

Annex related to the Art. 127a

Conditions or restrictions with regard to the safe and effective use of the medicinal product to be implemented by the member states

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The Member States should ensure that all conditions or restrictions with regard to the safe and effective use of the medicinal product described below are implemented:

1. The MAH shall agree the details of a controlled access programme with the National Competent Authorities and must implement such programme nationally to ensure that:
 - Prior to prescribing (where appropriate, and in agreement with the National Competent Authority, dispensing) all healthcare professionals who intend to prescribe (and dispense) pomalidomide are provided with an Educational Healthcare Professional's Kit containing the following:
 - o Educational Healthcare Professional brochure
 - o Educational brochures for patients
 - o Patient card
 - o Risk awareness forms
 - o Information on where to find latest Summary of Product Characteristics (SmPC).
2. The MAH shall implement a pregnancy prevention programme (PPP) in each Member State. Details of the PPP should be agreed with the National Competent Authorities in each Member State and put in place prior to the launch of the medicinal product.
3. The MAH should agree the contents of the Educational Healthcare Professional's Kit with the National Competent Authority in each Member State prior to launch of the medicinal product and ensure that the materials contain the key elements as described below.
4. The MAH should agree on the implementation of the controlled access programme in each Member State.

Key elements to be included

The Educational Healthcare Professional's Kit

The Educational Healthcare Professional's Kit shall contain the following elements:

Educational Healthcare Professional brochure

- Brief background on pomalidomide
- Maximum duration of treatment prescribed
 - o 4 weeks for women with childbearing potential
 - o 12 weeks for men and women without childbearing potential
- The need to avoid foetal exposure due to teratogenicity of pomalidomide in animals and the expected teratogenic effect of pomalidomide in humans
- Guidance on handling the blister or capsule of Pomalidomide Teva for healthcare professionals and caregivers
- Obligations of the healthcare professionals who intend to prescribe or dispense pomalidomide
 - o Need to provide comprehensive advice and counselling to patients
 - o That patients should be capable of complying with the requirements for the safe use of pomalidomide
 - o Need to provide patients with appropriate patient educational brochure, patient card and/or equivalent tool
- Safety advice relevant to all patients
 - o Description and management of thrombocytopenia including incidence rates from clinical studies
 - o Description and management of cardiac failure
 - o Local country specific arrangements for a prescription for pomalidomide to be dispensed

- 0 That any unused capsules should be returned to the pharmacist at the end of the treatment
- 0 That the patient should not donate blood during treatment (including during dose interruptions) and for at least 7 days following discontinuation of pomalidomide
- Description of the PPP and categorisation of patients based on sex and childbearing potential
 - 0 Algorithm for implementation of PPP
 - 0 Definition of women of childbearing potential (WCBP) and actions the prescriber should take if unsure
- Safety advice for women of childbearing potential
 - 0 The need to avoid foetal exposure
 - 0 Description of the PPP
 - 0 Need for effective contraception (even if the woman has amenorrhoea) and definition of effective contraception
 - 0 That if she needs to change or stop using her method of contraception she should inform:
 - The physician prescribing her contraception that she is on pomalidomide
 - The physician prescribing pomalidomide that she has stopped or changed her method of contraception
 - 0 Pregnancy test regime
 - Advice on suitable tests
 - Before commencing treatment
 - During treatment based on method of contraception
 - After finishing treatment
 - 0 Need to stop pomalidomide immediately upon suspicion of pregnancy
 - 0 Need to tell treating doctor immediately upon suspicion of pregnancy
- Safety advice for men
 - 0 The need to avoid foetal exposure
 - 0 The need to use condoms if sexual partner is pregnant or a WCBP not using effective contraception (even if the man has had a vasectomy)
 - During pomalidomide treatment
 - For at least 7 days following final dose
 - 0 That he should not donate semen or sperm during treatment (including during dose interruptions) and for at least 7 days following discontinuation of pomalidomide treatment
 - 0 That if his partner becomes pregnant whilst he is taking pomalidomide or shortly after he has stopped taking pomalidomide he should inform his treating doctor immediately
- Requirements in the event of pregnancy
 - 0 Instructions to stop pomalidomide immediately upon suspicion of pregnancy, if female patient
 - 0 Need to refer patient to physician specialised or experienced in dealing with teratology and its diagnosis for evaluation and advice
 - 0 Local contact details for reporting of any suspected pregnancy immediately
 - 0 Pregnancy reporting form
- Local contact details for reporting adverse reactions

Educational Brochures for patients

The Educational brochures for patients should be of 3 types:

- Brochure for women patients of childbearing potential and their partner
- Brochure for women patients who are not of childbearing potential
- Brochure for male patients

All educational brochures for patients should contain the following elements:

