

יוני 2021

**REPATHA (Evolocumab)**  
**Solution for injection**

רופא/ה נכבד/ה, רוקח/ת נכבד/ה,  
אמג'ן אירופה בי.וי, בעלת הרישום, מבקשת להודיעך על עדכונים בעלון לרופא ולצרכן לתכשיר  
רפאטה.  
בהודעה זו מצוינים העדכונים המהותיים וההחמרות בלבד.  
השינויים מפורטים להלן (קו תחת – הוספת טקסט, קו חוצה – מחיקת טקסט).

**ההתוויות הרשומות לתכשיר:**

**Hypercholesterolemia and mixed dyslipidemia**

Repatha is indicated in adults with primary hypercholesterolemia (heterozygous familial and non-familial) or mixed dyslipidemia, as an adjunct to diet:

- in combination with a statin or statin with other lipid-lowering therapies in patients unable to reach LDL-C goals with the maximum tolerated dose of a statin or,
- alone or in combination with other lipid-lowering therapies in patients who are statin-intolerant, or for whom a statin is contraindicated.

**Homozygous familial hypercholesterolemia**

Repatha is indicated in adults and adolescents aged 12 years and over with homozygous familial hypercholesterolemia in combination with other lipid-lowering therapies.

**Established atherosclerotic cardiovascular disease**

Repatha is indicated in adults with established atherosclerotic cardiovascular disease (myocardial infarction, stroke or peripheral arterial disease) to reduce cardiovascular risk by lowering LDL-C levels, as an adjunct to correction of other risk factors:

- in combination with the maximum tolerated dose of a statin with or without other lipid-lowering therapies or,
- alone or in combination with other lipid-lowering therapies in patients who are statin-intolerant, or for whom a statin is contraindicated.

#### 4.8 Undesirable effects

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MedDRA system organ class (SOC)	Adverse reactions	Frequency category
Infections and infestations	Influenza	Common
	Nasopharyngitis	Common
	Upper respiratory tract infection	Common
Immune system disorders	Hypersensitivity	Common
	Rash	Common
	Urticaria	Uncommon
<b><u>Nervous system disorders</u></b>	<b><u>Headache</u></b>	<b><u>Common</u></b>
Gastrointestinal disorders	Nausea	Common
Skin and subcutaneous tissue disorders	Angioedema	Rare
Musculoskeletal and connective tissue disorders	Back pain	Common
	Arthralgia	Common
	<b><u>Myalgia</u></b>	<b><u>Common</u></b>
General disorders and administration site conditions	Injection site reactions <sup>1</sup>	Common
	Influenza-like illness	Uncommon

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#### 5.1 Pharmacodynamic properties

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##### Effect on LDL-C during acute phase of acute coronary syndromes (ACS)

EVOPACS was a single country, multicenter, double-blind, randomized, placebo-controlled, 8-week study on 308 ACS patients with evolocumab initiated in-hospital within 24 to 72 hours of presentation.

If patients were not on a statin or were on statin treatment other than atorvastatin 40 mg prior to screening, this was stopped and atorvastatin 40 mg once daily was initiated. Randomization was stratified by study centre and presence of stable statin treatment within  $\geq 4$  weeks prior to enrolment. Most subjects (241 [78%]) were not on stable statin treatment for  $\geq 4$  weeks prior to screening and most (235 [76%]) were not taking a statin at baseline. By week 4, 281 (97%) subjects were receiving high-intensity statins. Evolocumab 420 mg once monthly significantly reduced LDL-C from baseline to week 8 compared with placebo

( $p < 0.001$ ). The mean (SD) reduction in calculated LDL-C from baseline at week 8 was 77.1% (15.8%) in the evolocumab group and 35.4% (26.6%) in the placebo group with a least squares (LS) mean difference (95% CI) of 40.7% (36.2%, 45.2%). Baseline LDL-C values were 3.61 mmol/L (139.5 mg/dL) in the evolocumab group and 3.42 mmol/L (132.2 mg/dL) in the placebo group. LDL-C reductions in this study were consistent with previous studies where evolocumab was added to stable lipid-lowering therapy as demonstrated by on-treatment LDL-C levels at week 8 in this study (reflecting steady-state effect of high-intensity statin in both treatment arms) of 0.79 mmol/L (30.5 mg/dL) and 2.06 mmol/L (79.7 mg/dL) in the evolocumab plus atorvastatin and the placebo plus atorvastatin groups, respectively.

The effects of evolocumab in this patient population were consistent with those observed in previous studies in evolocumab clinical development program and no new safety concerns were noted.

#### עדכונים בעלון לצרכן:

#### 4. תופעות לוואי

##### תופעות לוואי שכיחות: תופעות שמופיעות ב 10-1 מטופלים מתוך 100:

- שפעת (חום גבוה, כאב גרון, נזלת, שיעול וצמרמורות)
- התקררות, כמו נזלת, כאב גרון או דלקות בסינוסים (דלקת אף וגרון או זיהומים בדרכי הנשימה העליונות)
- בחילות
- כאבי גב
- כאבי מפרקים (ארטרלגיה)
- כאבי שרירים
- תגובות במקום ההזרקה, כמו חבלה, אודם, דימום, כאב או נפיחות
- תגובות אלרגיות כולל פריחה בעור
- כאב ראש

בנוסף עדכונים המתוארים מעלה, בוצע עדכון כללי של המדריך למשתמש.

את השינויים המפורטים ניתן לראות בעלון לרופא ולצרכן המצורפים למכתב זה.

העלון לרופא ולצרכן המעודכנים נשלחו לפרסום במאגר התרופות של אתר משרד הבריאות, וניתן לקבלם גם על-ידי פניה למפיץ המקומי של התרופה, חברת מדיסון פארמה.

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בברכה,

מאיה ליפסון

  
רוקחת ממונה