Annex I

Scientific conclusions and grounds for the variation to the terms of the Marketing Authorisation(s)

Scientific conclusions

Taking into account the PRAC Assessment Report on the PSUR(s) for pancuronium, the scientific conclusions are as follows:

In view of available data on risks from the literature, and in view of a plausible mechanism of action, the PRAC considers use of neuromuscular blocking agents, including pancuronium, during anaesthesia could be associated with an increased risk of post-operative pulmonary complications. In view of available data on risks from the literature, and in view of a plausible mechanism of action, the PRAC considers a causal relationship between pancuronium and myopathy is established.

The PRAC concluded that the product information of products containing pancuronium should be amended accordingly.

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

Grounds for the variation to the terms of the Marketing Authorisation(s)

On the basis of the scientific conclusions for pancuronium the CMDh is of the opinion that the benefit-risk balance of the medicinal product(s) containing pancuronium is unchanged subject to the proposed changes to the product information.

The CMDh reaches the position that the marketing authorisation(s) of products in the scope of this single PSUR assessment should be varied. To the extent that additional medicinal products containing pancuronium are currently authorised in the EU or are subject to future authorisation procedures in the EU, the CMDh recommends that the concerned Member States and applicant/marketing authorisation holders take due consideration of this CMDh position.

Annex II
Amendments to the product information of the nationally authorised medicinal product(s)

Amendments to be included in the relevant sections of the Product Information (new text underlined and in bold, deleted text ~~strike through~~)

Summary of Product Characteristics

- Section 4.4

A warning should be added as follows:

As with other neuromuscular blocking agents, residual neuromuscular blockade has been reported for pancuronium, which can lead to post-operative complications. Several studies have shown that use of neuromuscular blocking agents during anaesthesia could be associated with an increased risk of post-operative pulmonary complications. In order to prevent complications resulting from residual neuromuscular block, adherence to local clinical practice guidelines, including neuromuscular monitoring and use of neuromuscular blockade reversal agents where appropriate, is recommended.

A warning on myopathy should be added as follows:

Myopathy after long term administration of other non-depolarising neuromuscular blocking agents in the ICU in combination with corticosteroid therapy has been reported regularly. Therefore, for patients receiving both neuromuscular blocking agents and corticosteroids, the period of use of the neuromuscular blocking agent should be limited as much as possible.

- Section 4.8

The following adverse reaction should be added under the SOC Musculoskeletal and connective tissue disorders with a frequency not known:
Myopathy*
***Myopathy has been reported after the use of various neuromuscular blocking agents in the ICU in combination with corticosteroids (see section 4.4).**

Package Leaflet

4. Possible side effects

Frequency not known: **Muscle weakness**

Annex III

Timetable for the implementation of this position

Timetable for the implementation of this position

Adoption of CMDh position:	07/2020 CMDh meeting
Transmission to National Competent Authorities of the translations of the annexes to the position:	21 September 2020
Implementation of the position by the Member States (submission of the variation by the Marketing Authorisation Holder):	5 November 2020