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# **THE ITALIAN NATALIZUMAB REGISTRY**

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***On behalf of  
The Italian Neurological Panel***

*EMA, London July 2011*



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## Background

Natalizumab is approved by **EMA** as single disease modifying therapy in highly active relapsing remitting multiple sclerosis (RRMS) for the following patient groups:

patients with high disease activity despite adequate course of a beta-interferon.

patients with rapidly evolving severe relapsing remitting multiple sclerosis.

Because of the established risk of PML and potential risk of cancer and lymphoma the approval has been delivered with a risk Management Plan promoted by EMA.

The **Italian Medicine Agency** (AIFA) promoted a discussion within the Neurological Panel about the actions to increase the Benefit/Risk Ratio (BRR) and to monitor the safety



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**To increase the expected benefit**

The **Italian** Medicines Agency (AIFA) established more restrictive criteria to dispense and reimburse natalizumab, aiming to select patients with higher probability of developing disability

### EMEA criteria

Patients with high disease who have failed to respond to a full and adequate course of treatment with a beta-interferon. Patients should have had at least 1 relapse in the previous year while on therapy, and have at least 9 T2-hyperintense lesions in cranial MRI or at least 1 GD-enhancing lesion

Patients with rapidly evolving severe relapsing-remitting multiple sclerosis, defined by 2 or more disabling relapses in one year, and with 1 or more GD-enhancing lesions on brain MRI or a significant increase in T2 lesion load as compared to a previous recent MRI

### Additional AIFA criteria

- 1) Treatment with immunomodulatory treatment in the previous 12 months
- 2) At least 2 relapses **or** 1 relapse with incomplete recovery in the previous year and current EDSS  $\geq 2$

- 1) Incomplete recovery after relapses
- 2) Current EDSS  $\geq 2$



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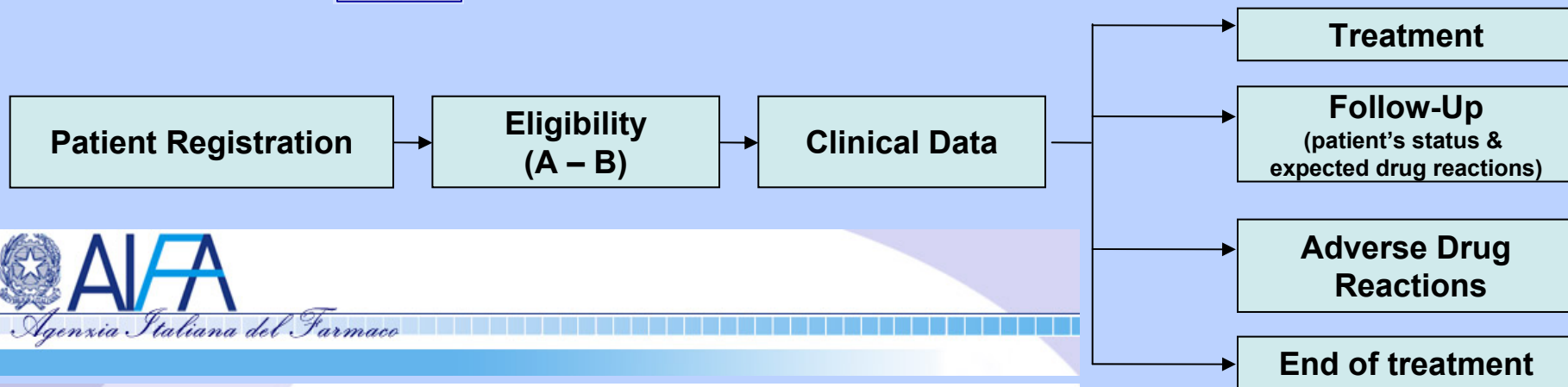


**To monitor safety  
and increase BRR**

## Implementation of WEB based Italian Registry:

- Access only to MS centers (206) authorized on the basis of predetermined professional competence and organizational features
- Central authorization to Tysabri treatment only for patients satisfying AIFA criteria
- Prompt communication of ADRs

## Data Flow



### Farmaci sottoposti a monitoraggio

#### Programmi generali:

- Farmaci antineoplastici
- Farmaci orfani
- Farmaci per la psoriasi
- Farmaci anti HIV
- Farmaci antipsicotici
- Farmaci antidiabetici
- Farmaci cardiovascolari

#### Progetti specifici:

- Tysabri
- ADHD
- Xolair
- Xagrid
- Xigris

Con il Registro dei farmaci a monitoraggio l'agenzia Italiana del Farmaco AIFA, intende mettere a disposizione degli operatori sanitari un punto di accesso unificato ai progetti di monitoraggio che sono richiesti, laddove necessario, a complemento delle determinazioni di immissione in commercio delle singole specialità medicinali (in luogo delle precedenti schede di rilevazione dati cartacee).