- That pomalidomide is teratogenic in animals and is expected to be teratogenic in humans
- That pomalidomide may cause thrombocytopenia and the need for regular blood tests
- Description of the patient card and its necessity
- Guidance on handling pomalidomide for patients, caregivers and family members
- National or other applicable specific arrangements for a prescription for pomalidomide to be dispensed
- That the patient must not give pomalidomide to any other person
- That the patient should not donate blood during treatment (including during dose interruptions) and for at least 7 days after discontinuation of pomalidomide treatment
- That the patient should tell their doctor about any adverse events
- That any unused capsules should be returned to the pharmacist at the end of the treatment

The following information should also be provided in the appropriate brochure:

Brochure for women patients with childbearing potential

- The need to avoid foetal exposure
- Description of the PPP
- The need for effective contraception and definition of effective contraception
- That if she needs to change or stop using her method of contraception she should inform:
 - o The physician prescribing her contraception that she is on pomalidomide
 - o The physician prescribing pomalidomide that she has stopped or changed her method of contraception
- Pregnancy test regime
 - o Before commencing treatment
 - o During treatment (including dose interruptions), at least every 4 weeks except in case of confirmed tubal sterilisation
 - o After finishing treatment
- The need to stop pomalidomide immediately upon suspicion of pregnancy
- The need to contact their doctor immediately upon suspicion of pregnancy

Brochure for male patients

- The need to avoid foetal exposure
- The need to use condoms if sexual partner is pregnant or a WCBP and not using effective contraception (even if the man has had vasectomy)
 - o During pomalidomide treatment (including dose interruptions)
 - o For at least 7 days following final dose
- That if his partner becomes pregnant he should inform his treating doctor immediately
- That he should not donate semen or sperm during treatment (including during dose interruptions) and for at least 7 days following discontinuation of pomalidomide treatment

Patient Card or equivalent tool

The patient card shall contain the following elements:

- Verification that appropriate counselling has taken place
- Documentation of childbearing potential status
- Check box (or similar) which physician ticks to confirm that patient is using effective contraception (if woman of childbearing potential)
- Pregnancy test dates and results

Risk Awareness Forms

There should be 3 types of risk awareness forms:

- Women of childbearing potential
- Women of non-childbearing potential
- Male patient

All risk awareness forms should contain the following elements:

- teratogenicity warning
- patients receive the appropriate counselling prior to treatment initiation
- affirmation of patient understanding regarding the risk of pomalidomide and the PPP measures
- date of counselling
- patient details, signature and date
- prescriber name, signature and date
- aim of this document i.e. as stated in the PPP: "The aim of the risk awareness form is to protect patients and any possible foetuses by ensuring that patients are fully informed of and understand the risk of teratogenicity and other adverse reactions associated with the use of pomalidomide. It is not a contract and does not absolve anybody from his/her responsibilities with regard to the safe use of the product and prevention of foetal exposure."

Risk awareness forms for women of childbearing potential should also include:

- Confirmation that the physician has discussed the following:
 - the need to avoid foetal exposure
 - that if she is pregnant or plans to be, she must not take pomalidomide
 - that she understands the need to avoid pomalidomide during pregnancy and to apply effective contraceptive measures without interruption, at least 4 weeks before starting treatment, throughout the entire duration of treatment, and at least 4 weeks after the end of treatment
 - that if she needs to change or stop using her method of contraception she should inform:
 - the physician prescribing her contraception that she is taking pomalidomide
 - the physician prescribing pomalidomide that she has stopped or changed her method of contraception
 - of the need for pregnancy tests i.e. before treatment, at least every 4 weeks during treatment and after treatment
 - of the need to stop pomalidomide immediately upon suspicion of pregnancy
 - of the need to contact their doctor immediately upon suspicion of pregnancy
 - that she should not share the medicinal product with any other person
 - that she should not donate blood during treatment (including during dose interruptions) and for at least 7 days following discontinuation of pomalidomide
 - that she should return the unused capsules to the pharmacist at the end of treatment

Risk awareness forms for women with no childbearing potential should also include:

- Confirmation that the physician has discussed the following:
 - that she should not share the medicinal product with any other person
 - that she should not donate blood during treatment (including during dose interruptions) and for at least 7 days following discontinuation of pomalidomide
 - that she should return the unused capsules to the pharmacist at the end of treatment

Risk awareness forms for male patients should also include:

- Confirmation that the physician has discussed the following:
 - the need to avoid foetal exposure

- that pomalidomide is found in semen and the need to use condoms if sexual partner is pregnant or is a WCBP not on effective contraception (even if the man has had a vasectomy)
- that if his partner becomes pregnant, he should inform his treating doctor immediately and always use a condom
- that he should not share the medicinal product with any other person
- that he should not donate blood or semen during treatment (including during dose interruptions) and for at least 7 days following discontinuation of pomalidomide
- that he should return the unused capsules to the pharmacist at the end of treatment