8] 10^9/L; Lymphocytes: 0.55 [0.9 - 5.2] 10^9/L; NPTST108-CRP: 98.4 [0 - 5] MG/L; NPTST142-FERRITIN: 547 [20 - 300] NG/ML; Platelets: 170 [150 - 400] 10^9/L; [redacted]20[redacted] (RX DAY 604): NPTST142-FERRITIN: 286 [20 - 300] NG/ML
Microbiology	NOT REPORTED
AE Stopped Initial Rx Day / Rx Day	1019 / 604
Duration of AE	17 DAYS
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	WORSENING OF COVID 19 INFECTION. PATIENT IS HOSPTALIZED ON [redacted]20[redacted] DUE TO PNEUMONIA
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はセルビアの 5[redacted] 歳女性であり，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，COVID-19 肺炎の感染症の事象を発現した。関連する病歴は，潰瘍性大腸炎であった。

Event 1 の臨床経過：

投与1003日後＊，被験者はCOVID-19 肺炎の感染症を発現した。投与1019日後＊，COVID-19 肺炎の感染症は消失した。

投与1011日後＊ ，被験者は発熱，頭痛，倦怠感及び筋肉痛があり入院した。被験者はCOVID-19 肺炎に対する治療を受けた。被験者の臨床状態及び臨床検査の反応は良好であった。投与1019日後＊，被験者は退院した。

投与された薬剤は，アスコルビン酸，paracetamol，アルファカルシドール，orvagil，pronison，fraxipiran，クラリスロマイシン，berodual 及びバンコマイシンであった。

The patient's past medications include:

GOLIMUMAB for ULCERATIVE COLITIS (20[redacted] - [redacted] 20[redacted])

PRONISON for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

SALOFALK for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

HYDROCORTISONE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

PENTASA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

AZATHIOPRIN for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

ETROLIZUMAB for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Blinded)

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1) COVID-19 pneumonia (10084380) (COVID-19 pneumonia (10084380)) [v.24.1] [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, outcome unknown

Alternative Etiology for UPADACITINIB (Blinded)

Event of COVID 19 PNEUMONIA-INFECTION

- Investigator: Worsening of COVID 19 infection. Patient was hospitalized on [redacted] 20[redacted] due to pneumonia.

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

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] ALBUMIN:** 31 G/L (normal 35 to 52)

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

[redacted] **20[redacted] BODY WEIGHT:** 6[redacted] KG

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

[redacted] **20[redacted] CRP:** 98.4 MG/L (normal <5)

[redacted] **20[redacted] CT THORAX:** not reported

[redacted] **20[redacted] DOPPLER ULTRASOUND OF LEG:** not reported

[redacted] **20[redacted] FERRITIN:** 547 NG/ML (normal 20 to 300)

[redacted] **20[redacted] FERRITIN:** 286 X10**9/L (normal 20 to 300)

[redacted] **20[redacted] HEMOGLOBIN:** 13 G/DL (normal 12 to 16)

[redacted] **20[redacted] LYMPHOCYTES ABS:** 0.55 X10**9/L (normal 0.9 to 5.2)

[redacted] **20[redacted] PLATELET COUNT:** 170 X10**9/L (normal 150 to 400)

[redacted] **20[redacted] WHITE BLOOD CELLS:** 5.5 X10**9/L (normal 4.8 to 10.8)

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
脛骨骨折	X			

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	5[redacted]	MALE	WHITE

Medical History	Onset Year
ARTHRALGIA	20[redacted]
GASTRITIS	20[redacted]
GASTRITIS CHRONICA	20[redacted]
LEFT SIDED UC	20[redacted]
RECTAL TUBULAR ADENOMA	20[redacted]
ULCERATIVE COLITIS	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	NEVER	

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS2 ABT-494 (IND)	45 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 57	57

M14-234 SS3 ABT-494 (MAIN)	15 mg	ORAL	QD	[redacted] / 58 [redacted] / 416	359
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted] / 417	

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
AZATHIOPRINE	125 mg	QD	Y-M: [redacted]
MESALAZINE	0.8 g	TID	Y-M: [redacted]
PREDNISONE	5 mg	QD	Y-M: [redacted]
INFLIXIMAB	400 mg	OTHER: EVERY OTHER MONTH	Y-M: [redacted]
METHOTREXATE	12.5 mg	QD	Y-M: [redacted]
HYDROCORTISONE	50 mg	QD	Y-M: [redacted]
MESALAZINE	1 g	OTHER: EOD	Y-M: [redacted]
MESALAZINE	1 g	QD	Y-M: [redacted]
MESALAZINE	1.2 g	TID	Y-M: [redacted]
MESALAZINE	2 g	QD	Y-M: [redacted]

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
MESALAZINE	1.2 g	TID	Y-M: [redacted]	ONGOING
ACECLOFENAC	100 mg	PRN	Y-M: [redacted] / 567	ONGOING
NADROPARIN	0.4 mL	QD	Y-M: [redacted] / 567	ONGOING
SERRAPEPTASE	1 OTHER: CAPS	QD	Y-M: [redacted] / 567	ONGOING

Event #1: Serious Adverse Event

Event Description	LEFT TIBIAL FRACTURE
Preferred term	脛骨骨折
AE Onset Date / Initial Rx Day / Rx Day	[redacted] / 975 / 559
Age at AE Onset	[redacted]

Laboratory Testing

NOT REPORTED

Microbiology

NOT REPORTED

AE Stopped Initial Rx Day / Rx Day	983 / 567
Duration of AE	9 DAYS
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	ACCIDENTAL FALL
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION, IMPORTANT MEDICAL EVENT REQUIRING MEDICAL OR SURGICAL INTERVENTION

Generated: [redacted]20[redacted]:16:51

Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はセルビアの 6[redacted] 歳男性であり，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，左脛骨骨折の事象を発現した。関連する病歴は，潰瘍性大腸炎，関節痛，非喫煙者及び非飲酒者であった。

Event 1 の臨床経過：

投与975日後＊，被験者は左脛骨骨折を発現した。投与983日後＊，左脛骨骨折は消失した。

投与975日後＊ ，被験者は入院し，左脛骨の観血的整復固定術を受けた。投与983日後＊，被験者は退院した。

投与された薬剤は，aflamil，fraxiparine 及び serapinn forte であった。

The patient's past medications include:

AZATHIOPRINE for ULCERATIVE COLITIS ([redacted] 20[redacted] - 20[redacted])

PRONISON for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

INFLIXIMAB for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

METHOTREXATE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

HYDROCORTISONE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

SALOFALK for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

PENTASA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Blinded)

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1) Tibia fracture (10043827) (Tibia fracture (10043827)) [v.24.1] [10043827]

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 TIBIAL FRACTURE

- Investigator: Accidental fall.

- AbbVie: event is more likely an unexpected and unintentional incident due to fall as reported by PI.Relevant Laboratory & Other Diagnostic Tests

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[redacted] 20[redacted] X-RAY OF LEFT LEG: Not reported.

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
小球性貧血	X	X		X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	6[redacted]	FEMALE	WHITE

Medical History	Onset Year
ARTERIAL HYPERTENSION	20[redacted]
EXTENSIVE UC/PANCOLITIS	20[redacted]
MENOPAUSE	20[redacted]
SLEEPING DIFFICULTIES	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	NEVER	

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-675 Placebo (IND)		ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 56	56
M14-675 ABT-494 (OL)	45 mg	ORAL	QD	[redacted]20[redacted] / 57	[redacted]20[redacted] / 115	59
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted]20[redacted] / 116	[redacted]20[redacted] / 462	347

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
AZATHIOPRINE	50 mg	QD	Y-M: 20[redacted]
INFLIXIMAB	300 mg	OTHER: EVERY 8 WEEKS	Y-M: 20[redacted]
PREDNISONE	5 mg	QD	Y-M: 20[redacted]
AMLODIPINE	5 mg	QD	Y-M: 20[redacted]
BISOPROLOL	2.5 mg	QD	Y-M: 20[redacted]
HYDROCHLOROTHIAZIDE;LISINOPRIL	20+12.5 mg	QD	Y-M: 20[redacted]
MESALAZINE	1 g	TID	Y: 20[redacted]
COLECALCIFEROL	0.5 OTHER: MG/ML	OTHER: ONCE A WEEK	Y: 20[redacted]
ESCITALOPRAM	10 mg	QD	Y: 20[redacted]
VEDOLIZUMAB	300 mg	OTHER: EVERY 4 WEEKS	Y: 20[redacted]
ALPRAZOLAM	0.5 mg	QD	Y: 20[redacted] / -344
ASCORBIC ACID;IRON	30 mg	QD	Y: 20[redacted] / -344

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
AMLODIPINE	5 mg	QD	Y-M: 20[redacted]	Not reported
BISOPROLOL	2.5 mg	QD	Y-M: 20[redacted]	Not reported
HYDROCHLOROTHIAZIDE;LISINOPRIL	20+12.5 mg	QD	Y-M: 20[redacted]	Not reported
MACROGOL 4000;POTASSIUM;SODIUM BICARBONATE;SODIUM CHLORIDE;SODIUM SULFATE	4 OTHER: SACHET	PRN	Y-M: 20[redacted] / 343	Y-M: 20[redacted] / 343
PANTOPRAZOLE	40 mg	QD	Y-M: 20[redacted] / 359	ONGOING
PREDNISONE	40 mg	QD	Y-M: 20[redacted] / 359	Y-M: 20[redacted] / 369
MESALAZINE	1 g	QD	Y-M: 20[redacted] / 365	ONGOING
MESALAZINE	3 g	QD	Y-M: 20[redacted] / 365	ONGOING
MESALAZINE	1 g	TID	Y: 20[redacted]	Not reported
COLECALCIFEROL	0.5 OTHER: MG/ML	OTHER: ONCE A WEEK	Y: 20[redacted]	Not reported

ESCITALOPRAM	10 mg	QD	Y: 20[redacted]	Not reported
ALPRAZOLAM	0.5 mg	QD	Y: 20[redacted] / -344	Not reported
ASCORBIC ACID;IRON	30 mg	QD	Y: 20[redacted] / -344	Not reported

Event #1: Serious Adverse Event, AE Leading to Discontinuation of Study Drug, Event of Interest - Anemia

Event Description	MICROCYTIC ANEMIA
Preferred term	小球性貧血
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 375 / 260
Age at AE Onset	6[redacted]

Laboratory Testing

[redacted]20[redacted] (RX DAY 348): Erythrocytes: 3.8 [3.86 - 5.08] 10^12/L; Hemoglobin: 70 [119 - 157] G/L; Leukocytes: 3.4 [2.356 - 9.7] 10^9/L; NPTST141-FERITIN: 98.9 [13 - 150] 099,MCG/L; NPTST213-MCV: 72.2 [83 - 97.2] FL; [redacted]20[redacted] (RX DAY 365): Erythrocytes: 4.7 [3.86 - 5.08] 10^12/L; Hemoglobin: 112 [119 - 157] G/L; Leukocytes: 5.1 [3.4 - 9.7] 10^9/L; NPTST213-MCV: 80 [83 - 97.2] FL

Microbiology

NOT REPORTED

AE Stopped Initial Rx Day / Rx Day	NOT REPORTED
Duration of AE	NOT REPORTED
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	UPPER AND LOWER ENDOSCOPY WERE PERFORMED, NO BLEEDING LESIONS WERE DETERMINED. GYNECOLOGY REPORT IDENTIFIED MYOMA. BIOPSY OF BONE MARROW CONFIRMED TOXIC MYELOSUPPRESSION, CAUSE STILL UNKNOWN
Discontinued Study Drug Due to the Event	YES
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION, IMPORTANT MEDICAL EVENT REQUIRING MEDICAL OR SURGICAL INTERVENTION

Generated: [redacted]20[redacted]:16:51

Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はセルビアの 6[redacted] 歳女性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，小球性貧血の事象を発現した。関連する病歴は，潰瘍性大腸炎，非喫煙者及び非飲酒者であった。

Event 1 の臨床経過：

投与375日後＊，被験者は小球性貧血を発現した。

被験者は臨床検査を受け，ヘモグロビン値低下が判明した（日付不明）。潰瘍性大腸炎又は貧血の症状はなかった。投与462日後＊ ，被験者は貧血の検査のために入院した。上部及び下部消化管内視鏡検査が実施され，出血部位は特定されなかった。婦人科の報告で筋腫が認められた。投与480日後＊，被験者は退院した。

The patient's pastmedications include:

AZATIOPRINE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

INFLIXIMUB for ULCERATIVE COLITIS ([redacted] 20[redacted] - 20[redacted])

PRONISON for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

VEDOLIZUMAB for ULCERATIVE COLITIS (20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Open Label)

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1) Microcytic anemia (10027539) (Microcytic anaemia (10027538)) [v.24.1] [10027539]

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

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

Dechallenge: No

Alternative Etiology for UPADACITINIB (Open Label)

Event of MICROCYTIC ANEMIA

- Investigator: UPPER AND LOWER ENDOSCOPY WERE PERFORMED, NO BLEEDING LESIONS WERE DETERMINED. GYNECOLOGY REPORT IDENTIFIED MYOMA. BIOPSY OF BONE MARROW CONFIRMED TOXIC MYELOSUPPRESSION, CAUSE STILL UNKNOWN

- AbbVie: Event is more likely pre-existing with low Hemoglobin levels at baseline. Risk factors include pre-existing ulcerative colitis and myoma seen on gynecologic report as noted by PI.

Relevant Laboratory & Other Diagnostic Tests

Unknown date BIOPSY OF BONE MARROW: Toxic effect on the bone marrow

[redacted] **20[redacted] CT ENTEROGRAPHY:** NORMAL APPEARANCE OF SMALL BOWEL

[redacted] **20[redacted] FERITIN:** 98.9 MCG/L (normal 13 to 150)

[redacted] **20[redacted] HEMOGLOBIN:** 95 G/L (normal 115 to 158)

[redacted] **20[redacted] HEMOGLOBIN:** 90 G/L (normal 115 to 158)

[redacted] **20[redacted] HEMOGLOBIN:** 89 G/L (normal 115 to 158)

[redacted] **20[redacted] HEMOGLOBIN:** 74 G/L (normal 115 to 158)

[redacted] **20[redacted] HEMOGLOBIN:** 70 G/L (normal 119 to 157)

[redacted] **20[redacted] HEMOGLOBIN:** 112 G/L (normal 119 to 157)

[redacted] **20[redacted] ILEOCOLONOSCOPY:** HYSTOPATHOLOGY SHOWES MINIMAL ACTIVE CHRONIC INFLAMMATION OF THE COLON MUCOSA, WITHOUT EVIDENT DYSPLASIA

[redacted] **20[redacted] MCV:** 68 FL (normal 80 to 100)

[redacted] **20[redacted] MCV:** 72.2 FL (normal 83 to 97.2)

[redacted] **20[redacted] MCV:** 80 FL (normal 83 to 97.2)

[redacted] **20[redacted] UPPER ENDOSCOPY:** Normal

[redacted] **20[redacted] WHITE BLOOD CELLS:** 3.4 X10**9/L (normal 3.4 to 9.7)

[redacted] **20[redacted] WHITE BLOOD CELLS:** 5.1 X10**9/L (normal 3.4 to 9.7)

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
子宮頚部扁平上皮癌	X	X		X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 30 mg	4[redacted]	FEMALE	WHITE

Medical History	Onset Year
EXTENSIVE UC/PANCOLITIS	20[redacted]
OTHER: FRACTURE OF RIGHT MALLEOLAR JOINT	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	FORMER	0.5 PACK	2	20[redacted]
CIGARS	NEVER			
PIPES	NEVER			

Alcohol Use	Status	Number/Day
ALCOHOL	CURRENT	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 ABT-494 (IND)	45 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 57	57
M14-234 SS3 ABT-494 (MAIN)	30 mg	ORAL	QD	[redacted]20[redacted] / 58	[redacted]20[redacted] / 419	362
M14-533 ABT-494 (LTE)	30 mg	ORAL	QD	[redacted]20[redacted] / 420	[redacted]20[redacted] / 616	197

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
MESALAZINE	1 g	QID	Y-M: 20[redacted]
AZATHIOPRINE	50 mg	BID	Y-M: 20[redacted]
AZATHIOPRINE	50 mg	TID	Y-M: 20[redacted]
PREDNISONE	20 mg	BID	Y-M: 20[redacted]
PREDNISONE	20 mg	QD	Y-M: 20[redacted]
DROTAVERINE	40 mg	OTHER: AS NEEDED	Y-M: 20[redacted] / -278

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
MESALAZINE	1 g	QID	Y-M: 20[redacted]	Not reported
DROTAVERINE	40 mg	OTHER: AS NEEDED	Y-M: 20[redacted] / -278	ONGOING
METAMIZOLE	500 mg	TID	Y-M: 20[redacted] / 177	ONGOING

Event #1: Serious Adverse Event, AE Leading to Discontinuation of Study Drug, Event of Interest-Possible Malignancies, Event of Interest-Malignancy, Event of Interest-Malignancies Excl NMSC

Event Description	SQUAMOUS CELL CARCINOMA OF CERVIX OF UTERI
Preferred term	子宮頚部扁平上皮癌
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 603 / 184
Age at AE Onset	4[redacted]

Laboratory Testing

[redacted]20[redacted] (RX DAY 184): NPTST175-HISTOLOGY: CARCINOMA [NOT REPORTED - NOT REPORTED] HISTOLOGY

Microbiology

NOT REPORTED

AE Stopped Initial Rx Day / Rx Day	ONGOING
Duration of AE	ONGOING
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	PROGRESSION FROM POSSIBLE DYSPLASIA
Discontinued Study Drug Due to the Event	YES
SAE Criteria	IMPORTANT MEDICAL EVENT REQUIRING MEDICAL OR SURGICAL INTERVENTION

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はスロバキア共和国の 4[redacted] 歳女性であり，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，子宮頚部の扁平上皮癌の事象を発現した。関連する病歴は，元喫煙者（1 日 0.5 箱を 2 年間），潰瘍性大腸炎及び現飲酒者（1 日 2 杯未満）であった。

Event 1 の臨床経過：

投与603日後＊，被験者は子宮頚部の扁平上皮癌を発現した。

投与591日後＊，被験者は月経と関係のない膣出血を経験し始めた。投与603日後＊ ，被験者は子宮頸癌の疑いで婦人科医の診察を受けた。投与615日後＊，組織検査の結果，子宮頚部の癌が指摘された。被験者は外科療法を受けることとなった。

投与659日後＊，被験者は入院し，検査が完了した。投与660日後＊，被験者は退院した。

ヒトパピローマウイルス感染の有無は確認できなかった。治験薬の投与は完全に中止された。

The patient's past medications include:

PREDNISON for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Blinded)

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1) Squamous cell carcinoma of the cervix (10041848) (Squamous cell carcinoma of the cervix (10041848)) [v.23.0] [10041848]

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

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

Dechallenge: No

Alternative Etiology for UPADACITINIB (Blinded)

Event of SQUAMOUS CELL CARCINOMA OF CERVIX OF UTERI

- Investigator: Progression from possible dysplasia

- AbbVie: Events etiology more likely related to HPV infection; Human papillomavirus (HPV) is central to the development of cervical neoplasia and can be detected in 99.7 percent of cervical cancers.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] GYNAECOLOGIC EXAMINATION/ULTRASOUND:** Ca cervicis IIA, post chemotherapy, radiotherapy, brachytherapy. Cervix with no definite lesion. Surgical therapy is not indicated due to good response to oncological therapy.

[redacted] **20[redacted] GYNAECOLOGIC ULTRASOUND:** Carcinoma of the cervix uteri squamocellular stage TIIB, referred for neoadjuvant radiotherapy.

[redacted] **20[redacted] HISTOLOGY:** Specimen: cervical tissue - well-differentiated non-keratising squamous carcinoma of cervix

[redacted] **20[redacted] MRI:** Stage II A1

20[redacted] PAP SMEAR: negative

[redacted] **20[redacted] PET CT (FDG):** Post neoadjuvant therapy of Ca cervicis uteris with no FDG-avid viable tissue in the pelvic region on the PET CT scan. Myoma uteri.

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
蜂巣炎	X			X
平均赤血球容積増加				X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	3[redacted]	FEMALE	WHITE

Medical History	Onset Year
BILATERAL CATARACT	20[redacted]
CATARACTS SECONDARY TO PREDNISONE	20[redacted]
EXTENSIVE UC/PANCOLITIS	20[redacted]
GASTRITIS	20[redacted]
GENERALIZED JOINT TENDERNESS ARTHRITIS	20[redacted]
HEADACHES	20[redacted]
INTERMITTENT ANEMIA	20[redacted]
IRITIS	20[redacted]
NASAL ULCERS	20[redacted]
OSTEOPEMINA	20[redacted]
PALPITATIONS IDIOPATHIC	20[redacted]
ULCERATIVE COLITIS	20[redacted]
UVEITIS	20[redacted]

Prior Procedures	Procedure Year
PRIOR PROCEDURES: BILATERAL CATARACT REMOVAL	20[redacted]
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	CURRENT	1 PACK	3	
CIGARS	NEVER			
PIPES	NEVER			

Alcohol Use	Status	Number/Day
ALCOHOL	CURRENT	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS2 ABT-494 (IND)	45 mg	ORAL	QD	[redacted] / 1	[redacted] / 55	55
M14-234 SS3 ABT-494 (MAIN)	15 mg	ORAL	QD	[redacted] / 56	[redacted] / 420	365
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted] / 421		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
METHOTREXATE	15 mg	QD	Y-M: [redacted]
PARACETAMOL	1 g	QD	Y-M: [redacted]
FOLIC ACID	5 mg	OTHER: DAILY	Y: [redacted]
MESALAZINE	1.6 g	OTHER: DAILY	Y: [redacted]
PREDNISONE	5 mg	OTHER: DAILY	Y: [redacted]
SULFASALAZINE	10 mg	OTHER: EVERY SECOND DAY	Y: [redacted]
CALCIUM CARBONATE;GLYCINE	2 mg	OTHER: DAILY	Y: [redacted]
ERGOCALCIFEROL	50 000 OTHER: IU	OTHER: WEEKLY	Y: [redacted]
LANSOPRAZOLE	30 mg	OTHER: DAILY	Y: [redacted]

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
PARACETAMOL	1 g	QD	Y-M: [redacted]	Not reported
CAFFEINE;CODEINE;MEPROBAMATE;PARACETAMOL	2 OTHER: TABLETS	PRN	Y-M: [redacted] / 97	Not reported
AMOXICILLIN	1 g	TID	Y-M: [redacted] / 98	Y-M: [redacted] / 103
AMOXICILLIN;CLAVULANIC ACID	1 G 4 HOURLY g	OTHER: 4 HOURLY	Y-M: [redacted] / 98	Y-M: [redacted] / 98
AMOXICILLIN;CLAVULANIC ACID	625 mg	TID	Y-M: [redacted] / 98	Y-M: [redacted] / 101
FOLIC ACID	5 mg	OTHER: DAILY	Y: [redacted]	Not reported
CALCIUM CARBONATE;GLYCINE	2 mg	OTHER: DAILY	Y: [redacted]	Not reported

ERGOCALCIFEROL	50 000 OTHER: IU	OTHER: WEEKLY	Y: 20[redacted]	Not reported
LANSOPRAZOLE	30 mg	OTHER: DAILY	Y: 20[redacted]	Not reported

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

Event Description	CELLULITIS 5TH FINGER RIGHT HAND
Preferred term	蜂巣炎
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 517 / 97
Age at AE Onset	3[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	551 / 131
Duration of AE	35 DAYS
Severity	SEVERE
Relation to Study Drug by Investigator	REASONABLE POSSIBILITY
Investigator Alternative Etiology	NOT REPORTED
Discontinued Study Drug Due to the Event	NO
SAE Criteria	IMPORTANT MEDICAL EVENT REQUIRING MEDICAL OR SURGICAL INTERVENTION

Event #2: Event of Interest - Anemia

Event Description	INCREASED MCV
Preferred term	平均赤血球容積増加
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 855 / 435
Age at AE Onset	3[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	NOT REPORTED
Duration of AE	NOT REPORTED
Severity	MILD
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]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は南アフリカの 3[redacted] 歳女性であり，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，右手第 5 指の蜂巣炎の事象を発現した。関連する病歴は，潰瘍性大腸炎，全身の関節圧痛及び関節炎，現喫煙者（1 日 1 箱を 3 年間）及び現飲酒者（1 日 2 杯未満）であった。

Event 1 の臨床経過：

投与517日後＊，被験者は右手第 5 指の蜂巣炎を発現した。投与551日後＊，右手第 5 指の蜂巣炎は消失した。

本事象発現前の投与の約16ヵ月後＊，被験者は右手第5指の爪真菌症（非重篤）を経験した。その後，投与から約17ヵ月目＊初旬に爪を除去した。投与517日後＊，被験者は感染の悪化による蜂巣炎と診断された。 指全体が赤く腫れており，膿が出ていた。被験者は抗生物質での治療を完了し，傷の管理を継続した。被験者は週 1 回の通院を継続し，著しい改善が認められた。

投与された薬剤は，アモキシシリン，stilpane 及びオーグメンチンであった。

The patient's past medications include:

ASACOL for ULCERATIVE COLITIS (20[redacted] - [redacted] 20[redacted])

PREDNISONE for ULCERATIVE COLITIS (20[redacted] - [redacted] 20[redacted])

SULPHASALAZINE for ULCERATIVE COLITIS (20[redacted] - [redacted] 20[redacted])

METHOTREXATE for ULCERATIVE COLITIS ([redacted] 20[redacted] - 20[redacted])

Causality for UPADACITINIB (Blinded)

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1) Cellulitis of finger (10007910) (Cellulitis (10007882)) [v.23.0] [10007910]

Causality as per reporter (Drug/Vaccine): 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 CELLULITIS 5TH FINGER RIGHT HAND

- Investigator: Not applicable

- AbbVie: Event more likely related to a complication from the nail removal procedure for concurrent onychomycosis approximately 2 weeks prior to event onset.

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
喘息	X			
ウイルス性肺炎	X			X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	3[redacted]	MALE	MULTIPLE

Medical History	Onset Year
ASTHMA: INTERMITTENT	20[redacted]
EXTENSIVE UC/PANCOLITIS	20[redacted]
OTHER: INTERMITTENT LOWER BACK PAIN POST MOTORCAR ACCIDENT	20[redacted]
OTHER: INTERMITTENT SINUS CONGESTION FOR PAST 3 YEARS	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	FORMER	1 PACK	15	20[redacted]
CIGARS	NEVER			
PIPES	NEVER			

Alcohol Use	Status	Number/Day
ALCOHOL	CURRENT	2 - 4 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 ABT-494 (IND)	7.5 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 56	56
M14-234 SS3 ABT-494 (MAIN)	7.5 mg	ORAL	QD	[redacted]20[redacted] / 57	[redacted]20[redacted] / 315	259

M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted]20[redacted] / 316

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
ETHAMBUTOL;ISONIAZID;PYRAZINAMIDE;RIFAMPICIN	4 OTHER: TABLET	QD	Y-M: 20[redacted]
MESALAZINE	1200 mg	TID	Y-M: 20[redacted]
METHOTREXATE	25 mg	OTHER: WEEKLY	Y-M: 20[redacted]
PREDNISONE	15 mg	QD	Y-M: 20[redacted]
FLUTICASONE	1 OTHER: SPRAY	QD	Y-M: 20[redacted] / -28

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
MESALAZINE	1200 mg	TID	Y-M: 20[redacted]	ONGOING
METHOTREXATE	25 mg	OTHER: WEEKLY	Y-M: 20[redacted]	ONGOING
FLUTICASONE	1 OTHER: SPRAY	QD	Y-M: 20[redacted] / -28	ONGOING
BUDESONIDE	1 OTHER: NEBULE	BID	Y-M: 20[redacted] / 111	ONGOING
FEXOFENADINE	180 mg	QD	Y-M: 20[redacted] / 111	ONGOING
IPRATROPIUM;SALBUTAMOL	1 OTHER: NEBULE	QID	Y-M: 20[redacted] / 111	ONGOING
METHYLPREDNISOLONE	40 mg	BID	Y-M: 20[redacted] / 111	ONGOING
ENOXAPARIN	40 mg	QD	Y-M: 20[redacted] / 371	Y-M: 20[redacted] / 378
IPRATROPIUM;SALBUTAMOL	2.5/800 mg	QID	Y-M: 20[redacted] / 371	Y-M: 20[redacted] / 378
SALBUTAMOL	2 mg	PRN	Y-M: 20[redacted] / 371	Y-M: 20[redacted] / 372
ERTAPENEM	1 g	QD	Y-M: 20[redacted] / 372	Y-M: 20[redacted] / 377
AZITHROMYCIN	25 mg	OTHER: THREE TIMES PER WEEK	Y-M: 20[redacted] / 377	Y-M: 20[redacted] / 398
BUDESONIDE	25 mg	TID	Y-M: 20[redacted] / 377	Y-M: 20[redacted] / 384
METHYLPREDNISOLONE	16 mg	QD	Y-M: 20[redacted] / 377	Y-M: 20[redacted] / 382

Event #1: Serious Adverse Event

Event Description	EXACERBATION OF ASTHMA
Preferred term	喘息
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 426 / 111

Age at AE Onset	3[redacted]
Laboratory Testing	
[redacted]20[redacted] (RX DAY 111): Hemoglobin: 152 [130 - 170] G/L; NPTST108-CRP: 1 [0 - 5] MG/L; NPTST137-ESTIMATED GFR: 89 [0 - 90] ML/MIN; NPTST181-IGE: 97.3 [0 - 22] IU/ML; NPTST247-PHADIATOP: 0.19 [0 - 0.35] IU/ML; NPTST325-TROPONIN I (STRATUS): <10 [0 - 10] MG/L	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	435 / 120
Duration of AE	10 DAYS
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	PRE -EXISTING CONDITION
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION, IMPORTANT MEDICAL EVENT REQUIRING MEDICAL OR SURGICAL INTERVENTION

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

Event Description	PNEUMONIA (VIRAL)
Preferred term	ウイルス性肺炎
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 686 / 371
Age at AE Onset	3[redacted]
Laboratory Testing	
[redacted]20[redacted] (RX DAY 371): Bicarbonate: 30 [21 - 31] MMOL/L; Chloride: 98 [101 - 109] MMOL/L; Creatinine: 82 [59 - 104] UMOL/L; Erythrocytes: 4.91 [4.5 - 5.9] 10^12/L; Hemoglobin: 143 [125 - 173] G/L; Leukocytes: 44 [40 - 50] 10^9/L; NPTST069-C-REACTIVE PROTEIN: 132 [NOT REPORTED - 5] mg/L; NPTST211-MCH: 29 [28 - 35] PG; NPTST213-MCV: 90 [81 - 95] FL; Potassium: 4.8 [3.5 - 5.1] MMOL/L; Sodium: 136 [136 - 146] MMOL/L	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	692 / 377
Duration of AE	7 DAYS
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	MEDICAL HISTORY
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION, IMPORTANT MEDICAL EVENT REQUIRING MEDICAL OR SURGICAL INTERVENTION

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は南アフリカの 3[redacted] 歳男性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，喘息の悪化の事象を発現した。関連する病歴は，喘息及び断続的な副鼻腔うっ血，元喫煙者（1 日 1 箱を 15 年間）及び現飲酒者（1 日 2–4 杯）であった。

Event 1 の臨床経過：

投与426日後＊，被験者は喘息の悪化を発現した。投与435日後＊，喘息の悪化は消失した。

本事象発現前の投与206日後＊，被験者は喘息の悪化（非重篤）を発現していた。

被験者は 投与427日後＊ ，喘息の悪化があり，入院した。被験者は，息切れ及び持続的な咳の発作に伴う失神を訴えた。胸部 CT 検査（日付不明）が実施され，投与429日後＊ に気管支鏡検査及び気管支洗浄を受けた。投与436日後＊，被験者は退院した。

投与された薬剤は，パルミコート，fexo，ソル・メドロール，prednisone 及び duolin nebulizer であった。

The patient's past medications include:

PREDNISONE for ULCERATIVE COLITIS ([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])

Causality for UPADACITINIB (Open Label)

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1) Exacerbation of asthma (10015575) (Asthma (10003553)) [v.23.0] [10015575]

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 (Open Label)

Event of EXACERBATION OF ASTHMA

- Investigator: PRE -EXISTING CONDITION

- AbbVie: EVENT IS MORE LIKELY RELATED TO PRE-EXISTING HISTORY OF ASTHMA.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] BRONCHIAL LAVAGE:** No Pus cells Bacteria absent Yeast cells absent Acid bacilli bacterial flora absent normal oral bacteria flora

20[redacted] CHEST CT: Results not reported

Unknown date CHEST X-RAY: Results not provided

[redacted] **20[redacted] ECG:** NORMAL

[redacted] **20[redacted] IGE:** 97.3 IU/mL (normal 0 to 22)
Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は南アフリカの 3[redacted] 歳男性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，肺炎（ウイルス性）の事象を発現した。関連する病歴は，喘息，潰瘍性大腸炎，副鼻腔うっ血，元喫煙者（1 日 1 箱を 15 年間）及び現飲酒者（1 日 2–4 杯）であった。

Event 2 の臨床経過：

投与686日後＊，被験者は肺炎（ウイルス性）を発現した。投与692日後＊，肺炎（ウイルス性）は消失した。

入院の約 1 週間前，被験者は喘息の悪化（非重篤）を経験していた。被験者は急性呼吸不全及び急性の息切れも発現したが，治療に反応しなかった。投与686日後＊　，被験者は肺炎で入院した。投与692日後＊，被験者は退院した。

投与された薬剤は，ventolin，duolin，クレキサン及び entapenem であった。

The patient's past medications include:

PREDNISONE for UC ([redacted])

BINDOCLAV for BRONCHITIS ([redacted])

PHOLTEX for BRONCHITIS ([redacted])

Causality for UPADACITINIB (Open Label)

---

1)　Pneumonia viral (10035737)　(Pneumonia viral (10035737))　[v.22.0]　[10035737]

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

Causality as per Mfr. (Drug/Vaccine): Reasonable possibility

Dechallenge: Not Applicable

Alternative Etiology for UPADACITINIB (Open Label)

Event of PNEUMONIA (VIRAL)

- Investigator: Medical History

- AbbVie: Not applicable

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] BRONCHIAL LAVAGE:** NO PUS CELLS BACTERIA ABSENT YEAST CELLS ABSENT ACID BACILLI BACTERIAL FLORA ABSENT NORMAL ORAL BACTERIA FLORA

[redacted] **20[redacted] CRP:** 1 MG/L (normal 0 to 5)

[redacted] **20[redacted] EGFR:** 89 ML/Min (normal 0 to 90)

[redacted] **20[redacted] HEMATOCRIT:** 44 % (normal 40 to 50)

[redacted] **20[redacted] HEMOGLOBIN:** 15.2 G/DL (normal 13.0 to 17.0)

[redacted] **20[redacted] HEMOGLOBIN:** 14.3 G/DL (normal 12.5 to 17.3)

[redacted] **20[redacted] IGE:** 97.3 IU/mL (normal 0 to 22.0)

[redacted] **20[redacted] MCH:** 29 PG (normal 28 to 35)

[redacted] **20[redacted] MCV:** 90 FL (normal 81 to 95)

[redacted] **20[redacted] PHADIATOP:** 0.19 IU/mL (normal 0.00 to 0.35)

[redacted] **20[redacted] RED BLOOD CELLS:** 4.91 X10**12/L (normal 4.5 to 5.9)

[redacted] **20[redacted] TROPONIN 1:** <10 mg/L

[redacted] **20[redacted] X-RAY:** No abnormalities seen.

[redacted] **20[redacted] X-RAY:** Left lower lobe vague opacification with partial effacemt of the left hemidiaphragm countour suggestive of subsegmental consolidation.

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
肺炎	X			X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	3[redacted]	FEMALE	WHITE

Medical History	Onset Year
COGNITIVE OR PSYCHIATRIC DISORDER: POST TRAUMATIC STRESS DISORDER	20[redacted]
DEPRESSION: DUE TO TRAUMATIC EVENT	20[redacted]
DRUG ABUSE: INTERMITTENT COCAINE USE STOPPED 1 YEAR AGO	20[redacted]
LEFT SIDED UC	20[redacted]
OTHER: ACNE	20[redacted]
OTHER: INTERMITTENT SINUS CONGESTION	19[redacted]
OTHER: JOINT PAIN ANKLES AND KNEES	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	CURRENT	0.05 PACK	15	
CIGARS	NEVER			
PIPES	NEVER			

Alcohol Use	Status	Number/Day
ALCOHOL	CURRENT	2 - 4 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 ABT-494 (IND)	45 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 57	57

M14-234 SS3 ABT-494 (MAIN)	30 mg	ORAL	QD	[redacted]20[redacted] / 58 [redacted]20[redacted] / 365	308
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted]20[redacted] / 367	

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
METHOTREXATE	25 mg	1 time per week	Y-M: 20[redacted]
BUDESONIDE	1 OTHER: ENEMA	BID	Y-M: 20[redacted]
METHOTREXATE	25 mg	OTHER: WEEKLY	Y-M: 20[redacted]
PROBIOTICS NOS	1 OTHER: TABLET	QD	Y-M: 20[redacted]
CIPROFLOXACIN	500 mg	BID	Y-M: 20[redacted]
METRONIDAZOLE	500 mg	BID	Y-M: 20[redacted]
FOLIC ACID	1 OTHER: TABLET	QD	Y-M: 20[redacted] / -276
PARACETAMOL;TRAMADOL	2 OTHER: TABLETS	PRN	Y-M: 20[redacted] / -128
TETRACYCLINE	300 mg	QD	Y-M: 20[redacted] / -36
DROSPIRENONE;ETHINYLESTRADIOL	1 OTHER: TABLET	QD	Y: 20[redacted]
PANTOPRAZOLE	20 mg	PRN	Y: 20[redacted] / -347

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
FOLIC ACID	5 mg	OTHER: ONCE WEEKLY	Y-M: 20[redacted] / 170	ONGOING
METHOTREXATE	25 mg	OTHER: ONCE WEEKLY	Y-M: 20[redacted] / 170	Y-M: 20[redacted] / 343
AMOXICILLIN;CLAVULANIC ACID	500 mg	BID	Y-M: 20[redacted] / 292	Y-M: 20[redacted] / 322
BUDESONIDE	200 mg	TID	Y-M: 20[redacted] / 343	Y-M: 20[redacted] / 350
LEVOFLOXACIN	500 mg	QD	Y-M: 20[redacted] / 343	Y-M: 20[redacted] / 344
PIPERACILLIN	4 g	QID	Y-M: 20[redacted] / 343	Y-M: 20[redacted] / 350
SALBUTAMOL	200 mg	PRN	Y-M: 20[redacted] / 343	Y-M: 20[redacted] / 350
HYDROCORTISONE	200 mg	OTHER: ONCE ONLY	Y-M: 20[redacted] / 344	Y-M: 20[redacted] / 344
POVIDONE-IODINE	1 OTHER: SPRAY	TID	Y-M: 20[redacted] / 346	Y-M: 20[redacted] / 350
XYLOMETAZOLINE	1 OTHER: PUFF	TID	Y-M: 20[redacted] / 346	Y-M: 20[redacted] / 350
DROSPIRENONE;ETHINYLESTRADIOL	1 OTHER: TABLET	QD	Y: 20[redacted]	ONGOING
PANTOPRAZOLE	20 mg	PRN	Y: 20[redacted] / -347	Y-M: 20[redacted] / 559

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

Event Description	PNEUMONIA
Preferred term	肺炎
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 707 / 341
Age at AE Onset	3[redacted]
Laboratory Testing	
[redacted]20[redacted] (RX DAY 343): Leukocytes: 11.4 [4 - 10.5] 10^9/L; NPTST108-CRP: 150.8 [0 - 5] MG/L; NPTST109-CULTURE: NORMAL [NOT REPORTED - NOT REPORTED] NOT APPLICABLE	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	716 / 350
Duration of AE	10 DAYS
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	INFLUENZA
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はオランダの 3[redacted] 歳女性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，肺炎の事象を発現した。関連する病歴は，断続的な副鼻腔うっ血，断続的な副鼻腔炎，潰瘍性大腸炎，現喫煙者（1 日 0.5 箱を 15 年間）及び現飲酒者（1 日 2–4 杯）であった。

この被験者は，先行の M14-234 試験では，被験者番号 [redacted] であり，20[redacted] 年 [redacted] 月 [redacted] 日から 20[redacted] 年 [redacted] 月 [redacted] 日まで盲検化された治験薬を投与された。

Event 1 の臨床経過：

投与707日後＊，被験者は肺炎を発現した。投与716日後＊，肺炎は消失した。

投与701日後＊，被験者はインフルエンザ（非重篤）を発現し，投与709日後＊，発熱及び息切れのため入院した。被験者は肺炎と診断された。被験者は，7 日間の抗生物質の投与を完了した。被験者の症状は改善したが，頭痛及び振戦は続いていた。被験者は神経科を紹介された。投与716日後＊，被験者は退院した。

投与された薬剤は，ventolin，レボフロキサシン，ピペラシリン及びパルミコートであった。

The patient's past medications include:

ENTOCORT for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

CIFLOC for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

FLAGYL for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Open Label)

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1) Pneumonia (10035664) (Pneumonia (10035664)) [v.22.1] [10035664]

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 (Open Label)

Event of PNEUMONIA

- Investigator: Influenza

- AbbVie: Event more likely a complication of influenza infection, a common viral infection in the general population. Additional risk factors include current smoker (0.5 ppd) and alcohol (2-4 drinks per day).

