Direct Healthcare Professional Communication (DHPC)

TECENTRIQ® (atezolizumab): Risk of Severe Cutaneous Adverse Reactions (SCARs)

Dear Healthcare professional,

Hoffmann-La Roche in agreement with European Medicines Agency and the <National Competent Authority> would like to inform you of the following:

Summary

- Severe cutaneous adverse reactions (SCARs), including cases of Stevens-Johnson syndrome (SJS) and toxic epidermal necrolysis (TEN), have been reported in patients treated with Tecentriq (atezolizumab).
- Patients should be monitored for suspected severe skin reactions and other causes should be excluded. In case a SCAR is suspected, Tecentriq should be withheld and patients should be referred to a specialist in SCARs for diagnosis and treatment.
- In case SJS or TEN is confirmed, and for any grade 4 rash/SCAR, treatment with Tecentriq should be permanently discontinued.
- Caution is recommended when considering the use of Tecentriq in patients with previous history of a severe or life-threatening SCAR with other immune-stimulatory cancer medicines.

Background on the safety concern

SCARs are a heterogeneous group of immunologically mediated drug eruptions. Although rare, these events are potentially fatal, and are mainly constituted by acute generalised exanthematous pustulosis (AGEP), Stevens-Johnson syndrome (SJS), toxic epidermal necrolysis (TEN) and drug rash with eosinophilia and systemic symptoms (DRESS).

SCARs were previously known to be potentially associated with the use of atezolizumab, and have been monitored continuously. Based upon the totality of evidence in a recent analysis, SCARs are now considered to be an identified risk for atezolizumab.

A cumulative analysis of the company safety database across the Tecentriq program identified 99 cases, of which 36 cases of SCARs were confirmed by histopathology or specialist diagnosis, in patients who have received Tecentriq. Approximately 23,654 clinical trial patients and 106,316 patients in post-marketing settings have been exposed to the product as of 17 May 2020. The incidence rates of SCAR, regardless of severity, from pooled atezolizumab monotherapy (N=3178) and combination therapy (N=4371) in company-sponsored clinical studies was 0.7% and 0.6% respectively. This included one fatal case of TEN in a 77-year old female patient who received atezolizumab monotherapy.

It is recommended that:

- For suspected SCARs the patients should be referred to a dermatologist for further diagnosis and management
- Tecentriq should be withheld in patients with suspected SJS or TEN
- Tecentriq should be permanently withdrawn for confirmed SJS or TEN, and for any grade 4 rash/SCAR
- Caution should be used when considering the use of atezolizumab in a patient who has previously experienced a severe or life-threatening skin adverse reaction on prior treatment with other immune-stimulatory anticancer agents.

An update to the EU Product Information to include a Warning and Precaution for SCARs, guidelines for discontinuation and further description of the risk will be implemented shortly.

Call for reporting

Health care professionals should report any adverse events suspected to be associated with the use of TECENTRIQ (atezolizumab) to:

[Insert local contact]

▼ TECENTRIQ (atezolizumab) is subject to additional monitoring. This medicinal product is subject to additional monitoring. This will allow quick identification of new safety information.

Company contact point

Should you have any questions regarding the use of TECENTRIQ® (atezolizumab), please feel free to contact us at:

[Insert local contact information e.g. Genentech Medical Information/Communications Department at (800) 821-8590].

Yours sincerely,

<Company Name of Affiliate>

<Signature of authorised contact person>

Vice President, Global Head Late-Stage & Marketed Medicines Safety

Communication Plan for Direct Healthcare Professional Communication

DHPC COMMUNICATION PLAN	
Medicinal product(s)/active substance(s)	TECENTRIQ (atezolizumab)
Marketing authorisation holder(s)	Hoffmann-La Roche
Safety concern and purpose of the communication	To inform healthcare professionals that severe cutaneous adverse reactions (SCARs) are now considered to be an identified risk of Tecentriq (atezolizumab).
DHPC recipients	Prescribing physicians for example oncologists, nurses/pharmacists as per country specific distribution channels, wholesalers, hospitals, and oncology clinics, according to local regulations.
Member States where the DHPC will be distributed	All EEA member states where Tecentriq is approved.

Timetable	Date
DHPC and communication plan (in English) agreed by CHMP	25/02/2021
Submission of translated DHPCs to the national competent authorities for review	04/03/2021
Agreement of translations by national competent authorities	11/03/2021
Dissemination of DHPC	25/03/2021