Published by Ministry of Health, Labour and Welfare Translated by Pharmaceuticals and Medical Devices Agency



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

English translation, the former shall prevail.

Revision of Precautions

Insulin human (genetical recombination) (cartridge preparations, prefilled preparations) Insulin aspart (genetical recombination) (cartridge preparations, prefilled preparations) Insulin glargine (genetical recombination) (cartridge preparations, prefilled preparations) Insulin glargine (genetical recombination) [insulin glargine biosimilar 1] Insulin glargine (genetical recombination) [insulin glargine biosimilar 2] Insulin glulisine (genetical recombination) (cartridge preparations, prefilled preparations) Insulin degludec (genetical recombination) Insulin degludec (genetical recombination) Insulin degludec (genetical recombination) Insulin degludec (genetical recombination) Insulin detemir (genetical recombination)

May 19, 2020

Therapeutic category

Hormones-miscellaneous

Pharmaceuticals and Medical Devices Agency

3-3-2 Kasumigaseki, Chiyoda-ku, Tokyo 100-0013 Japan E-mail: <u>safety.info@pmda.go.jp</u>

Non-proprietary name

Insulin human (genetical recombination), insulin aspart (genetical recombination), insulin glargine (genetical recombination) [insulin glargine biosimilar 2], insulin gluisine (genetical recombination), insulin degludec (genetical recombination)/insulin aspart (genetical recombination), insulin degludec (genetical recombination)/insulin aspart (genetical recombination), insulin detemir (genetical recombination)

Safety measure

Precautions should be revised in the package insert.

Revision in line with the Instructions for Package Inserts of Prescription Drugs, PAB Notification No. 606 by the	Director General of
Pharmaceutical Affairs Bureau, MHW, dated April 25, 1997 (Old instructions):	Revised language is underlined.

Current	Revision
Important Precautions	Important Precautions
(N/A)	By repeated injection into the same spot, cutaneous amyloidosis or
	lipodystrophy may occur in the injection site. Injection sites should
	be examined periodically and patients should be instructed as
	follows:
	. This drug should be injected at least 2 to 3 cm apart from the
	previous injection site.
	• If any masses and indurations that formed in the injection site are
	noted, injection into the affected area should be avoided.
	Injection of this drug into areas where cutaneous amyloidosis or

Pharmaceuticals and Medical Devices Agency

lipodystrophy developed may impede the absorption of this drug
and result in poor glycemic control. If poor glycemic control is
recognized, the injection site should be examined for mass or
induration and appropriate measures should be taken such as
changing the injection site as well as dose adjustment. Cases of
hypoglycemia have been reported that occurred after the injection
site was changed, and insulin preparation was injected into an
unaffected area in doses excessively increased in association with
the poor glycemic control.

Revision in line with the Instructions for Package Inserts of Prescription Drugs, etc. PSEHB Notification No. 0608-1 by the Director of

Pharmaceutical Safety and Environmental Health Bureau, MHLW, dated June 8, 2017 (New instructions):	Revised language is underlined.
---	---------------------------------

Current	Revision
8. IMPORTANT PRECAUTIONS	8. IMPORTANT PRECAUTIONS
(N/A)	By repeated injection into the same spot, cutaneous amyloidosis or
	lipodystrophy may occur in the injection site. Injection sites should
	be examined periodically and patients should be instructed as
	follows:
	•This drug should be injected at least 2 to 3 cm apart from the
	previous injection site.
	 If any masses and indurations that formed in the injection site are
	noted, injection into the affected area should be avoided.
	Injection of this drug into areas where cutaneous amyloidosis or

Pharmaceuticals and Medical Devices Agency

lipodystrophy developed may impede the absorption of this drug
and result in poor glycemic control. If poor glycemic control is
recognized, the injection site should be examined for mass or
induration and appropriate measures should be taken such as
changing the injection site as well as dose adjustment. Cases of
hypoglycemia have been reported that occurred after the injection
site was changed, and insulin preparation was injected into an
unaffected area in doses excessively increased in association with
the poor glycemic control.

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

Pharmaceuticals and Medical Devices Agency

3-3-2 Kasumigaseki, Chiyoda-ku, Tokyo 100-0013 Japan E-mail: <u>safety.info@pmda.go.jp</u>