Il Registro unificato intende porsi come strumento innovativo di comunicazione con l'Autorità regolatoria, per una efficace semplificazione degli iter burocratici richiesti dalle procedure e per l'avvio di un processo virtuoso in grado di supportare una sempre migliore pratica clinica a tutela del paziente.

- ✓ Active since jan 2007
- ✓ Registry Web based
- ✓ F/U every 3 months



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## Patients enrolled

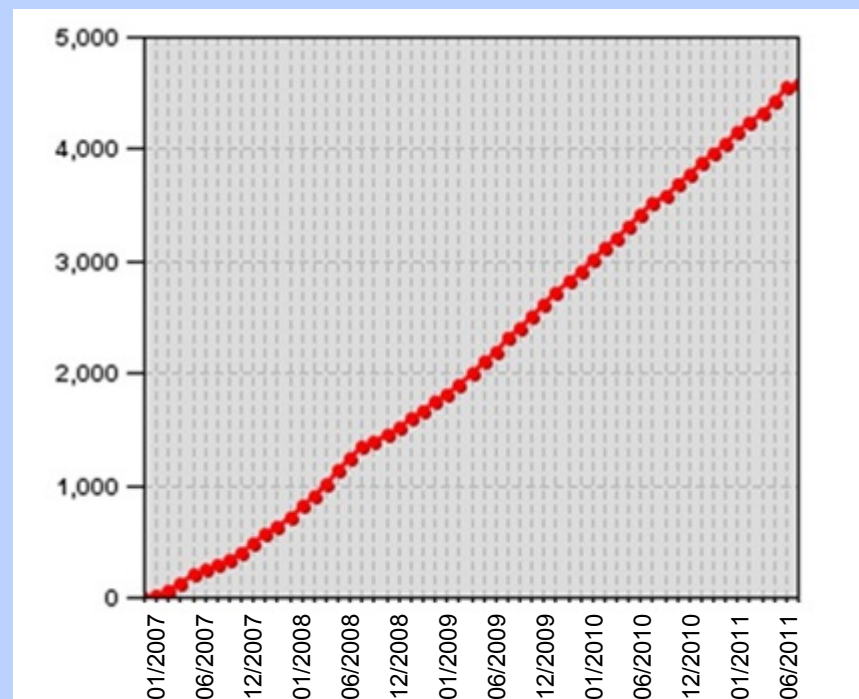
4523 pts (70% female) were enrolled in the registry:  
85.4% as non-responders to  $\beta$ -interferon (group A), and  
14.5% with aggressive RRMS (group B).

Elegibility Criteria	N. enrolled patients	%
A	3864	85.4
B	658	14.5
Tot	4523	100.0

*Data updated to July 13 2011*

Cumulative frequency

N. patients



Period of registration



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## Clinical features at baseline

<b>Group A</b>	<b># Patients</b>	<b>Disease duration (yr)</b>	<b>Mean age at entry (yr)</b>
<b>F</b>	<b>70%</b> (2711)	<b>10.1</b>	<b>36.5</b>
<b>M</b>	<b>30%</b> (1153)	<b>9.8</b>	<b>37</b>
<b>Total</b>	<b>3864</b>	<b>10</b>	<b>36.7</b>

<b>Group B</b>	<b># Patients</b>	<b>Disease duration (yr)</b>	<b>Mean age at entry (yr)</b>
<b>F</b>	<b>65%</b> (431)	<b>5.1</b>	<b>33</b>
<b>M</b>	<b>35%</b> (227)	<b>4.4</b>	<b>32.3</b>
<b>Total</b>	<b>658</b>	<b>4.8</b>	<b>32.7</b>