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] CHEST X-RAY:** SHADOWING IN BOTH MIDZONES

[redacted] **20[redacted] CRP:** 150.8 MG/L (normal 0 to 5)

[redacted] **20[redacted] URINE CULTURE:** NORMAL

[redacted] **20[redacted] WBC:** 11.4 X10**9/L (normal 4 to 10.5)

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
潰瘍性大腸炎	X			

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	3[redacted]	FEMALE	MULTIPLE

Medical History	Onset Year
BILATERAL SHOULDER TENDONITIS	20[redacted]
FATIGUE	20[redacted]
GASTRIC REFLUX	20[redacted]
INTERMITTENT MIGRAINE	20[redacted]
LEFT SIDED UC	20[redacted]
LOWER BACK PAIN	20[redacted]
TUBAL LIGATION	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	CURRENT	0.25 PACK	10	
CIGARS	NEVER			
PIPES	NEVER			

Alcohol Use	Status	Number/Day
ALCOHOL	NEVER	

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-675 Placebo (IND)		ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 64	64

M14-675 ABT-494 (OL)	45 mg	ORAL	QD	[redacted]20[redacted] / 65	[redacted]20[redacted] / 112	48
M14-234 SS3 Placebo (MAIN)		ORAL	QD	[redacted]20[redacted] / 113	[redacted]20[redacted] / 366	254
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted]20[redacted] / 367		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
METHOTREXATE	25 mg	1 time per week	Y-M: 20[redacted]
INFLIXIMAB	0 OTHER	OTHER: 0	Y-M: 20[redacted]
MESALAZINE	1 OTHER: ENEMA	OTHER: ENEMA	Y-M: 20[redacted]
MESALAZINE	1 OTHER: SUPPOSITRY	OTHER: SUPPOSITRY	Y-M: 20[redacted]
AZATHIOPRINE	150 mg	QD	Y-M: 20[redacted]
ETROLIZUMAB	105 mg	OTHER: 4 WEEKLY	Y-M: 20[redacted]
LESSERTIA FRUTESCENS	1 OTHER: CAPSULE	QD	Y-M: 20[redacted]
PREDNISONE	5 mg	QD	Y-M: 20[redacted]
TIOGUANINE	0.5 OTHER: TABLET	QD	Y-M: 20[redacted]
GARCINIA MANGOSTANA	30 mL	BID	Y-M: 20[redacted]
BUDESONIDE;SODIUM CHLORIDE	1 OTHER: ENEMA	QD	Y-M: 20[redacted]
CETIRIZINE	1 OTHER: TABLET	QD	Y-M: 20[redacted] / -359
FLUTICASONE	1 OTHER: SPRAY	QD	Y-M: 20[redacted] / -359
ASCORBIC ACID	1 OTHER: TABLET	QD	Y-M: 20[redacted] / -282
ASCORBIC ACID	5 mL	QD	Y-M: 20[redacted] / -282
IRON IN OTHER COMBINATIONS	1 OTHER: TABLET	QD	Y-M: 20[redacted] / -293
HOMEOPATHIC PREPARATION	1/4 OTHER: TEASPOON	BID	Y-M: 20[redacted] / -261
METFORMIN	500 mg	BID	Y-M: 20[redacted] / -203
PREGABALIN	1 OTHER: TABLET	QD	Y-M: 20[redacted] / -119
HYOSCINE	1 OTHER: TABLET	PRN	Y-M: 20[redacted] / -65
METFORMIN;VILDAGLIPTIN	1 OTHER: CAPSULE	BID	Y-M: 20[redacted] / -51
MEBEVERINE	1 OTHER: TABLET	QD	Y: 20[redacted]
METHYLSULFONYLMETHANE	2 OTHER: CAPSULE	QD	Y: 20[redacted]

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
LESSERTIA FRUTESCENS	1 OTHER: CAPSULE	QD	Y-M: 20[redacted]	Not reported
GARCINIA MANGOSTANA	30 mL	BID	Y-M: 20[redacted]	Y-M: 20[redacted] / 45
CETIRIZINE	1 OTHER: TABLET	QD	Y-M: 20[redacted] / -359	Not reported
FLUTICASONE	1 OTHER: SPRAY	QD	Y-M: 20[redacted] / -359	Not reported
ASCORBIC ACID	1 OTHER: TABLET	QD	Y-M: 20[redacted] / -282	Not reported
ASCORBIC ACID	5 mL	QD	Y-M: 20[redacted] / -282	Not reported
IRON IN OTHER COMBINATIONS	1 OTHER: TABLET	QD	Y-M: 20[redacted] / -293	Not reported
HOMEOPATHIC PREPARATION	1/4 OTHER: TEASPOON	BID	Y-M: 20[redacted] / -261	Not reported
METFORMIN	500 mg	BID	Y-M: 20[redacted] / -203	Not reported
PREGABALIN	1 OTHER: TABLET	QD	Y-M: 20[redacted] / -119	Not reported
HYOSCINE	1 OTHER: TABLET	PRN	Y-M: 20[redacted] / -65	Not reported
METFORMIN;VILDAGLIPTIN	1 OTHER: CAPSULE	BID	Y-M: 20[redacted] / -51	Not reported
CALCIUM CHLORIDE;POTASSIUM;SODIUM LACTATE	1000 mL	QID	Y-M: 20[redacted] / 12	ONGOING
METHYLPREDNISOLONE	100 mg	TID	Y-M: 20[redacted] / 12	ONGOING
GLIMEPIRIDE	4 mg	QD	Y-M: 20[redacted] / 15	Y-M: 20[redacted] / 41
PREDNISONE	30 mg	QD	Y-M: 20[redacted] / 15	Not reported
STERCULIA URENS	5 mL	PRN	Y-M: 20[redacted] / 57	ONGOING
BETAMETHASONE	5.7 mg	OTHER: STAT	Y-M: 20[redacted] / 62	Y-M: 20[redacted] / 62
AZITHROMYCIN	500 mg	QD	Y-M: 20[redacted] / 68	Y-M: 20[redacted] / 70
BUDESONIDE	1 OTHER: NEBULE	QD	Y-M: 20[redacted] / 68	ONGOING
CHLORAMPHENICOL	1 OTHER: APPLICATION	BID	Y-M: 20[redacted] / 107	Y-M: 20[redacted] / 111
ERYTHROMYCIN	250 mg	BID	Y-M: 20[redacted] / 107	Y-M: 20[redacted] / 111
BETAMETHASONE	2 mL	OTHER: STAT	Y-M: 20[redacted] / 162	Y-M: 20[redacted] / 162
LIDOCAINE	20 mg	OTHER: STAT	Y-M: 20[redacted] / 162	Y-M: 20[redacted] / 162
PARACETAMOL;TRAMADOL	37.5/325 mg	PRN	Y-M: 20[redacted] / 162	Y-M: 20[redacted] / 163
ATORVASTATIN	10 mg	QD	Y-M: 20[redacted] / 203	ONGOING

UBIDECARENONE	150 mg	QD	Y-M: 20[redacted] / 203	ONGOING
DOSULEPIN	1 OTHER: TAB	QD	Y-M: 20[redacted] / 205	ONGOING
AMOXICILLIN;CLAVULANIC ACID	375 mg	TID	Y-M: 20[redacted] / 282	Y-M: 20[redacted] / 287
ASCORBIC ACID	1000 mg	QD	Y-M: 20[redacted] / 282	ONGOING
BROMHEXINE	10 mL	TID	Y-M: 20[redacted] / 282	Y-M: 20[redacted] / 287
ERGOCALCIFEROL	1 OTHER: TABLET	QD	Y-M: 20[redacted] / 282	ONGOING
ZINC	1 OTHER: TABLET	QD	Y-M: 20[redacted] / 282	ONGOING
AMOXICILLIN	500 mg	TID	Y-M: 20[redacted] / 311	Y-M: 20[redacted] / 316
CHLORPHENAMINE; PARACETAMOL;PSEUDOEPHEDRINE	2 OTHER: CAPS	TID	Y-M: 20[redacted] / 311	Y-M: 20[redacted] / 316
BETAMETHASONE	1.5 mL	OTHER: STAT	Y-M: 20[redacted] / 325	Y-M: 20[redacted] / 325
VITAMIN B COMPLEX	1 mL	OTHER: STAT	Y-M: 20[redacted] / 325	Y-M: 20[redacted] / 325
ORPHENADRINE	1 OTHER: TABLET	PRN	Y-M: 20[redacted] / 419	ONGOING
MEBEVERINE	1 OTHER: TABLET	QD	Y: 20[redacted]	Not reported
METHYLSULFONYLMETHANE	2 OTHER: CAPSULE	QD	Y: 20[redacted]	Not reported

Event #1: Serious Adverse Event

Event Description	WORSENING OF ULCERATIVE COLITIS
Preferred term	潰瘍性大腸炎
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 378 / 12
Age at AE Onset	3[redacted]

Laboratory Testing

[redacted]20[redacted] (RX DAY 12): Alanine Aminotransferase: 11 [0 - 35] U/L; Albumin: 38 [20 - 35] G/L; Alkaline Phosphatase: 2 [35 - 105] U/L; Aspartate Aminotransferase: 11 [0 - 32] U/L; Basophils: 0.02 [0 - 0.02] 10^9/L; Bilirubin: 3 [0 - 21] UMOL/L; Chloride: 106 [98 - 107] MMOL/L; Creatinine: 79 [49 - 90] UMOL/L; Eosinophils: 0 [0 - 0.45] 10^9/L; Erythrocytes: 4.37 [3.8 - 4.8] 10^12/L; Hematocrit: 0.371 [0.36 - 0.46] FRACTION OF 1; Leukocytes: 6.35 [3.92 - 9.88] 10^9/L; Lymphocytes: 1.05 [1 - 4] 10^9/L; Monocytes: 0.14 [0.18 - 1] 10^9/L; NPTST031-ANION GAP: 16 [8 - 20] MMOL/L; NPTST096-CO2: 24 [22 - 29] MMOL/L; NPTST108-CRP: 8 [0 - 5] MG/L; NPTST137-ESTIMATED GFR: 83 [60 - 90] ML/MIN/1.73M2; NPTST294-SARS-COV-2: NEGATIVE [0 - 0] UNIT NOT REPORTED; NPTST334-UREA: 4.4 [0 - 8.4] MMOL/L; Neutrophils: 5.11 [2 - 7.5] 10^9/L; Platelets: 305 [150 - 450] 10^9/L; Potassium: 4.5 [3.5 - 5.1] MMOL/L; Sodium: 141 [136 - 145] MMOL/L

Microbiology

NOT REPORTED

AE Stopped Initial Rx Day / Rx Day	ONGOING
Duration of AE	ONGOING
Severity	SEVERE

Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	DISEASE UNDER STUDY
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted] 20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は南アフリカの 3[redacted] 歳女性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，潰瘍性大腸炎の悪化の事象を発現した。関連する病歴は，潰瘍性大腸炎，現喫煙者（1 日 0.25 箱を 10 年間）及び非飲酒者であった。

Event 1 の臨床経過：

投与378日後＊，被験者は潰瘍性大腸炎の悪化を発現した。

本事象発現前の投与336日後＊　　，被験者は排便回数の増加及び直腸出血を経験していた。投与353日後＊，内視鏡検査が実施された。

投与378日後＊　，被験者は静脈内投与による副腎皮質ステロイドでの治療のため入院した。投与381日後＊，被験者は退院した。

投与された薬剤は，prednisone，ringer lactat（塩化カルシウム，塩化カリウム，乳酸ナトリウム），及びソル・メドロールであった。

The patient's past medications include:

SALAZOPYRIN for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

METHOTREXATE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

INFLIXIMAB for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

ASACOL for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

AZATHIOPRINE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

ETROLIZUMAB for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

PREDNISONE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

LANVIS for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

ENTOCORT ENEMAS for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Open Label)

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1) Colitis ulcerative aggravated (10009901) (Colitis ulcerative (10009900)) [v.23.1] [10009901]

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 (Open Label)

Event of WORSENING OF ULCERATIVE COLITIS

- Investigator: Disease under study.

- AbbVie: Event more likely related to pre-existing Ulcerative Colitis.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] ALBUMIN:** 38 G/L (normal 20 to 35)

[redacted] **20[redacted] CRP:** 8 MIN (normal 0 to 5)

[redacted] **20[redacted] ENDOSCOPY:** Local read = 3

[redacted] **20[redacted] MONOCYTES ABS:** 0.14 X10**9/L (normal 0.18 to 1.0)

[redacted] **20[redacted] SARS-COV-2:** Negative

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
肝機能検査値上昇				X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	5[redacted]	FEMALE	MULTIPLE

Medical History	Onset Year
ANAEMIA	20[redacted]
ARTHRALGIA	20[redacted]
ECZEMA	20[redacted]
FUNGAL TOENAIL INFECTION	20[redacted]
LEFT SIDED UC	19[redacted]
VARICOSE VEINS	NOT REPORTED

Prior Procedures	Procedure Year
PRIOR PROCEDURES: FLEXIBLE SIGMOIDOSCOPY	20[redacted]
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	NEVER	

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS2 ABT-494 (IND)	45 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 56	56

M14-234 SS3 Placebo (MAIN)		ORAL	QD	[redacted]20[redacted] / 57 [redacted]20[redacted] / 427	371
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted]20[redacted] / 428	

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
MESALAZINE	1 g	QD	Y-M: 20[redacted]
MESALAZINE	2 g	BID	Y-M: 20[redacted]
CHLORPHENAMINE	4 mg	PRN	Y-M: 20[redacted]
CALCIUM CARBONATE;GLYCINE	2.5 g	QD	Y: 20[redacted]

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
MESALAZINE	2 g	BID	Y-M: 20[redacted]	Not reported
OENOTHERA BIENNIS	1 OTHER: CAPSULE	QD	Y-M: 20[redacted] / 1	Not reported
OMEGA-3 FATTY ACIDS	1 OTHER: CAPSULE	QD	Y-M: 20[redacted] / 1	Not reported
GRISEOFULVIN	500 mg	BID	Y-M: 20[redacted] / 81	Y-M: 20[redacted] / 164
MELOXICAM	15 mg	QD	Y-M: 20[redacted] / 81	Y-M: 20[redacted] / 164
PARACETAMOL	1 g	TID	Y-M: 20[redacted] / 158	Y-M: 20[redacted] / 177
ASCORBIC ACID	1000 mg	QD	Y-M: 20[redacted] / 161	Y-M: 20[redacted] / 177
VITAMIN D NOS	1000 IU	QD	Y-M: 20[redacted] / 161	Y-M: 20[redacted] / 177
ZINC	20 mg	QD	Y-M: 20[redacted] / 161	Y-M: 20[redacted] / 177
AZITHROMYCIN	500 mg	QD	Y-M: 20[redacted] / 171	Y-M: 20[redacted] / 173
SALBUTAMOL	200 ug	PRN	Y-M: 20[redacted] / 171	Y-M: 20[redacted] / 177
DEXAMETHASONE	8 mg	QD	Y-M: 20[redacted] / 177	Y-M: 20[redacted] / 186
PARACETAMOL	1 g	TID	Y-M: 20[redacted] / 177	Y-M: 20[redacted] / 182
AZITHROMYCIN	500 mg	QD	Y-M: 20[redacted] / 178	Y-M: 20[redacted] / 180
CEFTRIAXONE	1 g	QD	Y-M: 20[redacted] / 178	Y-M: 20[redacted] / 184
ENOXAPARIN	80 mg	BID	Y-M: 20[redacted] / 178	Y-M: 20[redacted] / 191
PREDNISONE	40 mg	QD	Y-M: 20[redacted] / 187	Y-M: 20[redacted] / 191
BUDESONIDE	200 ug	BID	Y-M: 20[redacted] / 191	Y-M: 20[redacted] / 247
SALBUTAMOL	100 ug	PRN	Y-M: 20[redacted] / 191	Y-M: 20[redacted] / 247
FOSFOMYCIN	3 g	QD	Y-M: 20[redacted] / 206	Y-M: 20[redacted] / 206
CITRIC ACID;MAGNESIUM	1 OTHER: SACHET	TID	Y-M: 20[redacted] / 331	Y-M: 20[redacted] / 332

OXIDE;SODIUM PICOSULFATE				
MIDAZOLAM	1 mg	QD	Y-M: 20[redacted] / 332	Y-M: 20[redacted] / 332
PROPOFOL	3 mL	QD	Y-M: 20[redacted] / 332	Y-M: 20[redacted] / 332
OXYMETAZOLINE	1 OTHER: SPRAY	QD	Y-M: 20[redacted] / 408	Y-M: 20[redacted] / 414
CALCIUM CARBONATE;GLYCINE	2.5 g	QD	Y: 20[redacted]	Not reported

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

Event Description	COVID 19 PNEUMONIA
Preferred term	COVID-19 肺炎
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 604 / 177
Age at AE Onset	5[redacted]
Laboratory Testing	

[redacted]20[redacted] (RX DAY 178): Albumin: 29 [35 - 52] G/L; Hematocrit: 0.329 [0.4 - 0.5] FRACTION OF 1; Hemoglobin: 112 [125 - 173] G/L; Leukocytes: 9.58 [4 - 11] 10^9/L; NPTST115-D-DIMER: >5.00 [0 - 0.25] MG/L; Potassium: 5.3 [3.5 - 5.1] MMOL/L

Microbiology	

NOT REPORTED

AE Stopped Initial Rx Day / Rx Day	618 / 191
Duration of AE	15 DAYS
Severity	SEVERE
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, IMPORTANT MEDICAL EVENT REQUIRING MEDICAL OR SURGICAL INTERVENTION, LIFE THREATENING

Event #2: Event of Interest - Hepatic Disorder

Event Description	RAISED LFT'S
Preferred term	肝機能検査値上昇
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 633 / 206
Age at AE Onset	5[redacted]
Laboratory Testing	

NOT APPLICABLE

Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	849 / 422
Duration of AE	217 DAYS
Severity	MILD
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]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は南アフリカの 5[redacted] 歳女性であり，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，COVID-19 肺炎の事象を発現した。関連する病歴は，潰瘍性大腸炎，貧血，非喫煙者及び非飲酒者であった。

Event 1 の臨床経過：

投与604日後＊，被験者は COVID-19 肺炎を発現した。投与618日後＊　　，COVID-19 肺炎は消失した。

投与585日後＊　　，被験者は非重篤な COVID-19 感染の事象を発現した。治験責任医師によると，被験者は発熱，咳嗽，疲労及び咽頭痛もあった。

入院前，被験者の咳嗽は徐々に悪化し，酷い息切れを感じ，低酸素症（自宅での酸素飽和度は，室内気で 70%–80%）を発現した。

投与604日後＊　　，被験者は更なる管理のため，入院した。胸部 X 線検査では，重度の COVID-19 肺炎/感染と一致する両側肺の不透明化が認められた。被験者は，酸素，ステロイド及び抗生物質で治療された。被験者は着実に回復した。投与618日後＊，被験者は退院した。

治験責任医師は，炎症性腸疾患が本事象の危険因子であると判断した。

投与された薬剤は，デキサメタゾン，アジスロマイシン，prednisone，paracetamol，エノキサパリン，酸素及びセフトリアキソンであった。

The patient's past medications include:

ASACOL SUPPOSITORIES for ULCERATIVE COLITIS ([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): 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: Not applicable

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

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] ALBUMIN:** 29 G/L (normal 35 to 52)

[redacted] **20[redacted] BMI:** 34.8 Kg/m2

[redacted] **20[redacted] CHEST X-RAY:** Extensive bilateral pulmonary opacification, in keeping with a severe COVID-19 Pneumonitis/ infection. There is dense right lower lobe consolidation.

[redacted] **20[redacted] CHEST XRAY:** SCREENING: Normal

[redacted] **20[redacted] D-DIMER:** >5.00 mg/L

[redacted] **20[redacted] HCT:** 0.329 l/l (normal 0.40 to 0.50)

[redacted] **20[redacted] HGB:** 11.2 G/DL (normal 12.5 to 17.3)

[redacted] **20[redacted] COVID-19 TEST:** Nasopharyngeal swab - Positive

[redacted] **20[redacted] O2 SAT:** 70 to 80 percent

[redacted] **20[redacted] POTASSIUM:** 5.3 MMOL/L (normal 3.5 to 5.1)

[redacted] **20[redacted] WEIGHT:** 8[redacted] KG

[redacted] **20[redacted] WHITE BLOOD CELLS:** 9.58 X10**9/L (normal 4.0 to 11.0)

NON SERIOUS EVENTS AND **OTHER AREAS OF SAFETY INTEREST

Liver function test increased: Asymptomatic. No alternative etiology.

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	X			X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	6[redacted]	MALE	BLACK OR AFRICAN AMERICAN

Medical History	Onset Year
DIABETES TYPE II	20[redacted]
HYPERTENSION	20[redacted]
LATENT TB	20[redacted]
LEFT SIDED UC	20[redacted]
RASH TO PENICILLIN	19[redacted]
ULCERATIVE COLITIS	20[redacted]

Prior Procedures	Procedure Year
PRIOR PROCEDURES: COLONOSCOPY	20[redacted]
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	FORMER	20 PACK	40	20[redacted]
CIGARS	NEVER			
PIPES	NEVER			

Alcohol Use	Status	Number/Day
ALCOHOL	CURRENT	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS2 ABT-494 (IND)	45 mg	ORAL	QD	[redacted] / 1	[redacted] / 57	57
M14-234 SS3 ABT-494 (MAIN)	15 mg	ORAL	QD	[redacted] / 58	[redacted] / 420	363
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted] / 421		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
PREDNISONE	10 mg	QD	Y-M: [redacted]
ISONIAZID	300 mg	QD	Y-M: [redacted]
PYRIDOXINE	25 mg	QD	Y-M: [redacted]
PREDNISONE	30 mg	QD	Y-M: [redacted] / -3
AZATHIOPRINE	150 mg	QD	Y: [redacted]
MESALAZINE	800 mg	TID	Y: [redacted]
INDAPAMIDE;PERINDOPRIL	4 mg	QD	Y: [redacted]

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
TRAMADOL	100 mg	PRN	Y-M: [redacted] / 170	Not reported
CITRIC ACID;MAGNESIUM OXIDE;SODIUM PICOSULFATE	15.5 g	PRN	Y-M: [redacted] / 330	Y-M: [redacted] / 331
KETAMINE	15 mg	OTHER: ONCE	Y-M: [redacted] / 331	Y-M: [redacted] / 331
PROPOFOL	250 mg	OTHER: ONCE	Y-M: [redacted] / 331	Y-M: [redacted] / 331
MESALAZINE	800 mg	TID	Y: [redacted]	Not reported
INDAPAMIDE;PERINDOPRIL	4 mg	QD	Y: [redacted]	Not reported

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

Event Description	COVID-19 INFECTION
Preferred term	COVID-19
AE Onset Date / Initial Rx Day / Rx Day	[redacted] / 659 / 239

Age at AE Onset	6[redacted]
Laboratory Testing	
[redacted]20[redacted] (RX DAY 240): NPTST108-CRP: 84.2 [0 - 4.9] MMOL/L	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	NOT REPORTED
Duration of AE	NOT REPORTED
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	COVID-19 - TESTED POSITIVE, DROP IN O2 SATS REQUIRING HOSPITALIZATION
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION, LIFE THREATENING

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。被験者は南アフリカの 6[redacted] 歳男性であり，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，COVID-19 の感染症の事象を発現した。関連する病歴は，元喫煙者（1 日 20 箱を 40 年間），潰瘍性大腸炎，2 型糖尿病，高血圧，潜伏結核及び現飲酒者（1 日 2 杯未満）であった。

Event 1 の臨床経過：

投与659日後＊，被験者は COVID-19 の感染症を発現した。

投与659日後＊　，被験者は COVID-19 の検査で陽性であり，COVID 肺臓炎があり入院した。被験者には，低酸素飽和度並びに息切れ，咳嗽及び疲労といった感冒様症状がみられた。酸素療法（鼻カニューレ）が開始された。6 日後，投与665日後＊，被験者は改善し，退院した。

被験者の家族も COVID-19 の検査で陽性であった。

The patient's past medications include:

AZATHIOPRINE for ULCERATIVE COLITIS (20[redacted] - [redacted] 20[redacted])

PREDNISONE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Blinded)

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1) COVID-19 (10084268) (COVID-19 (10084268)) [v.24.0] [10084268]

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

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

Dechallenge: No

Alternative Etiology for UPADACITINIB (Blinded)

Event of COVID-19 INFECTION

- Investigator: Covid-19 Tested positive, drop in O2 sats requiring hospitalization

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

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] BMI:** 32.95 kg/m2

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

[redacted] **20[redacted] COVID-19 TEST:** Nasopharyngeal swab: Positive

[redacted] **20[redacted] CRP:** 84.2 MMOL/L (normal 0 to 4.9)

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
不安	X			
うつ病	X			
好中球減少症				X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 30 mg	4[redacted]	MALE	WHITE

Medical History	Onset Year
EXTENSIVE UC/PANCOLITIS	20[redacted]
FINGER SURGERY	20[redacted]
FRACTURED SMALL FINGER LEFT HAND	20[redacted]
GASTRO ESOPHAGEAL REFLUX DISEASE	20[redacted]
INSOMNIA	20[redacted]
INTERMITTENT HEADACHES	19[redacted]
INTERMITTENT HEARTBURN	20[redacted]
LATENT TB	20[redacted]
UMBILICAL HERNIA REPAIR	20[redacted]

Prior Procedures	Procedure Year
PRIOR PROCEDURES: GASTROSCOPY	20[redacted]
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	FORMER	1 PACK	1	20[redacted]
CIGARS	NEVER			
PIPES	NEVER			

Alcohol Use	Status	Number/Day
ALCOHOL	CURRENT	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS2 ABT-494 (IND)	45 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 57	57
M14-234 SS3 ABT-494 (MAIN)	15 mg	ORAL	QD	[redacted]20[redacted] / 58	[redacted]20[redacted] / 419	362
M14-533 ABT-494 (LTE)	30 mg	ORAL	QD	[redacted]20[redacted] / 421		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
SULFASALAZINE	500 mg	TID	Y-M: 20[redacted]
PREDNISONE	10 mg	QD	Y-M: 20[redacted]
ESOMEPRAZOLE	40 mg	QD	Y-M: 20[redacted]
ISONIAZID	300 mg	QD	Y-M: 20[redacted]
BACLOFEN	0.5 OTHER: TABLET	BID	Y-M: 20[redacted]

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
LAMOTRIGINE	50 mg	QD	Y-M: 20[redacted] / 134	Y-M: 20[redacted] / 240
QUETIAPINE	75 mg	QID	Y-M: 20[redacted] / 134	Y-M: 20[redacted] / 148
SERTRALINE	25M mg	QID	Y-M: 20[redacted] / 134	Y-M: 20[redacted] / 148
LAMOTRIGINE	150 mg	QD	Y-M: 20[redacted] / 210	Y-M: 20[redacted] / 299
CITRIC ACID;MAGNESIUM OXIDE;SODIUM PICOSULFATE	1 OTHER: SACHET	TID	Y-M: 20[redacted] / 342	Y-M: 20[redacted] / 343
MIDAZOLAM	1 mg	QD	Y-M: 20[redacted] / 343	Y-M: 20[redacted] / 343
PROPOFOL	3 mL	QD	Y-M: 20[redacted] / 343	Y-M: 20[redacted] / 343

Event #1: Serious Adverse Event

Event Description	FIRST EPISODE OF ANXIETY
Preferred term	不安
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 554 / 134
Age at AE Onset	4[redacted]

Laboratory Testing

NOT REPORTED

Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	931 / 511
Duration of AE	378 DAYS
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	THIS WAS THE FIRST ADMISSION FOR LOW MOOD. PATIENT APPARENTLY SUFFERED MULTIPLE HEAD INJURIES PREVIOUSLY, AND HAD ANGER MANAGEMENT ISSUES
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Event #2: Serious Adverse Event

Event Description	FIRST EPISODE OF DEPRESSION
Preferred term	うつ病
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 554 / 134
Age at AE Onset	4[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	931 / 511
Duration of AE	378 DAYS
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	THIS WAS THE FIRST ADMISSION FOR LOW MOOD. PATIENT APPARENTLY SUFFERED MULTIPLE HEAD INJURIES PREVIOUSLY, AND HAD ANGER MANAGEMENT ISSUES
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Event #3: Event of Interest - Neutropenia

Event Description	NEUTROPENIA
Preferred term	好中球減少症
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 840 / 420
Age at AE Onset	4[redacted]

Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	931 / 511
Duration of AE	92 DAYS
Severity	MILD
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]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は南アフリカの 4[redacted] 歳男性であり，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，うつ病の最初のエピソード及び不安の最初のエピソードの事象を発現した。関連する病歴は，間欠性の頭痛，不眠症，元喫煙者（1 日 1 箱を 1 年間），潰瘍性大腸炎，現飲酒者（1 日 2 杯未満）及び複数の頭部外傷であった。

Event 1 及び 2 の臨床経過：

投与554日後＊　，被験者はうつ病の最初のエピソード及び不安の最初のエピソードを発現した。投与931日後＊，うつ病の最初のエピソード及び不安の最初のエピソードは消失した。

投与554日後＊　，被験者は抑うつ気分，過去の衝動制御障害及びたびたび憤激を伴う「ブラックアウト」で入院した。被験者は，早期に薬物療法に反応した。認知行動療法，作業療法及びアンガーマネジメントのレジメンを開始した。投与568日後＊，被験者は退院した。

治験責任医師は，複数の頭部外傷及び脳震盪，並びに複数の環境ストレス要因が関連する危険因子であると報告した。

投与された薬剤は，セルトラリン，serinem 及びクエチアピンであった。

The patient's past medications include:

SALAZOPYRIN for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

ASACOL for ULCERATIVE COLITIS (20[redacted] - [redacted] 20[redacted])

PREDNISONE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Blinded)

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1) Depression (10012378) (Depression (10012378)) [v. 24.0] [10012378]

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

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

Dechallenge: Not Applicable

2) Anxiety (10002855) (Anxiety (10002855)) [v. 24.0] [10002855]

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 FIRST EPISODE OF DEPRESSION

- Investigator: This was the first admission for low mood. Patient apparently suffered multiple head injuries previously, and had anger management issues.

- AbbVie: Risk factors include pre-existing impulse control issues, multiple prior head injuries and concussions, and multiple environmental stressors (per PI)

Event of FIRST EPISODE OF ANXIETY

- Investigator: This was the first admission for low mood. Patient apparently suffered multiple head injuries previously, and had anger management issues.

- AbbVie: Risk factors include pre-existing impulse control issues, multiple prior head injuries and concussions, and multiple environmental stressors (per PI)

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] BODY WEIGHT:** 8[redacted] KG

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 Induction Study Start	Sex	Race
ABT-494 30 mg	5[redacted]	FEMALE	WHITE

Medical History	Onset Year
ARTHRALGIAS	NOT REPORTED
EXTENSIVE UC/PANCOLITIS	20[redacted]
HEADACHE	NOT REPORTED
HIGH BLOOD PRESSURE	19[redacted]
MENOPAUSE	20[redacted]
NODULE IN VOCAL CORD	20[redacted]
ULCERATIVE COLITIS	20[redacted]

Prior Procedures	Procedure Year
PRIOR PROCEDURES: VOCAL CORD NODULE REMOVAL BY LAGINGOSCOPY	20[redacted]
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	FORMER	0.2 PACK	26	20[redacted]
CIGARS	NEVER			
PIPES	NEVER			

Alcohol Use	Status	Number/Day
ALCOHOL	NEVER	

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS2 ABT-494 (IND)	45 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 56	56

M14-234 SS2 ABT-494 (OL)	45 mg	ORAL	QD	[redacted]20[redacted] / 57 [redacted]20[redacted] / 113	57
M14-234 SS3 ABT-494 (MAIN)	30 mg	ORAL	QD	[redacted]20[redacted] / 114 [redacted]20[redacted] / 471	358
M14-533 ABT-494 (LTE)	30 mg	ORAL	QD	[redacted]20[redacted] / 472	

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
MERCAPTOPURINE	50 mg	QD	Y-M: 20[redacted]
INFLIXIMAB	NOT REPORTED	OTHER: WEEK 6	Y-M: 20[redacted]
BUDESONIDE	9 mg	QD	Y-M: 20[redacted]
ADALIMUMAB	80 mg	OTHER: EVERY WEEK	Y-M: 20[redacted]
MESALAZINE	4 g	QD	Y-M: 20[redacted]
MESALAZINE	4.8 g	QD	Y-M: 20[redacted]
PREDNISONE	50 mg	QD	Y-M: 20[redacted]
PREDNISONE	30 mg	QD	Y-M: 20[redacted]
MESALAZINE	4 g	QD	Y-M: 20[redacted]
MESALAZINE	3600 mg	QD	Y-M: 20[redacted]
VEDOLIZUMAB	300 mg	OTHER: EVERY 8 WEEKS	Y-M: 20[redacted]
HYDROCHLOROTHIAZIDE;TELMISARTAN	40 mg	QD	Y-M: 20[redacted]
BECLOMETASONE	10 mg	QD	Y-M: 20[redacted]
BUDESONIDE	9 mg	QD	Y-M: 20[redacted]
MESALAZINE	NOT REPORTED	QD	Y-M: 20[redacted]
MESALAZINE	3 g	QD	Y-M: 20[redacted]
PARACETAMOL	650 mg	PRN	Y-M: 20[redacted] / -186
MESALAZINE	1200 mg	QD	Y: 19[redacted]
MESALAZINE	2.4 g	QD	Y: 19[redacted]

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
AZATHIOPRINE	NOT REPORTED	QD	Not reported	Not reported
MESALAZINE	4.8 g	QD	Y-M: 20[redacted]	Not reported

HYDROCHLOROTHIAZIDE;TELMISARTAN	40 mg	QD	Y-M: 20[redacted]	Not reported
MESALAZINE	3 g	QD	Y-M: 20[redacted]	Not reported
PARACETAMOL	650 mg	PRN	Y-M: 20[redacted] / -186	Not reported
ASCORBIC ACID;CODEINE;PARACETAMOL	650/10/500 mg	QID	Y-M: 20[redacted] / 109	Y-M: 20[redacted] / 112
PARACETAMOL	1 g	TID	Y-M: 20[redacted] / 112	Not reported
MESALAZINE	3 g	QD	Y-M: 20[redacted] / 113	Not reported
AZITHROMYCIN	500 mg	QD	Y-M: 20[redacted] / 116	Y-M: 20[redacted] / 117
BARICITINIB	4 mg	QD	Y-M: 20[redacted] / 116	Y-M: 20[redacted] / 123
CEFTRIAXONE	2 g	QD	Y-M: 20[redacted] / 116	Y-M: 20[redacted] / 125
DEXAMETHASONE	6 mg	QD	Y-M: 20[redacted] / 116	Y-M: 20[redacted] / 136
ENOXAPARIN	40 IU	BID	Y-M: 20[redacted] / 116	Y-M: 20[redacted] / 120
OMEPRAZOLE	20 mg	QD	Y-M: 20[redacted] / 116	Y-M: 20[redacted] / 147
CODEINE	UNK mg	TID	Y-M: 20[redacted] / 117	Y-M: 20[redacted] / 137
ENOXAPARIN	40 mg	QD	Y-M: 20[redacted] / 121	Y-M: 20[redacted] / 150
DEXAMETHASONE	3 mg	QD	Y-M: 20[redacted] / 136	Y-M: 20[redacted] / 139
DEXAMETHASONE	2 mg	QD	Y-M: 20[redacted] / 140	Y-M: 20[redacted] / 143
DEXAMETHASONE	1 mg	QD	Y-M: 20[redacted] / 144	Y-M: 20[redacted] / 147
PARACETAMOL	1 g	QD	Y-M: 20[redacted] / 287	Y-M: 20[redacted] / 287
FOSFOMYCIN	3 g	QD	Y-M: 20[redacted] / 292	Y-M: 20[redacted] / 292
FOSFOMYCIN	3 g	QD	Y-M: 20[redacted] / 294	Y-M: 20[redacted] / 294
ACETYLCYSTEINE	UNKNOWN mg	QD	Y-M: 20[redacted] / 335	Y-M: 20[redacted] / 336
CITRIC ACID;MAGNESIUM OXIDE;SODIUM PICOSULFATE	10/3.5/10.97 mg	QD	Y-M: 20[redacted] / 343	Y-M: 20[redacted] / 344
LIDOCAINE	60 mg	QD	Y-M: 20[redacted] / 344	Y-M: 20[redacted] / 344
MIDAZOLAM	1,5 mg	QD	Y-M: 20[redacted] / 344	Y-M: 20[redacted] / 344
PROPOFOL	95 mg	QD	Y-M: 20[redacted] / 344	Y-M: 20[redacted] / 344
REMIFENTANIL	55.4 ug	QD	Y-M: 20[redacted] / 344	Y-M: 20[redacted] / 344
VACCINIUM MYRTILLUS	2 OTHER: CAPS	QD	Y-M: 20[redacted] / 344	Y-M: 20[redacted] / 348

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

Event Description	PNEUMONIA BY COVID-19 INFECTION
Preferred term	COVID-19 肺炎

AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 579 / 108
Age at AE Onset	6[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	NOT REPORTED
Duration of AE	NOT REPORTED
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	COVID-19 INFECTION (WORSENING OF SYMPTOMS)
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はスペインの 6[redacted] 歳女性であり，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，COVID-19 による肺炎の事象を発現した。関連する病歴は，元喫煙者（1 日 0.2 箱），高血圧，潰瘍性大腸炎及び非飲酒者であった。

Event 1 の臨床経過：

投与580日後＊，被験者は COVID-19 による肺炎を発現した。

投与580日後＊　　，被験者は COVID-19 の症状に適合する筋肉痛を経験し始めた。投与583日後＊，被験者は COVID-19 検査で陽性となった。投与587日後＊　　，被験者は入院した。徴候及び症状には，発熱，酷い筋肉痛及び息切れが含まれた。身体検査が実施され，生化学検査，血液学的検査及び凝固検査の検体が採取された（検査結果は保留）。投与608日後＊　　，被験者は退院した。

投与された薬剤は，dexametasona，オメプラゾール，algidol，paracetamol，enoxapraina，azitromicina，バリシチニブ及び ceftriaxona であった。

The patient's past medications include:

MERCAPTOPURINA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

INFLIXIMAB for ULCERATIVE COLITIS ([redacted] 20[redacted] - 20[redacted])

ENTOCORD for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

HUMIRA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

MEZAVANT for ULCERATIVE COLITIS (Stopped [redacted] 20[redacted], Started [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

SALOFALK for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

PREDNISONE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

VEDOLIZUMAB for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

CLIPPER for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

DACORTIN for ULCERATIVE COLITIS (Stopped [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: No

Alternative Etiology for UPADACITINIB (Blinded)

Event of PNEUMONIA BY COVID-19

- Investigator: COVID-19 INFECTION (WORSENING OF SYMPTOMS)

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

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] CHEST X RAY:** Pneumonia

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

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
潰瘍性大腸炎	X			

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	3[redacted]	MALE	WHITE

Medical History	Onset Year
ARTHRALGIAS	NOT REPORTED
HEADACHE	NOT REPORTED
LEFT SIDED UC	20[redacted]
SEASONAL ALLERGY	NOT REPORTED
ULCERATIVE COLITIS	20[redacted]

Prior Procedures	Procedure Year
PRIOR PROCEDURES: APHERESIS	20[redacted]
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	FORMER	1 PACK	18	20[redacted]
CIGARS	UNKNOWN			
PIPES	UNKNOWN			

Alcohol Use	Status	Number/Day
ALCOHOL	NEVER	

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS2 ABT-494 (IND)	45 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 56	56
M14-234 SS3 Placebo (MAIN)		ORAL	QD	[redacted]20[redacted] / 57	[redacted]20[redacted] / 115	59

M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted]20[redacted] / [redacted]20[redacted] / 333 116	218	

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
BUDESONIDE	2 mg	QD	Y-M: 20[redacted]
MESALAZINE	2400 mg	QD	Y-M: 20[redacted]
METRONIDAZOLE	250 mg	BID	Y-M: 20[redacted]
PREDNISONE	5 mg	QD	Y-M: 20[redacted]
VEDOLIZUMAB	300 mg	OTHER: EVERY 8 WEEKS	Y-M: 20[redacted]
MESALAZINE	4.8 g	QD	Y-M: 20[redacted] / -231
PREDNISONE	10 mg	QD	Y-M: 20[redacted] / -62
MESALAZINE	4 g	QD	Y-M: 20[redacted] / -31
EBASTINE	10 mg	PRN	Y: 19[redacted]
METAMIZOLE	1150 mg	PRN	Y: 19[redacted]

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
ADALIMUMAB	NOT REPORTED	OTHER: EVERY 2 WEEKS	Not reported	Not reported
GOLIMUMAB	50 mg	OTHER: EVERY 4 WEEKS	Not reported	Not reported
INFLIXIMAB	NOT REPORTED	OTHER: UNKNOWN	Not reported	Not reported
MERCAPTOPURINE	NOT REPORTED	QD	Not reported	Not reported
METHOTREXATE	NOT REPORTED	QD	Not reported	Not reported
PREDNISONE	10 mg	QD	Y-M: 20[redacted] / -62	ONGOING
MESALAZINE	4 g	QD	Y-M: 20[redacted] / -31	ONGOING
PARACETAMOL	1 g	PRN	Y-M: 20[redacted] / 124	ONGOING
DIAZEPAM	2.5 mg	PRN	Y-M: 20[redacted] / 152	ONGOING
AMOXICILLIN	750 mg	TID	Y-M: 20[redacted] / 166	Y-M: 20[redacted] / 173
BECLOMETASONE	5 mg	QD	Y-M: 20[redacted] / 202	ONGOING
CIPROFLOXACIN	400 mg	BID	Y-M: 20[redacted] / 213	ONGOING
DIAZEPAM	5 mg	QD	Y-M: 20[redacted] / 213	ONGOING
METOCLOPRAMIDE	10 mg	PRN	Y-M: 20[redacted] / 213	ONGOING
METRONIDAZOLE	500 mg	TID	Y-M: 20[redacted] / 213	ONGOING

PARACETAMOL	1 g	PRN	Y-M: 20[redacted] / 213	ONGOING
EBASTINE	10 mg	PRN	Y: 19[redacted]	ONGOING
METAMIZOLE	1150 mg	PRN	Y: 19[redacted]	ONGOING

Event #1: Serious Adverse Event

Event Description	WORSENING OF UC
Preferred term	潰瘍性大腸炎
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 317 / 202
Age at AE Onset	4[redacted]
Laboratory Testing	
[redacted]20[redacted] (RX DAY 214): NPTST069-C-REACTIVE PROTEIN: 26.4 [0 - 5] MG/L	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	ONGOING
Duration of AE	ONGOING
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	ULCERATIVE COLITIS WORSENING
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はスペインの 4[redacted] 歳男性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，潰瘍性大腸炎の悪化の事象を発現した。関連する病歴は，元喫煙者（1 日 1 箱を 18 年間），潰瘍性大腸炎及び非飲酒者であった。

Event 1 の臨床経過：

投与317日後＊，被験者は潰瘍性大腸炎の悪化を発現した。

投与328日後＊ ，被験者は直腸出血及び発熱があり，入院した。投与330日後＊ ，被験者は退院した。

投与された薬剤は，ジアゼパム，paracetamol，メトロニダゾール，シプロフロキサシン，clipper 及び metoclopramida であった。

The patient's past medications include:

VEDOLIZUMAB for ULCERATIVE COLITIS ([redacted])

INTESTIFALK for ULCERATIVE COLITIS ([redacted])

MESALAZINE for ULCERATIVE COLITIS ([redacted])

METRONIDAZOLE for ULCERATIVE COLITIS ([redacted])

PREDNISONE for ULCERATIVE COLITIS ([redacted])

MEZAVANT for ULCERATIVE COLITIS ([redacted])

ADALIMUMAB for ULCERATIVE COLITIS

GOLIMUMAB for ULCERATIVE COLITIS

INFLIXIMAB for ULCERATIVE COLITIS

MERCAPTOPURINA for ULCERATIVE COLITIS

METHOTREXATE for ULCERATIVE COLITIS

Causality for UPADACITINIB (Open Label)

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1) Colitis ulcerative aggravated (10009901) (Colitis ulcerative (10009900)) [v.23.1] [10009901]

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 (Open Label)

Event of WORSENING OF UC

- Investigator: ulcerative colitis worsening.

