

**הודעה על החמרה (מידע בטיחות) בעלון לרופא**  
(מעודכן 05.2013)

תאריך: 12.07.2016

שם תכשיר באנגלית ומספר הרישום: Kalydeco 150 mg 00-01-02-03 153 89 34269

שם בעל הרישום: **ורטקס פרמאסוטיקלס (יו.קיי) לימיטד**

**טופס זה מיועד לפרוט החמרות בלבד !**

| ההחמרות המבוקשות |  |   |
|------------------|--|---|
| פרק בעלון        | טקסט נוכחי   | טקסט חדש  |
|                  | <p><u>Summary of the safety profile</u></p> <p>The safety profile of Kalydeco is based on the pooled data from two double-blind placebo-controlled clinical studies conducted in 213 CF patients (109 received ivacaftor and 104 patients who received placebo up to 48 weeks) and who had a <i>G551D</i> mutation in the <i>CFTR</i> gene, and an 8-week, double-blind, placebo-controlled crossover study in 39 patients with CF who had a non-<i>G551D</i> gating (class III) mutation in the <i>CFTR</i> gene.</p> <p>The most common adverse reactions experienced by patients who received ivacaftor in the pooled placebo-controlled Phase 3 studies were abdominal pain (15.6% versus 12.5% on placebo), diarrhoea (12.8% versus 9.6% on placebo), dizziness (9.2% versus 1.0% on placebo), rash (12.8% versus 6.7% on placebo), upper respiratory tract reactions (including upper respiratory tract infection, nasal congestion, pharyngeal erythema, oropharyngeal pain, rhinitis, sinus congestion and nasopharyngitis) (63.3% versus 50.0% on placebo), headache (23.9% versus 16.3% on placebo) and bacteria in sputum (7.3% versus 3.8% on placebo). One patient in the ivacaftor group reported a serious adverse reaction: abdominal pain.</p> <p>The most common adverse reactions experienced by patients aged 6 years and older who received ivacaftor in the pooled 48-week placebo-controlled Phase 3 studies that occurred with an incidence of at least 3% and up to 9% higher than in the placebo arm were headache (23.9%), oropharyngeal pain (22.0%), upper respiratory tract infection (22.0%), nasal congestion (20.2%), abdominal pain (15.6%), nasopharyngitis (14.7%), diarrhoea (12.8%), dizziness (9.2%), rash (12.8%) and bacteria in sputum (12.8%). Transaminase elevations occurred in 12.8% of ivacaftor-treated patients versus 11.5% of placebo-treated patients.</p> <p>Serious adverse reactions in patients who received ivacaftor included abdominal pain and transaminase elevations (see section 4.4).</p> <p><u>Tabulated list of adverse reactions</u><br/>Table 1 reflects the adverse reactions observed with ivacaftor in clinical trials (placebo-controlled and uncontrolled studies) in which the length of exposure to ivacaftor ranged from 16</p> | <p><u>Summary of the safety profile</u></p> <p>The safety profile of Kalydeco is based on the pooled data from two double-blind placebo-controlled clinical studies conducted in 213 CF patients (109 received ivacaftor and 104 patients who received placebo up to 48 weeks) and who had a <i>G551D</i> mutation in the <i>CFTR</i> gene, and an 8-week, double-blind, placebo-controlled crossover study in 39 patients with CF who had a non-<i>G551D</i> gating (class III) mutation in the <i>CFTR</i> gene.</p> <p>The most common adverse reactions experienced by patients who received ivacaftor in the pooled placebo-controlled Phase 3 studies were abdominal pain (15.6% versus 12.5% on placebo), diarrhoea (12.8% versus 9.6% on placebo), dizziness (9.2% versus 1.0% on placebo), rash (12.8% versus 6.7% on placebo), upper respiratory tract reactions (including upper respiratory tract infection, nasal congestion, pharyngeal erythema, oropharyngeal pain, rhinitis, sinus congestion and nasopharyngitis) (63.3% versus 50.0% on placebo), headache (23.9% versus 16.3% on placebo) and bacteria in sputum (7.3% versus 3.8% on placebo). One patient in the ivacaftor group reported a serious adverse reaction: abdominal pain.</p> <p align="center"><b>Undesirable effects</b></p> <p><u>Tabulated list of adverse reactions</u><br/>Adverse reactions identified in patients who had a <i>G551D</i> mutation in at least one allele, age 6 years and older (pooled Phase 3 studies with 96 weeks</p> |