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**Patients under  
treatment**

<b>N. Cycles</b>	<b>Patients</b>
<b>&lt;12 months</b>	<b>35.8% (1591)</b>
<b>12-17 months</b>	<b>15.5% (688)</b>
<b>18-23 months</b>	<b>15.5% (688)</b>
<b>≥24 months</b>	<b>34.7% (1542)</b>
<b>Total</b>	<b>4441</b>

### **Previous Therapies**

- Immunosuppressants (Aza, Cyclof, Methotrex, Mitox): 1173 (26.41%) out of 4441





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## Italian Registry vs AFFIRM study: comparison of populations Clinical features at baseline

	Group A	Group B	AFFIRM
<b>Total number</b>	3864	658	627
<b>Age (yr)</b>	36.7	32.7	36
<b>Disease duration (yr)</b>	10	4.8	5
<b>EDSS</b> mean (range)	3.5 (1-8)	3.5 (1-7)	2.3 (0-5)



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## Italian Registry vs AFFIRM study: comparison of populations Relapses

N. relapses in last 12 months	AFFIRM	Italian Registry	
		Group A	Group B
0	<1% (6)	0.3% (11)	0.3% (2)
1	59% (368)	27.7% (1063)	1.1% (7)
2	31% (197)	48.9% (1878)	57.6% (378)
≥3	9% (56)	23.2% (889)	41.1% (269)
Relapses with residual deficit			
Yes	ND	86% (3302)	98.9% (649)
No	ND	14% (539)	1.1% (7)



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## Italian Registry vs AFFIRM study: comparison of populations Neuroradiological features

New lesions on GD-MRI within 12 m	AFFIRM	Italian Registry	
		Group A	Group B
Yes	49% (307)	59.2% (2272)	76.5% (502)
No	51% (319)	40.8% (1569)	23.5% (154)
At least 9 T2 lesions			
Yes	ND	98.6% (3789)	98.3% (645)
No	ND	1.4% (52)	1.7% (11)
Increasing T2 lesions within 12 m			
Yes	ND	77.7% (2985)	93% (610)
No	ND	22.3% (856)	7% (46)

