

אוגוסט 2023

**Neupogen® (Filgrastim) 30, 48 MU (Pre-filled syringe/vials)**  
**Solution for injection**

רופא/ה נכבד/ה, רוקח/ת נכבד/ה,

אמג'ן אירופה בי.וי., בעלת הרישום, מבקשת להודיעך על שינוי נוסח והרחבת התוויה עבור מטופלים הלוקים ב-HIV שאושרה לתכשירים:

**Neupogen 30, 48 MU Pre-filled syringe; Neupogen 30 MU Vials**

העלונים לרופא ולצרכן של התכשירים כוללים עדכונים נוספים הנובעים מהשינויים בהתוויה.

בהודעה זו מצוינים העדכונים המשמעותיים בלבד. קו תחתי מצוין הוספת טקסט, קו חוצה מצוין מחיקה.

#### 4.1 Therapeutic indications

~~–Reduction in the duration and severity of neutropenia in patients treated with highly myelosuppressive chemotherapy for malignancy (with the exception of chronic myeloid leukemia and myelodysplastic syndromes).~~

~~–Reduction in the duration of neutropenia in patients undergoing high-dose cytotoxic chemotherapy followed by bone marrow transplantation.~~

~~–In children or adults with severe congenital neutropenia, cyclic neutropenia or idiopathic neutropenia, a history of clinically important infections within the last 12 months and three documented episodes of neutropenia (with an ANC < 5 × 10<sup>9</sup>/l), long-term administration of Neupogen is indicated to increase neutrophil counts and to reduce infections.~~

~~–Neupogen is indicated for the mobilization of autologous peripheral blood progenitor cells alone or following myelosuppressive chemotherapy and the mobilization of peripheral blood progenitor cells in normal donors (allogeneic PBPC).~~

Neupogen is indicated for the reduction in the duration of neutropenia and the incidence of febrile neutropenia in patients treated with established cytotoxic chemotherapy for malignancy (with the exception of chronic myeloid leukemia and myelodysplastic syndromes) and for the reduction in the duration of neutropenia in patients undergoing myeloablative therapy followed by bone marrow transplantation considered to be at increased risk of prolonged severe neutropenia.

The safety and efficacy of Neupogen are similar in adults and children receiving cytotoxic chemotherapy.

Neupogen is indicated for the mobilization of peripheral blood progenitor cells (PBPCs).

In patients, children, or adults, with severe congenital, cyclic, or idiopathic neutropenia with an absolute neutrophil count (ANC) of  $\leq 0.5 \times 10^9/l$ , and a history of severe or recurrent infections, long-term administration of Neupogen is indicated to increase neutrophil counts and to reduce the incidence and duration of infection-related events.

**Neupogen is indicated for the treatment of persistent neutropenia (ANC less than or equal to  $1.0 \times 10^9/l$ ) in patients with advanced HIV infection, in order to reduce the risk of bacterial infections when other options to manage neutropenia are inappropriate.**

## 4.2 Posology and method of administration

...

### In patients with HIV infection

#### Posology

##### For reversal of neutropenia:

The recommended starting dose of Neupogen is 0.1 MU (1 µg)/kg/day, with titration up to a maximum of 0.4 MU (4 µg)/kg/day until a normal neutrophil count is reached and can be maintained (ANC > 2.0 × 10<sup>9</sup>/l). In clinical studies, > 90% of patients responded at these doses, achieving reversal of neutropenia in a median of 2 days.

In a small number of patients (< 10%), doses up to 1.0 MU (10 µg)/kg/day were required to achieve reversal of neutropenia.

##### For maintaining normal neutrophil counts:

When reversal of neutropenia has been achieved, the minimal effective dose to maintain a normal neutrophil count should be established. Initial dose adjustment to alternate day dosing with 30 MU (300 µg)/day is recommended. Further dose adjustment may be necessary, as determined by the patient's ANC, to maintain the neutrophil count at > 2.0 × 10<sup>9</sup>/l. In clinical studies, dosing with 30 MU (300 µg)/day on 1 to 7 days per week was required to maintain the ANC > 2.0 × 10<sup>9</sup>/l, with the median dose frequency being 3 days per week. Long-term administration may be required to maintain the ANC > 2.0 × 10<sup>9</sup>/l.

#### Method of administration

Reversal of neutropenia or maintaining normal neutrophil counts: Neupogen should be given by subcutaneous injection.

## 4.4 Special warnings and precautions for use

...

### Special precautions in patients with HIV infection

#### Blood cell counts

Absolute neutrophil count (ANC) should be monitored closely, especially during the first few weeks of Neupogen therapy. Some patients may respond very rapidly and with a considerable increase in neutrophil count to the initial dose of Neupogen. It is recommended that the ANC is measured daily for the first 2-3 days of Neupogen administration. Thereafter, it is recommended that the ANC is measured at least twice per week for the first two weeks and subsequently once per week or once every other week during maintenance therapy. During intermittent dosing with 30 MU (300 µg)/day of Neupogen, there can be wide fluctuations in the patient's ANC over time. In order to determine a patient's trough or nadir ANC, it is recommended that blood samples are taken for ANC measurement immediately prior to any scheduled dosing with Neupogen.

#### Risk associated with increased doses of myelosuppressive medications

Treatment with Neupogen alone does not preclude thrombocytopenia and anemia due to myelosuppressive medications. As a result of the potential to receive higher doses or a greater number of these medications with Neupogen therapy, the patient may be at higher risk of developing thrombocytopenia and anemia. Regular monitoring of blood counts is recommended (see above).

### Infections and malignancies causing myelosuppression

Neutropenia may be due to bone marrow infiltrating opportunistic infections such as *Mycobacterium avium* complex or malignancies such as lymphoma. In patients with known bone marrow infiltrating infections or malignancy, consider appropriate therapy for treatment of the underlying condition, in addition to administration of Neupogen for treatment of neutropenia. The effects of Neupogen on neutropenia due to bone marrow infiltrating infection or malignancy have not been well established.

### שינויים בעלון לצרכן:

1. למה מיועדת התרופה?

...

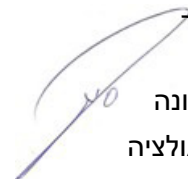
ניפוגן יכולה לשמש:

- להעלאת מספר תאי הדם הלבנים לאחר טיפול כימותרפי, בכדי לסייע במניעת זיהומים.
- להעלאת מספר תאי הדם הלבנים לאחר השתלת מח עצם, בכדי לסייע במניעת זיהומים.
- לפני כימותרפיה במינון גבוה, לגרום למח העצם לייצר יותר תאי אב, אשר ניתן לאסוף ולהחזיר לך לאחר הטיפול. ניתן לקחת אותם ממך או מתורם. תאי האב ישובו אחרי כן לתוך מח העצם וייצרו תאי דם.
- להעלאת מספר תאי הדם הלבנים אם הנך סובל מנויטרופניה כרונית חמורה (Severe Chronic Neutropenia = SCN), בכדי לסייע במניעת זיהומים.
- במטופלים עם זיהום מתקדם בנגיף הכשל החיסוני (HIV), בכדי לסייע בהפחתת הסיכון לזיהומים.

העלונים המעודכנים נשלחו לפרסום במאגר התרופות שבאתר משרד הבריאות, וניתן לקבלם גם על-ידי פניה למפיץ המקומי של התרופה, חברת מדיסון פארמה. שרות לקוחות: [Medison-CS@medison.co.il](mailto:Medison-CS@medison.co.il) טלפון: \*5634

בברכה,

סיגל בן דור



רוקחת ממונה  
ומנהלת רגולציה