weeks to 144 weeks. The frequency of adverse reactions is defined as follows: very common ( $\geq 1/10$ ); common ( $\geq 1/100$  to  $< 1/10$ ); uncommon ( $\geq 1/1,000$  to  $< 1/100$ ); rare ( $\geq 1/10,000$  to  $< 1/1,000$ ); very rare ( $< 1/10,000$ ). Within each frequency grouping, adverse reactions are presented in order of decreasing seriousness.

Adverse reactions identified in patients who had a *G551D* mutation in at least one allele, age 6 years and older (pooled Phase 3 studies with 96 weeks open label extension) are presented in Table 1 and are listed by system organ class, preferred term, and frequency. Adverse reactions are ranked under the MedDRA frequency classification: very common ( $\geq 1/10$ ); common ( $\geq 1/100$  to  $< 1/10$ ); uncommon ( $\geq 1/1,000$  to  $< 1/100$ ); rare ( $\geq 1/10,000$  to  $< 1/1,000$ ); very rare ( $< 1/10,000$ ); and not known (frequency cannot be estimated using the available data).

**Table 1**

**1. Adverse reactions in ivacaftor-treated patients**

| d 6 years and older with the <i>G551D</i> mutation in the <i>CFTR</i> gene |                         |             |
|--|-------------------------|-------------|
| System organ class   | Adverse reactions       | Frequency   |
| Hepatobiliary disorders  | Transaminase elevations | very common |
| Investigations   | Bacteria in sputum      | very common |

Description of selected adverse reactions

**Rash**

During 48-week placebo-controlled clinical studies, the incidence of rash was 12.8% in Kalydeco-treated patients. Including data from all clinical trial and post-marketing data, most of these events were non-serious and most of these patients did not discontinue the treatment because of rash.

**Ear and labyrinth disorders**

During 48-week placebo-controlled clinical studies, the incidence of ear and labyrinth disorders was 9.2% in Kalydeco-treated patients. Most events were described as mild to moderate in severity, 1 event of ear pain was described as severe, none were serious and no patients discontinued treatment because of ear and labyrinth disorders.

**Nervous system disorders**

**Headache**

During 48-week placebo-controlled clinical studies, the incidence of headache was 23.9% in Kalydeco-treated patients. Including data from all clinical trial and post-marketing data, most of these events were non-serious and most of these patients did not discontinue the treatment because of headache.

**Dizziness**

open-label extension) are presented in Table 1 and are listed by system organ class, preferred term, and frequency. Adverse reactions are ranked under the MedDRA frequency classification: very common ( $\geq 1/10$ ); common ( $\geq 1/100$  to  $< 1/10$ ); uncommon ( $\geq 1/1,000$  to  $< 1/100$ ); rare ( $\geq 1/10,000$  to  $< 1/1,000$ ); very rare ( $< 1/10,000$ ); and not known (frequency cannot be estimated using the available data).

**Table 1. Adverse reactions in ivacaftor-treated patients 6 years and older with the *G551D* mutation in the *CFTR* gene**

| System Organ Class | Frequency Category | Adverse Reactions (Preferred term)<br>Ivacaftor<br>N=198 |
|--------------------|--------------------|--|
| Investigations     | common             | Bacteria in sputum                                       |

Description of selected adverse reactions

**Rash**

During 48-week placebo-controlled clinical studies, the incidence of rash was 12.8% in Kalydeco-treated patients. Including data from all clinical trial and post-marketing data, most of these events were non-serious and most of these patients did not discontinue the treatment because of rash.

**Ear and labyrinth disorders**

During 48-week placebo-controlled clinical studies, the incidence of ear and labyrinth disorders was 9.2% in Kalydeco-treated patients. Most events were described as mild to moderate in severity, 1 event of ear pain was described as severe, none were serious and no patients discontinued treatment because of ear and labyrinth disorders.

