

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

**תאריך: 27/07/2017**

**שם תכשיר באנגלית ומספר הרישום: 146-29-33301-01 Firdapse tablets**

**שם בעל הרישום: מדיסון פארמה בע"מ**

**טופס זה מיועד לפרוט ההחמרות בלבד !**

ההחמרות המבוקשות		
פרק בעלון	טקסט נוכחי	טקסט חדש
4.4 Special warnings and precautions for use	<p><u>Carcinogenicity risk</u>  Amifampridine has not been fully tested in carcinogenicity models, and the carcinogenicity risk associated with treatment has not been determined.</p> <p>The use of amifampridine in patients with the non-paraneoplastic form of LEMS should only be commenced following a thorough assessment of the risk-benefit to the patient.</p>	<p><u>Carcinogenicity risk</u>  Amifampridine has not been fully tested in carcinogenicity models, and the carcinogenicity risk associated with treatment has not been determined.</p> <p>The use of amifampridine in patients with the non-paraneoplastic form of LEMS should only be commenced following a thorough assessment of the risk-benefit to the patient.</p> <p>In a 2-year dietary carcinogenicity study, benign and malignant Schwannomas have been observed in rats treated with amifampridine (see section 5.3). Amifampridine was not genotoxic in a standard battery of <i>in vitro</i> and <i>in vivo</i> tests. The correlation between the use of amifampridine and the development of tumours in humans is unknown at this time.</p> <p>Most Schwannomas are benign and asymptomatic. They can present in many locations, therefore the clinical presentation can be varied. A diagnosis of Schwannoma should be considered for patients who present with symptoms such as a mass that is painful on palpation or symptoms similar to a compressive neuropathy. Schwannomas are</p>

<p>generally slow-growing and can exist for months to years without producing symptoms. The benefit of continuing treatment with amifampridine should be reviewed for any patient who develops a Schwannoma.</p> <p>Amifampridine should be used with caution in patients with an increased risk of Schwannomas, such as patients with past medical history of such tumours, neurofibromatosis Type 2 or schwannomatosis</p>		
<p>In a repeat-dose toxicity studies in rats and dogs, effects on the central and autonomic nervous system, increased liver and kidney weights and cardiac effects (second degree atrioventricular block) were seen. No safety margins to human exposure were achieved in the animal studies due to the sensitivity of the animal models used.</p> <p>In a 2-year rat dietary carcinogenicity study, amifampridine caused small but statistically significant dose-related increases in the incidence of Schwannomas in both genders and of endometrial carcinomas in females. The clinical relevance of these results is unknown</p> <p>Amifampridine was not genotoxic in a standard battery of <i>in vitro</i> and <i>in vivo</i> tests, but the results of full carcinogenicity studies are not available.</p>	<p>In a repeat-dose toxicity studies in rats and dogs, effects on the central and autonomic nervous system, increased liver and kidney weights and cardiac effects (second degree atrioventricular block) were seen. No safety margins to human exposure were achieved in the animal studies due to the sensitivity of the animal models used.</p> <p>Amifampridine was not genotoxic in a standard battery of <i>in vitro</i> and <i>in vivo</i> tests, but the results of full carcinogenicity studies are not available.</p>	<p><b>5.3 Preclinical safety data</b></p>