- AbbVie: event is more likely related to pre-existing ulcerative colitis.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] BODY WEIGHT:** 8[redacted] KG

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
膀胱タンポナーデ	X			
潰瘍性大腸炎	X			
大腸菌性敗血症	X			X
鉄欠乏性貧血				X
処置後出血	X			
前立腺炎	X			X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	5[redacted]	MALE	WHITE

Medical History	Onset Year
BENIGN PROSTATIC HYPERPLASIA	20[redacted]
DEPRESSION: MIDDLE GRAD	19[redacted]
DIABETES MELLITUS: TYP 2	20[redacted]
EYE DISEASE/DISORDER: CATARACTAPOSTERIOR BOTH EYES , OPERATION [redacted] /20[redacted]	20[redacted]
GASTROESOPHAGEAL REFLUX DISEASE: GRADE 2	19[redacted]
HYPERLIPIDEMIA	20[redacted]
HYPERTENSION	20[redacted]
LEFT SIDED UC	20[redacted]
OTHER: CRONICAL CERVICOTHORACAL PAIN SYNDROM	19[redacted]
OTHER: MICRO HAEMATURIE	20[redacted]
OTHER: MICRO HEMATURIA	20[redacted]
OTHER: OVERWEIGHT	20[redacted]
OTHER: RECCURENT UROGENITAL INFECTIONS	20[redacted]
OTHER: VITAMIN B12 DEFICIENCY	20[redacted]
SLEEP APNEA: CPAP NEEDED	20[redacted]
TUBERCULOSIS: LATENT [redacted]/20[redacted] QUANTIFERON TEST POSITIV, NO SIGNS IN X RAY ,TREATED WITH ISONIAZID [redacted]/20[redacted]-[redacted]/20[redacted]	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	FORMER	1 PACK	40	20[redacted]
CIGARS	NEVER			
PIPES	NEVER			

Alcohol Use	Status	Number/Day
ALCOHOL	FORMER	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 ABT-494 (IND)	15 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 63	63
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted]20[redacted] / 64		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
BUDESONIDE	2 g	QD	Y-M: 20[redacted]-[redacted]
MESALAZINE	1000 mg	QD	Y-M: 20[redacted]-[redacted]
MESALAZINE	2000 mg	QD	Y-M: 20[redacted]-[redacted]
INFLIXIMAB	500 mg	OTHER: 6 WEEKS	Y-M: 20[redacted]-[redacted]
ACETYLSALICYLIC ACID	100 mg	QD	Y-M: 20[redacted]-[redacted]
BISOPROLOL	2.5 mg	QD	Y-M: 20[redacted]-[redacted]
INFLIXIMAB	1000 mg	OTHER: 6 WEEKS	Y-M: 20[redacted]-[redacted]
LISINOPRIL	2.5 mg	QD	Y-M: 20[redacted]-[redacted]
VEDOLIZUMAB	300 mg	OTHER: 4 WEEKS	Y-M: 20[redacted]-[redacted]
CICLOSPORIN	200 mg	QD	Y-M: 20[redacted]-[redacted]
METHYLPREDNISOLONE	50 mg	QD	Y-M: 20[redacted]-[redacted]
PREDNISONE	2.5 mg	QD	Y-M: 20[redacted]-[redacted]
SULFAMETHOXAZOLE;TRIMETHOPRIM	800 mg	OTHER: 3 TIMES A WEEK	Y-M: 20[redacted]-[redacted]
BUDESONIDE	9 mg	QD	Y-M: 20[redacted]-[redacted]
MESALAZINE	4500 mg	TID	Y-M: 20[redacted]-[redacted]
HYDROCORTISONE	10 mg	BID	Y-M: 20[redacted]-[redacted] / -23
PREDNISONE	20 mg	QD	Y-M: 20[redacted]-[redacted] / -7
ESOMEPRAZOLE	20 mg	QD	Y: 19[redacted]

PARACETAMOL	2000 mg	PRN	Y: 19[redacted]
MIANSERIN	30 mg	QD	Y: 19[redacted]
SERTRALINE	175 mg	TID	Y: 19[redacted]
INSULIN LISPRO	AS NEEDED IU	OTHER: PER PLAN	Y: 20[redacted]
LOPERAMIDE	2 mg	PRN	Y: 20[redacted]
ALFUZOSIN	10 mg	QD	Y: 20[redacted]

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
ACETYLSALICYLIC ACID	100 mg	QD	Y-M: 20[redacted]	ONGOING
BISOPROLOL	2.5 mg	QD	Y-M: 20[redacted]	ONGOING
LISINOPRIL	2.5 mg	QD	Y-M: 20[redacted]	ONGOING
MESALAZINE	4500 mg	TID	Y-M: 20[redacted]	ONGOING
HYDROCORTISONE	10 mg	BID	Y-M: 20[redacted] / -23	Y-M: 20[redacted] / 379
ACICLOVIR	30 mg	OTHER: EVERY 5 HOURS	Y-M: 20[redacted] / 192	Y-M: 20[redacted] / 202
BUDESONIDE	2 mg	QD	Y-M: 20[redacted] / 192	Y-M: 20[redacted] / 202
CALCIUM CARBONATE;COLECALCIFEROL	1 OTHER: TABLET	QD	Y-M: 20[redacted] / 192	Y-M: 20[redacted] / 202
MESALAZINE	1 g	QD	Y-M: 20[redacted] / 192	Y-M: 20[redacted] / 202
MESALAZINE	1000 mg	BID	Y-M: 20[redacted] / 192	Y-M: 20[redacted] / 202
MESALAZINE	2 g	QD	Y-M: 20[redacted] / 192	Y-M: 20[redacted] / 202
PREDNISONE	60 mg	OTHER: ONCE	Y-M: 20[redacted] / 192	Y-M: 20[redacted] / 192
SEA WATER	1 OTHER: SPREAT	QID	Y-M: 20[redacted] / 192	Y-M: 20[redacted] / 202
STERCULIA URENS	1 OTHER: TABLESPOON	QD	Y-M: 20[redacted] / 192	ONGOING
VITAMIN B NOS	1 OTHER: DRAGEE	QD	Y-M: 20[redacted] / 192	Y-M: 20[redacted] / 202
PREDNISOLONE	60 mg	QD	Y-M: 20[redacted] / 193	Y-M: 20[redacted] / 232
ACICLOVIR	30 mg	OTHER: EVERY 5 HOURS	Y-M: 20[redacted] / 204	Y-M: 20[redacted] / 225
CALCIUM CARBONATE;COLECALCIFEROL	1 OTHER: TABLET	QD	Y-M: 20[redacted] / 204	Y-M: 20[redacted] / 225
CEFTRIAXONE	1000 mg	BID	Y-M: 20[redacted] / 204	Y-M: 20[redacted] / 208
INSULIN ASPART	0-8 IU	PRN	Y-M: 20[redacted] / 204	Y-M: 20[redacted] / 225
METAMIZOLE	500 mg	QID	Y-M: 20[redacted] / 204	Y-M: 20[redacted] / 225

NICOTINAMIDE;PANTOTHENIC ACID;PYRIDOXINE;RIBOFLAVIN;THIAMINE	1 OTHER: DRAGEE	QD	Y-M: 20[redacted] / 204	Y-M: 20[redacted] / 225
NORFLOXACIN	400 mg	BID	Y-M: 20[redacted] / 204	Y-M: 20[redacted] / 204
PARACETAMOL	1 g	BID	Y-M: 20[redacted] / 204	Y-M: 20[redacted] / 225
SEA WATER	1 OTHER: SPREAT	QID	Y-M: 20[redacted] / 204	Y-M: 20[redacted] / 225
AMOXICILLIN	400 mg	BID	Y-M: 20[redacted] / 208	Y-M: 20[redacted] / 209
CIPROFLOXACIN	500 mg	BID	Y-M: 20[redacted] / 210	Y-M: 20[redacted] / 247
HYDROCORTISONE	10 mg	BID	Y-M: 20[redacted] / 380	Y-M: 20[redacted] / 683
HYDROCORTISONE	20 mg	QD	Y-M: 20[redacted] / 380	Y-M: 20[redacted] / 683
CIPROFLOXACIN	500 mg	BID	Y-M: 20[redacted] / 490	Y-M: 20[redacted] / 525
DUTASTERIDE;TAMSULOSIN	0,5/04 mg	QD	Y-M: 20[redacted] / 660	Y-M: 20[redacted] / 720
MIRABEGRON	50 mg	QD	Y-M: 20[redacted] / 660	ONGOING
MOXIFLOXACIN	400 mg	QD	Y-M: 20[redacted] / 779	Y-M: 20[redacted] / 803
IRON	2X500 mg	QD	Y-M: 20[redacted] / 794	Y-M: 20[redacted] / 794
CIPROFLOXACIN	500 mg	BID	Y-M: 20[redacted] / 804	Y-M: 20[redacted] / 838
PROPOFOL	200 mg	PRN	Y-M: 20[redacted] / 1338	Y-M: 20[redacted] / 1338
SODIUM PHOSPHATE;SODIUM PHOSPHATE MONOBASIC (ANHYDROUS)	2 OTHER: APPLICATION	OTHER: ONCE	Y-M: 20[redacted] / 1338	Y-M: 20[redacted] / 1338
CIPROFLOXACIN	400 mg	BID	Y-M: 20[redacted] / 1363	Y-M: 20[redacted] / 1365
CIPROFLOXACIN	500 mg	BID	Y-M: 20[redacted] / 1366	Y-M: 20[redacted] / 1377
CEFTRIAXONE	2 g	QD	Y-M: 20[redacted] / 1376	Y-M: 20[redacted] / 1378
PREGABALIN	150 mg	QD	Y-M: 20[redacted] / 1376	ONGOING
PREGABALIN	25 mg	BID	Y-M: 20[redacted] / 1376	Not reported
ESOMEPRAZOLE	20 mg	QD	Y: 19[redacted]	ONGOING
PARACETAMOL	2000 mg	PRN	Y: 19[redacted]	ONGOING
MIANSERIN	30 mg	QD	Y: 19[redacted]	ONGOING
SERTRALINE	175 mg	TID	Y: 19[redacted]	ONGOING
INSULIN LISPRO	AS NEEDED IU	OTHER: PER PLAN	Y: 20[redacted]	ONGOING
LOPERAMIDE	2 mg	PRN	Y: 20[redacted]	ONGOING
ALFUZOSIN	10 mg	QD	Y: 20[redacted]	Y-M: 20[redacted] / 659

Event #1: Serious Adverse Event

Event Description	FLARE OF UC
Preferred term	潰瘍性大腸炎
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 255 / 192
Age at AE Onset	5[redacted]

Laboratory Testing

[redacted]20[redacted] (RX DAY 192): NPTST108-CRP: 5.8 [NOT REPORTED - 5] mg/L; [redacted]20[redacted] (RX DAY 194): NPTST093-CLOSTRIDIUM DIFICILE: NEGATIVE [NOT REPORTED - NOT REPORTED] UNIT NOT REPORTED; NPTST109-CULTURE: NEGATIVE [NOT REPORTED - NOT REPORTED] UNIT NOT REPORTED

Microbiology

NOT REPORTED

AE Stopped Initial Rx Day / Rx Day	265 / 202
Duration of AE	11 DAYS
Severity	SEVERE
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: Serious Adverse Event, Event of Interest - Serious Infections

Event Description	UROSEPSIS WITH E.COLI
Preferred term	大腸菌性敗血症
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 267 / 204
Age at AE Onset	5[redacted]

Laboratory Testing

[redacted]20[redacted] (RX DAY 204): NPTST196-LACTAT: 2.2 [0.5 - 1.6] MMOL/L; [redacted]20[redacted] (RX DAY 205): NPTST108-CRP: 252 [NOT REPORTED - 5] mg/L; [redacted]20[redacted] (RX DAY 207): NPTST108-CRP: 109.4 [NOT REPORTED - 5] mg/L; [redacted]20[redacted] (RX DAY 208): NPTST108-CRP: 57.3 [NOT REPORTED - 5] mg/L; NPTST265-PSA: 73.30 [NOT REPORTED - 4] UNIT NOT REPORTED

Microbiology

[redacted]20[redacted] (RX DAY 204): BLOOD NPTST052-BLOOD CULTURE: Negative; URINE NPTST338-URINE CULTURE: Positive-E COLI

AE Stopped Initial Rx Day / Rx Day	288 / 225
Duration of AE	22 DAYS
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY

Investigator Alternative Etiology	BENIGN PROSTATE HYPERPLASIA AND HOSPITAL STAY DUE TO SAE A FEW DAYS AGO
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Event #3: Serious Adverse Event, Event of Interest - Serious Infections

Event Description	ACUTE PROSTATITIS
Preferred term	前立腺炎
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 553 / 490
Age at AE Onset	5[redacted]
Laboratory Testing	

NOT REPORTED

Microbiology

[redacted]20[redacted] (RX DAY 490): BLOOD NPTST052-BLOOD CULTURE: Negative; URINE NPTST336-URIN CLULTURE: Positive-GRAMNEGATIV BACTERIA 1000BACTERIAS PER ML

AE Stopped Initial Rx Day / Rx Day	557 / 494
Duration of AE	5 DAYS
Severity	MODERATE
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 #4: Serious Adverse Event

Event Description	POST OP BLEEDING
Preferred term	処置後出血
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 802 / 739
Age at AE Onset	5[redacted]
Laboratory Testing	

[redacted]20[redacted] (RX DAY 739): Erythrocytes: 7447 [NOT REPORTED - NOT REPORTED] UNIT NOT REPORTED; Hemoglobin: 117 [134 - 170] G/L; Leukocytes: 374 [NOT REPORTED - NOT REPORTED] UNIT NOT REPORTED; Leukocytes: 7.9 [4.5 - 11] 10^9/L; NPTST108-CRP: 1.2 [NOT REPORTED - 5] mg/L

Microbiology

NOT REPORTED

AE Stopped Initial Rx Day / Rx Day	806 / 743

Duration of AE	5 DAYS
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	PREVIOUS PLANED TUR PROSTATA OPERATION
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Event #5: Serious Adverse Event

Event Description	VESICAL BLADDER TAMPONADE AFTER TUR OPERATION
Preferred term	膀胱タンポナーデ
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 817 / 754
Age at AE Onset	5[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	824 / 761
Duration of AE	8 DAYS
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	COMPLICATION AFTER AN ELECTIVE PROSTATA TUR OPERATION
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Event #6: Event of Interest - Anemia

Event Description	IRON DEFICIENCY ANEMIA
Preferred term	鉄欠乏性貧血
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 834 / 771
Age at AE Onset	5[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	908 / 845

Duration of AE	75 DAYS
Severity	MODERATE
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

Event #7: Serious Adverse Event, Event of Interest - Serious Infections

Event Description	ACUTE PROSTATITIS
Preferred term	前立腺炎
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 1425 / 1362
Age at AE Onset	5[redacted]

Laboratory Testing

NOT REPORTED

Microbiology

[redacted]20[redacted] (RX DAY 1362): BLOOD NPTST109-CULTURE: Negative; URINE NPTST109-CULTURE: Negative

AE Stopped Initial Rx Day / Rx Day	1438 / 1375
Duration of AE	14 DAYS
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	PROSTATA HYPERPLASY
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Event #8: Serious Adverse Event, Event of Interest - Serious Infections

Event Description	WORSENING PROSTATITIS
Preferred term	前立腺炎
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 1439 / 1376
Age at AE Onset	5[redacted]

Laboratory Testing

NOT REPORTED

Microbiology

[redacted]20[redacted] (RX DAY 1376): URINE NPTST109-CULTURE: Positive-100 BACTERIES PER ML

AE Stopped Initial Rx Day / Rx Day	ONGOING
Duration of AE	ONGOING
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	PROSTATA HYPERPLASY
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はスイスの 5[redacted] 歳男性であり，ABT-494（ウパダシチニブ ABT-494）の治験でウパダシチニブが投与され，潰瘍性大腸炎の再燃及び大腸菌による尿路性敗血症の事象を発現した。関連する病歴は，グレード 2 の胃食道逆流性疾患，中等度のうつ病，CPAP を必要とする睡眠時無呼吸，2 型糖尿病，過体重，潰瘍性大腸炎，良性前立腺肥大症，ビタミン B12 欠乏，高脂血症，高血圧，泌尿生殖器系感染の再発，元喫煙者（1 日 1 箱を 40 年間）及び現飲酒者（1 日 2 杯未満）であった。

Event 1 及び 2 の臨床経過：

Event 1 及び 2 の発現前である 投与53日後＊，被験者は尿路性敗血症を発現し，入院した。

投与255日後＊，被験者は潰瘍性大腸炎の再燃を発現した。投与265日後＊　，潰瘍性大腸炎の再燃は消失した。投与267日後＊　，大腸菌による尿路性敗血症を発現した。投与288日後＊，大腸菌による尿路性敗血症は消失した。

投与255日後＊，被験者は潰瘍性大腸炎の再燃のため入院した。下痢及び腸の痛みがあった。投与265日後＊，被験者は退院した。

投与267日後＊ ，被験者は大腸菌による尿路性敗血症のため入院した。腸の痛み及び排尿障害があった。投与288日後＊，被験者は退院した。

投与された薬剤は， metamizol natrium， dafalgan， becocym， becozym forte， salofalk， çalcimagon D3 citron，fluimare，アモキシシリン，セフトリアキソン，ノルフロキサシン，プレドニゾン及びシプロフロキサシンであった。

The patient's past medications include:

BUDENOFALK for ULCERATIVE COLITIS ([redacted])

SALOFALK for ULCERATIVE COLITIS ([redacted])

REMICADE for ULCERATIVE COLITIS ([redacted])

VEDOLIZUMAB for ULCERATIVE COLITIS ([redacted])

SANDIMMUN for ULCERATIVE COLITIS ([redacted])

SOLUMEDROL for ULCERATVE COLITIS ([redacted])

PREDNISON for UC ([redacted])

BACTRIM for ULCERATIVE COLITIS ([redacted])

CORTIMENT for ULCERATIVE COLITIS ([redacted])

Causality for ABT-494 (Open Label)

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1) UC aggravated (10045283) (Colitis ulcerative (10009900)) [v.21.1] [10045283]

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

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

Dechallenge: Not Applicable

2) Escherichia sepsis (10015296) (Escherichia sepsis (10015296)) [v.21.1] [10015296]

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

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

Dechallenge: Not Applicable

Alternative Etiology for ABT-494 (Open Label)

Event of FLARE OF UC

- Investigator: Not applicable

- AbbVie: Event more likely related to pre-existing ulcerative colitis.

Event of UROSEPSIS WITH E.COLI

- Investigator: Benign prostate hyperplasia and hospital stay due to SAE a few days ago.

- AbbVie: Event more likely related to pre-existing history of recurrent urogenital infections, benign prostatic hyperplasia and diabetes mellitus. Recent hospitalization is an additional risk factor.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] ABDOMINAL CT:** WALL THICKENING DISTAL SIGMOID

[redacted] **20[redacted] BLOOD CULTURE:** Negative

[redacted] **20[redacted] CLOSTRIDIUM DIFFICILE:** NEGATIVE

[redacted] **20[redacted] CRP:** 5.6 MG/L (normal <5)

[redacted] **20[redacted] CRP:** 252 MG/L (normal <5)

[redacted] **20[redacted] CRP:** 109.4 MG/L (normal <5)

[redacted] **20[redacted] CRP:** 57.3 MG/L (normal <5)

[redacted] **20[redacted] LACTATE:** 2.2 MMOL/L (normal 0.5 to 1.6)

[redacted] **20[redacted] MRI BOWLAND ILEO SACRAL JOINT:** No pathologic outcome

[redacted] **20[redacted] PSA:** 73.3 MG/L (normal <5)

[redacted] **20[redacted] RECTOSIGMOIDOSCOPY:** INFLAMATION DISTAL COLON DESCENDENS TIL RECTUM

[redacted] **20[redacted] SONOGRAPHY GENITO-URINARY SYSTEM:** 29ml rest urine, no congestion, no pyelonephritis

[redacted] **20[redacted] SONOGRAPHY GENITO-URINARY SYSTEM:** 85ml rest urine, no congestion, prostatahyperplasia, no pyelonephritis

[redacted] **20[redacted] URINE CULTURE:** Positive E. coli
Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はスイスの 5[redacted] 歳男性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，急性前立腺炎の事象を発現した。関連する病歴は，うつ病，2 型糖尿病，潰瘍性大腸炎，良性前立腺肥大症，顕微鏡的血尿，ビタミン B12 欠乏，高血圧，泌尿生殖器系感染の再発，元喫煙者（1 日 1 箱を 40 年間）及び元飲酒者（1 日 2 杯未満）であった。

Event 3 の臨床経過：

投与553日後＊，被験者は急性前立腺炎を発現した。投与557日後＊　　，急性前立腺炎は消失した。

投与553日後＊　，被験者は排尿時の灼熱感及び下腹部痛を訴え，入院した。投与557日後＊，被験者は退院した。

投与された薬剤は ciproxin であった。

Causality for ABT-494 (Open Label)

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1)　Acute prostatitis (10001021)　(Prostatitis (10036978))　[v.22.0]　[10001021]

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

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

Dechallenge: Not Applicable

Alternative Etiology for ABT-494 (Open Label)

Event of ACUTE PROSTATITIS

- Investigator: Not Applicable.

- AbbVie: Risk factors include pre-existing benign prostatic hyperplasia and recurrent urogenital infections.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] URINE CULTURE:** Positive. Gram negative bacteria. 1000 bacteria per ml

[redacted] **20[redacted] BLOOD CULTURE:** Negative
Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はスイスの 5[redacted] 歳男性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，処置後の出血及び経尿道的切除術後の膀胱タンポナーデの事象を発現した。関連する病歴は，元喫煙者（1 日 1 箱を 40 年間），糖尿病，潰瘍性大腸炎，良性前立腺肥大症，顕微鏡的血尿，高脂血症，高血圧，泌尿生殖器系感染の再発及び元飲酒者（1 日 2 杯未満）であった。

Event 4 及び 5 の臨床経過：

投与802日後＊　　，被験者は処置後の出血を発現した。投与806日後＊ ，処置後の出血は消失した。投与817日後＊　　，被験者は経尿道的切除後の膀胱タンポナーデを発現した。投与824日後＊，経尿道的切除後の膀胱タンポナーデは消失した。

投与802日後＊　　，被験者は入院した。被験者は，待機的な前立腺の経尿道的切除後の膀胱タンポナーデを 投与783日後＊　　に発現した。その後，被験者は排尿時の強い痛み及び数日間の血液凝固を経験した。膀胱洗浄カテーテルを挿入し，再度の出血はなく，カテーテル除去前には清明な尿が認められた。投与806日後＊，被験者は退院した。

投与817日後＊　　，被験者は前立腺の手術後に出血を発現した。再度入院し，膀胱洗浄，前立腺のバイポーラ電極を用いた凝固術及び膀胱洗浄カテーテルの挿入を受け，膀胱洗浄カテーテ

ルは 2 日後に除去された。投与824日後＊，被験者は退院した。

The patient's past medications include:

BUDENOFALK FOAM for ULCERATIVE COLITIS and DUE TO FLARE OF UC ([redacted])

SALOFALK FOAM for ULCERATIVE COLITIS and FLARE OF UC ([redacted])

SALOFALK SUPP for ULCERATIVE COLITIS and FLARE TO UC ([redacted])

REMICADE for ULCERATIVE COLITIS ([redacted])

VEDOLIZUMAB for ULCERATIVE COLITIS ([redacted])

SANDIMMUN for ULCERATIVE COLITIS ([redacted])

SOLU MEDROL for ULCERATIVE COLITIS ([redacted])

PREDNISON for ULCERATIVE COLITIS ([redacted])

CORTIMENT for ULCERATIVE COLITIS ([redacted])

BECOZYM FORTE for UC FLARE ([redacted])

SALOFALK ENEMA for FLARE OF UC ([redacted])

SPIRICORT for FLARE OF UC ([redacted])

BECOZYME for GIVEN IN THE HOSPITAL DUE TO FLARE OF UC ([redacted])

DAFALGAN for FLARE OF UC ([redacted])

METAMIZOL NATRIUM for FLARE OF UC ([redacted])

Causality for UPADACITINIB (Open Label)

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1) Postoperative bleeding (10036277) (Post procedural haemorrhage (10051077)) [v.23.0] [10036277]

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

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

Dechallenge: Not Applicable

2) Bladder tamponade (10062656) (Bladder tamponade (10062656)) [v.23.0] [10062656]

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 (Open Label)

Event of POST OP BLEEDING

- Investigator: previous planed tur prostata operation

- AbbVie: Event more likely a complication of recent transurethral resection of the prostate procedure.

Event of VESICAL BLADDER TAMPONADE AFTER TUR OPERATION

- Investigator: Complication after an elective prostate TUR operation.

- AbbVie: Event more likely a complication of recent transurethral resection of the prostate procedure.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] CRP:** 1.2 MG/L (normal <5)

[redacted] **20[redacted] HEMOGLOBIN:** 117 G/L (normal 134 to 170)

[redacted] **20[redacted] URINE WBC:** 374 no units

[redacted] **20[redacted] UROGENITAL ULTRASOUND:** Vesical blood coagulation, multiple kidney cystes leftside, otherwise without other pathological findings, , no urinary retention

[redacted] **20**[redacted] **WBC:** 7.9 X10**3/MCL
Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はスイスの 5[redacted] 歳男性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，急性前立腺炎及び前立腺炎の悪化の事象を発現した。関連する病歴は，元喫煙者（1 日 1 箱を 40 年間），過体重，良性前立腺肥大症，顕微鏡的血尿，潰瘍性大腸炎及び元飲酒者（1 日 2 杯未満）であった。

Event 7 及び 8 の臨床経過：

投与1425日後＊　，被験者は急性前立腺炎を発現した。投与1438日後＊　，急性前立腺炎は消失した。投与1439日後＊，被験者は前立腺炎の悪化を発現した。

投与1425日後＊　　，被験者は排尿時の痛み及び灼熱感を症状とする急性前立腺炎のため，入院した。投与1428日後＊，被験者は退院した。

投与1439日後＊　　，被験者は排尿時の痛み及び骨盤痛症候群に関連する痛みの急性憎悪を伴う前立腺炎の悪化のため，再入院した。投与1445日後＊，被験者は退院した。

危険因子には，既往歴の前立腺肥大症が含まれた。被験者は本事象を過去に投与の約2ヵ月＊，投与の約9ヵ月後＊，投与553日後＊及び投与842日後＊にも経験していた。

投与された薬剤は，プレガバリン，シプロフロキサシン及びセフトリアキソンであった。

The patient's past medications include:

REMICADE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

VEDOLIZUMAB for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

PREDNISON for ULCERATIVE COLITIS ([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])

MOXIFLOXACIN for PROSTATITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

MODERNA COVID-19 VACCINE for PROPHYLAXIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Open Label)

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1) Acute prostatitis (10001021) (Prostatitis (10036978)) [v.24.1] [10001021]

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

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

Dechallenge: Not Applicable

2) Prostatitis (10036978) (Prostatitis (10036978)) [v.24.1] [10036978]

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 (Open Label)

Event of ACUTE PROSTATITIS

- Investigator: Prostate Hyperplasia

- AbbVie: Risk factors include pre-existing prostatic hyperplasia, recurrent urogenital infections and obesity. Prostatitis affects up to 1 in 6 men in their lifetimes and affects men of all ages.

Event of WORSENING PROSTATITIS

- Investigator: Prostate Hyperplasia

- AbbVie: Event more likely related to concurrent acute prostatitis. Risk factors for which include pre-existing prostatic hyperplasia, recurrent urogenital infections and obesity.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] BLOOD CULTURE:** negative

[redacted] **20[redacted] BMI:** 34.39 kg/m2

[redacted] **20[redacted] URINE CULTURE:** negative

[redacted] **20[redacted] URINE CULTURE:** Positive; 100 bacteria per ml

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
乳癌	X	X		X
リンパ球減少症				X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	4[redacted]	FEMALE	WHITE

Medical History	Onset Year
LEFT SIDED UC	20[redacted]
OTHER: VIT D DEFICIENCY	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	CURRENT	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 ABT-494 (IND)	7.5 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 56	56
M14-234 SS3 ABT-494 (MAIN)	7.5 mg	ORAL	QD	[redacted]20[redacted] / 57	[redacted]20[redacted] / 225	169
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted]20[redacted] / 226	[redacted]20[redacted] / 1274	1049

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
MERCAPTOPURINE	50 mg	OTHER: EVERY 4 DAYS	Y-M: 20[redacted]
BUDESONIDE	2 mg	QD	Y-M: 20[redacted]
CIPROFLOXACIN	1000 mg	BID	Y-M: 20[redacted]
METRONIDAZOLE	1500 mg	TID	Y-M: 20[redacted]
VEDOLIZUMAB	300 mg	OTHER: EVERY 4 WEEKS	Y-M: 20[redacted]
INFLIXIMAB	300 mg	OTHER: 8 WEEKS	Y-M: 20[redacted]
PREDNISONE	15 mg	QD	Y-M: 20[redacted] / -312
COLECALCIFEROL	0,4 mL	QD	Y-M: 20[redacted] / -1
MESALAZINE	1000 mg	QD	Y: 20[redacted]
MESALAZINE	4500 mg	QD	Y: 20[redacted]

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
COLECALCIFEROL	0,4 mL	QD	Y-M: 20[redacted] / -1	ONGOING
PREDNISONE	20 mg	QD	Y-M: 20[redacted] / 2	Y-M: 20[redacted] / 31
PREDNISONE	15 mg	QD	Y-M: 20[redacted] / 32	Y-M: 20[redacted] / 38
PREDNISONE	10 mg	QD	Y-M: 20[redacted] / 39	Y-M: 20[redacted] / 45
PREDNISONE	7.5 mg	QD	Y-M: 20[redacted] / 46	Y-M: 20[redacted] / 52
PREDNISONE	5 mg	QD	Y-M: 20[redacted] / 53	Y-M: 20[redacted] / 59
PREDNISONE	2.5 mg	QD	Y-M: 20[redacted] / 60	Y-M: 20[redacted] / 66
OTHER VIRAL VACCINES	1 OTHER: DOSE	OTHER: ONCE	Y-M: 20[redacted] / 1030	Y-M: 20[redacted] / 1030
CEFAZOLIN	1 g	OTHER: ONCE	Y-M: 20[redacted] / 1062	Y-M: 20[redacted] / 1062
TAMOXIFEN	20 mg	QD	Y-M: 20[redacted] / 1071	ONGOING
MESALAZINE	4500 mg	QD	Y: 20[redacted]	ONGOING

Event #1: Event of Interest - Lymphopenia

Event Description	LYMPHOPENIA
Preferred term	リンパ球減少症
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 259 / 34
Age at AE Onset	4[redacted]

Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	310 / 85
Duration of AE	52 DAYS
Severity	MILD
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 #2: Serious Adverse Event, AE Leading to Discontinuation of Study Drug, Event of Interest-Possible Malignancies, Event of Interest-Malignancy, Event of Interest-Malignancies Excl NMSC

Event Description	BREAST CARCINOMA
Preferred term	乳癌
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 1273 / 1048
Age at AE Onset	4[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	ONGOING
Duration of AE	ONGOING
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	PATIENT GOT SURGERY ON [redacted] 20[redacted]
Discontinued Study Drug Due to the Event	YES
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:16:51

Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はスイスの 4[redacted] 歳女性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，乳癌の事象を発現した。関連する病歴は，潰瘍性大腸炎，ビタミン D 欠乏，非喫煙者及び現飲酒者（1 日 2 杯未満）であった。

Event 2 の臨床経過：

投与1273日後＊，被験者は乳癌を発現した。

定期健診で，被験者の右乳房に結節が触知された。被験者は乳房生検を受け，乳癌が認められた。投与1286日後＊　，被験者は入院した。投与1287日後＊ ，被験者は乳癌のために右乳房区域切除を受け，また，被験者は右乳房のセンチネルリンパ節生検を受けた。投与1289日後＊，被験者は退院した。

治験責任医師によると，被験者に家族歴はなく，子どもはなく，閉経期ではなかった。

投与された薬剤はタモキシフェンであった。

The patient's past medications include:

SALOFALK FOAM for ULCERATIVE COLITIS (20[redacted] - [redacted] 20[redacted])

PURI NETHOL for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

BUDENOFALK RECTAL FOAM for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

VEDOLIZUMAB for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

INFLIXIMAB for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

PREDNISON for ULCERATIVE COLITIS, WORSENING OF UC and UC TAPERING DUE TO PROTOCOL ([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], [redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

COMIRNATY for COVID 19 PROPHYLAXIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted]20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Open Label)

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1) Breast carcinoma (10006204) (Breast cancer (10006187)) [v.24.0] [10006204]

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

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

Dechallenge: No

Alternative Etiology for UPADACITINIB (Open Label)

Event of BREAST CARCINOMA

- Investigator: Patient underwent surgery on [redacted] 20[redacted]

- AbbVie: Breast cancer is a common type of cancer in females world-wide with estimated incidence of 43.1 per 100,000 whereas Switzerland has an incidence rate of 88.1 per 100,000 as of 20[redacted] which is slightly higher than in the U.S. Additional risk factor is nulliparity.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] BIOPSY:** Mamma carcinoma cT1c, cN0, G2, ER/PR 80%, Her2 neg

[redacted] **20[redacted] MAMMOGRAPHY:** tumor right breast

[redacted] **20[redacted] ULTRASOUND BREAST:** tumor right breast

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
鼡径ヘルニア	X			
リンパ球減少症				X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	3[redacted]	MALE	WHITE

Medical History	Onset Year
APPENDECTOMY	20[redacted]
EXTENSIVE UC/PANCOLITIS	20[redacted]
IRON DEFICIENCY ANEMIA	20[redacted]
LACTOSE INTEROLERANCE	20[redacted]
MULTIPLE NAEVI	20[redacted]
ULCERATIVE COLITIS	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	CURRENT	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-675 Placebo (IND)		ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 55	55

M14-675 ABT-494 (OL)	45 mg	ORAL	QD	[redacted]20[redacted] / 56 [redacted]20[redacted] / 112	57
M14-234 SS3 Placebo (MAIN)		ORAL	QD	[redacted]20[redacted] / 113 [redacted]20[redacted] / 154	42
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted]20[redacted] / 155	

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
CURCUMA LONGA	NOT REPORTED	NOT REPORTED	Y-M: 20[redacted]
MESALAZINE	4.5 g	QD	Y-M: 20[redacted]
PREDNISONE	40 mg	QD	Y-M: 20[redacted]
AZATHIOPRINE	150 mg	QD	Y-M: 20[redacted]
PREDNISONE	20 mg	QD	Y-M: 20[redacted]
BUDESONIDE	9 mg	QD	Y-M: 20[redacted]
MESALAZINE	4 g	QD	Y-M: 20[redacted]
LECITHIN	NOT REPORTED	NOT REPORTED	Y-M: 20[redacted]
RIFAXIMIN	550 mg	BID	Y-M: 20[redacted]
INFLIXIMAB	400 mg	OTHER: 400	Y-M: 20[redacted]
BUDESONIDE	2 mg	QD	Y-M: 20[redacted]
INFLIXIMAB	800 mg	OTHER: 4 WEEKS	Y-M: 20[redacted]
MESALAZINE	4.8 mg	QD	Y-M: 20[redacted]
PREDNISONE	30 mg	QD	Y-M: 20[redacted]
PREDNISONE	30 mg	QD	Y-M: 20[redacted]
VEDOLIZUMAB	300 mg	OTHER: EVERY 8 WEEKS	Y-M: 20[redacted]
COLECALCIFEROL	1 OTHER: BOTTLE	OTHER: ONCE A MONTH	Y-M: 20[redacted] / -98
SODIUM PHOSPHATE	3 OTHER: CAPSULES	TID	Y-M: 20[redacted] / -98
TRIMIPRAMINE	25 gtt	QD	Y-M: 20[redacted] / -56
PREDNISONE	20 mg	QD	Y-M: 20[redacted] / -36

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
COLECALCIFEROL	1 OTHER: BOTTLE	OTHER: ONCE A MONTH	Y-M: 20[redacted] / -98	Not reported

SODIUM PHOSPHATE	3 OTHER: CAPSULES	TID	Y-M: 20[redacted] / -98	Y-M: 20[redacted] / 295
TRIMIPRAMINE	25 gtt	QD	Y-M: 20[redacted] / -56	Not reported
PREDNISONE	20 mg	QD	Y-M: 20[redacted] / -36	Y-M: 20[redacted] / 53
PREDNISONE	17.5 mg	QD	Y-M: 20[redacted] / 54	Y-M: 20[redacted] / 60
PAPAVER SOMNIFERUM	4X15 gtt	QID	Y-M: 20[redacted] / 56	Y-M: 20[redacted] / 212
PREDNISONE	15 mg	QD	Y-M: 20[redacted] / 61	Y-M: 20[redacted] / 67
PREDNISONE	12.5 mg	QD	Y-M: 20[redacted] / 68	Y-M: 20[redacted] / 74
PREDNISONE	10 mg	QD	Y-M: 20[redacted] / 75	Y-M: 20[redacted] / 82
PREDNISONE	7.5 mg	QD	Y-M: 20[redacted] / 83	Y-M: 20[redacted] / 94
PREDNISONE	5 mg	QD	Y-M: 20[redacted] / 95	Y-M: 20[redacted] / 120
PREDNISONE	2.5 mg	QD	Y-M: 20[redacted] / 121	Y-M: 20[redacted] / 200
PAPAVER SOMNIFERUM	15 gtt	TID	Y-M: 20[redacted] / 213	Y-M: 20[redacted] / 295
METAMIZOLE	4X40 gtt	PRN	Y-M: 20[redacted] / 262	Y-M: 20[redacted] / 264

Event #1: Event of Interest - Lymphopenia

Event Description	LYMPHOZYTOPENIA
Preferred term	リンパ球減少症
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 193 / 39
Age at AE Onset	3[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	210 / 56
Duration of AE	18 DAYS
Severity	MILD
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 #2: Serious Adverse Event

Event Description	INGUINAL HERNIA BOTH SIDES
Preferred term	鼠径ヘルニア
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 203 / 49
Age at AE Onset	3[redacted]

Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	418 / 264
Duration of AE	216 DAYS
Severity	MILD
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	PREFERED HERNIOTOMY TO AVOID INCARCERATION
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION, IMPORTANT MEDICAL EVENT REQUIRING MEDICAL OR SURGICAL INTERVENTION

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はスイスの 3[redacted] 歳男性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，両側鼠径ヘルニアの事象を発現した。関連する病歴は，潰瘍性大腸炎，非喫煙者及び現飲酒者（1 日 2 杯未満）であった。

Event 2 の臨床経過：

投与203日後＊ ，被験者は両側鼠径ヘルニアを発現した。投与418日後＊ ，両側鼠径ヘルニアは消失した。

投与416日後＊ ，被験者は両側腹膜外腔のメッシュ挿入のため，入院した。投与418日後＊，被験者は退院した。

The patient's past medications include:

KURKUMA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

MEZALAZIN for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

PREDNISON for ULCERATIVE COLITIS ([redacted])

IMUREK for ULCERATIVE COLITIS ([redacted])

CORTIMENT for ULCERATIVE COLITIS ([redacted])

MEZALAZIN KLYSMA for ULCERATIVE COLITIS ([redacted])

LECITIN for ULCERATIVE COLITIS ([redacted])

XIFAXAN for ULCERATIVE COLITIS ([redacted])

REMICADE for ULCERATIVE COLITIS ([redacted])

BUDENOFALK RECTAL FOAM for ULCERATIVE COLITIS ([redacted])

MEZAVANT for ULCERATIVE COLITIS ([redacted])

ENTYVIO for ULCERATIVE COLITIS ([redacted])

Causality for UPADACITINIB (Open Label)

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1) Bilateral inguinal hernia (10067165) (Inguinal hernia (10022016)) [v.24.1] [10067165]

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 (Open Label)

Event of INGUINAL HERNIA BOTH SIDES

- Investigator: Preferred herniotomy to avoid incarceration

- AbbVie: Inguinal hernias are common in the general population with a lifetime risk of 27.5 percent in men.

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
うつ病	X			

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	2[redacted]	FEMALE	WHITE

Medical History	Onset Year
ANEMIA: IRON ANEMIA	20[redacted]
DEPRESSION	20[redacted]
EXTENSIVE UC/PANCOLITIS	20[redacted]
NEPHROLITHIASIS: RIGHT	20[redacted]
OTHER: ANXIETY	20[redacted]
OTHER: ERYTHEMA NODOSUM	20[redacted]
OTHER: EXTRACORPOREAL SHOCK WAVE LITHOTRIPSY RIGHT	20[redacted]
OTHER: SWOLLEN ANCLE LEFT	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	NEVER	

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 Placebo (IND)		ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 55	55

M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted]20[redacted] / 55

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
PREDNISONE	2.5 mg	QD	Y-M: 20[redacted]
AZATHIOPRINE	100 mg	QD	Y-M: 20[redacted]
PREDNISONE	2.5 mg	QD	Y-M: 20[redacted]
INFLIXIMAB	300 mg	OTHER: EVERY 8 WEEKS	Y-M: 20[redacted]
METHOTREXATE	15 mg	QD	Y-M: 20[redacted]
PREDNISONE	2.5 mg	QD	Y-M: 20[redacted]
ADALIMUMAB	40 mg	OTHER: EVERY WEEKS	Y-M: 20[redacted]
PREDNISONE	2.5 mg	QD	Y-M: 20[redacted]
AMOXICILLIN;CLAVULANIC ACID	500 mg	BID	Y-M: 20[redacted]
VANCOMYCIN	125 mg	QID	Y-M: 20[redacted]
GOLIMUMAB	100 mg	OTHER: EVERY 4 WEEKS	Y-M: 20[redacted]
METHOTREXATE	15 mg	1 time per week	Y-M: 20[redacted]
VEDOLIZUMAB	300 mg	OTHER: EVERY 4 WEEKS	Y-M: 20[redacted]
MESALAZINE	4 g	QD	Y-M: 20[redacted] / -270
CIPROFLOXACIN	500 mg	BID	Y-M: 20[redacted] / -111
METHYLPREDNISOLONE	40 mg	QD	Y-M: 20[redacted] / -111
METRONIDAZOLE	500 mg	TID	Y-M: 20[redacted] / -111
PREDNISONE	5 mg	QD	Y-M: 20[redacted] / -111
BUDESONIDE	9 mg	QD	Y-M: 20[redacted] / -76
CIPROFLOXACIN	500 mg	BID	Y: 20[redacted]
MESALAZINE	6 g	QD	Y: 20[redacted]

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
CALCIUM CARBONATE;COLECALCIFEROL	1 OTHER: TABLET	QD	Y-M: 20[redacted] / 445	Y-M: 20[redacted] / 473
VITAMIN D NOS	20 gtt	QD	Y-M: 20[redacted] / 474	Y-M: 20[redacted] / 477
ESCITALOPRAM	2 gtt	QD	Y-M: 20[redacted] / 477	Y-M: 20[redacted] / 479

HUMULUS LUPULUS;VALERIANA OFFICINALIS	2 OTHER: DRG	PRN	Y-M: 20[redacted] / 477	Y-M: 20[redacted] / 481
VITAMIN D NOS	10 gtt	QD	Y-M: 20[redacted] / 478	Y-M: 20[redacted] / 550
ESCITALOPRAM	4 gtt	QD	Y-M: 20[redacted] / 480	Y-M: 20[redacted] / 481
ESCITALOPRAM	6 gtt	QD	Y-M: 20[redacted] / 482	Y-M: 20[redacted] / 483
ESCITALOPRAM	8 gtt	QD	Y-M: 20[redacted] / 484	Y-M: 20[redacted] / 485
ESCITALOPRAM	10 gtt	QD	Y-M: 20[redacted] / 486	Y-M: 20[redacted] / 490
ESCITALOPRAM	12 gtt	QD	Y-M: 20[redacted] / 491	Y-M: 20[redacted] / 493
ESCITALOPRAM	14 gtt	QD	Y-M: 20[redacted] / 494	Y-M: 20[redacted] / 558
ARIPIPRAZOLE	10 mg	QD	Y-M: 20[redacted] / 597	Y-M: 20[redacted] / 703
CITRIC ACID;MAGNESIUM OXIDE;SODIUM PICOSULFATE	SACHET OTHER: SACHET	BID	Y-M: 20[redacted] / 672	Y-M: 20[redacted] / 672
FENTANYL	50 ug	QD	Y-M: 20[redacted] / 673	Y-M: 20[redacted] / 673
FLUOXETINE	40 mg	BID	Y-M: 20[redacted] / 673	Y-M: 20[redacted] / 825
PROPOFOL	180 mg	QD	Y-M: 20[redacted] / 673	Y-M: 20[redacted] / 673
SULFAMETHOXAZOLE;TRIMETHOPRIM	800/160 mg	QD	Y-M: 20[redacted] / 1061	Y-M: 20[redacted] / 1065
LEVONORGESTREL	1 OTHER: PIECE	QD	Y-M: 20[redacted] / 1120	ONGOING
INFLUENZA VACCINE	0.5 mL	OTHER: 1X	Y-M: 20[redacted] / 1184	Y-M: 20[redacted] / 1184
BUPROPION	150 mg	QD	Y-M: 20[redacted] / 1331	Not reported
CITRIC ACID;MAGNESIUM OXIDE;SODIUM PICOSULFATE	1 OTHER: SACHET	BID	Y-M: 20[redacted] / 1339	Y-M: 20[redacted] / 1339
FENTANYL	75 ug	OTHER: ONCE TIME	Y-M: 20[redacted] / 1340	Y-M: 20[redacted] / 1340
PROPOFOL	260 mg	OTHER: ONCE TIME	Y-M: 20[redacted] / 1340	Y-M: 20[redacted] / 1340

Event #1: Serious Adverse Event

Event Description	DEPRESSION
Preferred term	うつ病
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 528 / 474
Age at AE Onset	2[redacted]
Laboratory Testing	

NOT REPORTED

Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	554 / 500
Duration of AE	27 DAYS
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	MEDICAL HISTORY OF PRE-EXISTING DEPRESSION
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Event #2: Serious Adverse Event

Event Description	DEPRESSION
Preferred term	うつ病
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 744 / 690
Age at AE Onset	2[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	748 / 694
Duration of AE	5 DAYS
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	MEDICAL HISTORY OF PRE-EXISTING DEPRESSION
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Event #3: Serious Adverse Event

Event Description	DEPRESSION
Preferred term	うつ病
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 1133 / 1079
Age at AE Onset	2[redacted]
Laboratory Testing	
NOT REPORTED	

Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	1256 / 1202
Duration of AE	124 DAYS
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	MEDICAL HISTORY OF PRE-EXISTING DEPRESSION
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Event #4: Serious Adverse Event

Event Description	DEPRESSION
Preferred term	うつ病
AE Onset Date / Initial Rx Day / Rx Day	[redacted] / 1372 / 1318
Age at AE Onset	[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	1438 / 1384
Duration of AE	67 DAYS
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	MEDICAL HISTORY OF PRE-EXISTING DEPRESSION
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はスイスの 2[redacted] 歳女性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，うつ病の事象を発現した。関連する病歴は，潰瘍性大腸炎，結節性紅斑，不安，うつ病，非喫煙者及び非飲酒者であった。

Event 1 の臨床経過：

投与528日後＊，被験者はうつ病を発現した。

投与528日後＊　，被験者はうつ病と関連した徴候及び症状のため，入院した。被験者は，疲労，人生の虚無感，無価値感及び不眠症を経験した。投与554日後＊，被験者は退院した。

投与された薬剤は，valverde，エビリファイ，cipralex 及びフルオキセチンであった。

The patient's past medications include:

INFLIXIMAB for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

METHOTREXATE for ULCERTIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

HUMIRA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

SIMPONI for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

CALZIMAGON D3 FORTE for VITAMIN D DEFICIENCY ([redacted] 20[redacted] - [redacted] 20[redacted])

UREK for ULCERTIVE COLITIS

Causality for UPADACITINIB (Open Label)

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1)　Depression (10012378)　(Depression (10012378))　[v.23.1]　[10012378]

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 (Open Label)

Event of DEPRESSION

- Investigator: MEDICAL HISTORY

- AbbVie: EVENT IS MORE LIKELY RELATED TO PRE-EXISTING DEPRESSION.

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はスイスの 2[redacted] 歳女性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，うつ病の事象を発現した。関連する病歴は，潰瘍性大腸炎，不安，うつ病，非喫煙者及び非飲酒者であった。

Event 4 の臨床経過：

投与1372日後＊，被験者はうつ病を発現した。投与1438日後＊，うつ病は消失した。

本事象の発現前，被験者は 投与の25ヵ月後＊に自閉症/アスペルガー症候群（非重篤），社交不安障害（非重篤）及び注意欠如・多動性障害（非重篤）と診断された。

投与1471日後＊　，被験者は入院した。投与1505日後＊　，被験者は退院した。本報告時点でそれ以上の情報提供はなかった。

The patient's past medications include:

PREDNISON for ULCERATIVE COLITIS ([redacted])

IMUREK for ULCERATIVE COLITIS ([redacted])

INFLIXIMAB for ULCERATIVE COLITIS ([redacted])

METHOTREXATE for ULCERATIVE COLITIS ([redacted])

CIPROFLOXACIN for ULCERATIVE COLITIS ([redacted])

SALOFALK for ULCERATIVE COLITIS ([redacted])

HUMIRA for ULCERATIVE COLITIS ([redacted])

CO-AMOXICILLIN for ULCERATIVE COLITIS ([redacted])

SIMPONI for ULCERATIVE COLITIS ([redacted])

VEDOLIZUMAB for ULCERATIVE COLITIS ([redacted])

METRONIDAZOL for ULCERATIVE COLITIS ([redacted])

SOLU MEDROL for ULCERATIVE COLITIS ([redacted])

CORTIMENT for ULCERATIVE COLITIS ([redacted])

CIPRALEX for DEPRESSION ([redacted])

ABILIFY for DEPRESSION ([redacted])

FLUOXETIN for DEPRESSION ([redacted])

Causality for UPADACITINIB (Open Label)

---

1) Depression (10012378) (Depression (10012378)) [v.24.1] [10012378]

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 (Open Label)

Event of DEPRESSION

- Investigator: Medical history

- AbbVie: Risk factors include pre-existing depression and anxiety.