**Nervous system disorders**

**Headache**

During 48-week placebo-controlled clinical studies, the incidence of headache was 23.9% in Kalydeco-treated patients. Including data from all clinical trial and post-marketing data, most of these events were non-serious and most of these patients did not discontinue the treatment because of headache.

During 48-week placebo-controlled clinical studies, the incidence of dizziness was 9.2% in the Kalydeco-treated patients. Including data from all clinical trial and post-marketing data, most of these events were non-serious and most of these patients did not discontinue the treatment because of dizziness.

Upper respiratory tract reactions

During 48-week placebo-controlled clinical studies, the incidence of upper respiratory tract reactions (upper respiratory tract infection, nasal congestion, pharyngeal erythema, oropharyngeal pain, rhinitis, sinus congestion, and nasopharyngitis) was 63.3% in Kalydeco-treated patients. Most events were described as mild to moderate in severity, 1 event of upper respiratory tract infection and 1 event of nasal congestion were considered to be severe, none were serious, and no patients discontinued treatment because of upper respiratory tract reactions.

Paediatric population

Table 2 lists the adverse reactions by system organ class, preferred term, and frequency in Kalydeco-treated paediatric patients age 6 through to 17 in the pooled 48-week Phase 3 studies with 96 weeks open-label extension in patients with CF with a G551D mutation. The safety data are limited to 44 patients between 6 to 11 years of age, and 38 patients between 12 to 17 years of age. Adverse reactions are ranked under the MedDRA frequency classification: very common ( $\geq 1/10$ ); common ( $\geq 1/100$  to  $< 1/10$ ); uncommon ( $\geq 1/1,000$  to  $< 1/100$ ); rare ( $\geq 1/10,000$  to  $< 1/1,000$ ); very rare ( $< 1/10,000$ ) and unknown (frequency cannot be estimated using the available data).

Dizziness

During 48-week placebo-controlled clinical studies, the incidence of dizziness was 9.2% in the Kalydeco-treated patients. Including data from all clinical trial and post-marketing data, most of these events were non-serious and most of these patients did not discontinue the treatment because of dizziness.

Upper respiratory tract reactions

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| Table 2.<br>Adverse reactions in ivacaftor-<br>patients age 6 through 17 years with the G551D mutation in the<br>CFTR gene |                    |                     |                                   |
|--|--------------------|---------------------|-----------------------------------|
| System Organ Class   | Frequency Category |                     | Preferred Term (Preferred Term)   |
|  | 11 Years<br>N=44   | 12-17 Years<br>N=38 |                                   |
| Infections and infestations  | very common        | very common         | Nasopharyngitis                   |
|  | very common        | very common         | Upper respiratory tract infection |
|  | common             | very common         | Rhinitis                          |
| Nervous system disorders   | very common        | very common         | Headache                          |
|  | common             | very common         | Dizziness                         |
| Ear and labyrinth  | common             | common              | Ear pain                          |

| Table 2.<br>Adverse reactions in ivacaftor-<br>patients age 6 through 17 years with the G551D mutation in the<br>CFTR gene |                    |                     |                                   |
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|  | common             | very common         | Rhinitis                          |
| Nervous system disorders   | very common        | very common         | Headache                          |
|  | common             | very common         | Dizziness                         |

|  |              |              |                          |
|--|--------------|--------------|--------------------------|
| disorders                                  | common       | not observed | anic membrane hyperaemia |
|  | common       | not observed | Tinnitus                 |
| atory, thoracic, and mediastinal disorders | very common  | very common  | asal congestion          |
|  | very common  | very common  | haryngeal pain           |
|  | common       | not observed | angeal erythema          |
|  | common       | common       | inus congestion          |
| Gastrointestinal disorders                 | very common  | very common  | abdominal pain           |
|  | very common  | very common  | Diarrhoea                |
| d subcutaneous tissue disorders            | common       | very common  | Rash                     |
| ductive system breast disorders            | not observed | common       | Breast mass              |
| Investigations                             | very common  | very common  | n sputum                 |

