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Committee for Medicinal Products for Human Use (CHMP)

Tarceva

Erlotinib

Procedure No: EMEA/H/C/618/PSU/020

Scientific conclusions and grounds recommending the variation to the terms of the Marketing Authorisation

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Scientific conclusions
Taking into account the PRAC Assessment Report on the PSUR for Tarceva, the scientific conclusions of PRAC are as follows:

Based on the PRAC review of data on safety and efficacy, the PRAC considers by concensus that the risk-benefit balance of medicinal products containing the active substance erlotinib remains favourable but recommends that the terms of the marketing authorisation should be varied as follows:

- Section 4.4, skin disorders: Patients with bullous and exfoliative skin disorders should be tested for skin infection and treated according to local management guidelines.

- Section 4.5 Intercations: Due to the working mechanism, proteasome inhibitors including bortezomib may be expected to influence the effect of EGFR inhibitors including erlotinib. Such influence is supported by limited clinical data and preclinical studies showing EGFR degradation through the proteasome.

- Section 4.4, interstitial lung disease: A higher incidence of ILD (approximately 5 % with a mortality rate of 1.5%) is seen among patients with Japanese origin.

- Section 4.8, table 3: ILD should be placed under common in the table with an additional note stating that the higher incidence is mainly seen in patients of Japanese origin.

- Section 4.4: Nephrotoxicity: “There have been rare reports of hypokalaemia and renal failure (including fatalities). Some cases were secondary to severe dehydration due to diarrhoea, vomiting and/or anorexia while others were confounded by concomitant chemotherapy. In more severe or persistent cases of diarrhoea, or cases leading to dehydration, particularly in groups of patients with aggravating risk factors (*especially* concomitant *chemotherapy and* medications, symptoms or diseases or other predisposing conditions including advanced age), Tarceva therapy should be interrupted and appropriate measures should be taken to intensively rehydrate the patients intravenously. In addition, renal function and serum electrolytes including potassium should be monitored in patients at risk of dehydration”.

The amendments recommended to be introduced to the product information to the marketing authorisation are included in Annex 1.

The CHMP agrees with the scientific conclusions made by the PRAC.

Grounds recommending the variation to the terms of the Marketing Authorisation

On the basis of the scientific conclusions for Tarceva the CHMP is of the opinion that the benefit-risk balance of the medicinal product containing the active substance erlotinib is favourable subject to the proposed changes to the product information.

The CHMP recommends that the terms of the Marketing Authorisation should be varied.