Relevant Laboratory & Other Diagnostic Tests

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

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はスイスの 2[redacted] 歳女性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，うつ病の事象を発現した。関連する病歴は，潰瘍性大腸炎，不安，うつ病，非喫煙者及び非飲酒者であった。

この被験者は，先行の M14-234 試験では，被験者番号 [redacted] であり，20[redacted] 年 [redacted] 月 [redacted] 日から 20[redacted] 年 [redacted] 月 [redacted] 日まで盲検化された治験薬を投与された。

Event 2 の臨床経過：

投与744日後＊，被験者はうつ病を発現した。投与748日後＊，うつ病は消失した。

本事象の発現前，被験者はうつ病による入院を経験していた。

投与744日後＊　，被験者は深いうつ病のため入院した。被験者は気力低下の徴候及び症状を示した。被験者は精神療法で治療された。投与748日後＊　，被験者は退院を決意したため，退院した。

The patient's past medications include:

PREDNISON for ULCERATIVE COLITIS ([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])

IMUREK for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

INFLIXIMAB for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

METHOTREXATE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

CIPROFLOXACIN for ULCERATIVE COLITIS (20[redacted] - 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

SALOFALK for ULCERATIVE COLITIS (20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - 20[redacted])

HUMIRA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

CO-AMOXICILLIN for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

SIMPONI for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

VEDOLIZUMAB for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

METRONIDAZOL for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

SOLU MEDROL for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Open Label)

---

1) Depression (10012378) (Depression (10012378)) [v.24.1] [10012378]

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 (Open Label)

Event of DEPRESSION

- Investigator: Medical history of pre-existing depression

- AbbVie: Event more likely related to pre-existing depression.
Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はスイスの 2[redacted] 歳女性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，うつ病の事象を発現した。関連する病歴は，潰瘍性大腸炎，不安，うつ病，非喫煙者及び非飲酒者であった。

Event 3 の臨床経過：

投与1133日後＊，被験者はうつ病を発現した。投与1256日後＊，うつ病は消失した。

投与1133日後＊ ，被験者は重度のうつ病で入院した。被験者は気力低下の徴候及び症状を示した。被験者は精神療法を受け，病状は改善した。投与1256日後＊，被験者は退院した。

治験責任医師によると，本事象の発現前に被験者はうつ病による入院を経験していた。

The patient's past medications include:

PREDNISON for ULCERATIVE COLITIS ([redacted])

IMUREK for ULCERATIVE COLITIS ([redacted])

INFLIXIMAB for ULCERATIVE COLITIS ([redacted])

METHOTREXATE for ULCERATIVE COLITIS ([redacted])

CIPROFLOXACIN for ULCERATIVE COLITIS ([redacted])

SALOFALK for ULCERATIVE COLITIS ([redacted])

HUMIRA for ULCERATIVE COLITIS ([redacted])

CO-AMOXICILLIN for ULCERATIVE COLITIS ([redacted])

VANCOMYCIN for CYTOMEGALOVIRUS INFECTION ([redacted])

SIMPONI for ULCERATIVE COLITIS ([redacted])

VEDOLIZUMAB for ULCERATIVE COLITIS ([redacted])

METRONIDAZOL for ULCERATIVE COLITIS ([redacted])

SOLU MEDROL for ULCERATIVE COLITIS ([redacted])

Causality for UPADACITINIB (Blinded)

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1) Depression (10012378) (Depression (10012378)) [v.24.1] [10012378]

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 DEPRESSION

- Investigator: Medical history of pre-existing depression.

- AbbVie: Event is more likely related to pre-existing depression

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
ボーエン病				X
潰瘍性大腸炎	X			
帯状疱疹				X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	6[redacted]	MALE	WHITE

Medical History	Onset Year
DIABETES MELLITUS: TYPE 1 LATE ONSET	20[redacted]
EXTENSIVE UC/PANCOLITIS	19[redacted]
HYPERTENSION	NOT REPORTED
HYPOTHYROIDISM	20[redacted]
OTHER: ACHILLES TENDON RUPTURE ON THE RIGHT SIDE	20[redacted]
OTHER: CHICKEN POX	NOT REPORTED
OTHER: DISCUS HERNIATION	20[redacted]
OTHER: GLUTENINTOLERANCE	20[redacted]
OTHER: HEMORRHOIDS	20[redacted]
OTHER: INSOMNIA	20[redacted]
OTHER: LACTOSE INTOLERANCE	20[redacted]
OTHER: POSTOPERATIVE DELIR	20[redacted]
VALVULAR HEART DISEASE: AOTERIC VALVE DISEASE	20[redacted]
VALVULAR HEART DISEASE: BIOLOGICAL AORTIC VALVE REPLACEMENT	20[redacted]

Prior Procedures	Procedure Year
SURGERY: ANTERIOR CRUCIATE LIGAMENT PLASTIC, POSTEROMEDIAL MENISCAL REPAIR, MEDIAL COLLATERAL LIGAMENT RECONSTRUCTION WITH ALLOGRAFT KNEE ON THE LEFT SIDE	20[redacted]
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			

CIGARETTES	FORMER	0.25 PACK	5	20[redacted]
CIGARS	NEVER			
PIPES	NEVER			

Alcohol Use	Status	Number/Day
ALCOHOL	NEVER	

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 Placebo (IND)		ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 56	56
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted]20[redacted] / 57		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
AZATHIOPRINE	100 mg	TID	Y-M: 19[redacted]
INFLIXIMAB	NOT REPORTED	OTHER: ALL 8 WEEKS	Y-M: 20[redacted]
ADALIMUMAB	40 mg	OTHER: ALL 2 WEEKS	Y-M: 20[redacted]
PREDNISONE	30 mg	QD	Y-M: 20[redacted]
MESALAZINE	1000 mg	QD	Y-M: 20[redacted]
AZATHIOPRINE	150 mg	QD	Y-M: 20[redacted]
INFLIXIMAB	400 mg	OTHER: ALL 6 WEEKS	Y-M: 20[redacted]
ETROLIZUMAB	105 mg	OTHER: EVERY 4 WEEKS	Y-M: 20[redacted]
LEVOTHYROXINE	25 OTHER: MCG	QD	Y-M: 20[redacted]
ZOLPIDEM	7.5 mg	OTHER: AS NEEDED	Y-M: 20[redacted]
BUDESONIDE	9 mg	QD	Y-M: 20[redacted]
ESOMEPRAZOLE	20 mg	QD	Y-M: 20[redacted]
BUDESONIDE	2 mg	QD	Y-M: 20[redacted] / -321
INSULIN ASPART	2 IU	OTHER: AS NEEDED	Y-M: 20[redacted] / -220
INSULIN GLARGINE	18 IU	QD	Y-M: 20[redacted] / -220
INFLIXIMAB	800 mg	OTHER: ALL 4 WEEKS	Y-M: 20[redacted] / -224
PREDNISONE	20 mg	QD	Y-M: 20[redacted] / -82
CALCIUM	1 OTHER: TABLET	QD	Y-M: 20[redacted] / -77
AMLODIPINE;VALSARTAN	2.5 mg	QD	Y-M: 20[redacted] / -33

METOPROLOL	100 mg	TID	Y-M: 20[redacted] / -33
ACETYLSALICYLIC ACID	100 mg	QD	Y: 20[redacted]
ATORVASTATIN	10 mg	QD	Y: 20[redacted]
MAGNESIUM	10 mmol	QD	Y: 20[redacted]
MESALAZINE	2000 mg	QD	Y: 20[redacted]
MESALAZINE	3000 mg	QD	Y: 20[redacted]

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
LEVOTHYROXINE	25 OTHER: MCG	QD	Y-M: 20[redacted]	ONGOING
ESOMEPRAZOLE	20 mg	QD	Y-M: 20[redacted]	Y-M: 20[redacted] / 317
INSULIN ASPART	2 IU	OTHER: AS NEEDED	Y-M: 20[redacted] / -220	Y-M: 20[redacted] / 919
INSULIN GLARGINE	18 IU	QD	Y-M: 20[redacted] / -220	Y-M: 20[redacted] / 317
CALCIUM	1 OTHER: TABLET	QD	Y-M: 20[redacted] / -77	Y-M: 20[redacted] / 745
AMLODIPINE;VALSARTAN	2.5 mg	QD	Y-M: 20[redacted] / -33	Y-M: 20[redacted] / 317
METOPROLOL	100 mg	TID	Y-M: 20[redacted] / -33	Y-M: 20[redacted] / 317
BUDESONIDE	2 mg	QD	Y-M: 20[redacted] / 14	Y-M: 20[redacted] / 712
CINCHOCAINE;HEXACHLOROPHENE;PREDNISOLONE	1 OTHER: SUPPOSITORIUM	QD	Y-M: 20[redacted] / 14	Y-M: 20[redacted] / 712
TILACTASE	1 OTHER: DRAGEE	OTHER: AS NEEDED	Y-M: 20[redacted] / 14	Y-M: 20[redacted] / 669
ASCORBIC ACID	1 OTHER: TABLET	QD	Y-M: 20[redacted] / 19	Y-M: 20[redacted] / 105
MIRTAZAPINE	15 mg	QD	Y-M: 20[redacted] / 64	Y-M: 20[redacted] / 1233
ZOLPIDEM	10 mg	PRN	Y-M: 20[redacted] / 64	Y-M: 20[redacted] / 330
ACICLOVIR	1 g	TID	Y-M: 20[redacted] / 101	Y-M: 20[redacted] / 113
AMLODIPINE;VALSARTAN	5 mg	QD	Y-M: 20[redacted] / 318	Not reported
ASCORBIC ACID;BETACAROTENE;COPPER;RIBOFLAVIN;SELENIUM;TOCOPHEROL;ZINC	1 OTHER: CAPSULE	OTHER: 4 DAYS A WEEK	Y-M: 20[redacted] / 318	Not reported
ESOMEPRAZOLE	40 mg	QD	Y-M: 20[redacted] / 318	Not reported
INSULIN GLARGINE	14 IU	QD	Y-M: 20[redacted] / 318	Y-M: 20[redacted] / 1422
METOPROLOL	50 mg	TID	Y-M: 20[redacted] / 318	Not reported
METAMIZOLE	500 mg	PRN	Y-M: 20[redacted] / 330	ONGOING
ZOLPIDEM	10 mg	PRN	Y-M: 20[redacted] / 506	Not reported

INSULIN ASPART	3 IU	PRN	Y-M: 20[redacted] / 920	ONGOING
ROSUVASTATIN	10 mg	QD	Y-M: 20[redacted] / 920	Y-M: 20[redacted] / 1422
CITRIC ACID;MAGNESIUM OXIDE;SODIUM PICOSULFATE	1 OTHER: SACHET	BID	Y-M: 20[redacted] / 1008	Y-M: 20[redacted] / 1008
PROPOFOL	170 mg	QD	Y-M: 20[redacted] / 1009	Y-M: 20[redacted] / 1009
FORMIC ACID	ONE TIME OTHER: ONE TIME	OTHER: WEEKLY	Y-M: 20[redacted] / 1013	Y-M: 20[redacted] / 1177
SALICYLIC ACID;UREA	ONE TIME OTHER: ONE TIME	QD	Y-M: 20[redacted] / 1013	Y-M: 20[redacted] / 1177
AMOXICILLIN	1000 mg	BID	Y-M: 20[redacted] / 1384	Y-M: 20[redacted] / 1414
ENOXAPARIN	40 mg	QD	Y-M: 20[redacted] / 1422	Y-M: 20[redacted] / 1436
FENTANYL	25 ug	QD	Y-M: 20[redacted] / 1422	Y-M: 20[redacted] / 1422
INSULIN ASPART	1 IU	PRN	Y-M: 20[redacted] / 1422	Y-M: 20[redacted] / 1426
METRONIDAZOLE	500 mg	TID	Y-M: 20[redacted] / 1422	Y-M: 20[redacted] / 1426
OTHER COMBINATIONS OF NUTRIENTS	50 mL	BID	Y-M: 20[redacted] / 1422	Y-M: 20[redacted] / 1423
PARACETAMOL	500 mg	PRN	Y-M: 20[redacted] / 1422	Y-M: 20[redacted] / 1422
POTASSIUM	10 mmol	PRN	Y-M: 20[redacted] / 1422	Y-M: 20[redacted] / 1433
PROPOFOL	140 mg	QD	Y-M: 20[redacted] / 1422	Y-M: 20[redacted] / 1422
CARBOHYDRATES NOS;FATS NOS;MINERALS NOS;PROTEINS NOS;VITAMINS NOS	50 mL	QID	Y-M: 20[redacted] / 1423	Not reported
CEFTRIAXONE	2 g	QD	Y-M: 20[redacted] / 1423	Y-M: 20[redacted] / 1426
EZETIMIBE	10 mg	QD	Y-M: 20[redacted] / 1423	Not reported
HUMULUS LUPULUS;VALERIANA OFFICINALIS	250/60 mg	PRN	Y-M: 20[redacted] / 1423	Y-M: 20[redacted] / 1428
INSULIN GLARGINE	14 IU	QD	Y-M: 20[redacted] / 1423	Y-M: 20[redacted] / 1426
METHYLPREDNISOLONE	60 mg	QD	Y-M: 20[redacted] / 1423	Y-M: 20[redacted] / 1433
METOPROLOL	100 mg	QD	Y-M: 20[redacted] / 1423	Not reported
ROSUVASTATIN	20 mg	QD	Y-M: 20[redacted] / 1423	Not reported
COLECALCIFEROL	800 IU	QD	Y-M: 20[redacted] / 1424	Not reported
IRON	1000 mg	QD	Y-M: 20[redacted] / 1424	Y-M: 20[redacted] / 1424
MINERALS NOS;VITAMINS NOS	1 OTHER: PCS	BID	Y-M: 20[redacted] / 1424	Y-M: 20[redacted] / 1433

PHYTOMENADIONE	10 mg	QD	Y-M: 20[redacted] / 1424	Y-M: 20[redacted] / 1429
SODIUM PHOSPHATE	1 mmol	PRN	Y-M: 20[redacted] / 1424	Y-M: 20[redacted] / 1436
THIAMINE	300 mg	QD	Y-M: 20[redacted] / 1424	Y-M: 20[redacted] / 1437
CARBOHYDRATES NOS;CHOLINE;FATS NOS;MINERALS NOS;PROTEINS NOS;VITAMINS NOS	500 mL	PRN	Y-M: 20[redacted] / 1425	Y-M: 20[redacted] / 1436
INSULIN GLARGINE	14 IU	QD	Y-M: 20[redacted] / 1427	Not reported
POTASSIUM PHOSPHATE DIBASIC	40 mmol	QD	Y-M: 20[redacted] / 1427	Y-M: 20[redacted] / 1435
CALCIUM CARBONATE;COLECALCIFEROL	1000 mg	QD	Y-M: 20[redacted] / 1430	Not reported
MOMETASONE	1 mg	QD	Y-M: 20[redacted] / 1432	Not reported
MIRTAZAPINE	30 mg	QD	Y-M: 20[redacted] / 1433	Y-M: 20[redacted] / 1435
METHYLPREDNISOLONE	40 mg	QD	Y-M: 20[redacted] / 1434	Y-M: 20[redacted] / 1436
MINERALS NOS;VITAMINS NOS	1 OTHER: PCS.	QD	Y-M: 20[redacted] / 1434	Y-M: 20[redacted] / 1437
CANDESARTAN	8 mg	QD	Y-M: 20[redacted] / 1437	Y-M: 20[redacted] / 1437
PREDNISOLONE	40 mg	QD	Y-M: 20[redacted] / 1437	Not reported
SODIUM PHOSPHATE	9 mmol	TID	Y-M: 20[redacted] / 1437	Not reported
ACETYLSALICYLIC ACID	100 mg	QD	Y: 20[redacted]	Y-M: 20[redacted] / 793
ATORVASTATIN	10 mg	QD	Y: 20[redacted]	Y-M: 20[redacted] / 317
MAGNESIUM	10 mmol	QD	Y: 20[redacted]	ONGOING

Event #1: Event of Interest - Herpes Zoster

Event Description	HERPES ZOSTER INFECTION
Preferred term	帯状疱疹
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 156 / 100
Age at AE Onset	6[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	225 / 169
Duration of AE	70 DAYS

Severity	MODERATE
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

Event #2: Event of Interest - Possible Malignancies, Event of Interest - Malignancy, Event of Interest - Non-melanoma Skin Cancer (NMSC)

Event Description	MORBUS BOWEN NECK LEFT SIDE
Preferred term	ボーエン病
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 1069 / 1013
Age at AE Onset	6[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	1069 / 1013
Duration of AE	1 DAY
Severity	MODERATE
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

Event #3: Serious Adverse Event

Event Description	WORSENING ULCERATIVE COLITIS
Preferred term	潰瘍性大腸炎
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 1478 / 1422
Age at AE Onset	6[redacted]
Laboratory Testing	

[redacted]20[redacted] (RX DAY 1422): Albumin: 28 [35 - 52] G/L; Erythrocytes: 4.62 [4.2 - 5.7] 10^12/L; Hematocrit: 0.41 [0.4 - 0.5] FRACTION OF 1; Hemoglobin: 145 [135 - 168] G/L; Leukocytes: 13.2 [3 - 10.5] 10^9/L; Lymphocytes: 1.02 [1.2 - 3.5] 10^9/L; Monocytes: 2.35 [0.2 - 0.9] 10^9/L; Neutrophils: 9.45 [1.6 - 7.4] 10^9/L; Platelets: 424 [150 - 450] 10^9/L; Potassium: 3.3 [3.5 - 4.5] MMOL/L; Sodium: 132 [136 - 145] MMOL/L

Microbiology

[redacted]20[redacted] (RX DAY 1422): STOOL NPTST111-CYTOMEGALOVIRUS: Negative; [redacted]20[redacted] (RX DAY 1424): STOOL NPTST070-C. DIFF.: Negative

AE Stopped Initial Rx Day / Rx Day	1493 / 1437
Duration of AE	16 DAYS
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	WORSENING OF ULCERATIVE COLITIS
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はスイスの 6[redacted] 歳男性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，潰瘍性大腸炎の悪化の事象を発現した。関連する病歴は，潰瘍性大腸炎，遅発性 1 型糖尿病，元喫煙者（1 日 0.25 箱を 5 年間），高血圧及び非飲酒者であった。

Event 3 の臨床経過：

投与1478日後＊，被験者は潰瘍性大腸炎の悪化を発現した。投与1493日後＊，潰瘍性大腸炎の悪化は消失した。

投与1478日後＊，被験者は腹痛，血便及び排便回数増加があり入院した。結腸内視鏡検査で，活動性の潰瘍性大腸炎が認められた。投与1493日後＊，被験者は改善した状態で退院した。

投与された薬剤は，メトロニダゾール，resource，ロセフィン，ソル・メドロール，spiricort，supradyn energy，bactrim forte，joulie，konakion，KCl-retard，リン酸カリウム，fresubin protein energy，fresubin hp energy，dafalgan，benerva 及び塩化ナトリウムであった。

The patient's past medications include:

IMUREK for ULCERATIVE COLITIS ([redacted] 19[redacted] - [redacted] 20[redacted])

INFLIXIMAB for ULCERATIVE COLITIS ([redacted])

SALOFALK for ULCERATIVE COLITIS ([redacted])

HUMIRA for ULCERATIVE COLITIS ([redacted])

PREDNISONE for ULCERATIVE COLITIS ([redacted])

AZATHIOPHRINE for ULCERATIVE COLITIS ([redacted])

ETROLIZUMAB for ULCERATIVE COLITIS ([redacted])

BUDENOFALK FOAM for ULCERATIVE COLITIS ([redacted])

MODERNA COVID-19 VACCINE for PROPHYLAXIS COVID-19 ([redacted])

NOVORAPID for DIABETES ([redacted])

LANTUS for DIABETES MELLITUS ([redacted])

VALVERDE SCHLAF for INSOMNIA ([redacted])

FERINJECT for LOW FERRITIN ([redacted])

CANDESARTAN for HYPERTENSION ([redacted])

Causality for UPADACITINIB (Open Label)

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1) Colitis ulcerative aggravated (10009901) (Colitis ulcerative (10009900)) [v.24.1] [10009901]

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 (Open Label)

Event of WORSENING ULCERATIVE COLITIS

- Investigator: Worsening of ulcerative colitis

- AbbVie: Event more likely related to pre-existing ulcerative colitis.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **ALBUMIN:** 28 G/L (normal 35 to 52)

[redacted] **COLONOSCOPY:** active disease of ulcerative colitis

[redacted] **HEMATOCRIT:** 41 % (normal 40 to 50)

[redacted] **HEMOGLOBIN:** 145 G/L (normal 135 to 168)

[redacted] **LYMPHOCYTE ABS:** 1.02 X10**9/L (normal 1.2 to 3.5)

[redacted] **MONOCYTE ABS:** 2.35 X10**9/L (normal 0.2 to 0.9)

[redacted] **NEUTROPHIL ABS:** 9.45 X10**9/L (normal 1.6 to 7.4)

[redacted] **PLATELET COUNT:** 424 X10**12/L (normal 150 to 450)

[redacted] **POTASSIUM:** 3.3 MMOL/L (normal 3.5 to 4.5)

[redacted] **RED BLOOD CELLS:** 4.62 X10**12/L (normal 4.2 to 5.7)

[redacted] **SODIUM:** 132 MMOL/L (normal 136 to 145)

[redacted] **WHITE BLOOD CELLS:** 13.2 X10**9/L (normal 3.0 to 10.5)

NON SERIOUS EVENTS AND **OTHER AREAS OF SAFETY INTEREST

Herpes zoster: One dermatome.
Bowen's disease: Shaving and biopsies.

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
潰瘍性大腸炎	X	X		

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	6[redacted]	MALE	WHITE

Medical History	Onset Year
ANEMIA: IRON DEFICIENCY	20[redacted]
EXTENSIVE UC/PANCOLITIS	20[redacted]
GASTROESOPHAGEAL REFLUX DISEASE	20[redacted]
OSTEOPOROSIS	20[redacted]
OTHER: AXIAL HIATUSHERNIA	20[redacted]
OTHER: HEPATITIS C	20[redacted]
OTHER: LIVER CIRRHOSIS	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	CURRENT	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 ABT-494 (IND)	30 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 52	52

M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted]20[redacted] / 53	[redacted]20[redacted] / 60	8

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
MESALAZINE	2 g	BID	Y-M: 20[redacted]
PREDNISONE	30 mg	QD	Y-M: 20[redacted]
AZATHIOPRINE	50 mg	QD	Y-M: 20[redacted]
CALCIUM CARBONATE;COLECALCIFEROL	VIT. D3: 800UI CALCIUMCARBONAT2.5 G CALCIUM: 1G OTHER: DRUG	QD	Y-M: 20[redacted]
CEFTRIAXONE	2 g	QD	Y-M: 20[redacted]
ZINC	20 mg	QD	Y-M: 20[redacted]
INFLIXIMAB	800 mg	OTHER: 4 WEEKS	Y-M: 20[redacted]
MESALAZINE	2 g	QD	Y-M: 20[redacted]
PREDNISONE	40 mg	QD	Y-M: 20[redacted]
METRONIDAZOLE	500 mg	BID	Y-M: 20[redacted] / -212
COLECALCIFEROL	16 gtt	OTHER: QW	Y: 20[redacted]

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
MESALAZINE	2 g	BID	Y-M: 20[redacted]	ONGOING
CALCIUM CARBONATE;COLECALCIFEROL	VIT. D3: 800UI CALCIUMCARBONAT2.5 G CALCIUM: 1G OTHER: DRUG	QD	Y-M: 20[redacted]	ONGOING
ZINC	20 mg	QD	Y-M: 20[redacted]	ONGOING
CALCIUM CHLORIDE;MAGNESIUM CHLORIDE;MALIC ACID;POTASSIUM;SODIUM ACETATE TRIHYDRATE;SODIUM CHLORIDE	500 mL	OTHER: 24H/D	Y-M: 20[redacted] / 8	ONGOING
ENOXAPARIN	40 mg	QD	Y-M: 20[redacted] / 8	ONGOING
METHYLPREDNISOLONE	40 mg	QD	Y-M: 20[redacted] / 8	ONGOING
SODIUM CHLORIDE	100 mL	OTHER: 24H/D	Y-M: 20[redacted] / 8	ONGOING
COLECALCIFEROL	16 gtt	OTHER: QW	Y: 20[redacted]	ONGOING

Event #1: Serious Adverse Event, AE Leading to Discontinuation of Study Drug

Event Description	PERSISTENT ULCERATIVE COLITIS ACTIVITY
Preferred term	潰瘍性大腸炎
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 60 / 8
Age at AE Onset	6[redacted]

Laboratory Testing

[redacted]20[redacted] (RX DAY 8): Alanine Aminotransferase: 7 [NOT REPORTED - 55] U/L; Albumin: 31.3 [34 - 48] G/L; Alkaline Phosphatase: 48 [53 - 128] U/L; Alkaline Phosphatase: 47 [53 - 128] U/L; Aspartate Aminotransferase: 11 [NOT REPORTED - 40] U/L; Aspartate Aminotransferase: 7 [NOT REPORTED - 55] U/L; Aspartate Aminotransferase: 12 [NOT REPORTED - 40] U/L; Bilirubin: 10 [NOT REPORTED - 20] umol/L; Calcium: 2.2 [2 - 2.6] MMOL/L; Chloride: 104 [95 - 113] MMOL/L; Creatine Kinase: 48 [NOT REPORTED - 170] U/L; Creatinine: 90 [NOT REPORTED - 115] umol/L; Erythrocytes: 4.1 [4.6 - 6.4] 10^12/L; Erythrocytes: 4.7 [4.6 - 6.4] 10^12/L; Glucose: 5.5 [3.9 - 5.6] MMOL/L; Hematocrit: 0.409 [0.4 - 0.54] FRACTION OF 1; Hematocrit: 0.39 [0.4 - 0.54] FRACTION OF 1; Hemoglobin: 132 [140 - 180] G/L; Hemoglobin: 135 [140 - 180] G/L; Leukocytes: 4.1 [4 - 10] G/L; Leukocytes: 4.3 [4 - 10] G/L; NPTST071-CALPROTECTIN: >8100 [NOT REPORTED - 50] mg/dL; NPTST108-CRP: 31 [NOT REPORTED - 8] mg/L; NPTST157-GGT: 12 [NOT REPORTED - 12] U/L; NPTST157-GGT: 8 [NOT REPORTED - 8] U/L; NPTST193-IRON: 4.2 [10 - 27] UMOL/L; NPTST201-LDH: 175 [NOT REPORTED - 265] U/L; NPTST237-PANCREAS AMYLASE: 43 [NOT REPORTED - 46] U/L; NPTST249-PHOSPHATE: 0.9 [0.8 - 1.5] MMOL/L; NPTST331-TSH: 1.08 [0.25 - 4] MIU/L; NPTST334-UREA: 4.3 [2 - 8] MMOL/L; Platelets: 324 [150 - 300] G/L; Platelets: 360 [150 - 300] G/L; Potassium: 4.2 [3.5 - 5.1] MMOL/L; Potassium: 3.4 [3.5 - 5.1] MMOL/L; Protein: 72 [63 - 83] G/L; Sodium: 135 [136 - 144] MMOL/L; Sodium: 132 [136 - 144] MMOL/L; Urate: 330 [210 - 430] UMOL/L; [redacted]20[redacted] (RX DAY 9): Creatinine: 80 [NOT REPORTED - 115] umol/L; Hematocrit: 0.356 [0.4 - 0.54] FRACTION OF 1; Hemoglobin: 124 [140 - 180] G/L; Leukocytes: 4.9 [4 - 10] G/L; NPTST108-CRP: 22 [NOT REPORTED - 8] mg/L; Platelets: 305 [150 - 300] G/L; Potassium: 3.6 [3.5 - 5.1] MMOL/L; Sodium: 137 [136 - 144] MMOL/L; [redacted]20[redacted] (RX DAY 11): Creatinine: 81 [NOT REPORTED - 115] umol/L; Erythrocytes: 4.2 [4.6 - 6.4] 10^12/L; Hematocrit: 0.368 [0.4 - 0.54] FRACTION OF 1; Hemoglobin: 117 [140 - 180] G/L; Leukocytes: 3.7 [4 - 10] G/L; NPTST108-CRP: 10 [NOT REPORTED - 8] mg/L; Platelets: 294 [150 - 300] G/L; Potassium: 4.1 [3.5 - 5.1] MMOL/L; Sodium: 141 [136 - 144] MMOL/L; [redacted]20[redacted] (RX DAY 15): Creatinine: 81 [NOT REPORTED - 115] umol/L; Erythrocytes: 4.8 [4.6 - 6.4] 10^12/L; Hematocrit: 0.424 [0.4 - 0.54] FRACTION OF 1; Hemoglobin: 138 [140 - 180] G/L; Leukocytes: 7.6 [4 - 10] G/L; NPTST108-CRP: 5 [NOT REPORTED - 8] mg/L; Platelets: 302 [150 - 300] G/L; [redacted]20[redacted] (RX DAY 19): Erythrocytes: 4.8 [4.6 - 6.4] 10^12/L; Hematocrit: 0.422 [0.4 - 0.54] FRACTION OF 1; Hemoglobin: 137 [140 - 180] G/L; Leukocytes: 9.9 [4 - 10] G/L; Platelets: 275 [150 - 300] G/L

Microbiology

NOT REPORTED

AE Stopped Initial Rx Day / Rx Day	ONGOING
Duration of AE	ONGOING
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	DEHYDRATION WEIGHT LOSS 20X BM/D
Discontinued Study Drug Due to the Event	YES
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はスイスの 6[redacted] 歳男性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，持続的な潰瘍性大腸炎の活動の事象を発現した。関連する病歴は，鉄欠乏，潰瘍性大腸炎，C 型肝炎，肝硬変，軸性裂孔ヘルニア，胃食道逆流性疾患及び現飲酒者（1 日 2 杯未満）であった。

Event 1 の臨床経過：

投与60日後＊，被験者は持続的な潰瘍性大腸炎の活動を発現した。

投与60日後＊　　，被験者は，下腹部の刺すような痛み，24 時間で 20 回の血性下痢，1 週間で 2 kg の体重減少，発熱を伴わない戦慄，悪心を伴わない食欲不振で入院した。触診の間に痛みは拡散した。被験者はステロイドの静脈内投与の導入療法及びその他の薬物療法に部分的に反応した（非血性便が 1 日 7–9 回）。被験者はベースラインの来院時にも同様の事象があった。投与71日後＊，被験者は退院した。

投与された薬剤は，ringerfundin，ステロイド，ブデゾニド，塩化カリウム，vitamin D3 wild oel, solu medrol，塩化ナトリウム 0.9%，budenofalk，パントプラゾール，salofalk 及びエンタイビオであった。

Causality for UPADACITINIB (Open Label)

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1)　Ulcerative colitis (10045365)　(Colitis ulcerative (10009900))　[v.23.1]　[10045365]

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

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

Dechallenge: No

Alternative Etiology for UPADACITINIB (Open Label)

Event of PERSISTENT ULCERATIVE COLITIS ACTIVITY

- Investigator: DEHYDRATION, WEIGHT LOSS, 20X BM/D

- AbbVie: Event more likely due to progression of pre-existing ulcerative colitis.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] ALBUMIN:** 31.1 G/L (normal 34 to 48)

[redacted] **20[redacted] CHLORIDE:** 104 MMOL/L (normal 95 to 113)

[redacted] **20[redacted] CREATININE:** 90 umol/l (normal <115)

[redacted] **20[redacted] CREATININE:** 81 umol/l

[redacted] **20[redacted] CRP:** 31 mg/l (normal <8)

[redacted] **20[redacted] CRP:** 5 mg/l

Unknown date CRP: UNKNOWN

Unknown date ELECTROLYTES: UNKNOWN

[redacted] **20[redacted] GLUCOSE:** 5.5 MMOL/L (normal 3.9 to 5.6)

Unknown date HEMATOLOGY: unknown

Unknown date HEPATIC PARAMETERS: UNKNOWN

[redacted] **20[redacted] IRON:** 4.2 umol/l (normal 10 to 27)

[redacted] **20[redacted] PHYSICAL EXAM: CV:** normal finding Pulmonary: normal finding Abdomen: diffuse pain during palpation. Skin and others: normal finding

[redacted] **20[redacted] POTASSIUM:** 4.2 MMOL/L (normal 3.5 to 5.1)

[redacted] **20[redacted] POTASSIUM:** 4.1 MMOL/L

Unknown date RENAL PARAMETER: UNKNOWN

[redacted] **20[redacted] SODIUM:** 132 MMOL/L (normal 136 to 144)

[redacted] **20[redacted] SODIUM:** 141 MMOL/L

[redacted] **20[redacted] TSH:** 1.08 mlu/l (normal 0.25 to 4)

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
尿路性敗血症	X			X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 7.5 mg	7[redacted]	FEMALE	WHITE

Medical History	Onset Year
ANEMIA: IRON DEFICIENCY ANEMIA	20[redacted]
LEFT SIDED UC	20[redacted]
OSTEOPOROSIS	20[redacted]
OTHER: AORTIC VALVE STENOSIS	20[redacted]
OTHER: AUTOIMMUNE ASOCIATED, ORGANISING PNEUMONIA	20[redacted]
OTHER: BACK PAIN	20[redacted]
OTHER: MISSCARIAGE	19[redacted]
OTHER: MISSCARRIAGE	19[redacted]
OTHER: PNEUMONIC INFILTRATE UPPER RIGHT LOBE AND LEFT LOWER LOBE	20[redacted]
OTHER: PULMONARY EMBOLISM	20[redacted]
OTHER: REFLUX	20[redacted]
OTHER: SLEEPING DISORDERS	20[redacted]
OTHER: THROMBOPHLEBITIS LEFT LEG	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	NEVER	

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 ABT-494 (IND)	7.5 mg	ORAL	QD	[redacted] / 1	[redacted] / 57	57
M14-234 SS3 ABT-494 (MAIN)	7.5 mg	ORAL	QD	[redacted] / 58	[redacted] / 430	373
M14-533 ABT-494 (LTE)	7.5 mg	ORAL	QD	[redacted] / 431		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
MERCAPTOPURINE	50 mg	OTHER: UNKNOWN	Y-M: [redacted]
INFLIXIMAB	400 mg	OTHER: 4 WEEKLY	Y-M: [redacted]
MESALAZINE	1 g	PRN	Y-M: [redacted]
VEDOLIZUMAB	300 mg	OTHER: 8 WEEKLY	Y-M: [redacted]
BUDESONIDE	2 g	PRN	Y-M: [redacted]
GOLIMUMAB	100 mg	OTHER: 4 WEEKLY	Y-M: [redacted]
RIVAROXABAN	20 mg	QD	Y-M: [redacted]
AZATHIOPRINE	50 mg	QD	Y-M: [redacted]
INFLIXIMAB	400 mg	OTHER: 4 WEEKLY	Y-M: [redacted]
ADALIMUMAB	40 mg	OTHER: 2 WEEKLY	Y-M: [redacted]
FOLIC ACID	5 mg	QD	Y-M: [redacted]
PANTOPRAZOLE	40 mg	QD	Y-M: [redacted]
ZOPICLONE	7.5 mg	QD	Y-M: [redacted] / -344
DOXYCYCLINE	40 mg	QD	Y-M: [redacted] / -308
MACROGOL	1 OTHER: SACHET	PRN	Y-M: [redacted] / -316
PREDNISONE	5 mg	QD	Y-M: [redacted] / -232
CALCIUM	1000 mg	QD	Y: [redacted]
COLECALCIFEROL	70 OTHER: DROPS	OTHER: WEEKLY	Y: [redacted]
IBANDRONIC ACID	3 mg	OTHER: 3 MONTHLY	Y: [redacted]
AZATHIOPRINE	50 mg	OTHER: UNKNOWN	Y: [redacted]
METHOTREXATE	NOT REPORTED	OTHER: UNKNOWN	Y: [redacted]
PREDNISONE	30 mg	QD	Y: [redacted]

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
RIVAROXABAN	20 mg	QD	Y-M: 20[redacted]	ONGOING
FOLIC ACID	5 mg	QD	Y-M: 20[redacted]	ONGOING
ZOPICLONE	7.5 mg	QD	Y-M: 20[redacted] / -344	ONGOING
DOXYCYCLINE	40 mg	QD	Y-M: 20[redacted] / -308	ONGOING
MACROGOL	1 OTHER: SACHET	PRN	Y-M: 20[redacted] / -316	ONGOING
PREDNISONE	5 mg	QD	Y-M: 20[redacted] / -232	ONGOING
BISACODYL	5 mg	QD	Y-M: 20[redacted] / 223	ONGOING
CEFTRIAXONE	UNK mg	OTHER: UNK	Y-M: 20[redacted] / 937	Y-M: 20[redacted] / 937
CIPROFLOXACIN	500 mg	BID	Y-M: 20[redacted] / 937	Y-M: 20[redacted] / 943
CALCIUM	1000 mg	QD	Y: 20[redacted]	ONGOING
COLECALCIFEROL	70 OTHER: DROPS	OTHER: WEEKLY	Y: 20[redacted]	ONGOING
IBANDRONIC ACID	3 mg	OTHER: 3 MONTHLY	Y: 20[redacted]	ONGOING

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

Event Description	UROSEPSIS
Preferred term	尿路性敗血症
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 1367 / 937
Age at AE Onset	7[redacted]

Laboratory Testing

[redacted]20[redacted] (RX DAY 937): Alanine Aminotransferase: 61 [0 - 35] U/L; Aspartate Aminotransferase: 102 [5 - 31] U/L; Hemoglobin: 106 [120 - 147] G/L; NPTST064-C REACTIVE PROTEIN: 56.5 [0 - 5.1] MG/L; NPTST132-ERYTHROCYTE: 10-20 [0 - 5] 099,/GF; NPTST204-LEUCOCYTES: 12.0 [3.9 - 9.5] 10^9/L; pH: 8.0 [5 - 7] UNIT NOT REPORTED; [redacted]20[redacted] (RX DAY 939): Alanine Aminotransferase: 59 [0 - 35] U/L; Aspartate Aminotransferase: 53 [5 - 31] U/L; Hemoglobin: 109 [120 - 147] G/L; NPTST064-C REACTIVE PROTEIN: 67.2 [0 - 5.1] MG/L; NPTST206-LEUKOCYTES: 6.8 [3.9 - 9.5] 10^9/L; [redacted]20[redacted] (RX DAY 941): Alanine Aminotransferase: 38 [0 - 35] U/L; Aspartate Aminotransferase: 32 [5 - 31] U/L; Hemoglobin: 111 [120 - 147] G/L; NPTST064-C REACTIVE PROTEIN: 24.7 [0 - 5.1] MG/L; NPTST204-LEUCOCYTES: 5.4 [3.9 - 9.5] 10^9/L

Microbiology

[redacted]20[redacted] (RX DAY 937): BLOOD NPTST052-BLOOD CULTURE: Positive-ESCHERICHIA COLI; URINE NPTST338-URINE CULTURE: Positive-ESCHERICHIA COLI

AE Stopped Initial Rx Day / Rx Day	1373 / 943
Duration of AE	7 DAYS
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	E. COLI INFECTION

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

Generated: [redacted]20[redacted]:16:51

Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はスイスの 7[redacted] 歳女性であり，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，尿路性敗血症の事象を発現した。関連する病歴は，潰瘍性大腸炎であった。

Event 1 の臨床経過：

投与1367日後＊　，被験者は尿路性敗血症を発現した。投与1373日後＊　，尿路性敗血症は消失した。

投与1367日後＊　，被験者は発熱及び排尿困難があり，救急治療室を受診した。検査では，その他の異常は認められなかった。被験者は尿路性敗血症と診断されて同日入院し，抗生物質での治療を受けた。投与1371日後＊，被験者は退院した。

投与された薬剤は，シプロフロキサシン及びセフトリアキソンであった。

The patient's past medications include:

AZATHIOPRIN for ULCERATIVE COLITIS (20[redacted] - 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

METHOTREXAT for ULCERATIVE COLITIS (20[redacted] - 20[redacted])

PURINETHOL for ULCERATIVE COLITIS ([redacted] 20[redacted] - 20[redacted])

REMICADE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

PREDNISON for ULCERATIVE COLITIS (20[redacted] - [redacted] 20[redacted])

SALOFALK for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

ENTYVIO for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

BUDENOFALK for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

SIMPONI for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

HUMIRA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

OMIRNATY/PFIZER BIONTECH for COVID-19 PROPHYLAXIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Blinded)

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1) Urosepsis (10048709) (Urosepsis (10048709)) [v.24.1] [10048709]

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

Causality as per Mfr. (Drug/Vaccine): Reasonable possibility

Dechallenge: Not Applicable

Alternative Etiology for UPADACITINIB (Blinded)

Event of UROSEPSIS

- Investigator: E.Coli Infection

- AbbVie: Not applicable

Relevant Laboratory & Other Diagnostic Tests

[redacted] 20[redacted] **BLOOD CULTURE:** Positive: Escherichia coli

[redacted] 20[redacted] **C REACTIVE PROTEIN:** 56.5 MG/L (normal 0 to 5.1)

[redacted] 20[redacted] **C REACTIVE PROTEIN:** 67.2 MG/L (normal 0 to 5.1)

[redacted] 20[redacted] **C REACTIVE PROTEIN:** 24.7 MG/L (normal 0 to 5.1)

[redacted] 20[redacted] **CHEST XRAY:** No findings

[redacted] **20[redacted] HEMOGLOBIN:** 106 G/L (normal 120 to 147)

[redacted] **20[redacted] HEMOGLOBIN:** 109 G/L (normal 120 to 147)

[redacted] **20[redacted] HEMOGLOBIN:** 111 G/L (normal 120 to 147)

[redacted] **20[redacted] LEUCOCYTES:** 12.0 X10**9/L (normal 3.9 to 9.5)

[redacted] **20[redacted] LEUCOCYTES:** 6.8 X10**9/L (normal 3.9 to 9.5)

[redacted] **20[redacted] LEUCOCYTES:** 5.4 X10**9/L (normal 3.9 to 9.5)

[redacted] **20[redacted] URINE CULTURE:** Positive: Escherichia coli

[redacted] **20[redacted] URINE ERYTHROCYTES:** 10-20/GF

[redacted] **20[redacted] URINE PH:** 8.0 no units (normal 5 to 7)

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
潰瘍性大腸炎	X			
帯状疱疹				X
鼠径ヘルニア	X			

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	3[redacted]	MALE	ASIAN

Medical History	Onset Year
ANEMIA, UNSPECIFIED	20[redacted]
AXIAL ARTHROPATHY (INCLUDING SACROILIITIS OR ANKYLOSING SPONDYLITIS)	20[redacted]
BENIGN NEOPLASM OF SKIN, SITE UNSPECIFIED	20[redacted]
CONTACT DERMATITIS	20[redacted]
DISEASE OF STOMACH AND DUODENUM, UNSPECIFIED	20[redacted]
DISORDERS OF FUNCTION OF STOMACH	20[redacted]
ECZEMA	20[redacted]
HEADACHE	20[redacted]
INSOMNIA, UNSPECIFIED	20[redacted]
LEFT SIDED UC	20[redacted]
LEFT-SIDED ULCERATIVE (CHRONIC) COLITIS	20[redacted]
MIXED SIMPLE AND MUCOPURULENT CHRONIC BRONCHITIS	20[redacted]
NONINFECTIVE GASTROENTERITIS AND COLITIS, UNSPECIFIED	20[redacted]
OTHER ACNE	20[redacted]
OTHER CHRONIC BRONCHITIS	20[redacted]
OTHER SPECIFIED DYSPEPSIA	20[redacted]
OTHER URTICARIA	20[redacted]
PAIN IN UNSPECIFIED JOINT	20[redacted]
REFLUX ESOPHAGITIS	20[redacted]
SEBORRHEIC DERMATITIS	20[redacted]
UNSPECIFIED CONTACT DERMATITIS, UNSPECIFIED CAUSE	20[redacted]
UNSPECIFIED CONTACT DERMATITIS, UNSPECIFIED CAUSE	20[redacted]
UNSPECIFIED FUNCTIONAL DISORDER OF INTESTINE	20[redacted]

UNSPECIFIED LOCAL INFECTION OF SKIN AND SUBCUTANEOUS TISSUE	20[redacted]
URTICARIA, UNSPECIFIED	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	NEVER	