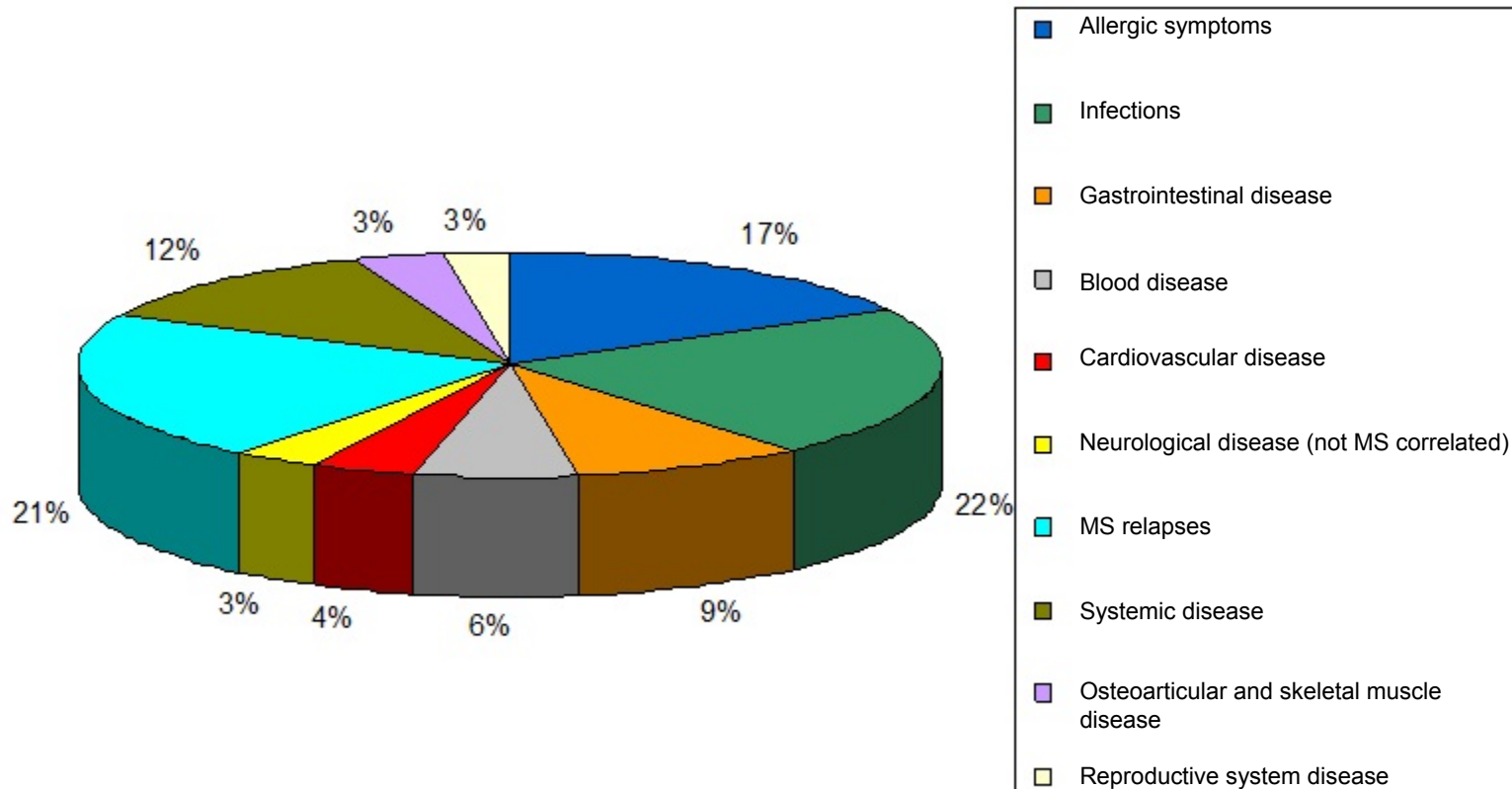


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## Mild Adverse Drug Reactions

**357 (7.9%) out of 4523 patients reported at least 1 Mild ADR**





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## Serious Adverse Drug Reactions

<b>Meningitis</b>	<b>1</b>
<b>Relapse of multiple sclerosis</b>	<b>4</b>
<b>Partial seizures</b>	<b>1</b>
<b>Inflammation CNS ↑</b>	<b>1</b>
<b>Urinary incontinence</b>	<b>1</b>
<b>Urinary tract infection</b>	<b>2</b>
<b>Partial Gastrectomy</b>	<b>1</b>
<b>Anaphilactoid reaction</b>	<b>1</b>
<b>Urticaria</b>	<b>2</b>
<b>Cardiovascular failure</b>	<b>1</b>
<b>Intentional self-arm</b>	<b>1</b>
<b>Myocarditis</b>	<b>1</b>
<b>Appendicitis</b>	<b>1</b>
<b>Sistemic CMV infection</b>	<b>1</b>
<b>Psoriasis</b>	<b>1</b>
<b>Hemorrhagic Cystitis</b>	<b>1</b>
<b>High fever</b>	<b>1</b>

An adverse drug reaction is defined serious if results in death, is life-threatening, requires inpatient hospitalization or prolongation of existing hospitalization, results in persistent or significant disability/incapacity, is a congenital anomaly/birth defect, or requires intervention to prevent permanent impairment or damage.



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## Serious Adverse Drug Reactions

<b>Breast cancer</b>	<b>3</b>
<b>Cardiac arrest †</b>	<b>1</b>
<b>Melanoma with superficial diffusion</b>	<b>1</b>
<b>Psychosis</b>	<b>2</b>
<b>Depression</b>	<b>1</b>
<b>Persecution delusions</b>	<b>1</b>
<b>Manic-depressive disease</b>	<b>2</b>
<b>Epilepsy state</b>	<b>1</b>
<b>Convulsion</b>	<b>1</b>
<b>Stomach cancer IV stadium</b>	<b>1</b>
<b>Spontaneous abortion</b>	<b>2</b>
<b>Deafness</b>	<b>1</b>
<b>Intracranial aneurysm</b>	<b>1</b>
<b>Toxic encephalopathy</b>	<b>2</b>
<b>Liver failure</b>	<b>1</b>
<b>Jaundice</b>	<b>1</b>
<b>Mixed delusions</b>	<b>1</b>
<b>Ovarian cyst</b>	<b>1</b>
<b>Arthritic pain</b>	<b>1</b>



