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

____March 26, 2015 ______ תאריך

שם תכשיר באנגלית ומספר הרישום

TOPOTECAN TEVA 1 mg/ml Concentrate for Solution for Infusion 144 28 33245 00

שם בעל הרישום 👘 אביק שיווק בע״מ, ת.ד. 8077, נתניה_

טופס זה מיועד לפרוט ההחמרות בלבד !

ההחמרות המבוקשות			
טקסט חדש	טקסט נוכחי	פרק בעלון	
		Indication	
Topotecan is contraindicated in patients who have a history of severe hypersensitivity to the active substance or to any of the excipients are pregnant or breast feeding (see section 4.6) already have severe bone marrow depression prior to starting first course, as evidenced by baseline neutrophils < 1.5 x 10 ⁹ /l and/or a platelet count \leq 100 x 10 ⁹ /l.	 Topotecan is contraindicated in patients who have a history of severe hypersensitivity to the active substance or to any of the excipients are pregnant or breast feeding (see section 4.6) already have severe bone marrow depression prior to starting first course, as evidenced by baseline neutrophils < 1.5 x 10⁹/1 and/or a platelet count ≤ 100 x 10⁹/1. 	Contraindications	
Patients who experience febrile neutropenia (neutrophil count less than 1 x 10 ⁹ /1 with a temperature of 38°C or above) are recommended to have the dose of topotecan reduced by 20% to 0.60 mg/m ² for subsequent courses. Patients whose platelet count falls below 10 x 10 ⁹ /1 are recommended to have the dose of topotecan reduced by 20% to 0.60 mg/m ² . No dosage adjustment is required in patients with a creatinine clearance more than or equal to 40 ml/min.	Patients who experience febrile neutropenia (neutrophil count less than $1 \ge 10^{9}$ /l with a temperature of 38°C or above) are recommended to have the dose of topotecan reduced by 20% to 0.60 mg/m ² for subsequent courses. Patients whose platelet count falls below 10 $\ge 10^{9}$ /l are recommended to have the dose of topotecan reduced by 20% to 0.60 mg/m ² . No dosage adjustment is required in patients with a creatinine clearance more than or equal to 40 ml/min.	Posology, dosage & administration	
No dosage adjustment is required in patients with hepatic impairment (serum bilirubin in the range 1.5 to 10 mg/dl). Hepatically impaired patients were able to tolerate 1.5 mg/m ² for five days every three weeks although a small reduction in topotecan clearance was observed. Combination therapy Dose adjustment may be necessary if topotecan is administered in combination with other cytotoxic agents (see section 4.5 Interaction with other medicinal products and other forms	<i>Hepatic Impairment</i> No dosage adjustment is required in patients with hepatic impairment (serum bilirubin in the range 1.5 to 10 mg/dl). Hepatically impaired patients were able to tolerate 1.5 mg/m ² for five days every three weeks although a small reduction in topotecan clearance was observed.		

Combination therapy Dose adjustment may be necessary if topotecan is administered in combination with other cytotoxic agents (see section 4.5 Interaction with other medicinal products and other forms of interaction).	
Topotecan should be administered under the direction of a physician experienced in the use of cytotoxic agents. It is recommended that topotecan is not used as a single agent therapy in first line patients. Topotecan and topotecan in combination with cisplatin are commonly associated with clinically relevant thrombocytopenia. This should be taken into account, e.g. in case patients at increased risk of tumour bleeds are considered for therapy.	Special Warnings and Special Precautions for Use
	Interaction with Other Medicaments and Other Forms of Interaction
As with all cytotoxic chemotherapy, effective contraceptive methods must be advised when either partner is treated with topotecan.	pregnancy and Fertility, Lactation
Topotecan has been shown to cause embryo-foetal lethality and malformations in preclinical studies (see section 5.3). As with other cytotoxic medicinal products, topotecan may cause foetal harm and therefore is contraindicated in pregnancy. Women should be advised to avoid becoming pregnant during therapy with topotecan. and to inform the treating physician immediately should this occur.	
Blood and lymphatic system disorders Very common: febrile neutropenia, neutropenia (see Gastrointestinal disorders), thrombocytopenia,	Adverse events
anaemia, leucopenia.	
	Dose adjustment may be necessary if topotecan is administered in combination with other cytotoxic agents (see section 4.5 Interaction with other medicinal products and other forms of interaction). Topotecan should be administered under the direction of a physician experienced in the use of cytotoxic agents. It is recommended that topotecan is not used as a single agent therapy in first line patients. Topotecan and topotecan in combination with cisplatin are commonly associated with clinically relevant thrombocytopenia. This should be taken into account, e.g. in case patients at increased risk of tumour bleeds are considered for therapy. As with all cytotoxic chemotherapy, effective contraceptive methods must be advised when either partner is treated with topotecan. Topotecan has been shown to cause embryo-foetal lethality and malformations in preclinical studies (see section 5.3). As with other cytotoxic medicinal products, topotecan may cause foetal harm and therefore is contraindicated in pregnancy. Women should be advised to avoid becoming pregnant during therapy with topotecan. and to inform the treating physician immediately should this occur.

Very common: infection. Common: sepsis ² . ² Fatalities due to sepsis have been reported in patients treated with topotecan (see section 4.4). <u>Reporting of suspected adverse reactions</u> Reporting suspected adverse reactions after authorisation of the medicinal product is important. It allows continued monitoring of the benefit/risk balance of the medicinal product. Healthcare professionals are asked to report any suspected adverse reactions to the Ministry of Health according to the National Regulation by using an online form (http://forms.gov.il/globaldata/getsequence/getsequence. aspx?formType=AdversEffectMedic@moh.health.gov.il) or by email (adr@MOH.HEALTH.GOV.IL).		
Overdoses have been reported in patients being treated with intravenous topotecan (up to 10 fold of the recommended dose) and topotecan capsules (up to 5 fold of the recommended dose). The observed signs and symptoms for overdose were consistent with the known undesirable events associated with topotecan (see section 4.8). The primary complications of overdose are bone marrow suppression and mucositis. In addition, elevated hepatic enzymes have been reported with intravenous topotecan overdose There is no known antidote for topotecan overdose. Further management should be as clinically indicated or as recommended by the national poisons centre, where available. The primary complications of overdose are anticipated to be bone marrow suppression and mucositis.	There is no known antidote for topotecan overdose. The primary complications of overdose are anticipated to be bone marrow suppression and mucositis.	Pharmacodynamic properties Overdose
		Pharmacokinetic properties
		Pharmaceutical particulars