|  |              |              |                          |
|--|--------------|--------------|--------------------------|
| r and labyrinth disorders                  | common       | common       | Ear pain                 |
|  | common       | not observed | anic membrane hyperaemia |
|  | common       | not observed | Tinnitus                 |
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|  | common       | common       | inus congestion          |
| Gastrointestinal disorders                 | very common  | very common  | Abdominal pain           |
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| d subcutaneous tissue disorders            | common       | very common  | Rash                     |
| ductive system breast disorders            | not observed | common       | Breast mass              |
| Investigations                             | very common  | very common  | teria in sputum          |

The safety data were evaluated in 61 patients between 6 to less than 12 years of age and 94 patients between 12 to less than 18 years of age.

The safety profile is generally consistent among children and adolescents and is also consistent with adult patients.

In children aged 6 to less than 12 years, the incidence of patients experiencing transaminase elevations (ALT or AST) >3 x ULN was 15.0% (6/40) in ivacaftor-treated patients and 14.6% (6/41) in patients who received placebo. A single ivacaftor-treated patient (2.5%) in this age range had an elevation of ALT and AST >8 x ULN. Peak LFT (ALT or AST) elevations were generally higher in paediatric patients than in older patients. In almost all instances where dosing was interrupted for elevated transaminases and subsequently resumed, ivacaftor dosing was able to be resumed successfully (see section 4.4).

**הודעה על החמרה (מידע בטיחות) בעלון לצרכן**  
 (מעודכן 05.2013)

תאריך: 12.07.2016

שם תכשיר באנגלית ומספר הרישום: Kalydeco 150mg 00-01-02-03 153 89 34269

שם בעל הרישום: ורטקס פרמאסוטיקלס (י.ו.קיי) לימיטד

**טופס זה מיועד לפרוט ההחמרות בלבד !**

**ההחמרות המבוקשות**

| טקסט חדש   | טקסט נוכחי   | פרק בעלון              |
|--|--|------------------------|
| <p><b>תופעות לוואי שכיחות מאוד (מופיעות ביותר ממשמש אחד מעשרה):</b></p> <ul style="list-style-type: none"> <li>• זיהום בדרכי הנשימה העליונות (הצטננות), כולל:                             <ul style="list-style-type: none"> <li>◦ כאב גרון</li> <li>◦ גודש באף</li> </ul> </li> <li>• כאב ראש</li> <li>• סחרחורת שלשול</li> <li>• פריחה</li> <li>• <b>שינוי בסוג החיידקים בליחה</b></li> </ul> <p><b>תופעות לוואי שכיחות (מופיעות ב-10-1 משתמשים מתוך 100):</b></p> <ul style="list-style-type: none"> <li>• גודש בסינוסים</li> <li>• נזלת</li> <li>• <b>שינוי בסוג החיידקים בליחה</b></li> <li>• <b>כאב אוזניים, אי נוחות באוזן</b></li> <li>• צלצולים באוזניים</li> <li>• אודם בתוך האוזן</li> <li>• גושים בשד</li> </ul> | <p><b>תופעות לוואי שכיחות מאוד (מופיעות ביותר ממשמש אחד מעשרה):</b></p> <ul style="list-style-type: none"> <li>• זיהום בדרכי הנשימה העליונות (הצטננות), כולל:                             <ul style="list-style-type: none"> <li>◦ כאב גרון</li> <li>◦ גודש באף</li> </ul> </li> <li>• כאב ראש</li> <li>• סחרחורת שלשול</li> <li>• פריחה</li> </ul> <p><b>תופעות לוואי שכיחות (מופיעות ב-10-1 משתמשים מתוך 100):</b></p> <ul style="list-style-type: none"> <li>• גודש בסינוסים</li> <li>• נזלת</li> <li>• שינוי בסוג החיידקים בליחה</li> <li>• כאב אוזניים</li> <li>• צלצולים באוזניים</li> <li>• אודם בתוך האוזן</li> <li>• גושים בשד</li> </ul> | <p>1. תופעות לוואי</p> |