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS2 ABT-494 (IND)	45 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 57	57
M14-234 SS3 Placebo (MAIN)		ORAL	QD	[redacted]20[redacted] / 58	[redacted]20[redacted] / 315	258
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted]20[redacted] / 316		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
MESALAZINE	1000 mg	BID	Y-M: 20[redacted]
MESALAZINE	2000 mg	BID	Y-M: 20[redacted]
PREDNISOLONE	5 mg	BID	Y-M: 20[redacted]
MESALAZINE	500 mg	BID	Y-M: 20[redacted]
MESALAZINE	1000 mg	BID	Y-M: 20[redacted]
MESALAZINE	2000 mg	BID	Y-M: 20[redacted]
MESALAZINE	1000 mg	BID	Y-M: 20[redacted]
PREDNISOLONE	10 mg	BID	Y-M: 20[redacted]
MESALAZINE	2000 mg	BID	Y-M: 20[redacted]
PREDNISOLONE	5 mg	BID	Y-M: 20[redacted]
PREDNISOLONE	10 mg	BID	Y-M: 20[redacted]

PREDNISOLONE	5 mg	BID	Y-M: 20[redacted]
PREDNISOLONE	5 mg	BID	Y-M: 20[redacted]
PREDNISOLONE	10 mg	BID	Y-M: 20[redacted]
AZATHIOPRINE	50 mg	BID	Y-M: 20[redacted]
MESALAZINE	1000 mg	BID	Y-M: 20[redacted]
PREDNISOLONE	5 mg	BID	Y-M: 20[redacted]
PREDNISOLONE	5 mg	BID	Y-M: 20[redacted]
AZATHIOPRINE	50 mg	BID	Y-M: 20[redacted]
AZATHIOPRINE	50 mg	BID	Y-M: 20[redacted]
PREDNISOLONE	10 mg	BID	Y-M: 20[redacted]
AZATHIOPRINE	50 mg	QD	Y-M: 20[redacted]
PREDNISOLONE	5 mg	BID	Y-M: 20[redacted]
MESALAZINE	500 mg	BID	Y-M: 20[redacted]
MESALAZINE	1000 mg	BID	Y-M: 20[redacted]
PREDNISOLONE	5 mg	BID	Y-M: 20[redacted]
PREDNISOLONE	5 mg	OTHER: Q3D	Y-M: 20[redacted]
AZATHIOPRINE	50 mg	QD	Y-M: 20[redacted]
MESALAZINE	2 g	OTHER: QOD	Y-M: 20[redacted]
PREDNISOLONE	5 mg	BID	Y-M: 20[redacted]
AZATHIOPRINE	25 mg	QD	Y-M: 20[redacted]
PREDNISOLONE	5 mg	BID	Y-M: 20[redacted]
ADALIMUMAB	40 mg	OTHER: Q2W	Y-M: 20[redacted]
MESALAZINE	500 mg	BID	Y-M: 20[redacted]
MESALAZINE	1000 mg	BID	Y-M: 20[redacted]
DIMETICONE	40 mg	BID	Y-M: 20[redacted] / -120
SERTACONAZOLE	2 %	OTHER: BIW	Y-M: 20[redacted] / -14

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
MESALAZINE	1000 mg	BID	Y-M: 20[redacted]	Not reported
DIMETICONE	40 mg	BID	Y-M: 20[redacted] / -120	Y-M: 20[redacted] / 368
BENZONATATE	100 mg	TID	Y-M: 20[redacted] / -8	Y-M: 20[redacted] / 366
ISOTRETINOIN	10 mg	OTHER: QN	Y-M: 20[redacted] / 289	Y-M: 20[redacted] / 317
DOXYCYCLINE	100 mg	BID	Y-M: 20[redacted] / 312	Y-M: 20[redacted] / 340
TRIAMCINOLONE	10 mg	OTHER: STAT	Y-M: 20[redacted] / 312	Y-M: 20[redacted] / 312
TRANEXAMIC ACID	5 mL	OTHER: Q8H	Y-M: 20[redacted] / 321	Y-M: 20[redacted] / 324

TRANEXAMIC ACID	5 mL	OTHER: STAT	Y-M: 20[redacted] / 321	Y-M: 20[redacted] / 321
HYDROCORTISONE	100 mg	OTHER: Q8H	Y-M: 20[redacted] / 322	Y-M: 20[redacted] / 324
HYDROCORTISONE	100 mg	OTHER: STAT	Y-M: 20[redacted] / 322	Y-M: 20[redacted] / 322
HYDROCORTISONE	100 mg	OTHER: Q12H	Y-M: 20[redacted] / 324	Y-M: 20[redacted] / 325
PREDNISOLONE	10 mg	QD	Y-M: 20[redacted] / 325	Y-M: 20[redacted] / 331
CITRIC ACID;MAGNESIUM OXIDE;SODIUM PICOSULFATE	16.2 g	OTHER: STAT	Y-M: 20[redacted] / 330	Y-M: 20[redacted] / 331
FENTANYL	0.1 mg	OTHER: STAT	Y-M: 20[redacted] / 331	Y-M: 20[redacted] / 331
MIDAZOLAM	5 mg	OTHER: STAT	Y-M: 20[redacted] / 331	Y-M: 20[redacted] / 331
PREDNISOLONE	7.5 mg	QD	Y-M: 20[redacted] / 332	Y-M: 20[redacted] / 338
PREDNISOLONE	5 mg	QD	Y-M: 20[redacted] / 339	Y-M: 20[redacted] / 345
PREDNISOLONE	2.5 mg	QD	Y-M: 20[redacted] / 346	Y-M: 20[redacted] / 352
BENZOYL PEROXIDE	10 g	OTHER: HS	Y-M: 20[redacted] / 366	Not reported
DOXYCYCLINE	100 mg	BID	Y-M: 20[redacted] / 366	Y-M: 20[redacted] / 394
TRIAMCINOLONE	10 mg	OTHER: STAT	Y-M: 20[redacted] / 366	Y-M: 20[redacted] / 366
PARACETAMOL;TRAMADOL	1 DF	TID	Y-M: 20[redacted] / 410	Y-M: 20[redacted] / 417
VALACICLOVIR	1000 mg	TID	Y-M: 20[redacted] / 410	Y-M: 20[redacted] / 417
BENZOCAINE;CHLORPHENAMINE	5 g	BID	Y-M: 20[redacted] / 417	Not reported
DOXYCYCLINE	100 mg	BID	Y-M: 20[redacted] / 417	Y-M: 20[redacted] / 473
TRIAMCINOLONE	10 mg	OTHER: STAT	Y-M: 20[redacted] / 417	Y-M: 20[redacted] / 417
BETAMETHASONE	10 g	BID	Y-M: 20[redacted] / 442	Not reported
BETAMETHASONE	5 g	BID	Y-M: 20[redacted] / 442	Not reported
FUSIDIC ACID	5 g	BID	Y-M: 20[redacted] / 498	Not reported
TRIAMCINOLONE	10 mg	OTHER: STAT	Y-M: 20[redacted] / 498	Y-M: 20[redacted] / 498
BUPIVACAINE	4 mL	OTHER: STAT	Y-M: 20[redacted] / 634	Y-M: 20[redacted] / 634
CEFAZOLIN	1000 mg	PRN	Y-M: 20[redacted] / 634	Y-M: 20[redacted] / 634
NALBUPHINE	5 mg	OTHER: STAT	Y-M: 20[redacted] / 634	Y-M: 20[redacted] / 634
PARACETAMOL	500 mg	QID	Y-M: 20[redacted] / 634	Y-M: 20[redacted] / 641
SENNOSIDE A+B	40 mg	OTHER: HS	Y-M: 20[redacted] / 634	Y-M: 20[redacted] / 641

Event #1: Serious Adverse Event

Event Description	WORSENING OF LEFT SIDED ULCERATIVE COLITIS WITHOUT COMPLICATION
Preferred term	潰瘍性大腸炎
AE Onset Date / Initial Rx Day / Rx	[redacted]20[redacted] / 635 / 320

Day	
Age at AE Onset	3[redacted]
Laboratory Testing	
[redacted]20[redacted] (RX DAY 320): Erythrocytes: 4.48 [4.5 - 5.7] 10^12/L; Hemoglobin: 98 [137 - 170] G/L; Leukocytes: 7.7 [3.6 - 11.2] 10^9/L; Lymphocytes/Leukocytes: 11.8 [16 - 43.5] %; [redacted]20[redacted] (RX DAY 321): Hemoglobin: 88 [137 - 170] G/L	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	NOT REPORTED
Duration of AE	NOT REPORTED
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	WORSENING OF DISEASE
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Event #2: Event of Interest - Herpes Zoster

Event Description	HERPES ZOSTER
Preferred term	帯状疱疹
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 724 / 409
Age at AE Onset	3[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	757 / 442
Duration of AE	34 DAYS
Severity	MODERATE
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

Event #3: Serious Adverse Event

Event Description	UNILATERAL INGUINAL HERNIA, WITHOUT OBSTRUCTION OR GANGRENE, NOT SPECIFIED AS RECURRENT

Preferred term	鼠径ヘルニア
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 928 / 613
Age at AE Onset	3[redacted]
Laboratory Testing	
[redacted]20[redacted] (RX DAY 626): Erythrocytes: 4.49 [4.5 - 5.7] 10^12/L; Hemoglobin: 140 [137 - 170] G/L; Leukocytes: 4.9 [3.6 - 11.2] 10^9/L; Lymphocytes/Leukocytes: 19.9 [16 - 43.5] %	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	NOT REPORTED
Duration of AE	NOT REPORTED
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	RIGHT INGUINAL HERNIA
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は台湾の 3[redacted] 歳男性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，合併症を伴わない潰瘍性大腸炎（左側）の悪化の事象を発現した。関連する病歴は，潰瘍性大腸炎（左側），貧血（詳細不明），慢性気管支炎，胃及び十二指腸の疾患（詳細不明），非感染性胃腸炎及び大腸炎（詳細不明），非喫煙者及び非飲酒者であった。

Event 1 の臨床経過：

投与635日後＊，被験者は合併症を伴わない潰瘍性大腸炎（左側）の悪化を発現した。

本事象発現前（日付不明），被験者はフォローアップで消化管外来を受診し，1 ヵ月間血便があったことを報告した。腹部痛，嘔吐，下痢，吐血及び発熱はなかった。神経学的欠損は認められなかった。投与635日後＊　，被験者は入院した。潰瘍性大腸炎の再発のため高用量のステロイドを投与され，下痢による低カリウム血症のため塩化カリウムを投与された。消化管下部

の出血に対して，輸血，トラネキサム酸投与及び急速輸液が行われた。入院中，バイタルサインは安定し，排便の頻度は減少した。投与640日後＊，被験者は退院した。

投与された薬剤は，ヒドロコルチゾン，トラネキサム酸及びプレドニゾロンであった。

The patient's past medications include:

MESALAZINE for ULCERATIVE COLITIS ([redacted])

PREDNISOLONE for ULCERATIVE COLITIS ([redacted])

AZATHIOPRINE for ULCERATIVE COLITIS ([redacted])

MESALAZINE ENEMA for ULCERATIVE COLITIS ([redacted])

ADALIMUMAB for ULCERATIVE COLITIS ([redacted])

Causality for UPADACITINIB (Open Label)

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1) Colitis ulcerative aggravated (10009901) (Colitis ulcerative (10009900)) [v.23.1] [10009901]

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 (Open Label)

Event of WORSENING OF LEFT SIDED ULCERATIVE COLITIS WITHOUT COMPLICATION

- Investigator: WORSENING OF DISEASE

- AbbVie: Event is more likely due to pre-existing ulcerative colitis.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] BODY WEIGHT:** 6[redacted] KG

[redacted] **20[redacted] CHEST X RAY:** Normal

[redacted] **20[redacted] CHEST XRAY:** NO ACTIVE LUNG LESION. NO PROMINENT PLEURAL EFFUSION.

[redacted] **20[redacted] COLONOSCOPY:** Not reported

[redacted] **20[redacted] HEMOGLOBIN:** 9.8 G/DL (normal 13.7 to 17)

[redacted] **20[redacted] HEMOGLOBIN:** 8.8 G/DL (normal 13.7 to 17)

[redacted] **20[redacted] KUB:** CALCIFIED DENSITY NOTED IN RIGHT PELVIS; MAYBE PHLEBOLITH OR LOWER URETERAL STONE. NARROWING OF SACROILIAC JOINT.

[redacted] **20[redacted] LYMPHOCYTES %:** 11.8 % (normal 16 to 43.5)

[redacted] **20[redacted] RED BLOOD CELLS:** 4.48 10^6/uL (normal 4.5 to 5.7)

[redacted] **20[redacted] WHITE BLOOD CELLS:** 7.7 10^3/uL (normal 3.6 to 11.2)
Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は台湾の 3[redacted] 歳男性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，閉塞又は壊疽を伴わず再発と特定されない片側の鼠径ヘルニアの事象を発現した。関連する病歴は，胃の機能障害，潰瘍性大腸炎，腸の機能障害（詳細不明），胃及び十二指腸の疾患（詳細不明），非感染性胃腸炎及び大腸炎（詳細不明），非喫煙者並びに非飲酒者であった。

この被験者は，先行の M14-234 試験では，被験者番号 [redacted] であり，20[redacted] 年[redacted] 月[redacted] 日から 20[redacted] 年[redacted] 月[redacted] 日まで盲検化された治験薬を投与された。

Event 3 の臨床経過：

投与928日後＊　　，被験者は閉塞又は壊疽を伴わず再発と特定されない片側の鼠径ヘルニアを発現した。

被験者は入院の 3ー4 週間前に右腹部痛を経験した。被験者はその後，右下腹部痛が悪化した。また，右鼠径部に突出した腫瘤があり，特に力を入れたり，咳をしたり，立ったりすると腫瘤が大きくなることがあった。腫瘤は横になると縮小した。被験者は潰瘍性大腸炎の既往があったため，消化器内科外来を受診した。投与949日後＊　　，被験者は右鼠径ヘルニアの治療のため入院した。投与950日後＊，被験者は退院した。

投与された薬剤は，セファゾリン，アセトアミノフェン，sennosides，nalbuphine 及び bupivacaine spinal であった。

The patient's past medications include:

PREDNISOLONE for ULCERATIVE COLITIS and WORSENING OF LEFT SIDED ULCERATIVE COLITIS WITHOUT COMPLICATION ([redacted])

AZATHIOPRINE for ULCERATIVE COLITIS ([redacted])

HUMIRA for ULCERATIVE COLITIS ([redacted])

Causality for UPADACITINIB (Open Label)

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1)　Inguinal hernia (10022016)　(Inguinal hernia (10022016))　[v.24.1]　[10022016]

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 (Open Label)

Event of UNILATERAL INGUINAL HERNIA, WITHOUT OBSTRUCTION OR GANGRENE, NOT SPECIFIED AS RECURRENT

- Investigator: Right inguinal hernia

- AbbVie: Inguinal hernias are common in the general population with a lifetime risk of 27.5 percent in men.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] CHEST X-RAY:** Normal heart size and configuration No prominent pleural effusion Normal appearance of bony thorax

[redacted] **20[redacted] EKG:** Normal sinus rhythm Normal ecg

NON SERIOUS EVENTS And **OTHER AREAS OF SAFETY INTEREST

Herpes zoster: One dermatome. 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
痔瘻	X			

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 30 mg	5[redacted]	MALE	ASIAN

Medical History	Onset Year
DISEASE OF DIGESTIVE SYSTEM, UNSPECIFIED	20[redacted]
EXTENSIVE UC/PANCOLITIS	20[redacted]
FUNCTIONAL DYSPEPSIA	20[redacted]
GASTRO-ESOPHAGEAL REFLUX DISEASE WITH ESOPHAGITIS	20[redacted]
INFLAMMATORY LIVER DISEASE, UNSPECIFIED	20[redacted]
MIXED HEMORRHOID	20[redacted]
MYOPIA, UNSPECIFIED EYE	20[redacted]
OTHER HYPERLIPIDEMIA	20[redacted]
ULCERATIVE (CHRONIC) PANCOLITIS WITHOUT COMPLICATIONS	20[redacted]
UNSPECIFIED CONJUNCTIVITIS	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	FORMER	5 PACK	20	20[redacted]
CIGARS	NEVER			
PIPES	NEVER			

Alcohol Use	Status	Number/Day
ALCOHOL	NEVER	

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-675 ABT-494 (IND)	45 mg	ORAL	QD	[redacted] / 1	[redacted] / 57	57
M14-234 SS3 ABT-494 (MAIN)	30 mg	ORAL	QD	[redacted] / 58	[redacted] / 420	363
M14-533 ABT-494 (LTE)	30 mg	ORAL	QD	[redacted] / 421		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
MESALAZINE	1000 mg	TID	Y-M: [redacted]
PREDNISOLONE	5 mg	OTHER: QW	Y-M: [redacted]
MESALAZINE	1000 mg	TID	Y-M: [redacted]
ADALIMUMAB	40 mg	OTHER: Q2W	Y-M: [redacted]
AZATHIOPRINE	50 mg	QD	Y-M: [redacted]
MESALAZINE	1000 mg	BID	Y-M: [redacted]
MERCAPTOPURINE	50 mg	QD	Y-M: [redacted]
MESALAZINE	1000 mg	BID	Y-M: [redacted]
AMOXICILLIN;CLAVULANIC ACID	1 g	BID	Y-M: [redacted]
MESALAZINE	1000 mg	TID	Y-M: [redacted]
DICLOXACILLIN	500 mg	TID	Y-M: [redacted]

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
MESALAZINE	1000 mg	TID	Y-M: [redacted]	Not reported
BETAMETHASONE;LIDOCAINE;PHENYLEPHRINE	10 g	OTHER: HS	Y-M: [redacted] / 169	Not reported
METRONIDAZOLE	500 mg	TID	Y-M: [redacted] / 424	Y-M: [redacted] / 430
BACITRACIN;NEOMYCIN;POLYMYXIN B	10 g	OTHER: STAT	Y-M: [redacted] / 432	Not reported
BUPIVACAINE	20 mg	OTHER: STAT	Y-M: [redacted] / 432	Y-M: [redacted] / 432
EPINEPHRINE	20 mg	OTHER: STAT	Y-M: [redacted] / 432	Y-M: [redacted] / 432
LIDOCAINE	20 mL	OTHER: STAT	Y-M: [redacted] / 432	Y-M: [redacted] / 432
MAGNESIUM OXIDE	250 mg	QID	Y-M: [redacted] / 432	Not reported

PARACETAMOL;TRAMADOL	1 DF	QID	Y-M: 20[redacted] / 432	Not reported
SENNOSIDE A+B	20 mg	OTHER: HS	Y-M: 20[redacted] / 432	Not reported

Event #1: Serious Adverse Event

Event Description	LEFT ANTERIOR PERIANAL FISTULA.
Preferred term	痔瘻
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 844 / 424
Age at AE Onset	5[redacted]
Laboratory Testing	
[redacted]20[redacted] (RX DAY 430): Hemoglobin: 137 [137 - 170] G/L; Leukocytes: 3.6 [3.6 - 11.2] 10^9/L; Platelets: 243 [130 - 400] 10^9/L	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	NOT REPORTED
Duration of AE	NOT REPORTED
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	ANAL PAIN AND SWELLING SOMETIMES
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は台湾の 5[redacted] 歳男性であり，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，左前方肛門周囲瘻の事象を発現した。関連する病歴は，元喫煙者（1 日 5 箱を 20 年間），混合痔，合併症を伴わない潰瘍性（慢性）汎大腸炎，及び潰瘍性大腸炎であった。

Event 1 の臨床経過：

投与844日後＊，被験者は左前方肛門周囲瘻を発現した。

事象発現に先立ち，被験者は肛門痛及び腫脹を経験した（日付不明）。

投与852日後＊　，被験者は肛門痛及び腫脹のために結腸 - 大腸外科を外来受診した。同日，被験者は入院した。被験者は以下の症状はないと述べた：発熱，悪心/嘔吐，腹痛，排便習慣の変化，及び体重減少。被験者は肛門周囲瘻と診断された。同日，被験者は肛門瘻孔切開及び痔核切除を受けた。投与853日後＊，被験者は退院した。

投与された薬剤は，メトロニダゾール，spersin ointment，酸化マグネシウム，リドカイン，アドレナリン，センノシド，ブピバカイン及び ultracet であった。

The patient's past medications include:

PREDNISOLONE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

ADALIMUMAB for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

AZATHIOPRINE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

MERCAPTOPURINE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

AUGMENTIN for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Blinded)

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1)　Perianal fistula (10068659)　(Anal fistula (10002156))　[v.24.1]　[10068659]

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 ANTERIOR PERIANAL FISTULA

- Investigator: Anal pain and swelling sometimes

- AbbVie: Event more likely related to pre-existing ulcerative colitis.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] HEMOGLOBIN:** 13.7 G/DL (normal 13.7 to 17)

[redacted] **20[redacted] PLATELET COUNT:** 243 X10**3/MCL (normal 130 to 400)

[redacted] **20[redacted] WHITE BLOOD CELLS:** 3.6 X10**3/MCL (normal 3.6 to 11.2)

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
良性前立腺肥大症	X			
膀胱結石	X			
帯状疱疹	X			X
単径ヘルニア	X			

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 30 mg	6[redacted]	MALE	ASIAN

Medical History	Onset Year
EXTENSIVE UC/PANCOLITIS	20[redacted]
PULMONARY FIBROSIS	20[redacted]
SEBORRHEIC KERATOSIS	20[redacted]
UROLITHIASIS	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	FORMER	0.01 PACK	32	20[redacted]
CIGARS	NEVER			
PIPES	NEVER			

Alcohol Use	Status	Number/Day
ALCOHOL	NEVER	

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-675 ABT-494 (IND)	45 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 56	56
M14-234 SS3 ABT-494 (MAIN)	30 mg	ORAL	QD	[redacted]20[redacted] / 57	[redacted]20[redacted] / 420	364
M14-533 ABT-494 (LTE)	30 mg	ORAL	QD	[redacted]20[redacted] / 421		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
AZATHIOPRINE	50 mg	QD	Y-M: 20[redacted]
MESALAZINE	800 mg	QID	Y-M: 20[redacted]
MESALAZINE	NOT REPORTED	NOT REPORTED	Y-M: 20[redacted]
GOLIMUMAB	50 mg	OTHER: ONCE PER MONTH	Y-M: 20[redacted]
PREDNISOLONE	5 mg	BID	Y-M: 20[redacted]
GOLIMUMAB	50 mg	OTHER: ONCE PER MONTH	Y-M: 20[redacted]
MESALAZINE	1600 mg	TID	Y-M: 20[redacted] / -364

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
MESALAZINE	1600 mg	TID	Y-M: 20[redacted] / -364	Not reported
ALPRAZOLAM	0.25 mg	PRN	Y-M: 20[redacted] / 218	Y-M: 20[redacted] / 223
CARVACROL	20 mL	OTHER: ONCE	Y-M: 20[redacted] / 218	Y-M: 20[redacted] / 218
CEFMETAZOLE	2 g	OTHER: ONCE	Y-M: 20[redacted] / 218	Y-M: 20[redacted] / 218
CEFMETAZOLE	1 g	TID	Y-M: 20[redacted] / 219	Y-M: 20[redacted] / 222
MAGNESIUM OXIDE	250 mg	QID	Y-M: 20[redacted] / 219	Y-M: 20[redacted] / 223
PARACETAMOL	500 mg	QID	Y-M: 20[redacted] / 219	Y-M: 20[redacted] / 222
TRANEXAMIC ACID	250 mg	TID	Y-M: 20[redacted] / 219	Y-M: 20[redacted] / 222
ACETYLCYSTEINE	600 mg	BID	Y-M: 20[redacted] / 220	Y-M: 20[redacted] / 229
CEFADROXIL	500 mg	BID	Y-M: 20[redacted] / 222	Y-M: 20[redacted] / 229
SILODOSIN	8 mg	QD	Y-M: 20[redacted] / 222	Y-M: 20[redacted] / 223
TRANEXAMIC ACID	250 mg	TID	Y-M: 20[redacted] / 222	Y-M: 20[redacted] / 223

PARACETAMOL	500 mg	BID	Y-M: 20[redacted] / 223	Y-M: 20[redacted] / 229
TRANEXAMIC ACID	250 mg	BID	Y-M: 20[redacted] / 223	Y-M: 20[redacted] / 229
CEFADROXIL	500 mg	TID	Y-M: 20[redacted] / 319	Y-M: 20[redacted] / 325
PHENAZOPYRIDINE	100 mg	TID	Y-M: 20[redacted] / 319	Y-M: 20[redacted] / 321
SILODOSIN	8 mg	QD	Y-M: 20[redacted] / 319	Y-M: 20[redacted] / 325
TRANEXAMIC ACID	250 mg	TID	Y-M: 20[redacted] / 319	Y-M: 20[redacted] / 323
DEXTRAN;HYPROMELLOSE	1 gtt	QID	Y-M: 20[redacted] / 341	Y-M: 20[redacted] / 354
FLUOROMETHOLONE	1 gtt	QID	Y-M: 20[redacted] / 341	Y-M: 20[redacted] / 354
PARAFFIN, LIQUID;WHITE SOFT PARAFFIN;WOOL FAT	1 OTHER: APPLICABLE	QD	Y-M: 20[redacted] / 341	Y-M: 20[redacted] / 354
ACICLOVIR	500 mg	TID	Y-M: 20[redacted] / 343	Y-M: 20[redacted] / 353
GABAPENTIN	100 mg	TID	Y-M: 20[redacted] / 343	Y-M: 20[redacted] / 351
PARACETAMOL	500 mg	PRN	Y-M: 20[redacted] / 343	Y-M: 20[redacted] / 353
DICLOFENAC	75 mg	QD	Y-M: 20[redacted] / 344	Y-M: 20[redacted] / 351
BETAMETHASONE	1 OTHER: APPLICABLE	BID	Y-M: 20[redacted] / 347	Y-M: 20[redacted] / 352
CHLORAMPHENICOL	1 gtt	QID	Y-M: 20[redacted] / 351	Y-M: 20[redacted] / 353
FLUOCINONIDE	1 OTHER: APPLICABLE	BID	Y-M: 20[redacted] / 351	Y-M: 20[redacted] / 353
GABAPENTIN	100 mg	PRN	Y-M: 20[redacted] / 351	Y-M: 20[redacted] / 357
LEVOCETIRIZINE	5 mg	QD	Y-M: 20[redacted] / 351	Y-M: 20[redacted] / 353
METHYLPREDNISOLONE	8 mg	QD	Y-M: 20[redacted] / 351	Y-M: 20[redacted] / 353
ACICLOVIR	1 OTHER: APPLICABLE	OTHER: PID	Y-M: 20[redacted] / 352	Y-M: 20[redacted] / 353
BRIMONIDINE;TIMOLOL	1 gtt	BID	Y-M: 20[redacted] / 352	Y-M: 20[redacted] / 353
ATROPINE	1 gtt	TID	Y-M: 20[redacted] / 354	Y-M: 20[redacted] / 361
FLUOCINONIDE	1 OTHER: APPLICABLE	BID	Y-M: 20[redacted] / 354	Not reported
PREDNISOLONE	1 gtt	QID	Y-M: 20[redacted] / 354	ONGOING
SERTACONAZOLE	1 OTHER: APPLICABLE	OTHER: BIW	Y-M: 20[redacted] / 354	ONGOING
GABAPENTIN	100 mg	TID	Y-M: 20[redacted] / 359	Y-M: 20[redacted] / 366

Event #1: Serious Adverse Event

Event Description	WORSENING OF THE PROSTATIC HYPERTROPHY
Preferred term	良性前立腺肥大症
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 638 / 218
Age at AE Onset	6[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	643 / 223
Duration of AE	6 DAYS
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	RELATED TO AE#2
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Event #2: Serious Adverse Event

Event Description	RIGHT INGUINAL HERNIA
Preferred term	鼡径ヘルニア
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 638 / 218
Age at AE Onset	6[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	643 / 223
Duration of AE	6 DAYS
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	NO EVIDENCE OF THE CAUSE OF HERNIA.
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Event #3: Serious Adverse Event

Event Description	BLADDER STONES
Preferred term	膀胱結石
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 736 / 316
Age at AE Onset	6[redacted]

Laboratory Testing

[redacted]20[redacted] (RX DAY 316): Erythrocytes: 8-10 [NOT REPORTED - NOT REPORTED] 099,/HPF; Leukocytes: +/- [NOT REPORTED - NOT REPORTED] 099,UNKNOWN; Occult Blood: 1+ [NOT REPORTED - NOT REPORTED] 099,NEGATIVE

Microbiology

NOT REPORTED

AE Stopped Initial Rx Day / Rx Day	739 / 319
Duration of AE	4 DAYS
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	MEDICAL HISTORY OF UROLITHIASIS.
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Event #4: Serious Adverse Event, Event of Interest - Serious Infections, Event of Interest - Herpes Zoster

Event Description	HERPES ZOSTER
Preferred term	帯状疱疹
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 758 / 338
Age at AE Onset	6[redacted]

Laboratory Testing

[redacted]20[redacted] (RX DAY 342): NPTST069-C-REACTIVE PROTEIN: 0.18 [0.5 - NOT REPORTED] mg/dL; [redacted]20[redacted] (RX DAY 343): NPTST069-C-REACTIVE PROTEIN: 0.23 [0.5 - NOT REPORTED] mg/dL; [redacted]20[redacted] (RX DAY 349): NPTST069-C-REACTIVE PROTEIN: 1.11 [0.5 - NOT REPORTED] mg/dL

Microbiology

NOT REPORTED

AE Stopped Initial Rx Day / Rx Day	NOT REPORTED
Duration of AE	NOT REPORTED
Severity	MODERATE
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

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は台湾の 6[redacted] 歳男性であり，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，右鼡径ヘルニア及び前立腺肥大の悪化の事象を発現した。関連する病歴は，元喫煙者（1 日 0.01 箱を 32 年間），潰瘍性大腸炎，脂漏性角化症，尿路結石症及び非飲酒者であった。

Event 1 及び 2 の臨床経過：

この被験者は，先行の M14-234 試験では，被験者番号 [redacted] であり，20[redacted] 年 [redacted] 月 [redacted] 日から 20[redacted] 年 [redacted] 月 [redacted] 日まで盲検化された治験薬を投与された。

投与638日後＊　　，被験者は右鼡径ヘルニア及び前立腺肥大の悪化を発現した。投与643日後＊，右鼡径ヘルニア及び前立腺肥大の悪化は消失した。

事象発現に先立ち，被験者は数年間に頻尿，排尿障害，低尿流量，排尿後尿滴下，残尿感及び夜間頻尿を経験していた。右鼡径部腫瘤が認められた（日付不明）。投与638日後＊　，被験者は，下部尿路症状を伴う前立腺肥大及び右鼡径部腫瘤のために入院した。投与638日後＊　，被験者は，グリーンライトレーザーによる経尿道的前立腺切除術，及び右鼠径部ヘルニア縫合術を受けた。両側葉の kissing：中葉肥大；高い膀胱頸部。顕著な前立腺腺様ポリポーシスが認められた。右鼡径ヘルニア（間接型及び直接型）。投与643日後＊，被験者は退院した。

投与された薬剤は，セフメタゾール，トランサミン，セファドロキシル，アセトアミノフェン及び urief F.C.であった。

The patient's past medications include:

ASACOL for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

IMURAN for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

SIMPONI for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

PREDNISOLONE for ULCERATIVECOLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

CRESTOR for CHOLESTEROL HIGH ([redacted] 20[redacted] - [redacted] 20[redacted])

LIVALO for CHOLESTEROL HIGH ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Blinded)

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1) Right inguinal hernia (10039155) (Inguinal hernia (10022016)) [v.24.0] [10039155]

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

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

Dechallenge: Not Applicable

2) Prostatic hypertrophy (10036962) (Benign prostatic hyperplasia (10004446)) [v.24.0] [10036962]

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 RIGHT INGUINAL HERNIA

- Investigator: No evidence of the cause of hernia.

- AbbVie: Inguinal hernias are common in the general population with alifetime risk of 27.5 percent in men.

Event of WORSENING OF PROSTATIC HYPERTROPHY

- Investigator: Related non serious event of HYPERTROPHY (BENIGN) OF PROSTATE

- AbbVie: Event is common in male population with the prevalence increases to 50% after age of 50.

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は台湾の 6[redacted] 歳男性であり，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，膀胱結石の事象を発現した。関連する病歴は，元喫煙者（1 日 0.01 箱を 32 年間），潰瘍性大腸炎，尿路結石及び非飲酒者であった。

Event 3 の臨床経過：

投与736日後＊，被験者は膀胱結石を発現した。投与739日後＊，膀胱結石は消失した。

事象発現に先立ち，被験者は 3 ヵ月間に排尿痛，持続的な尿意切迫感，及び尿勢低下を経験した。

投与736日後＊　　，被験者は入院した。被験者は経尿道的前立腺切除術，膀胱砕石術及び生検病理学検査を受けた。被験者は 3 way フォーリーカテーテルを留置されて生理食塩液による持続的膀胱洗浄を受け，摂取量・排泄量を記録され，鎮痛薬で痛みを管理した。フォーリーカテーテルは膀胱洗浄後に抜去され，被験者は血尿及び排尿困難を伴うことなく排尿自立できた。投与739日後＊，被験者は退院した。

投与された薬剤は，トランサミン，ユリーフ及びセファドロキシルであった。

The patient's past medications include:

ASACOL GASTRO-RESISTAN for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

IMURAN for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

SIMPONI for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

PREDNISOLONE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Blinded)

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1)　Stone urinary bladder (10042141)　(Calculus bladder (10006987))　[v.24.1]　[10042141]

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 BLADDER STONES

- Investigator: Medical history of urolithiasis.

- AbbVie: Event more likely related to pre-existing urolithiasis.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] BODY WEIGHT:** 6[redacted] KG

[redacted] **20[redacted] OCCULT BLOOD:** 1+ Negative

[redacted] **20[redacted] RED BLOOD CELLS:** 8-10 HPF

[redacted] **20[redacted] WHITE BLOOD CELLS:** +/- Unknown

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は台湾の 6[redacted] 歳男性であり，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，帯状疱疹の事象を発現した。関連する病歴は，元喫煙者（1 日 0.01 箱を 32 年間），潰瘍性大腸炎，脂漏性角化症及び非飲酒者であった。

Event 4 の臨床経過：

投与758日後＊，被験者は帯状疱疹を発現した。

入院前，被験者は，角膜血管新生（CNV-1）を合併したヘルペスと仮定して，バラシクロビル，プレガバリン及び人工涙液による治療を受けたが，症状はあまり改善しなかった。

投与752日後＊　，被験者は，小水疱，左眼の刺激感，及び左耳介前部に圧痛があるために入院した。左眉に近い小水疱が顕著であった。検査では，角膜はクリアで潰瘍を伴わなかった。

被験者はアシクロビルの静脈内投与を受けた。投与773日後＊，被験者は退院した。

投与された薬剤は，フルオシノニド，アシクロビル，バラシクロビル，プレガバリン，人工涙液，アセトアミノフェン，ガバペンチン，ジクロフェナク，クロラムフェニコール，combigan，ベタメタゾン及び zalain external であった。

The patient's past medications include:

ASACOL for ULCERATIVE COLITIS ([redacted])

ASACOL for ULCERATIVE COLITIS ([redacted])

IMURAN for ULCERATIVE COLITIS ([redacted])

SIMPONI for ULCERATIVE COLITIS ([redacted])

PREDNISOLONE for ULCERATIVE COLITIS ([redacted])

Causality for UPADACITINIB (Blinded)

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1) Herpes zoster (10019974) (Herpes zoster (10019974)) [v.24.1] [10019974]Causality as per reporter (Drug/Vaccine): Reasonable possibility

Causality as per Mfr. (Drug/Vaccine): Reasonable possibility

Dechallenge: Yes

Rechallenge: No rechallenge was done, recurrence is not applicable

Alternative Etiology for UPADACITINIB (Blinded)

Event of HERPES ZOSTER

- Investigator: Not Applicable

- AbbVie: Not Applicable

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] C-REACTIVE PROTEIN:** 0.18 mg/dL (normal >0.5)

[redacted] **20[redacted] C-REACTIVE PROTEIN:** 0.23 mg/dL (normal >0.5)

[redacted] **20[redacted] C-REACTIVE PROTEIN:** 1.11 mg/dL (normal >0.5)

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
子宮内膜症	X			

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	3[redacted]	FEMALE	WHITE

Medical History	Onset Year
ARTHRALGIA	20[redacted]
EXTENSIVE UC/PANCOLITIS	20[redacted]
HEMORRHOID	20[redacted]
HYPERTENSION	20[redacted]
LEFT EYE BLURRED	20[redacted]
LUMBAR SPINE AND LEFT PROXIMAL FEMUR OSTEOPENIA.	20[redacted]
ULCERATIVE COLITIS	NOT REPORTED

Prior Procedures	Procedure Year
PRIOR PROCEDURES: CESAREAN SECTION	20[redacted]
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	NEVER	

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS2 ABT-494 (IND)	45 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 58	58
M14-234 SS3 Placebo (MAIN)		ORAL	QD	[redacted]20[redacted] / 59	[redacted]20[redacted] / 422	364
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted]20[redacted] / 424		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
METHYLPREDNISOLONE	20 mg	BID	Y-M: 20[redacted]
METHYLPREDNISOLONE	28 mg	BID	Y-M: 20[redacted]
METHYLPREDNISOLONE	20 mg	BID	Y-M: 20[redacted]
AZATHIOPRINE	150 mg	BID	Y-M: 20[redacted]
METHYLPREDNISOLONE	24 mg	BID	Y-M: 20[redacted]
MESALAZINE	1000 mg	TID	Y-M: 20[redacted]
MESALAZINE	4 g	QD	Y-M: 20[redacted]
METHOTREXATE	15 mg	1 time per week	Y-M: 20[redacted]
METHOTREXATE	15 mg	1 time per week	Y-M: 20[redacted]
BUDESONIDE	1 g	QD	Y-M: 20[redacted]
METHOTREXATE	15 mg	1 time per week	Y-M: 20[redacted]
ADALIMUMAB	40 mg	OTHER: 1 TIMES PER 2 WEEKS	Y-M: 20[redacted]
ADALIMUMAB	80 mg	OTHER: 1 TIMES PER 2 WEEKS	Y-M: 20[redacted]
VEDOLIZUMAB	300 mg	OTHER: 1 IN 2 MONTH	Y-M: 20[redacted]
PANTOPRAZOLE	40 mg	QD	Y-M: 20[redacted]

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
PANTOPRAZOLE	40 mg	QD	Y-M: 20[redacted]	ONGOING
BISACODYL	2.5 mg	QD	Y-M: 20[redacted] / 215	Not reported
DIMETICONE;PANCREATIN	480 mg	TID	Y-M: 20[redacted] / 215	Not reported

Event #1: Serious Adverse Event

Event Description	ENDOMETRIOSIS
Preferred term	子宮内膜症
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 635 / 212
Age at AE Onset	4[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	638 / 215
Duration of AE	4 DAYS
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	OVARIAN CYSTS
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者はトルコの 4[redacted] 歳女性であり，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，子宮内膜症の事象を発現した。関連する病歴は，潰瘍性大腸炎，非喫煙者及び非飲酒者であった。

Event 1 の臨床経過：

投与635日後＊　，被験者は子宮内膜症を発現した。投与638日後＊　，子宮内膜症は消失した。

投与635日後＊　，被験者は，過去 2 週間に腹痛，悪心，便秘及び嘔吐があり入院した。被験者は腹部 CT 検査及び超音波画像検査を受け，いずれの検査でも，顕著な潰瘍性大腸炎の活動性は認められなかった。婦人科専門医の診察により被験者は子宮内膜症と診断された。投与638日

後＊，被験者は退院した。

The patient's past medications include:

PREDNOL for ULCERATIVE COLITIS ([redacted])

IMURAN for ULCERATIVE COLITIS ([redacted])

SALOFALK GRANUSTIX for ULCERATIVE COLITIS ([redacted])

SALOFALK LAVMAN for ULCERATIVE COLITIS ([redacted])

METOTREXATE for ULCERATIVE COLITIS ([redacted])

BUDENOFALK for ULCERATIVE COLITIS ([redacted])

HUMIRA for ULCERATIVE COLITIS ([redacted])

Causality for UPADACITINIB (Blinded)

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1) Endometriosis (10014778) (Endometriosis (10014778)) [v.24.0] [10014778]

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 ENDOMETRIOSIS

- Investigator: ovarian cysts

- AbbVie: Event not consistent with study drug's mechanism of action. The most widely accepted hypothesis for the pathophysiology of endometriosis is that endometrial cells are transported from the uterine cavity during menstruation and subsequently become implanted at ectopic sites.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] ABDOMINAL ULTRASOUND:** EMERGENCY PATHOLOGY WAS NOT DETECTED. THERE WERE NO SIGNS OF UC DISEASE ACTIVATION.

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

[redacted] **20[redacted] CT ENTEROGRAPHY:** EMERGENCY PATHOLOGY WAS NOT DETECTED. THERE WERE NO SIGNS OF UC DISEASE ACTIVATION.

