



תאריך יולי 2021

רופא /ה, רוקח/ת נכבד/ה

חברת טבע מודיעה על העדכונים הבאים בעלון לרופא של התכשיר

גמסיטאבין טבע תמיסה מרוכזת, תמיסה מרוכזת להזרקה

Gemcitabine Teva concentrate, concentration for solution for infusion

Contains: 40 mg/ml, *gemcitabine (as hydrochloride)*

עדכונים בעלון לרופא

התוויה כפי שאושרה בתעודת הרישום:

Non-Small Cell Lung Cancer:

Gemcitabine Teva 40 mg/ml Concentrate for Solution for Infusion is indicated for the palliative treatment of patients with locally advanced or metastatic non-small cell lung cancer.

Breast cancer:

Gemcitabine Teva 40 mg/ml Concentrate for Solution for Infusion in combination with paclitaxel, is indicated for the treatment of patients with unresectable, locally recurrent or metastatic breast cancer who have relapsed following adjuvant/neoadjuvant chemotherapy. Prior chemotherapy should have included an anthracycline unless clinically contraindicated.

Pancreatic Cancer:

Gemcitabine Teva 40 mg/ml Concentrate for Solution for Infusion is indicated for the treatment of patients with locally advanced or metastatic adenocarcinoma of the pancreas and for patients with 5-FU refractory pancreatic cancer.

Bladder Cancer:

Gemcitabine Teva 40 mg/ml Concentrate for Solution for Infusion is indicated for the treatment of patients with bladder cancer at the invasive stage.

Ovarian cancer:

Gemcitabine Teva 40 mg/ml Concentrate for Solution for Infusion in combination with carboplatin, is indicated for the treatment of patients with recurrent epithelial ovarian carcinoma who have relapsed at least 6 months after platinum-based therapy.



ברצוננו להודיע שהעלון לרופא F עודכן, בפירוט שלהלן כלולים העדכונים העיקריים בלבד (תוספות מסומנות באדום והסרות מידע כטקסט מחוק):

[...]

4.4 Special warnings and precautions for use

[...]

Hepatic or renal impairment

[...]

Patients with AST elevation tolerated gemcitabine without increasing toxicity, but patients with elevated bilirubin levels (>1.6 mg/dl) had a significantly increased risk of hepatotoxicity after gemcitabine therapy. A recommendation for dose reduction in the setting of liver dysfunction is promoted.

Patients with renal dysfunction presented with unusual side effects in response to gemcitabine, especially skin toxicity in the form of diffuse erythema and desquamation (see section Undesirable Effects)

[...]

4.8 Undesirable effects

[...]

System Organ Class	Frequency grouping
[...]	[...]
<i>Blood and lymphatic system disorders</i>	[...] <u>Very rare</u> Thrombocytosis, thrombotic microangiopathy
[...]	[...]
<i>Skin and subcutaneous tissue disorders</i>	[...] <u>Very rare</u> Toxic epidermal necrolysis Stevens-Johnson syndrome <u>Not known</u> Pseudocellulitis
<i>Renal and urinary disorders</i>	<u>Very common</u> Increased creatinine

[...]

Combination use in non-small-cell lung cancer



*Grade 3 and 4 adverse events
gemcitabine plus cisplatin vs. paclitaxel plus cisplatin*

	% of Patients			
	Gemitabine plus Cisplatin arm (N=293)		Paclitaxel plus Cisplatin arm (N=300)	
	Grade 3	Grade 4	Grade 3	Grade 4
Hematologic Toxicity				
Neutrophil count	24	39	18	57
Platelet count	22	28	4	2
Anemia	27	1	12	1
Infection	2	1	4	2
Febrile neutropenia	1	3	2	14
Non-hematologic Toxicity				
Cardiac toxicity	3	1	0	1
Renal toxicity	2	1	0	0
Nausea	37	0	25	0
Vomiting	7	28	3	21
Diarrhea	2	1	1	6
Hypersensitivity	0	0	2	1
Weakness	17	0	13	1
Neuropathy	9	0	5	0
All toxic effects highest Grade	21	68 4 Grade 5	19	68 5 Grade 5

[...]

העלון לרופא נשלח לפרסום במאגר התרופות שבאתר האינטרנט של משרד הבריאות

וניתן לקבלו מודפס ע"י פניה לחברת טבע. <http://www.health.gov.il>