מאי 2025

SARCLISA

CONCENTRATE FOR SOLUTION FOR INFUSION

חומר פעיל:ISATUXIMAB 20 MG / 1 ML

התוויות התכשיר:

Sarclisa is indicated:
- in combination with pomalidomide and dexamethasone, for the treatment of adult patients with multiple myeloma (MM) who have received at least two prior therapies including lenalidomide and a proteasome inhibitor (PI).
- in combination with carfilzomib and dexamethasone, for the treatment of adult patients with multiple myeloma who have received at least one prior therapy.

חברת סאנופי ישראל מבקשת להודיע על עדכון העלונים לצרכן ולרופא.

העדכונים העיקריים הינם:

בעלון לרופא:

2. QUALITATIVE AND QUANTITATIVE COMPOSITION

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Excipient with known effect
Each vial with 5 ml of concentrate for solution for infusion of isatuximab contains 1 mg of polysorbate 80.
Each vial with 25 ml of concentrate for solution for infusion of isatuximab contains 5 mg of
polysorbate 80.
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3. PHARMACEUTICAL FORM

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Colourless to slightly yellow solution, essentially free of visible particulates (pH of 6.0; osmolality of 350 to 400 mOsm/kg).
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4.2 Posology and method of administration

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Premedication

Prevention of infusion reaction
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Greenwork Park, Yakum, Building E, 1st floor, 6097600, Israel
Tel.: +972-9-8633081 - www.sanofi.co.il

Missed dose
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4.4 Special warnings and precautions for use

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Neutropenia
In patients treated with Isa-Pd, neutropenia was reported as a laboratory abnormality in 96.1% of patients and as an adverse reaction (1) in 46.7% of patients, with Grade 3-4 neutropenia reported as a laboratory abnormality in 84.9% of patients and as an adverse reaction in 45.4% of patients. Neutropenic complications have been observed in 30.3% of patients, including 11.8% of febrile neutropenia and 25.0% of neutropenic infections. In patients treated with Isa-Kd, neutropenia was reported as a laboratory abnormality in 54.8% of patients and as an adverse reaction (1) in 4.5% of patients, with Grade 3-4 neutropenia reported as a laboratory abnormality in 19.2% of patients (with 17.5% Grade 3 and 1.7% Grade 4) and as an adverse reaction in 4.0% of patients. Neutropenic complications have been observed in 2.8% of patients, including 1.1% of febrile neutropenia and 1.7% of neutropenic infections (see section 4.8). Complete blood cell counts should be monitored periodically during treatment. Patients with neutropenia should be monitored for signs of infection. No dose reductions of SARCLISA are recommended. SARCLISA dose delays and the use of colony-stimulating factors (e.g. G-CSF) should be considered to mitigate the risk of neutropenia (see section 4.2).
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Infection
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Antibacterial and antiviral prophylaxis (such as herpes zoster prophylaxis) according to treatment guidelines shouldbe considered during treatment (see sections 4.2 and 4.8).
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Excipient with known effect
This medicine contains 0.2 mg of polysorbate 80 in each mL of isatuximab concentrate for solution for infusion, which is equivalent to 0.1 mg/kg of body weight.
Polysorbates may cause allergic reactions.
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4.7 Effects on ability to drive and use machines

SARCLISA has no or negligible influence on the ability to drive and use machines. Fatigue and dizziness have been reported in patients taking SARCLISA and this should be taken into account when driving or using machines. For other medicinal products that are administered with SARCLISA, refer to the respective current Prescribing information.

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4.8 Undesirable effects

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The adverse reactions were reported in clinical studies (see section 5.1) and post-market settings.

Table 3: Adverse reactions reported in patients with multiple myeloma treated with isatuximabin combination with pomalidomide and low-dose dexamethasone

System Organ Class Preferred Term	Adverse reaction	Frequency	Incidence (%) (N=152)	
			Any Grade	Grade ≥3
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Blood and lymphatic system disorders	Neutropenia	Very common	52.5%	51.6%
	Thrombocytopenia	Very common	12.7%	11.9%
	Febrile neutropenia	Common	7.4%	7.4%
	Anaemia	Common	6.1%	4.5%
	Lymphopenia[d]	Not known	-----	-----
Immune system disorders	Anaphylactic reaction[d]	Uncommon	0.3%	0.3%

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[d] Based on post-marketing adverse reactions.