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## Serious Adverse Drug Reactions

Atrial fibrillation	1
Adenocarcinoma	1
Testis cancer	1
Renal cell carcinoma II stadium	1
Follicular thyroid cancer	1
Cervical cancer stadium III	1
Colon cancer	1
<b>PML</b>	<b>8</b>
Red cells aplasia	1
Raynaud's phenomenon	1
Herpes Zoster neurological infection	1
Hepatopathy Edema	1
Meningioma ben	1
Emorragia cereb	1
Bacterial Pneumonia	1
Bleeding	1
Suicide attempt	1
<b>Total</b>	<b>73</b>



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## Adverse Drug Reactions Summary

- 430 (9.5%) pts reported at least one Adverse Drug Reaction (mild and serious)
- 73 pts (1.6%) reported a Serious Adverse Drug Reaction
- **2 deaths:**
  - 1 cardiac arrest
  - 1 inflammation CNS
- 170 pts (3.8%) ended drug treatment due to Adverse Drug Reaction





## PML CASES

Pt	NZ Cycles	Previous therapy	Tx Duration months	Clinical presentation	Treatment	Outcome	RMN features	Blood PCR JCV (+)	CSF PCR JCV (+)
1	29	Other	0,92	<b>Cognitive deficits</b>	<b>Plasm</b>	<b>Unchanged or worsened</b>	<b>Cortical, subcortical extensive hyperi T2 lesions, bilateral in fronto-parietal regions</b>	<b>Yes</b>	<b>No</b>
		Mitox	2,03						
2	34	Avonex	3,67	<b>Cognitive and motor disturbances</b>	<b>Plasm</b>	<b>Unchanged or worsened</b>	<b>WM T2 hyper in right frontal, temporal, occipital and superior cerebellar regions; lack of GD +</b>	<b>Yes</b>	<b>Yes</b>
		Rebif 22	33,08						
		Mitox	33,74						
3	31	Avonex	24,1	<b>Visual field deficits</b>			<b>Extensive subcortical parieto-occipital T2 lesion with involment of U fibers</b>	<b>No</b>	<b>Yes</b>
4	19	Betaferon	2,98	<b>Speech deficits, facial emispasm, extrapiramidal symptoms</b>	<b>Hosp. Steroids Copax</b>	<b>Unchanged or worsened</b>	<b>T2 hyperi lesions in right lenticular nucleus and right subcortical frontal region; lack of GD +</b>	<b>Yes</b>	<b>Yes</b>
		Mitox	30,98						



## PML CASES

Pt	NZ Cycles	Previous therapy	Tx Duration months	Clinical presentation	Treatment	Outcome	RMN features	Blood PCR JCV (+)	CSF PCR JCV (+)
5	17	Aza	0,92	Cognitive, speech and motor disturbances	Plasma	Improved	Subcortical parieto-occipital lesion T1 hypointense	Yes	Yes
		Mitox	5,02						
		Betaferon	48,98						
6	44	Glatiramer	41,48	Epilepsy; Behavioral disturbances	Steroids	Improved			Yes
		Rebif 44	34,26						
		Mitox	5,97						
7	22	Glatiramer	12,59	Hemiplegia	Plasma Mirtazapina Meflochina	Unchanged or worsened			Yes
		Rebif 44	1,25						
		Mitox	14,89						
		Cyclophos	15,87						
8	34	Avonex	37,9		Plasma Mirtazapina Meflochina	Unchanged or worsened			Yes
		Rebif 22	15,8						
		Rebif 44	59,02						



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## Reasons for end of treatment

### Group A

Reasons	N.	%
End of therapeutical cycle	157	21.4
Ineffective	109	14.9
ADR (serious and minor)	146	19.9
Positivity to antibodies	93	12.7
Moving	3	0.4
Missed (or poor) compliance	54	7.4
Pregnancy	30	4.1
Loss to follow-up	12	1.6
Death	2	0.3
Other	126	17.2
<b>Total</b>	<b>732</b>	<b>100</b>

