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Direct Health Care Professional communication

Lenograstim (Granocyte®) is associated with a risk of capillary leak syndrome in patients with cancer and in healthy donors

Dear Healthcare Professional,

Chugai Pharma UK Ltd., in association with the European Medicines Agency and the Irish Medicines Board (IMB), would like to inform you about an adverse effect of capillary leak syndrome (CLS) associated with lenograstim.

Summary

- **CLS has been reported in recipients of lenograstim (as with other G-CSF drugs) during post-marketing experience, including patients undergoing chemotherapy and a healthy donor undergoing peripheral blood progenitor cell mobilisation.**
- **Episodes vary in severity and frequency and may be fatal. CLS is characterised by hypotension, hypoalbuminaemia, oedema and haemoconcentration.**
- **Healthcare professionals should closely monitor for CLS symptoms in patients and healthy donors receiving lenograstim. Standard symptomatic treatment should be given immediately if symptoms occur (this may include intensive care).**
- **Patients and healthy donors should be advised to contact their doctor immediately if they develop symptoms (often with rapid onset) such as generalised body swelling, puffiness (which may be associated with passing water less frequently), difficulty breathing, abdominal swelling and tiredness.**
- **The benefits of lenograstim continue to outweigh any risks in the approved indications.**

Further information on the safety concern

CLS has been reported in patients with cancer undergoing chemotherapy and a healthy donor undergoing peripheral blood progenitor cell mobilisation who were receiving the granulocyte colony-stimulating factor (G-CSF) product lenograstim. Reports have generally involved people with advanced malignant diseases, sepsis, those taking multiple chemotherapy medications or those undergoing apheresis. The mechanism of CLS remains unclear.

For lenograstim, 11 post-marketing reports of CLS were received world-wide between 04-October-1991 (International Birth Date) up to 31 October 2013. Of these 11 reports, one case concerned a healthy donor undergoing stem cell mobilisation and apheresis. In 7 cases, including the healthy donor, there was a positive de-challenge with supportive treatment or corticosteroids. In the majority of cases, the CLS symptoms occurred during or after the first course of lenograstim treatment. In 1 case the symptoms occurred during the first course with a positive re-challenge during the second course. Two cases had a fatal outcome from CLS.

The total number of CLS reports expressed above have been seen in over 1,5 million patients as of 31st October 2013 exposed to lenograstim in the post-marketing setting.

The Summaries of Product Characteristics and Patient Information Leaflet for lenograstim have been updated to reflect the new safety information please see annex 1 and 2 respectively.

Call for reporting

Any suspected adverse reactions associated with the use of lenograstim should be reported to the Irish Medicines Board using a Yellow Card obtained either from the Irish Medicines Board or electronically via the online reporting system at www.imb.ie. Adverse reactions can also be reported to the Irish Medicines Board by calling on (01) 676 4971.

Additionally, any such information may be reported to Chugai Pharma UK Ltd. by contacting Chugai UK/Ireland Drug Safety Department directly on +44 (0)208 987 5600 or pv@chugai-pharm.co.uk.

Company contact point

Should you have any questions or require additional information regarding the use of Granocyte®, please contact Chugai UK/Ireland Medical Information on +44 (0)208 987 5600 or by email to medinfo@chugai-pharm.co.uk.

Sincerely,

Dr. Simon Long, Medical Director UK and Ireland

Annex 1: Summary of Product Characteristics. Note on Granocyte®: Only the updated Granocyte® 34 million IU/mL, powder and solvent for solution for injection/infusion in a pre-filled syringe SmPC is appended to this communication. The information in this communication is applicable to both Granocyte® strengths.

Annex 2: Patient Information Leaflet