Table 4: Adverse reactions reported in patients with multiple myeloma treated with isatuximab in combination with carfilzomib and dexamethasone[a]

System Organ Class Preferred Term	Adverse reaction	Frequency	Incidence (N=177)	
			Any Grade	Grade ≥3
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Blood and lymphatic system disorders	Anaemia	Common	5.1%	4.5%
	Neutropenia	Common	4.5%	4.0%
	Thrombocytopenia	Common	2.8%	2.3%
	Lymphopenia[e]	Not known	-----	-----
Immune system disorders	Anaphylactic ~~reaction[e]~~reaction[e]	Uncommon	~~5 (~~0.3%~~)~~	~~5 (~~0.3%~~)~~

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e Based on post-marketing adverse reactions.

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Infections

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In relapsed and refractory multiple myeloma clinical studies,, herpes zoster was reported in 2.0% of patients. In ICARIA-MM, the incidence of herpes zoster was 4.6% in the Isa-Pd group compared to 0.7% in the Pd group, and in IKEMA, incidence was 2.3% in the Isa-Kd group compared to 1.6% in the Kd group.
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Immunogenicity
Across 9 clinical studies in relapsed or refractory multiple myeloma (RRMM) with isatuximab single agent and combination therapies including ICARIA-MM and IKEMA (N=1023), the incidence of treatment emergent anti-drug antibodies (ADA)s was 2%. No effect of ADAs was observed on pharmacokinetics, safety or efficacy of isatuximab.

Additional adverse reactions in clinical trials
Very common: Covid-19, cataract
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4.9 Pharmacokinetic properties
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Isatuximab exposure (area under the plasma concentration-time curve over the dosing interval AUC) increases in a greater than dose proportional manner from 1 to 20 mg/kg following every 2 weeks schedule, while no deviation to the dose proportionality is observed between 5 and 20 mg/kg following every week for 4 weeks followed by every 2 weeks schedule. This is due to the high contribution of nonlinear target-mediated clearance to the total clearance at doses below 5 mg/kg, which becomes negligible at higher doses. After isatuximab 10 mg/kg administration every week for 4weeks followed by every 2 weeks, the median time to reach steady state was 18 weeks with a 3.1-fold accumulation. In ICARIA-MM, clinical study performed in relapsed and/or refractory multiple myeloma patients treated with isatuximab in combination with pomalidomide and dexamethasone, the mean (CV%) predicted maximum plasma concentration C_{max} and AUC at steady state were 351 µg/mL (36.0%) and 72,600 µg.h/mL (51.7%), respectively. Although the change froma weight-based volume administration method for isatuximab infusion to the fixed volume infusion method resulted in changes in the t_{max}, the change had a limited impact on pharmacokinetics exposure with comparable simulated C_{max} at steady state (283 µg/mL vs 284 µg/mL) and C_{trough} at 4 weeks (119 µg/mL vs 119 µg/mL) for a patient with median weight (76 kg). Also for other patientweight groups, C_{max} and C_{trough} were comparable. In IKEMA, clinical study performed in relapsed and/or refractory multiple myeloma patients treated with isatuximab in combination with carfilzomib and dexamethasone, the mean (CV%) predicted maximum plasma concentration C_{max} and AUC at steady state were 637 µg/mL (30.9%) and 152,000 µg.h/mL (37.8%), respectively.
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בעלון לצרכן:

2. לפני השימוש בתרופה

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סרקליסה מכילה פוליסורבאט 80

תרופה זו מכילה 0.2 מ"ג פוליסורבאט 80 בכל מ"ל של איזטוקסימאב תמיסה מרוכזת להכנת תמיסה לעירוי, כמות שהינה שוות ערך ל- 0.1 מ"ג/ק"ג משקל גוף.

פוליסורבאטים עשויים לגרום לתגובות אלרגיות. ספר לרופא שלך אם ידוע לך שיש לך אלרגיות.

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4. תופעות לוואי

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תופעות לוואי שכיחות מאד (יכולות להופיע אצל יותר מ-1 מתוך 10 אנשים):

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ירידה בתיאבון

תופעות לוואי שכיחות מאוד נוספות שנצפו במחקרים קליניים:

- קוביד-19
- עכירות בעין (קטרקט)

תופעות לוואי שכיחות (יכולות להופיע אצל עד 1 מתוך 10 אנשים):

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- חום עם ירידה משמעותית בתאי דם לבנים מסוימים (חום נויטרופני) (ראה סעיף 2 "לפני השימוש בתרופה" לפרטים נוספים)
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העלונים המעודכנים נשלחו לפרסום במאגר התרופות שבאתר משרד הבריאות וניתן לקבלם מודפסים על ידי פנייה לבעל הרישום - סאנופי ישראל בע"מ, Greenwork Park, מתחם העסקים בקיבוץ יקום, בניין E (קומה 1), 6097600, יקום או בטלפון: 09-8633081.

להלן הקישור לאתר משרד הבריאות: https://israeldrugs.health.gov.il/#!/byDrug

בברכה,
חברת סאנופי ישראל בע"מ