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
精巣（純粋）セミノーマ	X	X		X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	4[redacted]	MALE	WHITE

Medical History	Onset Year
BENIGN LEFT TESTICULAR LUMP	20[redacted]
CEREBROVASCULAR ACCIDENT	20[redacted]
CHRONIC BACK PAIN	20[redacted]
EXTENSIVE UC/PANCOLITIS	20[redacted]
HEARTBURN	20[redacted]
INSOMNIA	19[redacted]
IRON DEFICIENCY	20[redacted]
LAZY LEFT EYE	20[redacted]
MILD LEFT SIDED LOWER EXTREMITY NUMBNESS	20[redacted]
NASAL CONGESTION	20[redacted]
PERIPHERAL ARTERY DISEASE	20[redacted]
RECURRENT LOWER EXTREMITY DEEP VENOUS THROMBOSIS	20[redacted]
RESTLESS LEG SYNDROME	20[redacted]
RIGHT PNEUMOTHORAX	20[redacted]
SPINAL FRACTURE	20[redacted]
SUBDURAL HEMATOMA	20[redacted]
VITAMIN D DEFICIENCY	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	FORMER	1 PACK	20	20[redacted]
CIGARS	NEVER			

PIPES NEVER

Alcohol Use	Status	Number/Day
ALCOHOL	CURRENT	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS2 Placebo (IND)		ORAL	QD	[redacted] / 1	[redacted] / 58	58
M14-234 SS2 ABT-494 (OL)	45 mg	ORAL	QD	[redacted] / 59	[redacted] / 112	54
M14-234 SS3 ABT-494 (MAIN)	15 mg	ORAL	QD	[redacted] / 113	[redacted] / 154	42
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted] / 155	[redacted] / 444	290

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
MESALAZINE	4.8 g	QD	Y-M: [redacted]
BUDESONIDE	9 mg	QD	Y-M: [redacted]
COLECALCIFEROL	1000 OTHER: UNITS	BID	Y-M: [redacted]
INFLIXIMAB	10 mg/kg	OTHER: EVERY 4 WEEKS	Y-M: [redacted]
IRON	300 mg	QD	Y-M: [redacted]
CALCIUM;COLECALCIFEROL	1 OTHER: TABLET	BID	Y-M: [redacted]
LOPERAMIDE	2 mg	PRN	Y-M: [redacted]
MESALAZINE	1000 mg	BID	Y-M: [redacted]
VEDOLIZUMAB	300 mg	OTHER: EVERY 8 WEEKS	Y-M: [redacted] / -281
OMEPRAZOLE	40 mg	QD	Y-M: [redacted] / -267
PREDNISONE	20 mg	QD	Y-M: [redacted] / -8
APIXABAN	5 mg	BID	Y: [redacted]
GLUTAMIC ACID	1000 mg	BID	Y: [redacted]

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
COLECALCIFEROL	1000 OTHER: UNITS	BID	Y-M: 20[redacted]	ONGOING
IRON	300 mg	QD	Y-M: 20[redacted]	ONGOING
CALCIUM;COLECALCIFEROL	1 OTHER: TABLET	BID	Y-M: 20[redacted]	ONGOING
LOPERAMIDE	2 mg	PRN	Y-M: 20[redacted]	ONGOING
OMEPRAZOLE	40 mg	QD	Y-M: 20[redacted] / -267	ONGOING
CHONDROITIN;GLUCOSAMINE	1 OTHER: TABLET	QD	Y-M: 20[redacted] / 149	ONGOING
DIPHENHYDRAMINE	50 mg	OTHER: ONCE	Y-M: 20[redacted] / 289	Y-M: 20[redacted] / 289
DOXYCYCLINE	100 mg	BID	Y-M: 20[redacted] / 290	Y-M: 20[redacted] / 294
OXYCODONE;PARACETAMOL	1 OTHER: TABLET	PRN	Y-M: 20[redacted] / 290	Y-M: 20[redacted] / 313
APIXABAN	5 mg	BID	Y: 20[redacted]	ONGOING
GLUTAMIC ACID	1000 mg	BID	Y: 20[redacted]	Y-M: 20[redacted] / 302

Event #1: Serious Adverse Event, AE Leading to Discontinuation of Study Drug, Event of Interest-Possible Malignancies, Event of Interest-Malignancy, Event of Interest-Malignancies Excl NMSC

Event Description	LEFT TESTICULAR SEMINOMA
Preferred term	精巣（純粋）セミノーマ
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 444 / 290
Age at AE Onset	4[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	444 / 290
Duration of AE	1 DAY
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	HISTORY OF BENIGN TESTICULAR LUMP
Discontinued Study Drug Due to the Event	YES
SAE Criteria	IMPORTANT MEDICAL EVENT REQUIRING MEDICAL OR SURGICAL INTERVENTION

Generated: [redacted]20[redacted]:16:51

Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は米国の 4[redacted] 歳男性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，左側精巣セミノーマの事象を発現した。関連する病歴は，良性左側精巣腫瘤，下肢深部静脈血栓症の再発，末梢動脈疾患，軽度の左下肢しびれ感，硬膜下血腫，元喫煙者（1 日 1 箱を 20 年間），潰瘍性大腸炎及び現飲酒者（1 日 2 杯未満）であった。

Event 1 の臨床経過：

投与444日後＊　，被験者は左側精巣セミノーマを発現した。投与444日後＊　，左側精巣セミノーマは消失した。

本事象発現前の 投与343日後＊　，被験者は左側精巣腫瘤の悪化が発現した。陰嚢の超音波検査に基づき，悪性腫瘍が疑われた。

投与444日後＊　，被験者は待機的な左側精巣摘出術を受け，左側精巣セミノーマが明らかとなった。病理学的ステージは pT2，NX であり，リンパ管又は静脈侵襲ありであった。更なる治療（放射線を含む）は不要であった。最終的な病理は上述の通りであった。組織型：セミノーマ，病理学的ステージ：pT2，NX，リンパ管又は静脈侵襲：あり

本事象により，治験薬の投与は完全に中止された。

投与された薬剤は percocet であった。

The patient's past medications include:

LIALDA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

UCERIS for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

INFLECTRA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

CANASA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

ENTYVIO for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

PREDNISONE for ULCERATIVE COLITIS, WORSENING OF ULCERATIVE COLITIS SYMPTOMS, DIFFUSE ARTHRALGIA AND ULCERATIVE COLITIS SYMPTOM RELAPSE and DIFFUSE ARTHRALGIA AND ULCERATIVE COLITIS SYMPTOM RELAPSE ([redacted])

Causality for UPADACITINIB (Open Label)

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1) Testicular seminoma (pure) (10062124) (Testicular seminoma (pure) (10062124)) [v.23.1] [10062124]

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

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

Dechallenge: Yes

Rechallenge: No rechallenge was done, recurrence is not applicable

Alternative Etiology for UPADACITINIB (Open Label)

Event of LEFT TESTICULAR SEMINOMA

- Investigator: History of benign testicular lump

- AbbVie: Event not consistent with study drug's mechanism of action. Exact etiology of seminoma is unknown. Instead, typical known risk factors include cryptorchidism, a personal or family history of testicular cancer, infertility or subfertility, and HIV infection.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **SCROTAL ULTRASOUND:** Suspicious for malignancy

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
肺炎	X			X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	2[redacted]	MALE	WHITE

Medical History	Onset Year
LEFT SIDED UC	20[redacted]
OTHER: ALLERGY TO SULFA'S	19[redacted]
OTHER: BILATERAL ADENOIDECTOMY	19[redacted]
OTHER: BILATERAL PRESSURE EQUALIZER SURGERY	19[redacted]
OTHER: DECREASED APPETITE	20[redacted]
OTHER: DENTAL IMPLANT	20[redacted]
OTHER: INSOMNIA	20[redacted]
OTHER: INTERMITTENT CHILLS	20[redacted]
OTHER: INTERMITTENT SWEATING	20[redacted]
OTHER: PILONDIAL CYST SURGERY	20[redacted]
OTHER: WISDOM TEETH REMOVAL	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	NEVER	

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 ABT-494 (IND)	30 mg	ORAL	QD	[redacted] / 1	[redacted] / 56	56
M14-234 SS3 ABT-494 (MAIN)	30 mg	ORAL	QD	[redacted] / 57	[redacted] / 371	315
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted] / 372	[redacted] / 1248	877

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
BUDESONIDE	9 mg	OTHER: QOD	Y-M: 20[redacted]
MESALAZINE	4 g	QD	Y-M: 20[redacted]
AZATHIOPRINE	150 mg	QD	Y-M: 20[redacted]
AZATHIOPRINE	50 mg	QID	Y-M: 20[redacted]
MESALAZINE	1.6 g	TID	Y-M: 20[redacted] / -62
MESALAZINE	1.5 mg	QD	Y: 20[redacted]
PREDNISONE	NOT REPORTED	QD	Y: 20[redacted]

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
PAROXETINE	20 mg	QD	Y-M: 20[redacted] / 429	ONGOING
ETODOLAC	400 mg	BID	Y-M: 20[redacted] / 580	Y-M: 20[redacted] / 581
CEFTRIAXONE	UNKNOWN OTHER: UNKNOWN	OTHER: UNKNOWN	Y-M: 20[redacted] / 610	Y-M: 20[redacted] / 621
CLINDAMYCIN	600 mg	OTHER: EVERY 6 HOURS	Y-M: 20[redacted] / 610	Y-M: 20[redacted] / 621
GUAIFENESIN	10 mL	PRN	Y-M: 20[redacted] / 610	Y-M: 20[redacted] / 621
LEVOFLOXACIN	UNKNOWN OTHER: UNKNOWN	OTHER: UNKNOWN	Y-M: 20[redacted] / 610	Y-M: 20[redacted] / 621
METRONIDAZOLE	UNKNOWN OTHER: UNKNOWN	OTHER: UNKNOWN	Y-M: 20[redacted] / 610	Y-M: 20[redacted] / 621
SULFAMETHOXAZOLE;TRIMETHOPRIM	UNKNOWN OTHER: UNKNOWN	OTHER: UNKNOWN	Y-M: 20[redacted] / 610	Y-M: 20[redacted] / 621
ATOVAQUONE	750 mg	BID	Y-M: 20[redacted] / 621	Y-M: 20[redacted] / 634

BIFIDOBACTERIUM NOS;LACTOBACILLUS ACIDOPHILUS;LACTOBACILLUS PARACASEI;STREPTOCOCCUS THERMOPHILUS	1 OTHER: CAPSULE	QD	Y-M: 20[redacted] / 621 Y-M: 20[redacted] / 634
PANTOPRAZOLE	40 mg	QD	Y-M: 20[redacted] / 621 Y-M: 20[redacted] / 697
PREDNISONE	20 mg	QD	Y-M: 20[redacted] / 621 Y-M: 20[redacted] / 625
PREDNISONE	10 mg	QD	Y-M: 20[redacted] / 626 Y-M: 20[redacted] / 697

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

Event Description	PNEUMONIA
Preferred term	肺炎
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 981 / 610
Age at AE Onset	2[redacted]

Laboratory Testing

[redacted]20[redacted] (RX DAY 610): NPTST184-INFLUENZA: NEGATIVE [NOT REPORTED - NOT REPORTED] UNIT NOT REPORTED; NPTST253-PNEUMOCYSTIS JIROVECI PNEUMONIA: NEGATIVE [NOT REPORTED - NOT REPORTED] UNIT NOT REPORTED; NPTST284-RESPIRATORY CULTURE: NEGATIVE [NOT REPORTED - NOT REPORTED] UNIT NOT REPORTED; NPTST345-VIRAL PCR PANEL: NEGATIVE [NOT REPORTED - NOT REPORTED] UNIT NOT REPORTED; [redacted]20[redacted] (RX DAY 615): NPTST016-ACIDE-FAST BACILLI: NEGATIVE [NOT REPORTED - NOT REPORTED] UNIT NOT REPORTED

Microbiology

NOT REPORTED

AE Stopped Initial Rx Day / Rx Day	1042 / 671
Duration of AE	62 DAYS
Severity	SEVERE
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

Generated: [redacted]20[redacted]:16:51

Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は米国の 2[redacted] 歳男性であり，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，肺炎の事象を発現した。関連する病歴は，潰瘍性大腸炎（左側），非喫煙者及び非飲酒者であった。

Event 1 の臨床経過：

投与981日後＊，被験者は肺炎を発現した。投与1042日後＊，肺炎は消失した

投与981日後＊，被験者は，本事象発現の前に発熱を発現し，非重篤と判断された。

投与981日後＊　，被験者は発熱，悪心及び嘔吐があり，入院した。当初，潰瘍性大腸炎の再燃が原因であると考えられた。腹部 CT 検査が実施され，急性の炎症が否定された。 投与986日後＊，洗浄を伴う気管支鏡検査が実施された後，両側の肺炎が明らかとなったが，検査中の咳嗽のため生検検体は採取できなかった。被験者は，抗生物質を投与された。気管支鏡検査でニューモシスチス・イロベチイ肺炎は否定された。被験者が最後に電子タバコを使用したのは，2–3 週間前であった。投与992日後＊，被験者は退院した。

投与された薬剤は，アトバコン，risaquad，prednisone，クリンダマイシン，robitussin，ロセフィン，levaquin，フラジール，bactrim であった。

The patient's past medications include:

APRISO for ULCERATIVE COLITIS (20[redacted] - [redacted] 20[redacted])

PREDNISONE for ULCERATIVE COLITIS (20[redacted] - 20[redacted])

UCERIS for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

ROWASA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

IMURAN for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

ASACOL for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

ETODOLAC for BACK ARTHRITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

SULFA for UNKNOWN INDICATION

Causality for UPADACITINIB (Blinded)

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1) Pneumonia (10035664) (Pneumonia (10035664)) [v.22.1] [10035664]

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

Causality as per Mfr. (Drug/Vaccine): Reasonable possibility

Dechallenge: Yes

Rechallenge: rechallenge was done, reaction did not recur

Alternative Etiology for UPADACITINIB (Blinded)

Event of PNEUMONIA

- Investigator: Not applicable

- AbbVie: Not applicable

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] ACIDE-FAST BACILLI TEST (SPUTUM):** Negative

[redacted] **20[redacted] BRONCH W/LAVAGE:** COULD NOT GET BIOPSIES WITH PERSISTENT STRONG COUGHING

[redacted] **20[redacted] BRONCHOSCOPY:** Positive for bilateral pneumonia, negative for PJ pneumonia.

[redacted] **20[redacted] CHEST X-RAY:** BILATERAL BASILAR LUNG INFILTRATES

[redacted] **20[redacted] COMPUTERIZED TOMOGRAPHY ABDOMEN:** "MILDLY THICKENED DISTAL COLONIC WALL, LIKELY RELATED TO HISTORY OF ULCERATIVE COLITIS. NO EVIDENCE OF ACUTE INFLAMMATORY CHANGES. NO ACUTE INTRA-ABDOMINAL/PELVICFINDING. BIBASILAR AIRSPACE OPACITIES. PLEASE CORRELATE CLINICALLY FOR PNEUMONIA."

[redacted] **20[redacted] INFLUENZA TEST:** Negative

[redacted] **20[redacted] PNEUMOCYSTIS JIROVECI PNEUMONIA TEST:** Negative

[redacted] **20[redacted] RESPIRATORY CULTURE (SPUTUM):** Negative

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

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
潰瘍性大腸炎		X		
敗血症	X			X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	2[redacted]	MALE	MULTIPLE

Medical History	Onset Year
ASTHMA	19[redacted]
EXTENSIVE UC/PANCOLITIS	20[redacted]
GASTROESOPHAGEAL REFLUX DISEASE	20[redacted]
OSTEOPOROSIS	20[redacted]
OTHER: ALLERGIC TO CEPHALEXIN	20[redacted]
OTHER: ALLERGIC TO LEGUMES	19[redacted]
OTHER: ALLERGIC TO MILK	19[redacted]
OTHER: ALLERGIC TO PEANUT OIL	19[redacted]
OTHER: ALLERGIC TO SOY	19[redacted]
OTHER: COLONOSCOPY	20[redacted]
OTHER: COLONOSCOPY	20[redacted]
OTHER: COLONSCOPY	20[redacted]
OTHER: GASTRIC ULCER	20[redacted]
OTHER: HIATIAL HERNIA	20[redacted]
OTHER: INSOMNIA	20[redacted]
OTHER: NAUSEA	20[redacted]
OTHER: SIGMOIDOSCOPY	20[redacted]
OTHER: SLEEP APNEA	20[redacted]

Prior Procedures	Procedure Year
SURGERY: GANGLION CYST REMOVED FROM LEFT WRIST	20[redacted]
SURGERY: SEPTOPLASTY	20[redacted]
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	CURRENT	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 Placebo (IND)		ORAL	QD	[redacted] / 1	[redacted] / 55	55
M14-234 SS3 Placebo (MAIN)		ORAL	QD	[redacted] / 56	[redacted] / 83	28
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted] / 84	[redacted] / 967	884

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
CETIRIZINE	10 mg	QD	Y-M: [redacted]
MONTELUKAST	10 mg	QD	Y-M: [redacted]
COLECALCIFEROL	2000 OTHER: UNITS	QD	Y-M: [redacted]
DICYCLOVERINE	20 mg	PRN	Y-M: [redacted]
MESALAZINE	4.8 g	QD	Y-M: [redacted]
ADALIMUMAB	40 mg	OTHER: EVERY 2 WEEKS	Y-M: [redacted]
MERCAPTOPURINE	50 mg	QD	Y-M: [redacted]
METHOTREXATE	25 mg	OTHER: WEEKLY	Y-M: [redacted]
INFLIXIMAB	5 OTHER	OTHER: EVERY 8 WEEKS	Y-M: [redacted]
TRAZODONE	50 mg	QD	Y-M: [redacted]
PANTOPRAZOLE	40 mg	BID	Y-M: [redacted]
PROMETHAZINE	25 mg	PRN	Y-M: [redacted]
VEDOLIZUMAB	300 mg	OTHER: EVERY 4 WEEKS	Y-M: [redacted]

BUDESONIDE	9 mg	QD	Y-M: 20[redacted] / -284
RISEDRONIC ACID	150 mg	OTHER: MONTHLY	Y-M: 20[redacted] / -139
LOPERAMIDE	2 mg	PRN	Y-M: 20[redacted] / -111
PREDNISONE	30 mg	QD	Y-M: 20[redacted] / -9
SALBUTAMOL	90 ug/m2	PRN	Y: 20[redacted]
BUDESONIDE;FORMOTEROL	160-4.5 ug	BID	Y: 20[redacted]
TRIAMCINOLONE	55 ug/m2	BID	Y: 20[redacted]
PROBIOTICS NOS	10 BILLION CELL OTHER: CAPSULE	BID	Y: 20[redacted]
CALCIUM CARBONATE	1500 mg	BID	Y: 20[redacted]

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 / Stop Year-Month / RX Day	
CETIRIZINE	10 mg	QD	Y-M: 20[redacted]	ONGOING
COLECALCIFEROL	2000 OTHER: UNITS	QD	Y-M: 20[redacted]	ONGOING
DICYCLOVERINE	20 mg	PRN	Y-M: 20[redacted]	ONGOING
TRAZODONE	50 mg	QD	Y-M: 20[redacted]	ONGOING
PANTOPRAZOLE	40 mg	BID	Y-M: 20[redacted]	ONGOING
PROMETHAZINE	25 mg	PRN	Y-M: 20[redacted]	ONGOING
RISEDRONIC ACID	150 mg	OTHER: MONTHLY	Y-M: 20[redacted] / -139	ONGOING
LOPERAMIDE	2 mg	PRN	Y-M: 20[redacted] / -111	ONGOING
PARACETAMOL	1000 mg	PRN	Y-M: 20[redacted] / 21	ONGOING
HYOSCYAMINE	0.125 mg	PRN	Y-M: 20[redacted] / 743	ONGOING
PREDNISONE	30 mg	QD	Y-M: 20[redacted] / 784	Y-M: 20[redacted] / 798
PREDNISONE	25 mg	QD	Y-M: 20[redacted] / 799	Y-M: 20[redacted] / 806
PREDNISONE	20 mg	QD	Y-M: 20[redacted] / 807	Y-M: 20[redacted] / 814
CALCIUM CHLORIDE;POTASSIUM;SODIUM LACTATE	1000 mL	OTHER: ONE DOSE	Y-M: 20[redacted] / 817	Y-M: 20[redacted] / 817
GLUCOSE;POTASSIUM;SODIUM CHLORIDE	1000 mL	OTHER: ONE BAG AT 100 ML HR	Y-M: 20[redacted] / 817	Y-M: 20[redacted] / 817
HYDROXYZINE	25 mg	OTHER: 1 DOSE	Y-M: 20[redacted] / 817	Y-M: 20[redacted] / 817
MORPHINE	2 mg	PRN	Y-M: 20[redacted] / 817	ONGOING
ONDANSETRON	4 mg	PRN	Y-M: 20[redacted] / 817	Y-M: 20[redacted] / 820

PARACETAMOL	1000 mg	OTHER: X1 DOSE	Y-M: 20[redacted] / 817	Y-M: 20[redacted] / 817
PIPERACILLIN;TAZOBACTAM	4.5 g	PRN	Y-M: 20[redacted] / 817	Y-M: 20[redacted] / 820
PROMETHAZINE	12.5 mg	OTHER: ONE DOSE	Y-M: 20[redacted] / 817	Y-M: 20[redacted] / 817
SODIUM CHLORIDE	1000 mL	OTHER: 1 BAG	Y-M: 20[redacted] / 817	Y-M: 20[redacted] / 817
PREDNISONE	40 mg	QD	Y-M: 20[redacted] / 884	Y-M: 20[redacted] / 934
TOFACITINIB	10 mg	QD	Y-M: 20[redacted] / 904	ONGOING
SALBUTAMOL	90 ug/m2	PRN	Y: 20[redacted]	ONGOING
BUDESONIDE;FORMOTEROL	160-4.5 ug	BID	Y: 20[redacted]	ONGOING
TRIAMCINOLONE	55 ug/m2	BID	Y: 20[redacted]	ONGOING
PROBIOTICS NOS	10 BILLION CELL OTHER: CAPSULE	BID	Y: 20[redacted]	ONGOING
CALCIUM CARBONATE	1500 mg	BID	Y: 20[redacted]	ONGOING

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

Event Description	SEPSIS DUE TO UNSPECIFIED ORGANISM
Preferred term	敗血症
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 899 / 816
Age at AE Onset	2[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	903 / 820
Duration of AE	5 DAYS
Severity	MODERATE
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: AE Leading to Discontinuation of Study Drug

Event Description	ULCERATIVE COLITIS EXACERBATION
Preferred term	潰瘍性大腸炎
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 964 / 881

Age at AE Onset	2[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	ONGOING
Duration of AE	ONGOING
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	NOT APPLICABLE
Discontinued Study Drug Due to the Event	YES
SAE Criteria	NONE

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は米国の 2[redacted] 歳男性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，詳細不明の病原体による敗血症の事象を発現した。関連する病歴は，胃食道逆流性疾患，潰瘍性大腸炎，胃潰瘍，悪心，非喫煙者及び少量の現飲酒者（1 日 2 杯未満）であった。

Event 1 の臨床経過：

投与899日後＊　，被験者は詳細不明の病原体による敗血症を発現した。投与903日後＊　，詳細不明の病原体による敗血症は消失した。

本事象発現前の 投与806日後＊　　，被験者は潰瘍性大腸炎の悪化（非重篤）を発現し始め，prednisone 25 mg の 2 週間の投与を開始し，その後漸減した。

投与899日後＊　，被験者は下痢，悪心，嘔吐，腹部痛，発熱及び頻脈を発現した。被験者は救急治療室を受診し，投与900日後＊ に入院した。投与900日後＊，被験者は腹部 CT 検査を受け，下痢性疾患及びびまん性大腸炎が示唆された。投与903日後＊，被験者は退院した。

投与された薬剤は，モルヒネ，塩化ナトリウム，ラクトリンゲル，アセトアミノフェン，ブドウ糖水和物 5%・塩化ナトリウム 0.9%・塩化カリウム 20 mEq 合剤及びゾシンであった。

The patient's past medications include:

LIALDA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

HUMIRA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

6 MERCAPTOPURINE for ULCERATIVE COLITIS ([redacted] 20[redacted] - 20[redacted])

METHOTREXATE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

REMICADE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

ENTYVIO for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

UCERIS for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

AZITHROMYCIN for SINUS INFECTION ([redacted] 20[redacted] -[redacted] 20[redacted])

CEPHALEXIN for UNKNOWN INDICATION

Causality for UPADACITINIB (Open Label)

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1) Sepsis (10040047) (Sepsis (10040047)) [v.22.1] [10040047]

Causality as per reporter (Drug/Vaccine): 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 (Open Label)

Event of SEPSIS DUE TO UNSPECIFIED ORGANISM

- Investigator: Not applicable

- AbbVie: Event is more likely related to pre-existing ulcerative colitis.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] CREATINE:** increased

[redacted] **20[redacted] CT SCAN:** SUGGESTIVE OF DIARRHEAL ILLNESS AND SUGGESTIVE OF DIFFUSE COLITIS

[redacted] **20[redacted] FLEXIBLE SIGMOIDOSCOPY:** biopsy taken: normal sigmoid colon, rectum

[redacted] **20[redacted] GLUCOSE:** increased

[redacted] **20[redacted] WBC:** increased

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
胃炎	X			

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	4[redacted]	FEMALE	BLACK OR AFRICAN AMERICAN

Medical History	Onset Year
GASTROESOPHAGEAL REFLUX DISEASE	19[redacted]
HYPERTENSION	20[redacted]
HYPOTHYROIDISM	20[redacted]
LIVER DISEASE (EXCLUDING HEPATITIS): FATTY LIVER	20[redacted]
MIGRAINE HEADACHE	20[redacted]
OTHER: ANXIETY	20[redacted]
OTHER: GASTROPARESIS	20[redacted]
OTHER: HYPOKALEMIA	20[redacted]
OTHER: HYPOMAGNESIA	20[redacted]
OTHER: SEASONAL ALLERGIES	20[redacted]
OTHER: SLEEP DISORDER	20[redacted]
OTHER: UC	19[redacted]
OTHER: VITAMIN D DEFICIENCY	20[redacted]
UC DISEASE LIMITED TO RECTUM	19[redacted]

Prior Procedures	Procedure Year
SURGERY: HYSTERECTOMY	20[redacted]
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

PIPES NEVER

Alcohol Use	Status	Number/Day
ALCOHOL	FORMER	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 ABT-494 (IND)	7.5 mg	ORAL	QD	[redacted] / 1	[redacted] / 56	56
M14-234 SS3 ABT-494 (MAIN)	7.5 mg	ORAL	QD	[redacted] / 57	[redacted] / 359	303
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted] / 360		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
MESALAZINE	1000 mg	QD	Y-M: [redacted]
MESALAZINE	2.4 g	QD	Y-M: [redacted]
SULFASALAZINE	1000 mg	BID	Y-M: [redacted]
METRONIDAZOLE	500 mg	BID	Y-M: [redacted]
TIZANIDINE	4 mg	PRN	Y-M: [redacted]
ONDANSETRON	4 mg	PRN	Y-M: [redacted]
LOPERAMIDE	2.5-0.025 mg	PRN	Y-M: [redacted]
HYDROCORTISONE	2016 mL	BID	Y-M: [redacted]
ERGOCALCIFEROL	50,000 IU	OTHER: WEEKLY	Y-M: [redacted]
HYOSCYAMINE	0.125 mg	PRN	Y-M: [redacted]
TRAMADOL	50 mg	PRN	Y-M: [redacted]
ZOLPIDEM	10 mg	QD	Y: [redacted]
PANTOPRAZOLE	40 mg	QD	Y: [redacted]
AMLODIPINE;BENAZEPRIL	5-20 mg	QD	Y: [redacted]
MONTELUKAST	10 mg	QD	Y: [redacted]
BUTALBITAL;CAFFEINE;PARACETAMOL	40 mg	PRN	Y: [redacted]

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
TIZANIDINE	4 mg	PRN	Y-M: [redacted]	ONGOING

ONDANSETRON	4 mg	PRN	Y-M: 20[redacted]	ONGOING
LOPERAMIDE	2.5-0.025 mg	PRN	Y-M: 20[redacted]	ONGOING
ERGOCALCIFEROL	50,000 IU	OTHER: WEEKLY	Y-M: 20[redacted]	ONGOING
HYOSCYAMINE	0.125 mg	PRN	Y-M: 20[redacted]	ONGOING
OXYCODONE;PARACETAMOL	10/325 mg	PRN	Y-M: 20[redacted] / 493	Not reported
CLONAZEPAM	0.5 mg	QD	Y-M: 20[redacted] / 993	Not reported
CARBAMAZEPINE	100 mg	BID	Y-M: 20[redacted] / 1267	Not reported
PANTOPRAZOLE	40 mg	BID	Y-M: 20[redacted] / 1413	Not reported
SUCRALFATE	1 g	TID	Y-M: 20[redacted] / 1415	Not reported
ZOLPIDEM	10 mg	QD	Y: 20[redacted]	ONGOING
PANTOPRAZOLE	40 mg	QD	Y: 20[redacted]	Y-M: 20[redacted] / 1413
AMLODIPINE;BENAZEPRIL	5-20 mg	QD	Y: 20[redacted]	ONGOING
MONTELUKAST	10 mg	QD	Y: 20[redacted]	ONGOING
BUTALBITAL;CAFFEINE;PARACETAMOL	40 mg	PRN	Y: 20[redacted]	ONGOING

Event #1: Serious Adverse Event

Event Description	GASTRITIS
Preferred term	胃炎
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 1772 / 1413
Age at AE Onset	4[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	1775 / 1416
Duration of AE	4 DAYS
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	SUBJECT HISTORY OF GERD AND GASTROPARESIS
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は米国の 4[redacted] 歳女性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，胃炎の事象を発現した。関連する病歴は，潰瘍性大腸炎，胃食道逆流性疾患，片頭痛，胃不全麻痺，不安，肝疾患（肝炎を除く），脂肪肝，ビタミンD欠乏，非喫煙者及び元飲酒者（1 日 2 杯未満）であった。

Event 1 の臨床経過：

投与1772日後＊，被験者は胃炎を発現した。投与1775日後＊，胃炎は消失した。

投与1772日後＊，被験者は，直腸出血，心窩部痛，悪心及び浮動性めまいのために入院した。同日，CT スキャン検査が実施された。投与1774日後＊，上部消化管内視鏡検査（ESD）が実施された。被験者に薬物治療が開始された。被験者は clear diet に耐容性を示し，投与1775日後＊，被験者は退院した。

投与された薬剤は carafate であった。

The patient's past medications include:

CANASA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

LIALDA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

SULFASALAZINE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

FLAGYL for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

CORTENEMA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

TRAMADOL for ABDOMINAL PAIN FROM ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Open Label)

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1) Gastritis (10017853) (Gastritis (10017853)) [v.24.1] [10017853]

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 (Open Label)

Event of GASTRITIS

- Investigator: The patient's history of GERD and gastroparesis.

- AbbVie: Risk factors include pre-existing gastroesophageal reflux requiring chronic proton-pump inhibitor treatment and gastroparesis. Additional risk factor is the presence of a hiatal hernia described during endoscopy.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] CT SCAN:** CT OF ABDOMEN AND PELVIS WITH CONTRAST, SHOWED WALL THICKENING OF THE TRANSVERSE, DESCENDING AND A PORTION OF THE SIGMOID COLON SUGGESTING COLITIS. NO EVIDENCE OF MESENTERIC OR RETROPERITONEAL LYMPHADENOPATHY.

[redacted] **20[redacted] EGD:** FINDINGS: NORMAL ESOPHAGUS, NORMAL BULB, NORMAL PYLORUS, MODERATE INFLAMMATION WITH STEAKING DOWN TO THE PYLORUS IN THE ANTRUM, MILD INFLAMMAITON IN THE BODY, CARDIA, AND FUNDUS AND A SMALL HIATAL HERNIA ON RETROFLEXION> BIOPSIES OF THE STOMACH: BENIGN GASTRIC MUCOSA, WITH MILD GASTRITIS NEGATIVE FOR H. PYLORI. ESOPHAGUS: BENIGN ESOPHAGUS COMPATIBLE WITH REFLUX ESOPHAGITIS

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
クロストリジウム・ディフィシレ感染	X			X
帯状疱疹		X		X
四肢痛	X			

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	3[redacted]	FEMALE	WHITE

Medical History	Onset Year
EXTENSIVE UC/PANCOLITIS	20[redacted]
INFLAMMATORY BOWEL DISEASE: ULCERATIVE COLITIS	20[redacted]
OSTEOARTHRITIS: ANKLE PAIN	20[redacted]
OTHER: CHICKEN POX	19[redacted]

Prior Procedures	Procedure Year
SURGERY: FECAL MATTER TRANSPLANT FOR TREATMENT OF RECURRENT C-DIFFICILE	20[redacted]
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	FORMER	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 Placebo (IND)		ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 58	58

M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted]20[redacted] / 58 [redacted]20[redacted] / 261	204

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
MESALAZINE	2.4 g	QD	Y-M: 20[redacted]
INFLIXIMAB	5 mg/kg	OTHER: 4 WEEKS	Y-M: 20[redacted]
ADALIMUMAB	40 mg	OTHER: BI WEEL;Y	Y-M: 20[redacted]
AZATHIOPRINE	150 mg	QD	Y-M: 20[redacted]
VEDOLIZUMAB	300 mg	OTHER: 4	Y-M: 20[redacted]
METHOTREXATE	NOT REPORTED	NOT REPORTED	Y-M: 20[redacted]
BUDESONIDE	9 mg	OTHER: WEEKLY	Y-M: 20[redacted]
PREDNISONE	50 mg	QD	Y-M: 20[redacted] / -142
VANCOMYCIN	125 mg	QID	Y-M: 20[redacted] / -148

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
METHOTREXATE	NOT REPORTED	NOT REPORTED	Y-M: 20[redacted]	Not reported
VANCOMYCIN	125 mg	QID	Y-M: 20[redacted] / 133	Y-M: 20[redacted] / 142
TRAMADOL	50 mg	PRN	Y-M: 20[redacted] / 141	ONGOING
PREDNISONE	50 mg	QD	Y-M: 20[redacted] / 144	Y-M: 20[redacted] / 150
PREDNISONE	20 mg	TID	Y-M: 20[redacted] / 204	Y-M: 20[redacted] / 211
VALACICLOVIR	1 mg	QD	Y-M: 20[redacted] / 204	Y-M: 20[redacted] / 211
CEFTRIAXONE	1 g	QD	Y-M: 20[redacted] / 244	Y-M: 20[redacted] / 252
VANCOMYCIN	125 mg	QID	Y-M: 20[redacted] / 244	Y-M: 20[redacted] / 252

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

Event Description C-DIFFICILE INFECTION

Preferred term クロストリジウム・ディフィシレ感染

AE Onset Date / Initial Rx Day / Rx Day [redacted]20[redacted] / 189 / 132

Age at AE Onset 3[redacted]

Laboratory Testing

[redacted]20[redacted] (RX DAY -234): NPTST251-PLATELETS: 532 [130 - 400] KMCL; [redacted]20[redacted] (RX DAY 132): Leukocytes: 11.5 [4.8 - 10.8] 10^9/L; NPTST023-ALK PHOS: 0.4 [0.1 - 1.3] MG/DL; NPTST026-ALT: 5 [7 - 52] IU/L; NPTST040-AST: 26 [15 - 41] U/L; NPTST068-C-DIFFICILE: POSITIVE [NOT REPORTED - NOT REPORTED] UNIT NOT REPORTED; NPTST078-CHEMISTRY- BUN: 6 [7 - 25] MG/DL; NPTST079-CHEMISTRY- POTASSIUM: 3.0 [3.5 - 5.3] MMOL/L; NPTST080-CHEMISTRY-ALBUMIN: 3.0 [3.3 - 4.6] G/DL; NPTST081-CHEMISTRY-CALCIUM: 8.8

[8.6 - 10.3] MG/DL; NPTST084-CHEMISTRY-CREATININE: 0.75 [0.6 - 1.1] MG/DL; NPTST085-CHEMISTRY-SODIUM: 132 [136 - 144] MMOL/L; NPTST087-CHEMISTRYTOTAL PROTEIN: 7.4 [6 - 8.1] G/DL; NPTST096-CO2: 26 [22 - 32] MMOL/L; NPTST162-GLUCOSE: 98 [75 - 110] MG/DL; NPTST166-HEMOCRIT: 32.6 [37 - 47] %; NPTST167-HEMOGLOBIN: 10.4 [12 - 16] G/DL; NPTST251-PLATELETS: 532 [130 - 400] K/MCL

Microbiology

[redacted]20[redacted] (RX DAY 133): STOOL NPTST067-C-DIFF: Positive-C DIFFICILE

AE Stopped Initial Rx Day / Rx Day	199 / 142
Duration of AE	11 DAYS
Severity	SEVERE
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: Serious Adverse Event

Event Description	L FOOT PAIN
Preferred term	四肢痛
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 198 / 141
Age at AE Onset	3[redacted]

Laboratory Testing

[redacted]20[redacted] (RX DAY 142): Albumin: 24 [35 - 50] G/L; Calcium: 2.095884 [2.095884 - 2.619855] MMOL/L; NPTST059-BUN: 16 [9 - 20] MG/DL; NPTST082-CHEMISTRY-CARBON DIOXIDE: 26 [21 - 31] MEQ/L; NPTST083-CHEMISTRY-CHLORIDE: 99 [98 - 110] MEQ/L; NPTST084-CHEMISTRY-CREATININE: 0.5 [0.5 - 1.4] MG/DL; NPTST086-CHEMISTRY-UREA NITROGEN: 8 [7 - 22] MG/DL; NPTST162-GLUCOSE: 90 [60 - 99] MG/DL; Potassium: 3.9 [3.5 - 5.1] MMOL/L; Sodium: 137 [135 - 148] MMOL/L

Microbiology

NOT REPORTED

AE Stopped Initial Rx Day / Rx Day	202 / 145
Duration of AE	5 DAYS
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	PARTICIPANT HOSPITALIZED ON 4/20/18 FOR SEVERE FOOT PAIN RELATING TO ARTHRALGIA FROM ULCERATIVE COLITIS
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Event #3: AE Leading to Discontinuation of Study Drug, Event of Interest - Herpes Zoster

Event Description	SHINGLES
Preferred term	帯状疱疹
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 261 / 204
Age at AE Onset	3[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	306 / 249 (45 DAYS AFTER LAST TREATMENT)
Duration of AE	46 DAYS
Severity	MODERATE
Relation to Study Drug by Investigator	REASONABLE POSSIBILITY
Investigator Alternative Etiology	NOT APPLICABLE
Discontinued Study Drug Due to the Event	YES
SAE Criteria	NONE

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は米国の 3[redacted] 歳女性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，クロストリジウム・ディフィシレ感染の事象を発現した。関連する病歴は，潰瘍性大腸炎，クロストリジウム・ディフィシレ感染再発の治療のための糞便移植，非喫煙者及び元飲酒者（1 日 2 杯未満）であった。

Event 1 の臨床経過：

投与189日後＊　　，被験者はクロストリジウム・ディフィシレ感染を発現した。投与199日後＊，クロストリジウム・ディフィシレ感染は消失した。

投与189日後＊　，被験者は嘔吐，悪心及び腹痛があり，入院した。クロストリジウム・ディフィシレ感染と診断された。免疫抑制が危険因子であると考えられた。投与194日後＊　，被験

者は退院した。

投与された薬剤は，バンコマイシンであった。

Causality for ABT-494 (Open Label)

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1) Clostridium difficile infection (10054236) (Clostridium difficile infection (10054236)) [v.21.0] [10054236]

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

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

Dechallenge: Yes

Rechallenge: rechallenge was done, reaction did not recur

Alternative Etiology for ABT-494 (Open Label)

Event of C-DIFFICILE INFECTION

- Investigator: Not applicable.

- AbbVie: Event is more likely related to recurrence of pre-existing Clostridium difficile infection. Ulcerative colitis is an additional risk factor.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] ALBUMIN:**3.0 G/DL (normal 3.3 to 4.6)

[redacted] **20[redacted] ALT:** 5 IU/L (normal 7 to 52)

[redacted] **20[redacted] CT ABDOMEN AND PELVIS W IV CONTRAST:** Normal

[redacted] **20[redacted] HEMATOCRIT:** 32.6 % (normal 37 to 47)

[redacted] **20[redacted] HEMOGLOBIN:** 10.4 G/DL (normal 12.0 to 16.0)

[redacted] 20[redacted] **PLATELETS:** 532 X10**3/MCL (normal 130 to 400)

[redacted] 20[redacted] **POTASSIUM:** 3.0 MMOL/L (normal 3.5 to 5.3)

[redacted] 20[redacted] **SODIUM:** 132 MMOL/L (normal 136 to 144)

[redacted] 20[redacted] **STOOL TEST:** Positive C. difficile

[redacted] 20[redacted] **STOOL TEST:** Positive C. difficile

[redacted] 20[redacted] **WHITE BLOOD CELLS:** 11.5 X10**3/MM**3 (normal 4.8 to 10.8)
Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は米国の 3[redacted] 歳女性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，左足痛の事象を発現した。関連する病歴は，足関節痛，足痛及び変形性関節症であった。

Event 2 の臨床経過：

投与198日後＊，被験者は左足痛を発現した。

投与198日後＊　　，被験者は重度の急性左足痛及び足関節痛があり，入院した。投与202日後＊，被験者は退院した。投与202日後＊，左足痛は消失した。

投与された薬剤は，トラマドール及び prednisone であった。

Causality for ABT-494 (Open Label)

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1)　Foot pain (10016974)　(Pain in extremity (10033425))　[v.23.1]　[10016974]

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

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

Dechallenge: Not Applicable

Alternative Etiology for ABT-494 (Open Label)

Event of LEFT FOOT PAIN

- Investigator: PARTICIPANT HOSPITALIZED ON [redacted] FOR SEVERE FOOT PAIN RELATING TO ARTHRALGIA FROM ULCERATIVE COLITIS.

- AbbVie: EVENT IS MORE LIKELY RELATED TO PRE-EXISTING OSTEOARTHRITIS AND ANKLE PAIN.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] BUN:** 16 mg/dL (normal 9 to 20)

[redacted] **20[redacted] CALCIUM:** 8.4 mg/dL (normal 8.4 to 10.5)

[redacted] **20[redacted] CHEMISTRY-CARBON DIOXIDE:** 26 MEQ/L (normal 21 to 31)

[redacted] **20[redacted] CHEMISTRY-CHLORIDE:** 99 MEQ/L (normal 98 to 110)

[redacted] **20[redacted] CHEMISTRY-CREATININE:** 0.5 mg/dL (normal 0.5 to 1.4)

[redacted] **20[redacted] CHEMISTRY-UREA NITROGEN:** 8 mg/dL (normal 7 to 22)

[redacted] **20[redacted] GLUCOSE:** 90 mg/dL (normal 60 to 99)

[redacted] **20[redacted] POTASSIUM:** 3.9 MEQ/L (normal 3.5 to 5.1)

[redacted] **20[redacted] SODIUM:** 137 MEQ/L (normal 135 to 149)

[redacted] **20[redacted] ULTRASOUND LOWER L EXTREMITIES:** NO EVIDENCE OF DEEP VEIN THROMBOSIS

[redacted] **20[redacted] X- RAY OF L FOOT:** NO ACUTE OSSEOUS ABNORMALITIES

NON SERIOUS EVENTS AND **OTHER AREAS OF SAFETY INTEREST

Herpes zoster: Study drug discontinued. Discontinued study.

