



EUROPEAN MEDICINES AGENCY  
SCIENCE MEDICINES HEALTH

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Pharmacovigilance Risk Assessment Committee (PRAC)

## New product information wording – Extracts from PRAC recommendations on signals

Adopted at the 9-12 April 2018 PRAC

The product information wording in this document is extracted from the document entitled 'PRAC recommendations on signals' which contains the whole text of the PRAC recommendations for product information update, as well as some general guidance on the handling of signals. It can be found [here](#) (in English only).

New text to be added to the product information is underlined. Current text to be deleted is ~~struck through~~.

### 1. Amitriptyline – Dry eye (EPITT no 19173)

#### Summary of product characteristics

##### 4.8. Undesirable effects

Under SOC 'Eye disorders'

Frequency 'not known': Dry eye

#### Package leaflet

##### 4. Possible side effects

Frequency 'not known': Dry eyes

### 2. Dasatinib – Cytomegalovirus (CMV) reactivation (EPITT no 19111)

#### Summary of product characteristics

##### 4.8. Undesirable effects

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<sup>1</sup> Intended publication date. The actual publication date can be checked on the webpage dedicated to [PRAC recommendations on safety signals](#).



Table 2: Tabulated summary of adverse reactions

Infections and infestations

Common: pneumonia (including bacterial, viral, and fungal), upper respiratory tract infection/inflammation, herpes virus infection (including cytomegalovirus-CMV), enterocolitis infection, sepsis (including uncommon cases with fatal outcomes)

#### **Package leaflet**

4. Possible side effects

Common side effects (may affect up to 1 in 10 people)

Infections: pneumonia, herpes virus infection (including cytomegalovirus-CMV), upper respiratory tract infection, serious infection of the blood or tissues (including uncommon cases with fatal outcomes)

### **3. Lapatinib – Pulmonary hypertension (EPITT no 19089)**

#### **Summary of product characteristics**

4.8 Undesirable effects

Frequency not known: pulmonary arterial hypertension

#### **Package leaflet**

4. Possible side effects

Frequency not known: pulmonary arterial hypertension (increased blood pressure in the arteries (blood vessels) of the lungs)

### **4. Phenprocoumon – Risk of birth defects and foetal loss following first trimester exposure as a function of the time of withdrawal (EPITT no 18902)**

#### **Summary of product characteristics**

4.6. Fertility, pregnancy and lactation

Women of childbearing potential / Contraception

Women of childbearing age who are taking <...> have to use effective contraceptive measures during treatment and should continue for 3 months after the last dose.

Women of childbearing potential planning a pregnancy should be switched to a safer alternative treatment prior to pregnancy.

Pregnancy

Based on human experience phenprocoumon may cause birth defects and foetal death when administered during pregnancy. There is epidemiological evidence suggesting that the risk of birth

defects and foetal death increases with the increasing duration of exposure to phenprocoumon during the first trimester of pregnancy, with a steep increase of the rate of major birth defects when phenprocoumon treatment is continued beyond the 5th gestational week.

In cases of exposure to phenprocoumon during second and third trimester of pregnancy, the foetus is at an increased risk of intrauterine or parturitional (cerebral) hemorrhage due to foetal anticoagulation.

In humans phenprocoumon crosses the placental barrier.

Phenprocoumon is contraindicated during pregnancy (see section 4.3).

If the patient becomes pregnant while taking <...>, the patient should immediately be switched to a safer alternative treatment (e.g. heparin) and close follow-up including level II ultrasound should be recommended.

#### Breastfeeding

In nursing mothers, the active ingredient passes into the breast milk, though in such small amounts that no adverse reactions are likely to occur in the infant. As a precaution, however, prophylaxis involving the administration of vitamin K1 to the infant concerned is recommended.

#### Fertility

No information on effects of <...> on fertility is available.

### **Package leaflet**

#### 2. What you need to know before you take <...>

Pregnancy, breastfeeding and fertility

##### Pregnancy

You must not use <...> when you are pregnant, as it passes from mother to child. This means taking <...> during pregnancy can lead to malformations and even death of your unborn child. There is also a risk of bleeding in the foetus (foetal hemorrhage).

You must prevent becoming pregnant by taking effective contraceptive measures during therapy with <...> and in the period of 3 months after completion of the treatment with <...> due to the increased risk of foetal malformations.

If you wish to get pregnant or if you already became pregnant while taking this medicine, talk to your doctor immediately as you should be switched to a safer alternative treatment (e.g. heparin) if you are planning a pregnancy or immediately after recognition of pregnancy.

##### Breastfeeding

If you are breastfeeding, <...> passes into the breast milk, though in such small amounts that no adverse reactions are likely to occur to your child. Therefore, if you are breastfeeding, your child should receive vitamin K1.

##### Fertility

No information is available regarding the influence of <...> on fertility.

## 5. Vortioxetine – Angioedema and urticaria (EPITT no 19099)

### Summary of product characteristics

#### 4.8. Undesirable effects

Tabulated list of adverse reactions

Skin and subcutaneous tissue disorders

Frequency 'not known': Angioedema, urticaria

### Package leaflet

#### 4. Possible side effects

Not known: frequency cannot be estimated from available data

- Swelling of the face, lips, tongue or throat
- Hives