

<Date>

INSUMAN RAPID / INSUMAN BASAL / INSUMAN COMB 25 (insulin human): temporary supply shortage <and marketing cessation>

Direct Healthcare Professional Communication

Dear Healthcare Professional,

Sanofi <INSERT COUNTRY> (or Sanofi-Aventis Deutschland GmbH) in agreement with the European Medicines Agency and the <National Competent Authority; where applicable; if this DHPC has been validated by local authority> would like to inform you of the following

TEMPORARY SUPPLY SHORTAGE OF:

<products below to be adapted locally mentioning the registration number>

- **INSUMAN RAPID (insulin human) 100 IU/mL, solution for injection - cartridges and pre-filled pen (3 mL)**
- **INSUMAN BASAL (insulin human) 100 IU/mL, suspension for injection - cartridges and pre-filled pen (3 mL)**
- **INSUMAN COMB 25 (insulin human) 100 IU/mL, suspension for injection - cartridges and pre-filled pen (3 mL)**

Summary

- Issues at a manufacturing site in the past months resulted in a temporary critical global supply situation affecting the products mentioned above.
- In <INSERT COUNTRY>, the shortage is expected to begin and will affect:
 - <INSERT DATE AND MONTH AS PER INDIVIDUAL COUNTRY> and <INSERT PRESENTATION (INSUMAN)>
- <The expected date to return to normal supply is:
 - <INSERT DATE AND MONTH AS PER INDIVIDUAL COUNTRY> and <INSERT PRESENTATION (INSUMAN)>>
 - Or
- <In addition in <insert country> Marketing and distribution of INSUMAN RAPID, INSUMAN BASAL and INSUMAN COMB 25 will be terminated as of <insert date>>.
- No new patients should be initiated with any of the impacted INSUMAN products (BASAL, RAPID, COMB 25) and existing patients should be switched to suitable alternatives.
- Interruption of insulin treatment is potentially life threatening. Therefore, replacement with alternative insulin formulations is needed to avoid hyperglycaemia and serious complications.

Background on supply shortage:

INSUMAN® (Insulin Human) is indicated for the treatment of diabetes mellitus where treatment with insulin is required.

INSUMAN RAPID can also be used for the treatment of hyperglycaemic coma (coma caused by too much blood glucose [sugar]) and ketoacidosis (high levels of ketones [acids] in the blood), and to control blood glucose before, during or after an operation in patients with diabetes mellitus.

Several events at the manufacturing site in the past months resulted in a temporary supply shortage of INSUMAN product. They include supplier delays of pen components and issues on filling, assembly, and packaging lines.

Safety concerns

- The potential unavailability of the necessary insulin increases the risk for hyperglycemia and potentially diabetic ketoacidosis.

Recommendations for risk minimization

- The risk of adverse reactions such as hyperglycemia and diabetic ketoacidosis may be minimized using an alternative insulin formulation
- No new patients should be initiated with any of the impacted INSUMAN products (BASAL, RAPID, COMB 25) and existing patients should be switched to suitable alternatives.

Alternative treatments

- There are several suitable treatment alternatives available for patients who need to change treatments depending on the type of insulin. The best option may depend on national/local guidance, and the needs of the individual patient. A patient may be converted to an alternative recombinant human insulin preparation according to current INSUMAN treatment (Basal/NPH insulin, Rapid/regular, Premixed 25/75) under the supervision of a healthcare professional and with close monitoring of blood glucose levels. Where INSUMAN SoloStar products are replaced by another recombinant human insulin product, no dose adjustment is required.
 - For INSUMAN RAPID, suitable treatment alternatives are other regular insulins.
 - For INSUMAN BASAL, suitable treatment alternatives are other NPH insulins,
 - For INSUMAN COMB 25, suitable treatment alternatives are other premixed combinations with 25% regular insulin and 75% NPH insulin.
- Where other recombinant human insulin preparations are not available or not appropriate, a patient may require conversion to an insulin analogue. The alternative options for substitution include but are not limited to:
 - For INSUMAN RAPID, substitution by alternative short-acting insulins such as insulin glulisine, insulin aspart, or insulin lispro is possible. As these short-acting insulin analogues have a faster onset and a shorter duration of action than INSUMAN RAPID, the direct supervision of a healthcare professional, and more frequent blood glucose monitoring are required with dose adjustment as necessary.
 - For INSUMAN BASAL, substitution by a long-acting basal insulin analogue such insulin glargine 100 U/mL, insulin glargine 300 U/mL, insulin detemir, or insulin degludec is possible. As these long-acting insulin analogues have a slower onset and a longer duration of action than INSUMAN BASAL, the direct supervision of a healthcare professional and more frequent blood glucose monitoring are required with dose adjustment as necessary.
 - For INSUMAN COMB 25, substitution by an alternative premixed insulin analogue is possible. The alternative formulations include a mixture of insulin lispro and insulin lispro protamine 25/75, or a mixture of insulin aspart and insulin aspart protamine 30/70. As these premixed insulin analogue formulations have a different pharmacokinetic/pharmacodynamic profile when compared to INSUMAN COMB 25, the direct supervision of a healthcare professional and more frequent blood glucose monitoring are required with dose adjustment as necessary.

<ONLY INCLUDE FOR COUNTRIES WHERE PRODUCT IS MARKETED AND AFFECTED BY SHORTAGE>:
This information has been approved for distribution by the <EMA (European Medicines Agency) or the national competent authority where applicable; if this DHPC has been validated by local authority>, and the <local Marketing Authorization Holder>.

A further communication will follow when the supply shortage is resolved.

Further information

Further information is available on the website of the competent authority: <provide link/reference>

<Therapeutic indication of the medicinal product>

Call for reporting

Healthcare professionals should report adverse reactions <and medication error IF APPLICABLE> in accordance with the national spontaneous reporting system <INSERT CONTACT DETAILS (e.g. name, postal address, fax number, website address) on how to access the national spontaneous reporting system>

Company contact point

Should you have any question or require additional information, please call Medical Information at <INSERT CONTACT DETAILS OF SANOFI LOCAL REPRESENTATIVE IN MEMBER STATE>.

<IF APPLICABLE: Contact point details for access to further information, including relevant website address(es), telephone numbers and a postal address>

Communication plan

DHPC COMMUNICATION PLAN	
Medicinal product/active substance	<products below to be adapted locally> • Insuman Rapid (insulin human) 100 IU/mL, solution for injection - cartridges and pre-filled pen (3 mL) • Insuman Basal (insulin human) 100 IU/mL, suspension for injection - cartridges and pre-filled pen (3 mL) • Insuman Comb 25 (insulin human) 100 IU/mL, suspension for injection - cartridges and pre-filled pen (3 mL)
Marketing authorisation holder	Sanofi-Aventis Deutschland GmbH Brueningstrasse 50, D-65926 Frankfurt am Main Germany
Safety concern and purpose of the communication	To inform relevant Healthcare Providers (HCPs) in affected countries
DHPC recipients	should be further defined on national level, depending on national health care systems.
Member States where the DHPC will be distributed	In all EEA member states where Insuman Rapid, Basal and Comb 25 is on the market
DHPC COMMUNICATION PLAN	
Timetable (Delete steps that are not applicable)	Date
DHPC and communication plan (in English) agreed by CHMP/CMDh	22 December 2022
Submission of translated DHPCs to the national competent authorities for review	4 January 2023
Agreement of translations by national competent authorities	12 January 2023
Dissemination of DHPC	14 January 2023