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
膵腺癌	X	X	X	X
血中クレアチンホスホキナーゼ増加				X
肺塞栓症				X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 30 mg	7[redacted]	FEMALE	WHITE

Medical History	Onset Year
EXTENSIVE UC/PANCOLITIS	20[redacted]
GASTROESOPHAGEAL REFLUX DISEASE	20[redacted]
HYPERLIPIDEMIA: TAKES TRICOR	19[redacted]
HYPOTHYROIDISM: TAKES SYNTHROID	19[redacted]
OTHER: ARTHRITIS, MOST DISCOMFORT IN HANDS, FEET, BACK. OCCASIONAL TYLENOL	20[redacted]
OTHER: BENIGN MOLES/LESIONS REMOVAL	20[redacted]
OTHER: C.DIFFICILE	20[redacted]
OTHER: GAS	20[redacted]
OTHER: INFERIOR VENA CAVA THROMBUS	20[redacted]
OTHER: LATERAL, MEDIAL MENISCUS TEAR	20[redacted]
OTHER: PAROXYSMAL ATRIAL FIBRILLATION	20[redacted]
OTHER: RECTAL POLYPS REMOVED	20[redacted]
OTHER: VARIOUS BENIGN CYSTS REMOVED FROM RIGHT ARM AND FINGERS	19[redacted]
OTHER: VITAMIN D DEFICIENCY	20[redacted]

Prior Procedures	Procedure Year
SURGERY: HYSTERECTOMY	19[redacted]
SURGERY: LUMPECTOMY RIGHT BREAST,BENIGN LUMP (TIMES 2) RIGHT BREAST	19[redacted]
SURGERY: PARTIAL COCCYX REMOVAL	19[redacted]
SURGERY: RIGHT EYE CATARACT SURGERY	20[redacted]
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	CURRENT	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 ABT-494 (IND)	30 mg	ORAL	QD	[redacted] / 1	[redacted] / 56	56
M14-234 SS3 ABT-494 (MAIN)	15 mg	ORAL	QD	[redacted] / 57	[redacted] / 365	309
M14-533 ABT-494 (LTE)	30 mg	ORAL	QD	[redacted] / 429	[redacted] / 836	408

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
HERPES ZOSTER IMMUNIZATION	NOT REPORTED	NOT REPORTED	Y-M: 20[redacted]
MERCAPTOPURINE	100 mg	QD	Y-M: 20[redacted]
INFLIXIMAB	5 mg/kg	OTHER: 8 WEEKS	Y-M: 20[redacted]
VEDOLIZUMAB	300 mg	OTHER: 8 WEEKS	Y-M: 20[redacted]
METHOTREXATE	25 mg	1 time per week	Y-M: 20[redacted]
CALCIUM CARBONATE	500 mg	PRN	Y-M: 20[redacted]
MESALAZINE	1000 mg	QD	Y-M: 20[redacted]
PREDNISONE	5 mg	QD	Y-M: 20[redacted]
ESTROGENS CONJUGATED	1 OTHER: APPLICATOR	PRN	Y-M: 20[redacted]
LOPERAMIDE	2 OTHER: TABLETS	PRN	Y-M: 20[redacted]
METOPROLOL	25 mg	QD	Y-M: 20[redacted] / -327
SALBUTAMOL	2 OTHER: PUFFS	PRN	Y-M: 20[redacted] / -290
POTASSIUM	595 mg	BID	Y-M: 20[redacted] / -240
POTASSIUM	595 mg	QD	Y-M: 20[redacted] / -226
VITAMIN E NOS	400 OTHER: UNITS	QD	Y-M: 20[redacted] / -8

WARFARIN	2.5-5 mg	QD	Y-M: 20[redacted] / -8
PARACETAMOL	650 mg	PRN	Y: 19[redacted]
VITAMINS NOS	1 OTHER: TABLET	QD	Y: 19[redacted]
FENOFIBRATE	145 mg	QD	Y: 20[redacted]
VITAMIN D NOS	4000 IU	QD	Y: 20[redacted]
CALCIUM	500 mg	BID	Y: 20[redacted]
FOLIC ACID	400 ug	QD	Y: 20[redacted]
MAGNESIUM	250 mg	QD	Y: 20[redacted]
LEVOTHYROXINE	88 ug	QD	Y: 20[redacted]
ADALIMUMAB	40 mg	OTHER: EVERY OTHER WEEK	Y: 20[redacted]
PREDNISONE	5 mg	QD	Y: 20[redacted]

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
CALCIUM CARBONATE	500 mg	PRN	Y-M: 20[redacted]	Y-M: 20[redacted] / -43
ESTROGENS CONJUGATED	1 OTHER: APPLICATOR	PRN	Y-M: 20[redacted]	Y-M: 20[redacted] / 434
LOPERAMIDE	2 OTHER: TABLETS	PRN	Y-M: 20[redacted]	Y-M: 20[redacted] / 434
METOPROLOL	25 mg	QD	Y-M: 20[redacted] / -327	Y-M: 20[redacted] / 434
SALBUTAMOL	2 OTHER: PUFFS	PRN	Y-M: 20[redacted] / -290	Y-M: 20[redacted] / 434
POTASSIUM	595 mg	BID	Y-M: 20[redacted] / -240	Y-M: 20[redacted] / -196
POTASSIUM	595 mg	QD	Y-M: 20[redacted] / -226	Y-M: 20[redacted] / 402
VITAMIN E NOS	400 OTHER: UNITS	QD	Y-M: 20[redacted] / -8	Y-M: 20[redacted] / 51
WARFARIN	2.5-5 mg	QD	Y-M: 20[redacted] / 68	Y-M: 20[redacted] / 330
ASCORBIC ACID	1000 mg	QD	Y-M: 20[redacted] / 122	Y-M: 20[redacted] / 152
DOCOSANOL	1 OTHER: APPLICATION	PRN	Y-M: 20[redacted] / 122	Y-M: 20[redacted] / 129
AMOXICILLIN;CLAVULANIC ACID	875-125 mg	BID	Y-M: 20[redacted] / 152	Y-M: 20[redacted] / 161
ASCORBIC ACID	1000 mg	QD	Y-M: 20[redacted] / 237	Y-M: 20[redacted] / 251
NITROFURANTOIN	100 mg	BID	Y-M: 20[redacted] / 247	Y-M: 20[redacted] / 251
INFLUENZA VACCINE	0.5 mL	QD	Y-M: 20[redacted] / 275	Y-M: 20[redacted] / 275
CEFALEXIN	500 mg	BID	Y-M: 20[redacted] / 295	Y-M: 20[redacted] / 301
BISACODYL	20 mg	QD	Y-M: 20[redacted] / 335	Y-M: 20[redacted] / 335

MACROGOL 3350	238 mg	QD	Y-M: 20[redacted] / 335	Y-M: 20[redacted] / 335
SIMETICONE	180 mg	QD	Y-M: 20[redacted] / 335	Y-M: 20[redacted] / 335
FENTANYL	100 OTHER: MCG	QD	Y-M: 20[redacted] / 336	Y-M: 20[redacted] / 336
MIDAZOLAM	7.5 mg	QD	Y-M: 20[redacted] / 336	Y-M: 20[redacted] / 336
WARFARIN	2.5-5 mg	QD	Y-M: 20[redacted] / 337	Y-M: 20[redacted] / 434
CEFALEXIN	500 mg	BID	Y-M: 20[redacted] / 392	Y-M: 20[redacted] / 398
DOCUSATE	100 mg	PRN	Y-M: 20[redacted] / 403	Y-M: 20[redacted] / 434
MAGNESIUM	400 mg	QD	Y-M: 20[redacted] / 403	Y-M: 20[redacted] / 434
MAGNESIUM HYDROXIDE	30 mL	PRN	Y-M: 20[redacted] / 403	Y-M: 20[redacted] / 434
MORPHINE	2 mg	PRN	Y-M: 20[redacted] / 403	Y-M: 20[redacted] / 408
ONDANSETRON	4 mg	PRN	Y-M: 20[redacted] / 403	Y-M: 20[redacted] / 408
PANTOPRAZOLE	40 mg	QD	Y-M: 20[redacted] / 403	Y-M: 20[redacted] / 408
POTASSIUM	40 mEq	QD	Y-M: 20[redacted] / 403	Y-M: 20[redacted] / 408
SODIUM CHLORIDE	1000 mL	QD	Y-M: 20[redacted] / 403	Y-M: 20[redacted] / 408
VITAMIN E NOS	400 IU	QD	Y-M: 20[redacted] / 403	Y-M: 20[redacted] / 434
CYCLOBENZAPRINE	5 mg	TID	Y-M: 20[redacted] / 408	Y-M: 20[redacted] / 434
PARACETAMOL	650 mg	PRN	Y: 19[redacted]	Y-M: 20[redacted] / 434
VITAMINS NOS	1 OTHER: TABLET	QD	Y: 19[redacted]	Y-M: 20[redacted] / 434
FENOFIBRATE	145 mg	QD	Y: 20[redacted]	Y-M: 20[redacted] / 434
VITAMIN D NOS	4000 IU	QD	Y: 20[redacted]	Y-M: 20[redacted] / 434
CALCIUM	500 mg	BID	Y: 20[redacted]	Y-M: 20[redacted] / 434
FOLIC ACID	400 ug	QD	Y: 20[redacted]	Y-M: 20[redacted] / 434
MAGNESIUM	250 mg	QD	Y: 20[redacted]	Y-M: 20[redacted] / 402
LEVOTHYROXINE	88 ug	QD	Y: 20[redacted]	Y-M: 20[redacted] / 434

Event #1: Event of Interest - Adjudicated Venous Thromboembolic Event

Event Description	PULMONARY EMBOLUS RIGHT LOWER LOBE
Preferred term	肺塞栓症
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 99 / -330 DAYS BEFORE TREATMENT
Age at AE Onset	7[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	862 / 434 (26 DAYS AFTER LAST TREATMENT)
Duration of AE	764 DAYS

Severity	MODERATE
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

Event #2: Event of Interest - Creatine Phosphokinase (CPK) Elevation

Event Description	ELEVATED CPK
Preferred term	血中クレアチンホスホキナーゼ増加
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 764 / 336
Age at AE Onset	7[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	862 / 434 (26 DAYS AFTER LAST TREATMENT)
Duration of AE	99 DAYS
Severity	MILD
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

Event #3: Serious Adverse Event, AE Leading to Discontinuation of Study Drug, Death, Event of Interest-Possible Malignancies, Event of Interest-Malignancy, Event of Interest-Malignancies Excl NMSC

Event Description	PANCREATIC ADENOCARCINOMA
Preferred term	膵腺癌
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 831 / 403
Age at AE Onset	7[redacted]
Laboratory Testing	
[redacted]20[redacted] (RX DAY 407): NPTST097-CORE BIOPSY: METASTATIC ADENOCARC [NOT REPORTED - NOT REPORTED] UNIT NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	862 / 434 (26 DAYS AFTER LAST TREATMENT)

Duration of AE	32 DAYS
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	AGE RELATED CANCER
Discontinued Study Drug Due to the Event	YES
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION, DEATH OF SUBJECT

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Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は米国の 7[redacted] 歳女性であり，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，致死性の膵腺癌の事象を発現した。関連する病歴は，高脂血症，甲状腺機能低下症，子宮摘出，右乳房腫瘤摘除，右乳房良性腫瘤（2 回），右腕及び指から切除された種々の良性嚢胞，ビタミン D 欠乏，発作性心房細動，潰瘍性大腸炎，良性ほくろ及び良性病変の切除，胃食道逆流性疾患，直腸ポリープ切除，関節炎，多数の不快感（手，足，背部），下大静脈血栓症，非喫煙者，現飲酒者（1 日 2 杯未満）及び肺癌の家族歴（母親）であった。

Event 2 の臨床経過：

投与831日後＊　　，被験者は膵腺癌を発現した。投与862日後＊　，被験者は死亡した。死因は，膵臓病変–膵腺癌であると報告された。剖検が行われたかは不明である。

入院以前の 4 週間，被験者は上腹部に痛みを経験していた。胸やけの薬物治療を開始しており，それが関連していると考えていた。更に，被験者は，腹部痛が持続し，下腹部痛も自覚したと報告した。被験者は，2 週間前（ 投与820日後＊　）にクリニックを受診し，尿路感染（非重篤）と診断され，尿路感染は投与826日後＊　　に抗生物質により消失した。しかしながら，腹部痛は持続した。

投与831日後＊　　，被験者は間欠的な腹部痛，浮動性めまい及び悪心（発熱又は悪寒はなし）を訴え，救急治療室を受診した。CT 検査及び MRI 検査を受け，検査結果は消化管科及び腫瘍科で評価された。投与836日後＊　，被験者は外来での生検結果の計画を立て，退院した。鎮痛薬，

腸の薬剤及びプロトンポンプ阻害薬を処方され，帰宅した。

カルテによると，被験者は，肝臓の広範な転移性病変を伴う転移性膵癌を発現した。全身状態が急速に悪化し，ゲムシタビンとアブラキサン併用の化学療法を受けていた。被験者は，凝血異常，高カルシウム血症，高血圧，消化管出血，急性腎障害，汎血球減少症及び低ナトリウム血症も発現した。消化管科及び腫瘍科の診察を受け，最大限の治療を受けたにもかかわらず，改善しなかった。被験者は緩和ケア科に移され，腫瘍科及び緩和ケア科での蘇生処置を拒否した。緩和のための薬物治療に切り替えられ，緩和ケア科によってフォローされた。被験者は死亡前の数日間，経口摂取しなかった。痛み，不安，息切れ及び便秘に対処するための薬剤を処方された。緩和ケア科によると，被験者は昏迷状態，覚醒不可能であり，おそらく無意識であった。その後，被験者は死亡した。

胆嚢摘出術，回旋筋腱板修復，結腸内視鏡検査，子宮内容除去術，円錐切除術，右膝関節鏡検査及び結腸手術を含む病歴が追加された。

投与された薬剤は，アブラキサン及びゲムシタビンであった。

The patient's past medications include:

6-MERCAPTOPURINE for ULCERATIVE COLITIS ([redacted] 20[redacted] - 20[redacted])

HUMIRA for ULCERATIVE COLITIS (20[redacted] - [redacted] 20[redacted])

PREDNISONE for ULCERATIVE COLITIS (20[redacted] - 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

REMICADE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

ENTYVIO for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

METHOTREXATE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

CANASA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Blinded)

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1) Pancreatic adenocarcinoma (10051971) (Adenocarcinoma pancreas (10052747)) [v.24.0] [10051971]

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 PANCREATIC ADENOCARCINOMA

- Investigator: Age related cancer

- AbbVie: Advancing age is a risk factor. In addition, per Johns Hopkins researchers, conservative estimates are that an average of 11.7 years elapses before the first cancer cell develops within a high grade pancreatic lesion, then another 6.8 years as the cancer grows and at least one cell has the potential to spread.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] BIOPSY: ULTRASOUND GUIDED BIOPSY:** Right lobe liver lesion core biopsy: metastatic carcinoma

[redacted] **20[redacted] BLOOD PRESSURE:** 145/59 mmHg

[redacted] **20[redacted] CA 19-9:** 10575 NO UNITS

[redacted] **20[redacted] CT ABD/PELVIS W/O ALL CONTRAST:** Pancreatic lesion, multiple liver lesions

[redacted] **20[redacted] CT ABDOMEN/PELVIS:** showed new atrophy of the pancreas body and tail with 3 cm probable mass at the junction of the pancreas head and body, consistent with neoplastic disease, prominent lymph node, nodal metastases, numerous scattered lesions in the liver.

[redacted] **20[redacted] HEART RATE:** 83 /min

[redacted] **20[redacted] MAGNETIC RESONANCE CHOLANGIOPANCREATOGRAPHY:** worrisome for metastatic pancreatic adenocarcinoma.

[redacted] **20[redacted] MRI MRCP W/O CONTRAST:** Findings worrisome for metastatic pancreatic adenocarcinoma

[redacted] **20[redacted] RESPIRATORY RATE:** 16 /min

[redacted] **20[redacted] SPO2:** 93 %

[redacted] **20[redacted] TEMPERATURE:** 36.5 Degrees C

NON SERIOUS EVENTS AND **OTHER AREAS OF SAFETY INTEREST

Pulmonary embolism: Shortness of breath.
Blood creatine phosphokinase increased: Asymptomatic. No alternative etiology.

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
扁平上皮癌				X
皮膚有棘細胞癌				X
舌扁平上皮癌				X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	6[redacted]	FEMALE	WHITE

Medical History	Onset Year
CHOLELITHIASIS	20[redacted]
DIABETES MELLITUS	20[redacted]
GASTROESOPHAGEAL REFLUX DISEASE	20[redacted]
HYPERLIPIDEMIA: HYPERLIPIDEMIA IS THE DIAGNOSIS	20[redacted]
HYPERTENSION	20[redacted]
LEFT SIDED UC	20[redacted]
OTHER: CHOLELITHTIASIS WITHOUT OBSTRUCTION	20[redacted]
OTHER: DEPRESSION	20[redacted]
OTHER: INSOMNIA	20[redacted]
OTHER: RHEUMATOID ARTHRITIS	20[redacted]

Prior Procedures	Procedure Year
SURGERY: DILATION AND CURETTAGE FOR MENORRHAGIA	19[redacted]
SURGERY: SEPTOPLASY FOR DEVIATED SEPTUM	19[redacted]
SURGERY: TUBAL LIGATION	19[redacted]
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	FORMER	1 PACK	25	19[redacted]
CIGARS	NEVER			
PIPES	NEVER			

Alcohol Use	Status	Number/Day
ALCOHOL	UNKNOWN	

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 ABT-494 (IND)	30 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 57	57
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted]20[redacted] / 58		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
HYDROCHLOROTHIAZIDE	12.5 mg	QD	Y-M: 20[redacted]
METOPROLOL	50 mg	BID	Y-M: 20[redacted]
MESALAZINE	2.4 g	QD	Y-M: 20[redacted]
MESALAZINE	4 g	QD	Y-M: 20[redacted]
SIMVASTATIN	40 mg	QD	Y-M: 20[redacted]
AMITRIPTYLINE	25 mg	QD	Y-M: 20[redacted]
MESALAZINE	4.8 g	QD	Y-M: 20[redacted]
HERPES ZOSTER IMMUNIZATION	NOT REPORTED	NOT REPORTED	Y-M: 20[redacted]
MESALAZINE	4 g	QD	Y-M: 20[redacted]
PREDNISONE	5 mg	QD	Y-M: 20[redacted]
FLUOXETINE	40 mg	QD	Y-M: 20[redacted]
PREDNISONE	5 mg	QD	Y-M: 20[redacted]
SULFASALAZINE	3 g	QD	Y-M: 20[redacted]
MESALAZINE	2.4 g	BID	Y-M: 20[redacted]
AZATHIOPRINE	100 mg	QD	Y-M: 20[redacted]
MESALAZINE	4.8 g	QD	Y-M: 20[redacted]
PREDNISONE	5 mg	QD	Y-M: 20[redacted]
MESALAZINE	4 g	QD	Y-M: 20[redacted]
PIOGLITAZONE	15 mg	QD	Y-M: 20[redacted]
MERCAPTOPURINE	50 mg	QD	Y-M: 20[redacted]
MESALAZINE	2.4 g	BID	Y-M: 20[redacted]
BUDESONIDE	3 mg	QD	Y-M: 20[redacted]
ADALIMUMAB	40 mg	OTHER: EVERY 2 WEEKS	Y-M: 20[redacted]

PREDNISONE	5 mg	QD	Y-M: 20[redacted]
PREDNISONE	5 mg	QD	Y-M: 20[redacted]
HYDROXYCHLOROQUINE	200 mg	QD	Y-M: 20[redacted]
INSULIN GLARGINE	32 OTHER: UNITS	QD	Y-M: 20[redacted]
METFORMIN	500 mg	QD	Y-M: 20[redacted]
PANTOPRAZOLE	40 mg	QD	Y-M: 20[redacted]
VEDOLIZUMAB	300 mg	OTHER: EVERY 8 WEEKS	Y-M: 20[redacted]

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
HYDROCHLOROTHIAZIDE	12.5 mg	QD	Y-M: 20[redacted]	ONGOING
METOPROLOL	50 mg	BID	Y-M: 20[redacted]	ONGOING
SIMVASTATIN	40 mg	QD	Y-M: 20[redacted]	ONGOING
AMITRIPTYLINE	25 mg	QD	Y-M: 20[redacted]	ONGOING
FLUOXETINE	40 mg	QD	Y-M: 20[redacted]	ONGOING
PIOGLITAZONE	15 mg	QD	Y-M: 20[redacted]	ONGOING
HYDROXYCHLOROQUINE	200 mg	QD	Y-M: 20[redacted]	ONGOING
INSULIN GLARGINE	32 OTHER: UNITS	QD	Y-M: 20[redacted]	ONGOING
METFORMIN	500 mg	QD	Y-M: 20[redacted]	ONGOING
PANTOPRAZOLE	40 mg	QD	Y-M: 20[redacted]	ONGOING
POTASSIUM	250 mg	QID	Y-M: 20[redacted] / 604	Not reported
DEXAMETHASONE	NOT KNOWN OTHER: NOT KNOWN	OTHER: NOT KNOWN	Y-M: 20[redacted] / 977	Y-M: 20[redacted] / 1006
REMDESIVIR	NOT KNOWN OTHER: NOT KNOWN	OTHER: NOT KNOWN	Y-M: 20[redacted] / 977	Y-M: 20[redacted] / 1006
CORTISONE	ONE OTHER: INJECTION	OTHER: ONCE	Y-M: 20[redacted] / 1044	Y-M: 20[redacted] / 1044

Event #1: Event of Interest - Possible Malignancies, Event of Interest - Malignancy, Event of Interest - Malignancies Excluding NMSC

Event Description	SQUAMOUS CELL CARCINOMA, FACE
Preferred term	扁平上皮癌
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 607 / 550
Age at Age Onset	7[redacted]
Laboratory Testing	
NOT APPLICABLE	

Microbiology

NOT APPLICABLE

AE Stopped Initial Rx Day / Rx Day	607 / 550
Duration of AE	1 DAY
Severity	MILD
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

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

Event Description	COVID-19 PNEUMONIA
Preferred term	COVID-19 肺炎
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 1057 / 1000
Age at AE Onset	7[redacted]

Laboratory Testing

[redacted]20[redacted] (RX DAY 996): Blood Urea Nitrogen: 15.70668 [2.85576 - 7.1394] MMOL/L; Creatinine: 141.445216 [44.20163 - 79.562934] UMOL/L; Leukocytes: 5.3 [4 - 11] 10^9/L; NPTST297-SARS-COV2 PCR: POSITIVE [NOT REPORTED - NOT REPORTED] UNIT NOT REPORTED

Microbiology

NOT REPORTED

AE Stopped Initial Rx Day / Rx Day	1063 / 1006
Duration of AE	7 DAYS
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	COVID-19
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Event #3: Event of Interest - Possible Malignancies, Event of Interest - Malignancy, Event of Interest - Non-melanoma Skin Cancer (NMSC)

Event Description	SQUAMOUS CELL CARCINOMA, SKIN
Preferred term	皮膚有棘細胞癌
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 1129 / 1072
Age at AE Onset	7[redacted]

Laboratory Testing

NOT APPLICABLE

Microbiology

NOT APPLICABLE

AE Stopped Initial Rx Day / Rx Day	1129 / 1072
Duration of AE	1 DAY
Severity	MILD
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

Event #4: Event of Interest - Possible Malignancies, Event of Interest - Malignancy, Event of Interest - Non-melanoma Skin Cancer (NMSC)

Event Description	SKIN SQUAMOUS CELL CARCINOMA OF UPPER CHEST
Preferred term	皮膚有棘細胞癌
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 1225 / 1168
Age at AE Onset	7[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	1225 / 1168
Duration of AE	1 DAY
Severity	MILD
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

Event #5: Event of Interest - Possible Malignancies, Event of Interest - Malignancy, Event of Interest - Malignancies Excluding NMSC

Event Description	SQUAMOUS CELL CARCINOMA OF LEFT TONGUE
Preferred term	舌扁平上皮癌
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 1247 / 1190
Age at AE Onset	7[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	

AE Stopped Initial Rx Day / Rx Day	NOT REPORTED
Duration of AE	NOT REPORTED
Severity	MILD
Relation to Study Drug by Investigator	REASONABLE POSSIBILITY
Investigator Alternative Etiology	NOT APPLICABLE
Discontinued Study Drug Due to the Event	NO
SAE Criteria	NONE

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Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は米国の 7[redacted] 歳女性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，COVID-19 肺炎の事象を発現した。関連する病歴は，元喫煙者（1 日 1 箱を 25 年間），高血圧，糖尿病，潰瘍性大腸炎，高脂血症及び関節リウマチであった。

Event 2 の臨床経過：

投与1057日後＊ ，被験者は COVID-19 肺炎を発現した。投与1063日後＊ ，COVID-19 肺炎は消失した。

本事象発現前，被験者に症状が現れる前に被験者の娘が COVID 検査で陽性となった。被験者は予防的に隔離され，投与1053日後＊ に病院を受診する 1 週間前に，頭痛，浮動性めまい，悪心，下痢及び咳嗽を発現した。

投与1053日後＊ ，被験者は入院した。症状及び徴候は，頭痛，咳嗽，下痢，悪心，食欲不振及び乏尿であった。入院時，被験者は COVID 検査で陽性となり，低酸素状態で体力が減退していた。被験者は，治療及び観察のため 10 日間入院した。身体検査，検体検査及び胸部 X 線検査が実施された。被験者は，COVID に関連する市中肺炎があることも判明した。被験者はレムデシビル及びデカドロンを 1 クール投与され，軽快した。投与1063日後＊ ，被験者は退院した。

投与された薬剤は，デカドロン及びレムデシビルであった。

The patient's past medications include:

ASACOL for ULCERATIVE COLITIS ([redacted])

ROWASA for ULCERATIVE COLITIS ([redacted])

LIALDA for ULCERATIVE COLITIS ([redacted])

PREDNISONE forULCERATIVE COLITIS ([redacted])

SULFASALAZINE for ULCERATIVE COLITIS ([redacted])

AZATHIOPRINE for ULCERATIVE COLITIS ([redacted])

MERCAPTOPURINE for ULCERATIVE COLITIS ([redacted])

ASACOL for ULCERATIVE COLITIS ([redacted])

UCERIS for ULCERATIVE COLITIS ([redacted])

HUMIRA for ULCERATIVE COLITIS ([redacted])

ENTYVIO for ULCERATIVE COLITIS ([redacted])

SHINGRIX for PREVENTATIVE MEASURE ([redacted])

Causality for UPADACITINIB (Open Label)

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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 (Open Label)

Event of COVID-19 PNEUMONIA

- Investigator: COVID-19

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

COVID-19 Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] BLOOD UREA NITROGEN:** 44 mg/dL (normal 8 to 20)

[redacted] **20[redacted] BMI:** 37.8 kg/m2

[redacted] **20[redacted] CHEST X-RAY:** Findings consistent with pneumonia in setting of +COVID testing

[redacted] **20[redacted] CREATININE:** 1.6 mg/dL (normal 0.5 to 0.9)

[redacted] **20[redacted] SARS-COV2 PCR TEST:** Nasopharyngeal swab: Positive for COVID-19

[redacted] **20[redacted] WHITE BLOOD CELLS:** 5.3 X10**3/MCL (normal 4 to 11)

NON SERIOUS EVENTS AND **OTHER AREAS OF SAFETY INTEREST

Squamous cell carcinoma ([redacted]20[redacted]): Surgical excision, uncomplicated.
Squamous cell carcinoma ([redacted]20[redacted]): Dermatology treated with liquid nitrogen.
Squamous cell carcinoma of skin ([redacted]20[redacted]): Surgical intervention MOHS procedure.
Squamous cell carcinoma of the tongue ([redacted]20[redacted]): Partial glossectomy. 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
血中クレアチンホスホキナーゼ増加				X
胃腸炎	X			X
細菌性肺炎	X			X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	5[redacted]	MALE	WHITE

Medical History	Onset Year
CHOLECYSTITIS: CHOLECYSTECTOMY	20[redacted]
EXTENSIVE UC/PANCOLITIS	20[redacted]
EYE DISEASE/DISORDER: CATARACT	20[redacted]
EYE DISEASE/DISORDER: LATTICE DEGENERATION OF THE R EYE	20[redacted]
EYE DISEASE/DISORDER: PERIPHERAL NEUROPATHY	20[redacted]
EYE DISEASE/DISORDER: RETINAL DETACHMENT	20[redacted]
OTHER: ENLARGED HEART	20[redacted]
OTHER: GRADE 2 INTERNAL HEMORRHOIDS	20[redacted]
OTHER: PROSTATE ENLARGEMENT	20[redacted]
OTHER: SLEEP APNEA	20[redacted]

Prior Procedures	Procedure Year
SURGERY: BURSITIS OF SHOULDER	20[redacted]
SURGERY: CATARACT REPAIR	20[redacted]
SURGERY: MICRO DISCECTOMY FOR BACK PAIN AND BULGING DISC	20[redacted]
SURGERY: RETINAL SURGERY	20[redacted]
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	FORMER	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 Placebo (IND)		ORAL	QD	[redacted] / 1	[redacted] / 56	56
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted] / 57	[redacted] / 1652	1596

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
VITAMINS NOS	UNKNOWN mg	QD	Y-M: [redacted]
AZATHIOPRINE	50 mg	QID	Y-M: [redacted]
ADALIMUMAB	80 mg	OTHER: EVERY OTHER WEEK	Y-M: [redacted]
HYDROCORTISONE	NOT REPORTED	NOT REPORTED	Y-M: [redacted]
VEDOLIZUMAB	300 mg	OTHER: EVERY 8 WEEKS	Y-M: [redacted]
MESALAZINE	1000 mg	QD	Y-M: [redacted]
USTEKINUMAB	NOT REPORTED	NOT REPORTED	Y-M: [redacted] / -331
SIMETICONE	UNKNOWN mg	PRN	Y-M: [redacted] / -239
PREDNISONE	UNKNOWN OTHER: UNKNOWN	QD	Y-M: [redacted] / -178
PREDNISONE	15 mg	QD	Y-M: [redacted] / -67
PROBIOTICS NOS	UNKNOWN mg	QD	Y-M: [redacted] / -42
SERENOA REPENS	UNKNOWN mg	QD	Y-M: [redacted] / -42
TIMOLOL	0.5 %	BID	Y-M: [redacted] / -56
FENTANYL	150 OTHER: MCG	OTHER: ONCE	Y-M: [redacted] / -1
MIDAZOLAM	6 mg	OTHER: ONCE	Y-M: [redacted] / -1
NIFEDIPINE	30 mg	QD	Y: [redacted]
BUDESONIDE	9 mg	QD	Y: [redacted]
MESALAZINE	4800 mg	OTHER: 6 TIMES PER DAY	Y: [redacted]

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
VITAMINS NOS	UNKNOWN mg	QD	Y-M: 20[redacted]	ONGOING
PROBIOTICS NOS	UNKNOWN mg	QD	Y-M: 20[redacted] / -42	Y-M: 20[redacted] / 261
SERENOA REPENS	UNKNOWN mg	QD	Y-M: 20[redacted] / -42	ONGOING
ALPHA-D-GALACTOSIDASE	UNK OTHER: UNKNOWN	PRN	Y-M: 20[redacted] / 13	Y-M: 20[redacted] / 522
PREDNISONE	30 mg	QD	Y-M: 20[redacted] / 105	Y-M: 20[redacted] / 156
PREGABALIN	600 mg	QD	Y-M: 20[redacted] / 151	Y-M: 20[redacted] / 244
PREDNISONE	27.5 mg	QD	Y-M: 20[redacted] / 157	Y-M: 20[redacted] / 163
PREDNISONE	25 mg	QD	Y-M: 20[redacted] / 164	Y-M: 20[redacted] / 170
PREDNISONE	22.5 mg	QD	Y-M: 20[redacted] / 171	Y-M: 20[redacted] / 178
PREDNISONE	20 mg	QD	Y-M: 20[redacted] / 179	Y-M: 20[redacted] / 185
PREDNISONE	17.5 mg	QD	Y-M: 20[redacted] / 186	Y-M: 20[redacted] / 192
PREDNISONE	15 mg	QD	Y-M: 20[redacted] / 193	Y-M: 20[redacted] / 210
CEFALEXIN	500 mg	QID	Y-M: 20[redacted] / 201	Y-M: 20[redacted] / 211
TRAMADOL	50 mg	PRN	Y-M: 20[redacted] / 201	Y-M: 20[redacted] / 201
PREDNISONE	12.5 mg	QD	Y-M: 20[redacted] / 211	Y-M: 20[redacted] / 222
PREDNISONE	10 mg	QD	Y-M: 20[redacted] / 223	Y-M: 20[redacted] / 229
PREDNISONE	7.5 mg	QD	Y-M: 20[redacted] / 231	Y-M: 20[redacted] / 236
PREDNISONE	5 mg	QD	Y-M: 20[redacted] / 237	Y-M: 20[redacted] / 243
PREDNISONE	2.5 mg	QD	Y-M: 20[redacted] / 244	Y-M: 20[redacted] / 250
COLECALCIFEROL	5000 IU	QD	Y-M: 20[redacted] / 293	Y-M: 20[redacted] / 339
LOPERAMIDE	UNK OTHER: UNK	PRN	Y-M: 20[redacted] / 310	Y-M: 20[redacted] / 506
DOCOSANOL	10 mg	PRN	Y-M: 20[redacted] / 334	ONGOING
FENTANYL	100 OTHER: MCG	OTHER: ONCE	Y-M: 20[redacted] / 336	Y-M: 20[redacted] / 336
MIDAZOLAM	4 mg	OTHER: ONCE	Y-M: 20[redacted] / 336	Y-M: 20[redacted] / 336
PREDNISONE	30 mg	QD	Y-M: 20[redacted] / 336	Y-M: 20[redacted] / 425
LORATADINE	10 mg	QD	Y-M: 20[redacted] / 348	Y-M: 20[redacted] / 505
PREDNISONE	27.5 mg	QD	Y-M: 20[redacted] / 426	Y-M: 20[redacted] / 453
TRAMADOL	50 mg	PRN	Y-M: 20[redacted] / 450	Y-M: 20[redacted] / 451
PREDNISONE	25 mg	QD	Y-M: 20[redacted] / 454	Y-M: 20[redacted] / 481
PREDNISONE	22.5 mg	QD	Y-M: 20[redacted] / 482	Y-M: 20[redacted] / 510
PREDNISONE	20 mg	QD	Y-M: 20[redacted] / 511	Y-M: 20[redacted] / 538
PREDNISONE	17.5 mg	QD	Y-M: 20[redacted] / 539	Y-M: 20[redacted] / 558
UNSPECIFIED HERBAL	1 OTHER: TABLET	QD	Y-M: 20[redacted] / 553	Y-M: 20[redacted] / 612

PREDNISONE	15 mg	QD	Y-M: 20[redacted] / 559	Y-M: 20[redacted] / 579
PREDNISONE	12.5 mg	QD	Y-M: 20[redacted] / 580	Y-M: 20[redacted] / 600
PREDNISONE	10 mg	QD	Y-M: 20[redacted] / 601	Y-M: 20[redacted] / 628
PREDNISONE	7.5 mg	QD	Y-M: 20[redacted] / 629	Y-M: 20[redacted] / 656
NEPAFENAC	1 gtt	QD	Y-M: 20[redacted] / 636	Y-M: 20[redacted] / 664
PREDNISONE	5 mg	QD	Y-M: 20[redacted] / 657	Y-M: 20[redacted] / 704
DIFLUPREDNATE	3 gtt	QD	Y-M: 20[redacted] / 664	Y-M: 20[redacted] / 687
AMOXICILLIN;CLAVULANIC ACID	875-125 mg	BID	Y-M: 20[redacted] / 761	Y-M: 20[redacted] / 768
BENZONATATE	100 mg	PRN	Y-M: 20[redacted] / 761	Y-M: 20[redacted] / 768
AZITHROMYCIN	500 mg	OTHER: ONCE	Y-M: 20[redacted] / 768	Y-M: 20[redacted] / 768
CEFTRIAXONE	1 g	OTHER: ONCE	Y-M: 20[redacted] / 768	Y-M: 20[redacted] / 768
CODEINE;PROMETHAZINE	6.25-10 mg	OTHER: Q6H PRN	Y-M: 20[redacted] / 768	Y-M: 20[redacted] / 772
HEPARIN	500 mg	OTHER: Q12H	Y-M: 20[redacted] / 768	Y-M: 20[redacted] / 772
IBUPROFEN	600 mg	OTHER: ONCE	Y-M: 20[redacted] / 768	Y-M: 20[redacted] / 768
KETOROLAC	60 mg	OTHER: ONCE	Y-M: 20[redacted] / 768	Y-M: 20[redacted] / 768
METHYLPREDNISOLONE	125 mg	OTHER: ONCE	Y-M: 20[redacted] / 768	Y-M: 20[redacted] / 768
METHYLPREDNISOLONE	60 mg	OTHER: Q6H	Y-M: 20[redacted] / 768	Y-M: 20[redacted] / 772
ONDANSETRON	4 mg	OTHER: Q6H PRN	Y-M: 20[redacted] / 768	Y-M: 20[redacted] / 772
PANTOPRAZOLE	40 mg	QD	Y-M: 20[redacted] / 768	Y-M: 20[redacted] / 772
PARACETAMOL	650 mg	OTHER: Q6H PRN	Y-M: 20[redacted] / 768	Y-M: 20[redacted] / 772
CEFDINIR	300 mg	BID	Y-M: 20[redacted] / 772	Y-M: 20[redacted] / 774
VANCOMYCIN	125 mg	QID	Y-M: 20[redacted] / 772	Y-M: 20[redacted] / 787
CYANOCOBALAMIN	500 mg	QD	Y-M: 20[redacted] / 782	ONGOING
ATORVASTATIN	20 mg	QD	Y-M: 20[redacted] / 1301	ONGOING
ESOMEPRAZOLE	20 mg	QD	Y-M: 20[redacted] / 1444	ONGOING
EZETIMIBE	10 mg	QD	Y-M: 20[redacted] / 1451	ONGOING
NIFEDIPINE	30 mg	QD	Y: 20[redacted]	ONGOING

Event #1: Event of Interest - Creatine Phosphokinase (CPK) Elevation

Event Description	ELEVATED CPK
Preferred term	血中クレアチンホスホキナーゼ増加
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 226 / 170
Age at AE Onset	5[redacted]

Laboratory Testing

NOT APPLICABLE

Microbiology

NOT APPLICABLE

AE Stopped Initial Rx Day / Rx Day	392 / 336
Duration of AE	167 DAYS
Severity	MILD
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 #2: Event of Interest - Creatine Phosphokinase (CPK) Elevation

Event Description	ELEVATED CPK
Preferred term	血中クレアチンホスホキナーゼ増加
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 478 / 422
Age at AE Onset	6[redacted]

Laboratory Testing

NOT APPLICABLE

Microbiology

NOT APPLICABLE

AE Stopped Initial Rx Day / Rx Day	825 / 769
Duration of AE	348 DAYS
Severity	MILD
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: Serious Adverse Event, Event of Interest - Serious Infections

Event Description	BACTERIAL PNEUMONIAE
Preferred term	細菌性肺炎
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 824 / 768
Age at AE Onset	6[redacted]

Laboratory Testing

NOT REPORTED

Microbiology

[redacted]20[redacted] (RX DAY 769): BLOOD NPTST094-CMV IGG: Positive-CMVIGG REACTIVE; BLOOD NPTST177-HISTOPLASMA PNEUMONIAE IGG, ICM: Positive-3.02; [redacted]20[redacted] (RX DAY 770): STOOL NPTST320-TOXINGENIC C DIFFICILE BY AMPLI: Positive-POSITIVE

AE Stopped Initial Rx Day / Rx Day	838 / 782
Duration of AE	15 DAYS
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	PI DETERMINED NOT DRUG RELATED. CAUSE IS BACTERIAL PER PI ASSESSMENT
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Event #4: Serious Adverse Event, Event of Interest - Serious Infections

Event Description	SEVERE GASTROENTERITIS
Preferred term	胃腸炎
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 941 / 885
Age at AE Onset	6[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	972 / 916
Duration of AE	32 DAYS
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	SUBJECT WAS AROUND SICK FAMILY MEMBER
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Event #5: Event of Interest - Creatine Phosphokinase (CPK) Elevation

Event Description	ELEVATED CK
Preferred term	血中クレアチンホスホキナーゼ増加
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 1408 / 1352
Age at AE Onset	6[redacted]
Laboratory Testing	
NOT APPLICABLE	

Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	ONGOING
Duration of AE	ONGOING
Severity	MILD
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]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は米国の 6[redacted] 歳男性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，細菌性肺炎の事象を発現した。関連する病歴は，心肥大，広範囲な潰瘍性大腸炎（全大腸炎型），睡眠時無呼吸，非喫煙者及び元飲酒者（1 日 2 杯未満）であった。

Event 3 の臨床経過：

投与824日後＊　，被験者は細菌性肺炎を発現した。投与838日後＊　　，細菌性肺炎は消失した。

本事象発現の約 10 日前，被験者は建築作業中にコウモリの糞に曝露した。2–3 日後，被験者は咳嗽を伴う発熱の悪化を発現した。被験者は緊急医療センターを受診し，非重篤な気管支炎及び副鼻腔感染と診断された。被験者は薬物療法を開始した。被験者は，息切れの悪化，咳嗽及び粘稠性の緑色痰の排出困難のため緊急医療センターを再受診した。被験者は薬物療法により改善しなかった。被験者は疲労，発汗し，体温は華氏 103°F 超であり，心拍数上昇が認められた。

投与824日後＊　，被験者は入院した。投与825日後＊　，ヒストプラスマ肺炎抗体の血液検査では陽性であったが，血液培養では陰性であった。入院中に，被験者は診断され，非重篤なク

ロストリジウム・ディフィシレに対する治療を受けた。投与828日後＊ ，被験者は退院した。

治験責任医師は，CMV IgG 検査陽性は遠い過去（6 ヵ月超前）の CMV 曝露を示していたと述べた。活動性感染は示されず，臨床的に重大ではなかった。治験責任医師は，肺炎の結果を示す画像はなかったとも述べた。

投与された薬剤は，アジスロマイシン，ketorolac，プロメタジン-コデイン，オンダンセトロン，アセトアミノフェン，パントプラゾール，ヘパリン，メチルプレドニゾロン，イブプロフェン，セフジニル，バンコマイシン及びセフトリアキソンであった。

The patient's past medications include:

ASACOL for ULCERATIVE COLITIS (20[redacted] - [redacted] 20[redacted])

UCERIS for ULCERATIVE COLITIS (20[redacted] - 20[redacted])

IMURAN for ULCERATIVE COLITIS ([redacted] 20[redacted] - 20[redacted])

HUMIRA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

CORTIFOAM for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

ENTYVIO for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

CANASA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

STELARA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

PREDNISONE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Open Label)

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1) Pneumonia bacterial (10060946) (Pneumonia bacterial (10060946)) [v.22.0] [10060946]

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 (Open Label)

Event of BACTERIAL PNEUMONIAE

- Investigator: PI DETERMINED NOT DRUG RELATED. CAUSE IS BACTERIAL PER PI ASSESSMENT

- AbbVie: Risk factors include obesity, sleep apnea and Inflammatory bowel disease , conditions that increase the risk to develop pneumonia

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] BLOOD CULTURE:** Culture negative for sepsis

20[redacted] BODY TEMPERATURE: 103 F

[redacted] **20[redacted] BODY TEMPERATURE:** 104 F

[redacted] **20[redacted] CHEST CT:** No cardiopulmonary process

[redacted] **20[redacted] CHEST XRAY:** normal

[redacted] **20[redacted] CHEST XRAY:** No acute cardiopulmonary process

[redacted] **20[redacted] CMV IGG:** positive: CMVIGG Reactive

[redacted] **20[redacted] FLEXIBLE SIGMOIDOSCOPY:** No normal mucosa (pancolitis).

[redacted] **20[redacted] HEART RATE:** 120 /min

[redacted] **20[redacted] HISTOPLASMA PNEUMONIAE IGG, ICM AB:** positive- 3.02

[redacted] **20[redacted] STOOL TOXINGENIC C DIFFICILE BY AMPLIFIED DNA:** Positive
Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は米国の 6[redacted] 歳男性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，高度の胃腸炎の事象を発現した。関連する病歴は，非喫

煙者及び元飲酒者（1 日 2 杯未満）であった。

Event 4 の臨床経過：

投与941日後＊　，被験者は高度の胃腸炎を発現した。投与972日後＊　　，高度の胃腸炎は消失した。

入院前日に，被験者は来訪した胃腸症状を呈する家族 1 名と接触した。接触の翌日，被験者は下痢及び大量嘔吐の症状を発症し，嘔吐は改善しているようであった。被験者は身震い及び悪寒を発現したため，体を温めるために温浴した。看護師である被験者の娘は，被験者の指が青いことに気付き，被験者の酸素飽和度は 80%台と低かった。同日（ 投与941日後＊　），救急車が出動要請され，被験者は救急治療室へ搬送された。

投与941日後＊　　，被験者は嘔吐及び下痢のため入院した。被験者は，胸痛，動悸，息切れ，湿性咳嗽，ふくらはぎ痛，下肢浮腫，起坐呼吸又は発作性夜間呼吸困難を否定した。被験者は，吐血，血便，メレナ又は泌尿器系愁訴を否定した。静脈内輸液が投与された。薬剤は投与されなかった。投与943日後＊，被験者は退院した。

The patient's past medications include:

ASACOL for ULCERATIVE COLITIS (20[redacted] - [redacted] 20[redacted])

IMURAN for ULCERATIVE COLITIS ([redacted] 20[redacted] - 20[redacted])

HUMIRA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

ENTYVIO for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

CANASA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted]

STELARA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

PREDNISONE for ULCERATIVE COLITIS and UC FLARE ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted], [

OTC IMMODIUM for LOOSE STOOLS AND DIARRHEA ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Open Label)

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1) Gastroenteritis (10017888) (Gastroenteritis (10017888)) [v.24.0] [10017888]

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 (Open Label)

Event of SEVERE GASTROENTERITIS

- Investigator: Patient was around sick family member.

- AbbVie: Event is more likely due to contact with family member with similar gastrointestinal symptoms. Additionally, event is common in general population

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] CT SCAN:** NOT REPORTED

[redacted] **20[redacted] SPO2:** in the 80s

NON SERIOUS EVENTS AND **OTHER AREAS OF SAFETY INTEREST

Blood creatine phosphokinase increased ([redacted] 20[redacted]): Asymptomatic, related to vigorous physical activity.
Blood creatine phosphokinase increased ([redacted] 20[redacted]): Asymptomatic, related to vigorous physical activity.
Blood creatine phosphokinase increased ([redacted] 20[redacted]): Asymptomatic. No alternative etiology.

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
大腸菌感染	X			X
敗血症	X			X

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	4[redacted]	FEMALE	WHITE

Medical History	Onset Year
ANEMIA: SUBJECT IS CURRENTLY TAKING IRON SUPPLEMENTS	20[redacted]
EXTENSIVE UC/PANCOLITIS	20[redacted]
GASTROESOPHAGEAL REFLUX DISEASE: ACID REFLUX	20[redacted]
HYPERTENSION	20[redacted]
OTHER: ANXIETY	20[redacted]
OTHER: DX'D WITH CERVICAL CANCER AND SUCCESSFULLY TREATED AT THE AGE OF 2[redacted].	19[redacted]
OTHER: HEMORRHOIDS	20[redacted]
OTHER: JOINT PAIN	20[redacted]
OTHER: RIGHT SIDE FLANK PAIN	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	FORMER	Less than 2 DRINKS

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 Placebo (IND)		ORAL	QD	[redacted] / 1	[redacted] / 63	63
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted] / 63	[redacted] / 420	358

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
ALPRAZOLAM	0.5 mg	OTHER: AT BEDTIME	Y-M: [redacted]
QUETIAPINE	25 mg	OTHER: AT BEDTIME	Y-M: [redacted]
INFLIXIMAB	10 mg	OTHER: EVERY 4 WEEKS	Y-M: [redacted]
MESALAZINE	3200 mg	QD	Y-M: [redacted]
PREDNISONE	5 mg	QD	Y-M: [redacted]
HYDROCODONE;PARACETAMOL	7.5-325 mg	PRN	Y-M: [redacted] / -158
PANTOPRAZOLE	40 mg	BID	Y-M: [redacted] / -51

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
ALPRAZOLAM	0.5 mg	OTHER: AT BEDTIME	Y-M: [redacted]	ONGOING
QUETIAPINE	25 mg	OTHER: AT BEDTIME	Y-M: [redacted]	ONGOING
HYDROCODONE;PARACETAMOL	7.5-325 mg	PRN	Y-M: [redacted] / -158	ONGOING
IRON	325 mg	QD	Y-M: [redacted] / 57	ONGOING
PANTOPRAZOLE	20 mg	BID	Y-M: [redacted] / 88	Y-M: [redacted] / 341
BUDESONIDE	9 mg	QD	Y-M: [redacted] / 266	Y-M: [redacted] / 342
AMOXICILLIN	500 mg	TID	Y-M: [redacted] / 330	Y-M: [redacted] / 339
ONDANSETRON	4 mg	OTHER: ONCE	Y-M: [redacted] / 342	Y-M: [redacted] / 342
PROCHLORPERAZINE	10 mg	PRN	Y-M: [redacted] / 342	Y-M: [redacted] / 350
CEFEPIME	2000 mg	OTHER: ONCE	Y-M: [redacted] / 343	Y-M: [redacted] / 343
CEFTRIAXONE	1000 mg	QD	Y-M: [redacted] / 343	Y-M: [redacted] / 343
DICYCLOVERINE	20 mg	OTHER: ONCE	Y-M: [redacted] / 343	Y-M: [redacted] / 343
DIPHENHYDRAMINE	25 mg	OTHER: ONCE	Y-M: [redacted] / 343	Y-M: [redacted] / 343
ENOXAPARIN	40 mg	QD	Y-M: [redacted] / 343	Y-M: [redacted] / 350

FAMOTIDINE	20 mg	BID	Y-M: 20[redacted] / 343	Y-M: 20[redacted] / 348
LORAZEPAM	1 mg	OTHER: ONCE	Y-M: 20[redacted] / 343	Y-M: 20[redacted] / 343
METHYLPREDNISOLONE	125 mg	OTHER: ONCE	Y-M: 20[redacted] / 343	Y-M: 20[redacted] / 344
METRONIDAZOLE	500 mg	OTHER: Q8H	Y-M: 20[redacted] / 343	Y-M: 20[redacted] / 343
MORPHINE	4 mg	OTHER: ONCE	Y-M: 20[redacted] / 343	Y-M: 20[redacted] / 343
MUPIROCIN	2 %	OTHER: ONCE	Y-M: 20[redacted] / 343	Y-M: 20[redacted] / 343
PARACETAMOL	650 mg	PRN	Y-M: 20[redacted] / 343	Y-M: 20[redacted] / 350
VANCOMYCIN	2000 mg	OTHER: ONCE	Y-M: 20[redacted] / 343	Y-M: 20[redacted] / 343
CEFTRIAXONE	1000 mg	QD	Y-M: 20[redacted] / 345	Y-M: 20[redacted] / 350
CALCIUM CARBONATE	500 mg	OTHER: Q4H	Y-M: 20[redacted] / 348	Y-M: 20[redacted] / 350
FAMOTIDINE	20 mg	QD	Y-M: 20[redacted] / 348	ONGOING
CEFAZOLIN	2000 mg	OTHER: Q8H	Y-M: 20[redacted] / 349	Y-M: 20[redacted] / 350
CEFALEXIN	500 mg	OTHER: Q8H	Y-M: 20[redacted] / 350	Y-M: 20[redacted] / 355

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

Event Description	SEPSIS, E. COLI
Preferred term	大腸菌感染，敗血症
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 404 / 342
Age at AE Onset	4[redacted]

Laboratory Testing

NOT REPORTED

Microbiology

[redacted]20[redacted] (RX DAY 342): BLOOD NPTST136-ESCHERICHIA COLI: Positive-CULTURE RESULT POSITIVE DURING INPT STAY

AE Stopped Initial Rx Day / Rx Day	412 / 350
Duration of AE	9 DAYS
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	EXACT CAUSE OF INFECTION IS UNKNOWN. THERE ARE MULTIPLE WAYS THE SUBJECT COULD HAVE GOTTEN E. COLI
Discontinued Study Drug Due to the Event	NO
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION

Generated: [redacted]20[redacted]:16:51

Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は米国の 4[redacted] 歳女性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，敗血症（大腸菌）の事象を発現した。関連する病歴は，貧血，潰瘍性大腸炎，高血圧，非喫煙者及び元飲酒者（1 日 2 杯未満）であった。

Event 1 の臨床経過：

投与404日後＊　，被験者は敗血症（大腸菌）を発現した。投与412日後＊　，敗血症（大腸菌）は消失した。

被験者は高熱，悪寒，嘔吐及び脱水があり，救急治療室を受診した。投与404日後＊　，被験者は入院した。血液培養では大腸菌陽性であった。投与412日後＊，被験者は退院した。

治験薬の投与は本事象により完全に中止された。

投与された薬剤は，benadryl，pepcid，セファゾリン，ソル・メドロール，zofran，フラジール，tums，ケフレックス，セフトリアキソン，セフェピム，モルヒネ，バンコマイシン，ムピロシン，bentyl，タイレノール，lovenox，compazine 及び ativan であった。

The patient's past medications include:

ASACOL for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

PREDNISONE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

REMICADE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

UCERIS for UC ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Open Label)

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1)　Sepsis (10040047)　(Sepsis (10040047))　[v.23.0]　[10040047]

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

Causality as per Mfr. (Drug/Vaccine): Reasonable possibility

Dechallenge: Yes

Rechallenge: No rechallenge was done, recurrence is not applicable

2) Escherichia infection (10061126) (Escherichia infection (10061126)) [v.23.0] [10061126]

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

Causality as per Mfr. (Drug/Vaccine): Reasonable possibility

Dechallenge: Yes

Rechallenge: No rechallenge was done, recurrence is not applicable

Alternative Etiology for UPADACITINIB (Open Label)

Event of SEPSIS, E COLI

- Investigator: Exact cause of infection is unknown. There are multiple ways the subject could have gotten E. Coli

- AbbVie: Not applicable

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] ABDOMINAL X-RAY:** no evidence of acute process within the chest or abdomen. Adynamic ileus is suspect.