### Group B

Reasons	N.	%
End of therapeutical cycle	36	30
Positivity to antibodies	14	11.7
Ineffective	9	7.5
Loss to follow-up	2	1.7
ADR	24	20
Moving	1	0.8
Pregnancy	3	2.5
Missed (or poor) compliance	8	6.7
Other	23	19.2
<b>Total</b>	<b>120</b>	<b>100</b>



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N. administrations	N. patients	%
0	1	0.1
1	32	3.8
2	65	7.6
3	32	3.8
4	25	2.9
5	32	3.8
6	31	3.6
7	32	3.8
8	30	3.5
9	23	2.7
10	25	2.9
11	28	3.3
12	34	4.0
13	23	2.7
14	25	2.9
15	23	2.7
16	14	1.6
17	25	2.9
18	16	1.9
19	8	0.9
20	12	1.4

Patients with end of  
treatment  
and administrations number

**852 (18.8%) with end of treatment  
specified out of 4523**

**Mean number of administrations:  
16 (range 0-48)**



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Patients with end of  
treatment and  
administrations number

N. administrations	N. patients	%
21	9	1.1
22	22	2.6
23	12	1.4
24	61	7.2
25	26	3.1
26	17	2.0
27	18	2.1
28	16	1.9
29	14	1.6
30	8	0.9
31	15	1.8
32	16	1.9
33	10	1.2
34	8	0.9
35	6	0.7
36	17	2.0
37	5	0.6
38	5	0.6
39	6	0.7
40	4	0.5

N. administrations	N. patients	%
41	4	0.5
42	4	0.5
43	2	0.2
44	5	0.6
45	2	0.2
46	3	0.4
48	1	0.1
<b>Total</b>	<b>852</b>	<b>100.0</b>

**852 (18.8%) with end of treatment  
specified out of 4523**

**Mean number of administrations:  
16 (range 0-48)**



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## Relapses

**667 patients had at least 1 relapse**

**Based on 2737 (76.6%) patients treated for at least 6 months**

Relapses during therapy	Relapses during 12 months before therapy								
	1	2	3	4	5	6	7	8	9
	N. pts	N. pts	N. pts	N. pts	N. pts	N. pts	N. pts	N. pts	N. pts
1	99	209	98	31	11	6	1	0	1
2	13	62	30	14	4	5	2	0	0
3	7	27	18	5	1	0	0	0	0
4	1	8	5	1	3	0	0	0	0
5	0	0	1	0	1	0	0	0	0
Total	120	306	152	51	20	11	3	0	1



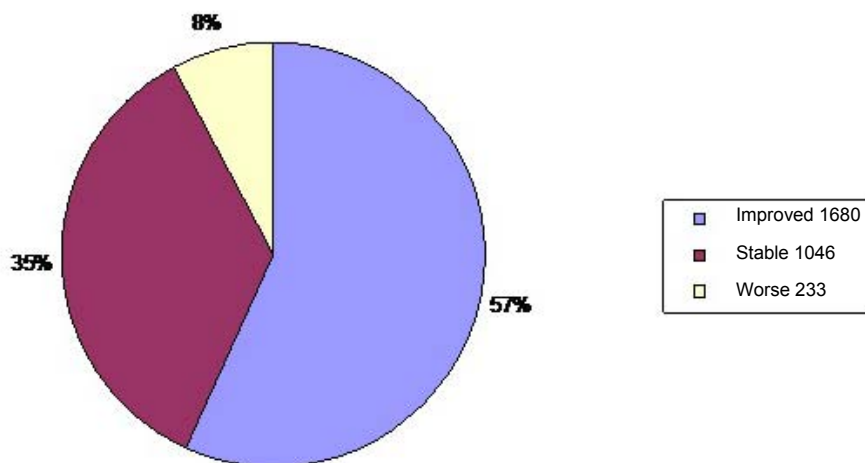
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## EDSS at the last follow-up

**2959 (65.4%) with at least 1 FUP out of 4523**

Condition	Patients	%
Improved	1680	56.8
Stable	1046	35.3
Worse	233	7.9
<b>Total</b>	<b>2959</b>	<b>100.0</b>



Improved: confirmed  
increase of EDSS

$1 \leq 5.5$   
 $0.5 > 5.5$



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**AIFA**

**Laura Periotto**

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