



EUROPEAN MEDICINES AGENCY  
SCIENCE MEDICINES HEALTH

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EMA/PRAC/75387/2022  
Pharmacovigilance Risk Assessment Committee (PRAC)

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

Adopted at the 7-10 February 2022 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. Enzalutamide – Erythema multiforme (EPITT no 19734)

#### Summary of product characteristics

##### 4.8. Undesirable effects

Skin and subcutaneous tissue disorders

Frequency "Not known": Erythema multiforme

#### Package Leaflet

##### 2. What you need to know before you take Xtandi

~~Severe~~ Serious skin rash or skin peeling, blistering and/or mouth sores have been reported in association with Xtandi treatment. Seek medical attention immediately if you notice any of these symptoms.

##### 4. Possible side effects

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



Frequency "Not known": a skin reaction that causes red spots or patches on the skin that may look like a target or "bulls-eye" with a dark red centre surrounded by paler red rings (erythema multiforme)

## **2. Obinutuzumab – Non-overt disseminated intravascular coagulation (EPITT no 19711)**

### **Summary of product characteristics**

#### 4.4. Special warnings and precautions for use

##### Coagulation abnormalities including disseminated intravascular coagulation (DIC)

DIC including fatal events, has been reported in clinical studies and in postmarketing surveillance in patients receiving Gazyvaro. The majority of cases involved non-overt DIC, with subclinical (asymptomatic) changes in platelets and laboratory coagulation parameters occurring within 1-2 days after the first infusion with spontaneous resolution usually occurring within one to two weeks, not requiring drug discontinuation or specific intervention. In some cases, the events were associated with IRRs and/or TLS. No specific baseline risk factors for DIC were identified. Patients suspected to have non-overt DIC should be monitored closely with coagulation parameters including platelets and clinical observation for signs or symptoms of overt DIC. Gazyvaro should be discontinued at first onset of suspected overt DIC and appropriate treatment initiated.

#### 4.8. Undesirable effects

##### Blood and lymphatic system disorders

Frequency 'uncommon': disseminated intravascular coagulation ##

[Footnote:] ##Disseminated intravascular coagulation (DIC) including fatal events, has been reported in clinical studies and in postmarketing surveillance in patients receiving Gazyvaro (see section 4.4).

### **Package leaflet**

#### 4. Possible side effects

Uncommon (may affect up to 1 in 100 people)

Abnormal coagulation, including a serious illness where clots form all over the body (disseminated intravascular coagulation)

## **3. Sorafenib – Tumour lysis syndrome (EPITT no 19733)**

### **Summary of product characteristics**

#### 4.4. Special warnings and precautions for use

##### Tumour lysis syndrome (TLS)

Cases of TLS, some fatal, have been reported in postmarketing surveillance in patients treated with sorafenib. Risk factors for TLS include high tumour burden, pre-existing chronic renal insufficiency, oliguria, dehydration, hypotension, and acidic urine. These patients should be monitored closely and treated promptly as clinically indicated, and prophylactic hydration should be considered.

#### 4.8. Undesirable effects

Metabolism and nutrition disorders

Frequency 'not known': tumour lysis syndrome

### **Package leaflet**

#### 2. What do you need to know before you take Nexavar

Take special care with Nexavar

- If you experience the following symptoms, contact your doctor immediately as this can be a life-threatening condition: nausea, shortness of breath, irregular heartbeat, muscular cramps, seizure, clouding of urine and tiredness. These may be caused by a group of metabolic complications that can occur during treatment of cancer that are caused by the break-down products of dying cancer cells (tumour lysis syndrome (TLS)) and can lead to changes in kidney function and acute renal failure (see also section 4: Possible side effects).

#### 4. Possible side effects

Not known: frequency cannot be estimated from the available data

- nausea, shortness of breath, irregular heartbeat, muscular cramps, seizure, clouding of urine and tiredness (tumour lysis syndrome (TLS)) (see section 2).