[redacted] **20[redacted] BLOOD CULTURE:** Escherichia Coli Positive. Culture result positive during inpatient stay

[redacted] **20[redacted] CHEST CT:** No distinct CT finding of pulmonary embolism

[redacted] **20[redacted] CHEST XRAY:** Nonspecific, nonobstructive intestinal gas pattern again noted, with relative paucity of intestinal gas again seen. No acute cardiopulmonary abnormalities identified.

[redacted] **20[redacted] CHEST XRAY**: Examination demonstrates a nonspecific bowel gas pattern. No evidence of intestinal obstruction. There is no evidence of dilation of large or small bowel

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
アスパラギン酸アミノトランスフェラーゼ増加				X
肩回旋筋腱板症候群	X			

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	4[redacted]	MALE	WHITE

Medical History	Onset Year
DEPRESSION: DEPRESSION	20[redacted]
LEFT SIDED UC	20[redacted]
OTHER: ANXIETY	20[redacted]
OTHER: BACK PAIN FROM CAR ACCIDENT IN 20[redacted]	20[redacted]
OTHER: HYPERTENSION	20[redacted]
OTHER: LOW IRON	20[redacted]
OTHER: MITRAL VALVE PROLAPSE	20[redacted]
OTHER: NECK PAIN FROM CAR ACCIDENT IN 20[redacted]	20[redacted]

Prior Procedures	Procedure Year
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

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

Alcohol Use	Status	Number/Day
ALCOHOL	UNKNOWN	

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 ABT-494 (IND)	30 mg	ORAL	QD	[redacted] / 1	[redacted] / 57	57
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted] / 57		

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
SULFASALAZINE	1500 mg	BID	Y-M: [redacted]
HYDROCHLOROTHIAZIDE;LISINOPRIL	20 12.5 mg	QD	Y-M: [redacted]
INFLIXIMAB	10 mg	OTHER: Q6WEEKS	Y-M: [redacted]
IRON	142 mg	QD	Y-M: [redacted]
SERTRALINE	150 mg	QD	Y-M: [redacted]
VITAMIN B COMPLEX	1000 mg	QD	Y-M: [redacted]
CIPROFLOXACIN	250 mg	BID	Y-M: [redacted] / -352
AZATHIOPRINE	75 mg	BID	Y-M: [redacted] / -271
MESALAZINE	1000 mg	PRN	Y-M: [redacted] / -216
PARACETAMOL	650 mg	PRN	Y-M: [redacted] / -192
PREDNISONE	20 mg	QD	Y-M: [redacted] / -119
ASCORBIC ACID	500 mg	QD	Y-M: [redacted] / -135
AMLODIPINE	5 mg	QD	Y-M: [redacted] / -28
GUAIFENESIN	600 mg	QD	Y-M: [redacted] / -45

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
HYDROCHLOROTHIAZIDE;LISINOPRIL	20 12.5 mg	QD	Y-M: [redacted]	ONGOING
SERTRALINE	150 mg	QD	Y-M: [redacted]	Y-M: [redacted] / 923
VITAMIN B COMPLEX	1000 mg	QD	Y-M: [redacted]	ONGOING
PARACETAMOL	650 mg	PRN	Y-M: [redacted] / -192	ONGOING
ASCORBIC ACID	500 mg	QD	Y-M: [redacted] / -135	ONGOING
AMLODIPINE	5 mg	QD	Y-M: [redacted] / -28	ONGOING
GUAIFENESIN	600 mg	QD	Y-M: [redacted] / -45	ONGOING
CYCLOBENZAPRINE	5 mg	PRN	Y-M: [redacted] / 485	Y-M: [redacted] / 661
CYCLOBENZAPRINE	5 mg	TID	Y-M: [redacted] / 513	Y-M: [redacted] / 570

SIMVASTATIN	20 mg	QD	Y-M: 20[redacted] / 533	Not reported
BETAMETHASONE;SODIUM PHOSPHATE	2 mL	PRN	Y-M: 20[redacted] / 540	Y-M: 20[redacted] / 540
ROPIVACAINE	4 mL	PRN	Y-M: 20[redacted] / 540	Y-M: 20[redacted] / 540
BETAMETHASONE;SODIUM PHOSPHATE	2 mL	OTHER: ONCE	Y-M: 20[redacted] / 661	Y-M: 20[redacted] / 661
ROPIVACAINE	4 mL	OTHER: ONCE	Y-M: 20[redacted] / 661	Y-M: 20[redacted] / 661
FENTANYL	50 OTHER: MCG	OTHER: ONCE	Y-M: 20[redacted] / 675	Y-M: 20[redacted] / 675
MIDAZOLAM	1 mg	OTHER: ONCE	Y-M: 20[redacted] / 675	Y-M: 20[redacted] / 675
POTASSIUM	UNKNOWN mg	QD	Y-M: 20[redacted] / 742	Not reported
BETAMETHASONE;SODIUM PHOSPHATE	2 mL	PRN	Y-M: 20[redacted] / 757	Y-M: 20[redacted] / 757
ROPIVACAINE	4 mL	PRN	Y-M: 20[redacted] / 757	Y-M: 20[redacted] / 757
ONDANSETRON	8 mg	OTHER: EVERY 8 HOURS	Y-M: 20[redacted] / 806	Y-M: 20[redacted] / 813
OXYCODONE;PARACETAMOL	5-325 mg	OTHER: EVERY 4 HOURS	Y-M: 20[redacted] / 806	Y-M: 20[redacted] / 813
SERTRALINE	200 mg	QD	Y-M: 20[redacted] / 924	ONGOING
HYDROCODONE;PARACETAMOL	5-325 mg	OTHER: Q6H	Y-M: 20[redacted] / 980	Not reported
TRAZODONE	50 mg	QD	Y-M: 20[redacted] / 980	Not reported
FENTANYL	100 OTHER: MCG	OTHER: ONCE	Y-M: 20[redacted] / 1014	Y-M: 20[redacted] / 1014
MIDAZOLAM	4 mg	OTHER: ONCE	Y-M: 20[redacted] / 1014	Y-M: 20[redacted] / 1014
DICYCLOVERINE	10 mg	TID	Y-M: 20[redacted] / 1031	Y-M: 20[redacted] / 1099
HYOSCYAMINE	0.125 mg	QD	Y-M: 20[redacted] / 1031	Y-M: 20[redacted] / 1099
ZOLPIDEM	5 mg	QD	Y-M: 20[redacted] / 1174	Not reported
BUPIVACAINE	5 mg	OTHER: ONCE	Y-M: 20[redacted] / 1175	Y-M: 20[redacted] / 1175
DICLOFENAC	1 %	OTHER: ONCE	Y-M: 20[redacted] / 1175	Y-M: 20[redacted] / 1175
LIDOCAINE	200 mg	OTHER: ONCE	Y-M: 20[redacted] / 1175	Y-M: 20[redacted] / 1175
TRIAMCINOLONE	40 mg	OTHER: ONCE	Y-M: 20[redacted] / 1175	Y-M: 20[redacted] / 1175
DICYCLOVERINE	10 mg	TID	Y-M: 20[redacted] / 1256	Not reported
HYOSCYAMINE	0.125 mg	PRN	Y-M: 20[redacted] / 1256	Not reported
HYDROCORTISONE	UNKOWN OTHER: UNKNOWN	PRN	Y-M: 20[redacted] / 1290	Not reported
TRAMADOL	50 mg	PRN	Y-M: 20[redacted] / 1290	Not reported
FENTANYL	100 OTHER: MCG	OTHER: ONCE	Y-M: 20[redacted] / 1346	Y-M: 20[redacted] / 1346
MIDAZOLAM	4 mg	OTHER: ONCE	Y-M: 20[redacted] / 1346	Y-M: 20[redacted] / 1346

Event #1: Event of Interest - Hepatic Disorder

Event Description	ELEVATED ALT AND AST
Preferred term	アラニンアミノトランスフェラーゼ増加，アスパラギン酸アミノトランスフェラーゼ増加
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 562 / 506
Age at AE Onset	4[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	NOT REPORTED
Duration of AE	NOT REPORTED
Severity	MILD
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 #2: Serious Adverse Event

Event Description	RIGHT SHOULDER IMPINGEMENT SYNDROME DIAGNOSED ON [redacted]20[redacted]
Preferred term	肩回旋筋腱板症候群
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 569 / 513
Age at AE Onset	4[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	NOT REPORTED
Duration of AE	NOT REPORTED
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	UNKNOWN
Discontinued Study Drug Due to the Event	NO
SAE Criteria	IMPORTANT MEDICAL EVENT REQUIRING MEDICAL OR SURGICAL INTERVENTION

Generated: [redacted]20[redacted]:16:51
Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は米国の 4[redacted] 歳男性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，投与597日後＊　に診断された右肩インピンジメント症候群の事象を発現した。関連する病歴は，事故による頚部痛（19[redacted] 年），潰瘍性大腸炎，非喫煙者及び禁酒であった。

Event 2 の臨床経過：

投与569日後＊，被験者は右肩インピンジメント症候群を発現し，投与597日後＊　に診断された。

手術前，被験者は 投与の約19ヵ月後＊に右肩痛を発現し始め，右肩インピンジメント症候群及び変形性関節症と診断された。

投与854日後＊　，被験者は手術のため入院した。同日，被験者は右肩インピンジメント症候群の矯正手術を受けた。投与854日後＊　，被験者は退院した。被験者は 12 週間の術後理学療法を開始した。

被験者は環境サービス業に従事しており，ゴミの交換，清掃の反復運動を行っていた。

投与された薬剤は，percocet，flexeril，bethamethasone acetate sodium PHOS 及び naropin であった。

The patient's past medications include:

SULFASALAZINE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

REMICADE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

CIPRO for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

AZATHIOPRINE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

CANASA for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

PREDNISONE for UC FLARE ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Open Label)

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1) Impingement syndrome shoulder (10049039) (Rotator cuff syndrome (10039227)) [v.24.0] [10049039]

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

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

Dechallenge: No

Alternative Etiology for UPADACITINIB (Open Label)

Event of RIGHT SHOULDER IMPINGEMENT SYNDROME DIAGNOSED ON [redacted]20[redacted]

- Investigator: Unknown

- AbbVie: Shoulder impingement syndrome (SIS) is attributed to the compression of structures around the glenohumeral joint that occur with shoulder elevation. Event not consistent with study drug's mechanism of action. Additional risk factor includes patient's occupation which involves repetitive motion for cleaning, sweeping, and changing trash.

NON SERIOUS EVENTS AND **OTHER AREAS OF SAFETY INTEREST

Alanine aminotransferase increased: Intermittent. Asymptomatic.
Aspartate aminotransferase increased: Intermittent. Asymptomatic.

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
貧血				X
血中クレアチンホスホキナーゼ増加				X
脳損傷	X	X	X	
ヘマトクリット減少				X
ヘモグロビン減少				X
リンパ球数減少				X
片頭痛	X			
好中球数減少				X
過量投与	X			

Treatment Group	Age at Induction Study Start	Sex	Race
ABT-494 15 mg	4[redacted]	FEMALE	WHITE

Medical History	Onset Year
GASTROESOPHAGEAL REFLUX DISEASE	20[redacted]
HYPERTENSION	20[redacted]
LEFT SIDED UC	19[redacted]
NEPHROLITHIASIS	19[redacted]
OSTEOPOROSIS	20[redacted]
OTHER: BENZO ADDICTION	20[redacted]
OTHER: BIPOLAR DISORDER	20[redacted]
OTHER: BOWEL OBSTRUCTION	20[redacted]
OTHER: ENDOMETRIOSIS	19[redacted]
OTHER: FIBROMYALGIA	20[redacted]
OTHER: IRRITABLE BOWEL SYNDROME	19[redacted]
OTHER: RECURRENT UTIS	20[redacted]
OTHER: SCREENING PHYSICAL EXAM: DIFFUSE POSTERIOR THORAX AND BACK TENDERNESS	20[redacted]
OTHER: SCREENING PHYSICAL EXAM: MODERATE DIFFUSE ABDOMINAL TENDERNESS. NO MASSES. NO REBOUND	20[redacted]

Prior Procedures	Procedure Year
SURGERY: APPENDECTOMY	20[redacted]
SURGERY: C-SECTION	19[redacted]
SURGERY: C-SECTION	19[redacted]
SURGERY: CHOLECYSTECTOMY	20[redacted]
SURGERY: HERNIA REPAIR	20[redacted]
SURGERY: HYSTERECTOMY	20[redacted]
SURGERY: LEFT ANKLE SURGERY	20[redacted]
ULCERATIVE COLITIS DISEASE HISTORY: COLONOSCOPY	20[redacted]

Tobacco Use	Status	Number/Day	Number of Years	Year Stopped
CHEWING TOBACCO	NEVER			
CIGARETTES	FORMER	0.5 PACK	1	20[redacted]
CIGARS	NEVER			
PIPES	NEVER			

Alcohol Use	Status	Number/Day
ALCOHOL	NEVER	

Study Drug Administration

Study Drug	Dose/Units	Route of Administration	Frequency	First Dose Date/Day	Last Dose Date/Day	Duration (Days)
M14-234 SS1 ABT-494 (IND)	45 mg	ORAL	QD	[redacted]20[redacted] / 1	[redacted]20[redacted] / 59	59
M14-234 SS3 ABT-494 (MAIN)	15 mg	ORAL	QD	[redacted]20[redacted] / 60	[redacted]20[redacted] / 371	312
M14-533 ABT-494 (LTE)	15 mg	ORAL	QD	[redacted]20[redacted] / 372	[redacted]20[redacted] / 1558	1187

Previous Therapy - Prior to baseline/enrollment

Medication Name (WHO Drug)	Dose/Units	Frequency	Start Year-Month / RX Day
AZATHIOPRINE	100 mg	QD	Y-M: 20[redacted]
INFLIXIMAB	5 mg/kg	OTHER: EVERY 8 WEEKS	Y-M: 20[redacted]
AZITHROMYCIN	97.5 mg	PRN	Y-M: 20[redacted]
CIPROFLOXACIN	400 mg	BID	Y-M: 20[redacted]
CIPROFLOXACIN	500 mg	BID	Y-M: 20[redacted]

GABAPENTIN	600 mg	TID	Y-M: 20[redacted]
METHYLPREDNISOLONE	40 mg	QD	Y-M: 20[redacted]
METRONIDAZOLE	500 mg	BID	Y-M: 20[redacted]
METRONIDAZOLE	500 mg	TID	Y-M: 20[redacted]
PREDNISONE	20 mg	QD	Y-M: 20[redacted]
PROMETHAZINE	25 mg	PRN	Y-M: 20[redacted]
SULFASALAZINE	1000 mg	TID	Y-M: 20[redacted]
BISACODYL	5 mg	PRN	Y-M: 20[redacted] / -256
LORAZEPAM	1 mg	BID	Y-M: 20[redacted] / -261
HYOSCYAMINE	.125 mg	QD	Y-M: 20[redacted] / -176
APIXABAN	5 mg	QD	Y-M: 20[redacted] / -146
BUPROPION	300 mg	QD	Y-M: 20[redacted] / -87
ZOLPIDEM	10 mg	QD	Y-M: 20[redacted] / -87
OXYCODONE;PARACETAMOL	10 mg	QID	Y-M: 20[redacted] / -7

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
AZITHROMYCIN	97.5 mg	PRN	Y-M: 20[redacted]	ONGOING
GABAPENTIN	600 mg	TID	Y-M: 20[redacted]	ONGOING
PROMETHAZINE	25 mg	PRN	Y-M: 20[redacted]	ONGOING
BISACODYL	5 mg	PRN	Y-M: 20[redacted] / -256	ONGOING
LORAZEPAM	1 mg	BID	Y-M: 20[redacted] / -261	ONGOING
HYOSCYAMINE	.125 mg	QD	Y-M: 20[redacted] / -176	ONGOING
APIXABAN	5 mg	QD	Y-M: 20[redacted] / -146	ONGOING
BUPROPION	300 mg	QD	Y-M: 20[redacted] / -87	ONGOING
ZOLPIDEM	10 mg	QD	Y-M: 20[redacted] / -87	Y-M: 20[redacted] / 427
OXYCODONE;PARACETAMOL	10 mg	QID	Y-M: 20[redacted] / -7	Y-M: 20[redacted] / 135
ESOMEPRAZOLE	20 mg	PRN	Y-M: 20[redacted] / 28	ONGOING
SULFAMETHOXAZOLE;TRIMETHOPRIM	1 OTHER: TABLET	BID	Y-M: 20[redacted] / 55	Y-M: 20[redacted] / 62
OXYCODONE	15 mg	PRN	Y-M: 20[redacted] / 105	Y-M: 20[redacted] / 319
AZITHROMYCIN	500 mg	BID	Y-M: 20[redacted] / 147	Y-M: 20[redacted] / 147
FLUTICASONE	1 OTHER: SPRAY	QD	Y-M: 20[redacted] / 147	Y-M: 20[redacted] / 151
AZITHROMYCIN	500 mg	QD	Y-M: 20[redacted] / 148	Y-M: 20[redacted] / 151
ACETYLSALICYLIC ACID;CAFFEINE	1 OTHER: PACKET	PRN	Y-M: 20[redacted] / 173	Y-M: 20[redacted] / 333

BUTALBITAL;CAFFEINE;PARACETAMOL	50/325/40 mg	PRN	Y-M: 20[redacted] / 311	ONGOING
PARACETAMOL	650 mg	PRN	Y-M: 20[redacted] / 311	ONGOING
KETAMINE	50 mg	TID	Y-M: 20[redacted] / 380	Y-M: 20[redacted] / 746
LISINOPRIL	20 mg	QD	Y-M: 20[redacted] / 470	Y-M: 20[redacted] / 523
HYOSCYAMINE	0.125 mg	PRN	Y-M: 20[redacted] / 497	Y-M: 20[redacted] / 917
LISINOPRIL	40 mg	QD	Y-M: 20[redacted] / 523	ONGOING
CEFALEXIN	500 mg	QD	Y-M: 20[redacted] / 537	Y-M: 20[redacted] / 551
MORPHINE	4 mg	QD	Y-M: 20[redacted] / 537	Y-M: 20[redacted] / 537
PROMETHAZINE	25 mg	QD	Y-M: 20[redacted] / 537	Y-M: 20[redacted] / 537
RISPERIDONE	1 mg	QD	Y-M: 20[redacted] / 543	ONGOING
BISACODYL	4 DF	OTHER: ONCE	Y-M: 20[redacted] / 682	Y-M: 20[redacted] / 682
MACROGOL 3350	238 g	OTHER: ONCE	Y-M: 20[redacted] / 682	Y-M: 20[redacted] / 683
PROPOFOL	300 mg	OTHER: ONCE	Y-M: 20[redacted] / 683	Y-M: 20[redacted] / 683
OXYCODONE	10 mg	QD	Y-M: 20[redacted] / 811	Y-M: 20[redacted] / 1015
BISACODYL	4 DF	OTHER: SINGLE DOSE	Y-M: 20[redacted] / 1014	Y-M: 20[redacted] / 1014
MACROGOL 3350	238 g	OTHER: SINGLE DOSE	Y-M: 20[redacted] / 1014	Y-M: 20[redacted] / 1015
LIDOCAINE	40 mg	OTHER: SINGLE DOSE	Y-M: 20[redacted] / 1015	Y-M: 20[redacted] / 1015
PROPOFOL	350 mg	OTHER: SINGLE DOSE	Y-M: 20[redacted] / 1015	Y-M: 20[redacted] / 1015
ACETYLSALICYLIC ACID	81 mg	QD	Y-M: 20[redacted] / 1096	ONGOING
ATORVASTATIN	1 DF	QD	Y-M: 20[redacted] / 1096	ONGOING
CITALOPRAM	40 mg	QD	Y-M: 20[redacted] / 1096	ONGOING
METOPROLOL	2 DF	QD	Y-M: 20[redacted] / 1096	ONGOING
NALOXONE	4 mg	OTHER: ONCE	Y-M: 20[redacted] / 1181	Y-M: 20[redacted] / 1181
NALOXONE	2 mg	OTHER: ONCE	Y-M: 20[redacted] / 1186	Y-M: 20[redacted] / 1186

Event #1: Event of Interest - Creatine Phosphokinase (CPK) Elevation

Event Description	ELEVATED CK LEVELS
Preferred term	血中クレアチンホスホキナーゼ増加
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 462 / 91
Age at AE Onset	4[redacted]
Laboratory Testing	

NOT APPLICABLE

Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	557 / 186
Duration of AE	96 DAYS
Severity	MILD
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 #2: Event of Interest - Neutropenia

Event Description	DECREASED NEUTROPHIL LEVELS
Preferred term	好中球数減少
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 462 / 91
Age at AE Onset	4[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	557 / 186
Duration of AE	96 DAYS
Severity	MILD
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 - Neutropenia

Event Description	DECREASED TOTAL ANC LEVELS
Preferred term	好中球数減少
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 462 / 91
Age at AE Onset	4[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	

AE Stopped Initial Rx Day / Rx Day	557 / 186
Duration of AE	96 DAYS
Severity	MILD
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 #4: Serious Adverse Event

Event Description	WORSENING OF MIGRAINE HEADACHES
Preferred term	片頭痛
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 681 / 310
Age at AE Onset	4[redacted]
Laboratory Testing	
NOT REPORTED	
Microbiology	
NOT REPORTED	
AE Stopped Initial Rx Day / Rx Day	682 / 311
Duration of AE	2 DAYS
Severity	SEVERE
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 #5: Event of Interest - Anemia

Event Description	LOW HGB, HCT, AND RBC
Preferred term	ヘマトクリット減少，ヘモグロビン減少
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 818 / 447
Age at AE Onset	4[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	

AE Stopped Initial Rx Day / Rx Day	1054 / 683
Duration of AE	237 DAYS
Severity	MILD
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 #6: Event of Interest - Anemia

Event Description	ANEMIA
Preferred term	貧血
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 987 / 616
Age at AE Onset	4[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	1054 / 683
Duration of AE	68 DAYS
Severity	MILD
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 #7: Event of Interest - Lymphopenia

Event Description	LOW LYMPHOCYTES
Preferred term	リンパ球数減少
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 1054 / 683
Age at AE Onset	4[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	1138 / 767
Duration of AE	85 DAYS

Severity	MILD
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 #8: Event of Interest - Lymphopenia

Event Description	LOW LYMPHOCYTES
Preferred term	リンパ球数減少
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 1386 / 1015
Age at AE Onset	5[redacted]
Laboratory Testing	
NOT APPLICABLE	
Microbiology	
NOT APPLICABLE	
AE Stopped Initial Rx Day / Rx Day	ONGOING
Duration of AE	ONGOING
Severity	MILD
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 #9: Serious Adverse Event

Event Description	OPIOD OVERDOSE
Preferred term	過量投与
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 1552 / 1181
Age at AE Onset	5[redacted]
Laboratory Testing	

[redacted]20[redacted] (RX DAY 1181): Albumin: 44 [35 - 49] G/L; Alkaline Phosphatase: 61 [36 - 108] U/L; Basophils: 0 [0 - 0.2] 10^9/L; Basophils/Leukocytes: 0.3 [0 - 1.3] %; Bilirubin: 6.841556 [0 - 25.655835] UMOL/L; Blood Urea Nitrogen: 4.99758 [2.49879 - 8.92425] MMOL/L; Calcium: 2.345394 [2.220639 - 2.569953] MMOL/L; Chloride: 105 [100 - 111] MMOL/L; Creatinine: 67.186478 [41.549532 - 119.344401] UMOL/L; Eosinophils: 0 [0 - 0.4] 10^9/L; Eosinophils/Leukocytes: 0.2 [0 - 5] %; Erythrocytes: 3.68 [3.57 - 4.97] 10^12/L; Glucose: 5.828235 [3.88549 - 5.5507] MMOL/L; Hematocrit: 0.347 [0.326 - 0.434] FRACTION OF 1; Hemoglobin: 118 [110 - 149] G/L; Leukocytes: 4.5 [3.7 - 10.6] 10^9/L; Lymphocytes: 0.8 [1 - 3.4] 10^9/L; Lymphocytes/Leukocytes: 19 [15.7 - 45.3] %; Monocytes: 0.3 [0.2 - 0.9] 10^9/L; Monocytes/Leukocytes: 7.3 [3.5 - 11.1] %; NPTST006-A/G RATIO: 2.3 [0.9 - 2.4] RATIO; NPTST027-ALT

(SGPT): 38 [8 - 39] IU/L; NPTST031-ANION GAP: 6 [6 - 13] MMOL/L; NPTST040-AST: 33 [12 - 33] IU/L; NPTST061-BUN/CREATININE RATIO: 18 [8 - 23] RATIO; NPTST096-CO2: 28.3 [23 - 32.6] MMOL/L; NPTST159-GLOBULIN: 1.9 [2 - 4.5] G/DL; NPTST211-MCH: 31.9 [26.9 - 34.1] PG; NPTST212-MCHC: 33.9 [32.9 - 35.4] G/DL; NPTST213-MCV: 94.3 [80.1 - 98.4] FL; NPTST232-NRBC: 0.1 [0 - 0] 10^9/L; NPTST235-OSMOLALITY CALC: 278 [270 - 350] MOSM/KG; NPTST272-RDW: 14.3 [11.8 - 15.2] %; NPTST324-TROPONIN I: 0.02 [0 - 0.04] NG/ML; Neutrophils: 3.3 [1 - 8] 10^9/L; Neutrophils/Leukocytes: 73.2 [43.4 - 75.7] %; Platelets: 188 [141 - 359] 10^9/L; Potassium: 4.4 [3.5 - 5.2] MMOL/L; Protein: 63 [61 - 80] G/L; Sodium: 139 [133 - 146] MMOL/L

Microbiology

NOT REPORTED

AE Stopped Initial Rx Day / Rx Day	1552 / 1181
Duration of AE	1 DAY
Severity	MODERATE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	DRUG OVERDOSE
Discontinued Study Drug Due to the Event	NO
SAE Criteria	IMPORTANT MEDICAL EVENT REQUIRING MEDICAL OR SURGICAL INTERVENTION

Event #10: Serious Adverse Event, AE Leading to Discontinuation of Study Drug, Death

Event Description	ANOXIC BRAIN INJURY
Preferred term	脳損傷
AE Onset Date / Initial Rx Day / Rx Day	[redacted]20[redacted] / 1558 / 1187
Age at AE Onset	5[redacted]

Laboratory Testing

[redacted]20[redacted] (RX DAY 1186): Albumin: 39 [35 - 49] G/L; Alkaline Phosphatase: 203 [36 - 108] U/L; Basophils: 0 [0 - 0.2] 10^9/L; Basophils/Leukocytes: 0.3 [0 - 1.3] %; Bilirubin: 8.551945 [0 - 25.655835] UMOL/L; Blood Urea Nitrogen: 5.71152 [2.49879 - 8.92425] MMOL/L; Calcium: 2.045982 [2.220639 - 2.569953] MMOL/L; Chloride: 106 [100 - 111] MMOL/L; Creatinine: 107.851977 [41.549532 - 119.344401] UMOL/L; Eosinophils: 0 [0 - 0.4] 10^9/L; Eosinophils/Leukocytes: 0.3 [0 - 5] %; Erythrocytes: 3.6 [3.57 - 4.97] 10^12/L; Glucose: 20.426576 [3.88549 - 5.5507] MMOL/L; Hematocrit: 0.356 [0.326 - 0.434] FRACTION OF 1; Hemoglobin: 114 [110 - 149] G/L; Leukocytes: 6.9 [3.7 - 10.6] 10^9/L; Lymphocytes: 1.7 [1 - 3.4] 10^9/L; Lymphocytes/Leukocytes: 25 [15.7 - 45.3] %; Monocytes: 0.2 [0.2 - 0.9] 10^9/L; Monocytes/Leukocytes: 2.8 [3.5 - 11.1] %; NPTST006-A/G RATIO: 2.2 [0.9 - 2.4] RATIO; NPTST027-ALT (SGPT): 355 [8 - 39] IU/L; NPTST031-ANION GAP: 16 [6 - 13] MMOL/L; NPTST040-AST: 617 [12 - 33] IU/L; NPTST060-BUN/ CREATININE RATIO: 13 [8 - 23] RATIO; NPTST096-CO2: 15.9 [23 - 32.6] MMOL/L; NPTST159-GLOBULIN: 1.8 [2 - 4.5] G/DL; NPTST207-LIPASE: 82 [10 - 140] U/L; NPTST209-MAGNESIUM: 2.5 [1.7 - 2.2] MG/DL; NPTST211-MCH: 31.7 [26.9 - 34.1] PG; NPTST212-MCHC: 32.0 [32.9 - 35.4] G/DL; NPTST213-MCV: 98.8 [80.1 - 98.4] FL; NPTST232-NRBC: 0.0 [0 - 0] 10^9/L; NPTST235-OSMOLALITY CALC: 292 [270 - 350] MOSM/KG; NPTST272-RDW: 14.6 [11.8 - 15.2] %; NPTST324-TROPONIN I: 0.03 [0 - 0.04] NG/ML; Neutrophils: 4.9 [1 - 8] 10^9/L; Neutrophils/Leukocytes: 71.6 [43.4 - 75.7] %; Platelets: 171 [141 - 359] 10^9/L; Potassium: 4.4 [3.5 - 5.2] MMOL/L; Protein: 57 [61 - 81] G/L; Sodium: 138 [133 - 146] MMOL/L; [redacted]20[redacted] (RX DAY 1190): Albumin: 34 [35 - 49] G/L; Alkaline Phosphatase: 128 [36 - 108] U/L; Bilirubin: 8.551945 [0 - 25.655835] UMOL/L; Blood Urea Nitrogen: 6.42546 [2.49879 - 8.92425] MMOL/L; Calcium: 2.24559 [2.220639 - 2.569953] MMOL/L; Chloride: 112 [100 - 111] MMOL/L;

Creatinine: 60.114217 [41.549532 - 119.344401] UMOL/L; Glucose: 10.046767 [3.88549 - 5.5507] MMOL/L; NPTST006-A/G RATIO: 1.5 [0.9 - 2.4] RATIO; NPTST020-ALANINE TRANSAMINASE: 94 [8 - 39] IU/L; NPTST031-ANION GAP: 8 [6 - 13] MMOL/L; NPTST039-ASPARTATE TRANSAMINASE: 45 [12 - 33] IU/L; NPTST061-BUN/CREATININE RATIO: 26 [8 - 23] RATIO; NPTST096-CO2: 27.7 [23 - 32.6] MMOL/L; NPTST160-GLOBULIN TOTAL: 2.2 [2 - 4.5] G/DL; NPTST235-OSMOLALITY CALC: 301 [270 - 350] MOSM/KG; Potassium: 3.9 [3.5 - 5.2] MMOL/L; Protein: 56 [61 - 80] G/L; Sodium: 148 [133 - 146] MMOL/L

Microbiology

NOT REPORTED

AE Stopped Initial Rx Day / Rx Day	1558 / 1187
Duration of AE	1 DAY
Severity	SEVERE
Relation to Study Drug by Investigator	NO REASONABLE POSSIBILITY
Investigator Alternative Etiology	ACUTE RESPIRATORY FAILURE WITH HYPOXIA
Discontinued Study Drug Due to the Event	YES
SAE Criteria	HOSPITALIZATION OR PROLONGED HOSPITALIZATION, DEATH OF SUBJECT

Generated: [redacted]20[redacted]:16:51

Program Source Code: [redacted]

Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は米国の 4[redacted] 歳女性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，片頭痛の悪化の事象を発現した。関連する病歴は，子宮内膜症，過敏性腸症候群，双極性障害，元喫煙者（1 日 0.5 箱を 1 年間），ベンゾ系薬剤嗜癖，線維筋痛，高血圧，片頭痛，軽度両側浮腫，肺塞栓症，不眠症及び潰瘍性大腸炎であった。

Event 4 の臨床経過：

投与681日後＊　，被験者は片頭痛の悪化を発現した。投与682日後＊　　，片頭痛の悪化は消失した。

投与681日後＊　，被験者は入院した。被験者は激しい右側の頭痛を経験し，不明瞭発語，顔面全体のしびれ感，右顔面のピリピリ感及び右腕のピリピリ感を伴っていた。被験者の NIH 脳卒中スケール/スコア（NIHSS）は 2 及び 4 であった。被験者は診断検査を受け，脳卒中は否定された。投与682日後＊　，被験者は退院した。被験者は，頭部外傷，嘔吐又は脳卒中の病歴はな

かった。

投与された薬剤は，fioricet 及びアセトアミノフェンであった。

Causality for UPADACITINIB (Open Label)

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1) Migraine aggravated (10027600) (Migraine (10027599)) [v.23.1] [10027600]

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

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

Dechallenge: Not Applicable

Alternative Etiology for UPADACITINIB (Open Label)

Event of WORSENING OF MIGRAINE HEADACHES

- Investigator: NOT APPLICABLE.

- AbbVie: RISK FACTORS INCLUDE PRE-EXISTING MIGRAINE HEADACHE, FIBROMYALGIA AND OBESITY.

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] BLOOD UREA NITROGEN:** 11 mg/dL (normal 7 to 21)

[redacted] **20[redacted] CALCIUM:** 9.6 mg/dL (normal 8.9 to 10.7)

[redacted] **20[redacted] CARBON DIOXIDE:** 23 MMOL/L (normal 20 to 30)

[redacted] **20[redacted] CHLORIDE:** 108 MMOL/L (normal 101 to 111)

[redacted] **20[redacted] COLONOSCOPY:** No inflammation seen

[redacted] **20[redacted] CREATININE:** 0.75 mg/dL (normal 0.72 to 1.25)

[redacted] **20[redacted] CT SCAN-HEAD:** NO EVIDENCE FOR ACUTE HEMORRHAGE OR EDEMA.

[redacted] **20[redacted] ECG 12 LEAD:** NORMAL SINUS RHYTHM WITHOUT ACUTE ST-T WAVE CHANGES

[redacted] **20[redacted] ECHO:** TECHNICALLY DIFFICULT STUDY DUE TO PATIENTS BODY HABITUS. THE LEFT VENTRICULAR SYSTOLIC FUNCTION IS NORMAL (55-65%). MILD AORTIC VALVA REGURGITATION. THERE IS A PATENT FORAMEN OVALE PRESENT WITH RIGHT TO LEFT SHUNTING INDICATED BY BUBBLE STUDY. THE EXAM WAS COMPARED TO THE STUDY PERFORMED ON [redacted]/[redacted]/20[redacted]. NO SIGNIFICANT CHANGES COMPARED TO PRIOR STUDY. THIS STUDY DID INCLUDE A SALINE BUBBLE CONTRAST STUDY WHICH IS POSITIVE.

[redacted] **20[redacted] GLUCOSE:** 94 mg/dL (normal 74 to 99)

[redacted] **20[redacted] HEMATOCRIT:** 34.3 % (normal 41.0 to 53.0)

[redacted] **20[redacted] HEMOGLOBIN:** 11.7 G/DL (normal 13.5 to 17.5)

[redacted] **20[redacted] MRI ANGIOGRAM HEAD WITHOUT CONTRAST:** NO ABNORMALITY IS IDENTIFIED WITHIN THE MAJOR INTRACRANIAL ARTERIAL VASCULATURE

[redacted] **20[redacted] MRI ANGIOGRAM NECK WITH AND WITHOUT CONTRAST:** LOSS OF SIGNAL WITHIN THE BILATERAL VERTEBRAL ARTERIES, PROXIMAL RIGHT COMMON ARTERY AND LEFT SUBCLAVIAN ARTERY LIMITING EVALUATION. THESE ARE MOST LIKE ARTIFACTUAL. NO DEFINITIVE AREAS OF OCCLUSION OR INTRACRANIAL STENOSIS ARE IDENTIFIED. IF THERE IS CONTINUED CLINICAL CONCERN, MAY CONSIDER CTA OF THE NECK

[redacted] **20[redacted] MRI BRAIN WITHOUT CONTRAST:** 1. NO EVIDENCE OF INTRACRANIAL HEMORRHAGE. 2. NO EVIDENCE OF ACUTE OR EVOLVING CEREBRAL INFARCTION. 3. MILD PERIVENTRICULAR WHITE MATTER CHANGES

[redacted] **20[redacted] NIH STROKE SCALE/SCORE (NIHSS):** 2 no units

[redacted] **20[redacted] NIH STROKE SCALE/SCORE (NIHSS):** 4 no units

[redacted] **20[redacted] PLATELET COUNT:** 197 TH/CUMM (normal 125 to 415)

[redacted] **20[redacted] POTASSIUM:** 4.1 MMOL/L (normal 3.4 to 5.1)

[redacted] **20[redacted] SODIUM:** 142 MEQ/L (normal 135 to 145)

[redacted] **20[redacted] WHITE BLOOD CELLS:** 3.9 TH/MM3 (normal 4.0 to 11.5)
Investigator No.: [redacted]

Subject Number: [redacted]

Protocol Number: M14-533

治験責任医師からの報告。本被験者は米国の 5[redacted] 歳女性であり，ABT-494（ウパダシチニブ）の治験でウパダシチニブが投与され，死亡に至った無酸素性脳損傷及びオピオイド過量投与の

事象を発現した。関連する病歴は，潰瘍性大腸炎，腸閉塞，ベンゾ系薬剤嗜癖，高血圧，元喫煙者（1 日 0.5 箱を 1 年間），肺塞栓症及び非飲酒者であった。

Event 9 及び 10 の臨床経過：

投与1552日後＊，被験者はオピオイド過量投与を発現した。投与1552日後＊，オピオイド過量投与は消失した。投与1558日後＊，被験者は無酸素性脳損傷を発現した。投与1558日後＊，被験者は死亡した。死因は無酸素性脳損傷と報告された。剖検は実施されなかった。

投与1552日後＊　，被験者は narcan の投与を必要とする過量投与のため，救急治療室に搬送された。

同日，被験者は退院した。

投与1557日後＊　，被験者は心停止後状態で救急医療サービスを介して救急治療室へ搬送された。被験者は家族により無反応状態で発見された。被験者は約 45 分間から 1 時間蘇生が試みられ，挿管された。病院到着時，被験者は narcan を複数回投与されたが反応がなく，瞳孔は固定し散大しており，グラスゴーコーマスケール（GCS）は鎮静剤の使用なしで 3 であった。CT 検査でびまん性酸素欠乏障害が認められた。被験者は脳死検査実施まで入院となった。入院 24 時間後に，集中治療室で正式な脳死検査が実施された。被験者は正常体温であり，電解質異常はなかった。投与1558日後＊，10 時 20 分，被験者は死亡宣告された。

治験責任医師によると，本事象に関連する危険因子はオピオイド乱用の病歴であった。

投与された薬剤は，narcan であった。

The patient's past medications include:

IMURAN for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

REMICADE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

SOLUMEDROL for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

SULFASALAZINE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

CIPRO for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

FLAGYL for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted], [redacted] 20[redacted] - [redacted] 20[redacted])

PREDNISONE for ULCERATIVE COLITIS ([redacted] 20[redacted] - [redacted] 20[redacted])

Causality for UPADACITINIB (Open Label)

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1) Anoxic brain damage (10002663) (Brain injury (10067967)) [v.23.1] [10002663]

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

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

Dechallenge: Not Applicable

2) Drug overdose (10068719) (Overdose (10033295)) [v.23.1] [10068719]

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 (Open Label)

Event of ANOXIC BRAIN INJURY

- Investigator: Acute respiratory failure with hypoxia.

- AbbVie: Risk factors include pre-existing benzodiazepine addiction, polypharmacy, history of opioid abuse (per PI) and recent opioid overdose requiring Narcan administration.

Event of OPIOD OVERDOSE

- Investigator: Drug overdose

- AbbVie: Risk factors include pre-existing bipolar disorder, benzodiazepine addiction and history of opioid abuse (per PI).

Relevant Laboratory & Other Diagnostic Tests

[redacted] **20[redacted] A/G RATIO:** 1.5 Ratio (normal 0.9 to 2.4)

[redacted] **20[redacted] ALANINE TRANSAMINASE:** 94 IU/L (normal 8 to 39)

[redacted] **20[redacted] ALBUMIN:** 3.4 G/DL (normal 3.5 to 4.9)

[redacted] **20[redacted] ALKALINE PHOSPHATASE:** 203 IU/L (normal 36 to 108)

[redacted] **20[redacted] ALKALINE PHOSPHATASE:** 128 IU/L (normal 36 to 108)

[redacted] **20[redacted] ALT:** 355 IU/L (normal 8to 39)

[redacted] **20[redacted] ANION GAP:** 16 MMOL/L (normal 6 to 13)

[redacted] **20[redacted] ANION GAP:** 8 MMOL/L (normal 6 to 13)

[redacted] **20[redacted] ASPARTATE TRANSAMINASE:** 45 IU/L (normal 12 to 33)

[redacted] **20[redacted] AST:** 617 IU/L (normal 12 to 33)

[redacted] **20[redacted] BILIRUBIN:** 0.5 mg/dL (normal 0.0 to 1.5)

[redacted] **20[redacted] BLOOD UREA NITROGEN:** 18 mg/dL (normal 7 to 25)

[redacted] **20[redacted] BODY WEIGHT:** 6[redacted] KG

[redacted] **20[redacted] BUN:** 16 mg/dL (normal 7 to 25)

[redacted] **20[redacted] BUN/CREATININE RATIO:** 26 RATIO (normal 8 to 23)

[redacted] **20[redacted] CALCIUM:** 9.0 mg/dL (normal 8.9 to 10.3)

[redacted] **20[redacted] CHLORIDE:** 112 MMOL/L (normal 100 to 111)

[redacted] **20[redacted] CO2:** 27.7 MMOL/L (normal 23.0 to 32.6)

[redacted] **20[redacted] CREATININE:** 0.68 mg/dL (normal 0.47 to 1.35)

[redacted] **20[redacted] CT CHEST ABDOMEN PELVIS WITH IV CONTRAST ONLY:** No acute finding in the chest, only mild bibasilar dependent atelectasis. No clearly acute intra-abdominal or pelvis finding, surgery changes seen. There maybe an early developing bowel ileus.

[redacted] **20[redacted] CT HEAD WITHOUT CONTRAST:** Abnormalexam-appearance very worrisome for diffuse anoxic injury with cerebral/cerebellar edema.

[redacted] **20[redacted] EKG:** RESULTS NOT LISTED ON REPORT