Talzenna

Procedural steps taken and scientific information after the authorisation

Application number	Scope	Opinion/ Notification[1] issued on	Commission Decision Issued[2] / amended on	Product Information affected[3]	Summary
IB/0012	B.II.f.1.b.1 - Stability of FP - Extension of the shelf life of the finished product - As packaged for sale (supported by real time data)	06/12/2021		SmPC	
II/0010/G	This was an application for a group of variations.	11/11/2021		SmPC and PL	

[1] Notifications are issued for type I variations and Article 61(3) notifications (unless part of a group including a type II variation or extension application or a worksharing application). Opinions are issued for all other procedures.
[2] A Commission decision (CD) is issued for procedures that affect the terms of the marketing authorisation (e.g. summary of product characteristics, annex II, labelling, package leaflet). The CD is issued within two months of the opinion for variations falling under the scope of Article 23.1a(a) of Regulation (EU) No. 712/2012, or within one year for other procedures.
[3] SmPC (Summary of Product Characteristics), Annex II, Labelling, PL (Package Leaflet).

	Update of section 4.4 of the SmPC in order to update the frequency of myelodysplastic syndrome/acute myeloid syndrome (MDS/AML) based on a cumulative safety review; Update of section 5.1 of the SmPC with the revised ATC code. In addition, the MAH took the opportunity to update the list of local representatives in the Package Leaflet and make minor corrections in the SmPC and PL. A.6 - Administrative change - Change in ATC Code/ATC Vet Code C.I.4 - Change(s) in the SPC, Labelling or PL due to new quality, preclinical, clinical or pharmacovigilance data				
N/0011	Minor change in labelling or package leaflet not connected with the SPC (Art. 61.3 Notification)	21/09/2021		PL	
PSUSA/10781 /202010	Periodic Safety Update EU Single assessment - talazoparib	10/06/2021	n/a		PRAC Recommendation - maintenance
II/0009	Update of sections 4.2 and 5.2 based on the results from PK study MDV3800-02 (C3441002), a phase 1 open-label pharmacokinetics and safety study of talazoparib (MDV3800) in patients with advanced solid tumours and normal or varying degrees of hepatic impairment. In addition, the MAH took the opportunity to update the list of local representatives in the package leaflet. C.I.4 - Change(s) in the SPC, Labelling or PL due to	22/04/2021	21/05/2021	SmPC and PL	The PK of talazoparib in patients with normal hepatic function, mild hepatic impairment, moderate hepatic impairment (total bilirubin > 1.5 to 3.0 × ULN and any AST) or severe hepatic impairment (total bilirubin > 3.0 × ULN and any AST) was studied in a PK trial. Population PK analysis using data from this PK trial indicated that mild, moderate or severe hepatic impairment had no significant impact on the PK of talazoparib. No dose adjustment is required for patients with mild hepatic impairment (total bilirubin ≤ 1 × upper limit of

	new quality, preclinical, clinical or pharmacovigilance data				normal [ULN] and aspartate aminotransferase (AST) > ULN, or total bilirubin > 1.0 to 1.5 × ULN and any AST), moderate hepatic impairment (total bilirubin > 1.5 to 3.0 × ULN and any AST), or severe hepatic impairment (total bilirubin > 3.0 × ULN and any AST).
IB/0007/G	This was an application for a group of variations. A.4 - Administrative change - Change in the name and/or address of a manufacturer or an ASMF holder or supplier of the AS, starting material, reagent or intermediate used in the manufacture of the AS or manufacturer of a novel excipient B.I.d.1.a.4 - Stability of AS - Change in the re-test period/storage period - Extension or introduction of a re-test period/storage period supported by real time data B.II.d.2.a - Change in test procedure for the finished product - Minor changes to an approved test procedure	04/02/2021	n/a		
PSUSA/10781 /202004	Periodic Safety Update EU Single assessment - talazoparib	29/10/2020	n/a		PRAC Recommendation - maintenance
II/0004	Update of section 5.1 of the SmPC in order to include the final OS results from Study 673-301 (C3441009, EMBRACA), a phase 3, open-label, randomised, multicentre study of talazoparib vs chemotherapy in patients with germline BRCA mutated HER-2 negative locally advanced or metastatic breast cancer. In addition, the MAH took the opportunity to the update the list of local representatives in the	03/09/2020	21/05/2021	SmPC and PL	The study EMBRACA demonstrated a statistically significant improvement in PFS, the primary efficacy outcome, for Talzenna compared with chemotherapy. There was no statistically significant effect on OS at the time of final OS analysis. OS was based on the data cutoff date 30 September 2019, and a median follow-up of 44.9 months (95% CI: 37.9, 47.0) in the talazoparib arm and 36.8 months (95% CI: 34.3, 43.0) in the chemotherapy arm.

	package leaflet. C.I.4 - Change(s) in the SPC, Labelling or PL due to new quality, preclinical, clinical or pharmacovigilance data				Median OS (95% CI) was 19.3 months (16.6, 22.5) in the talazoparib arm vs 19.5 months (17.4, 22.4) in the chemotherapy arm. OS HR was 0.85 (95% CI: 0.67, 1.07) and the p-value was 0.169.
II/0001	Update of sections 4.2 and 5.2 of the SmPC in order to change posology recommendations in patients with severe renal impairment and update pharmacokinetic information based on the results from PK study MDV3800-01 (C3441001) listed as a category 3 study in the RMP. The RMP version 1.0 is approved. In addition, the MAH took the opportunity to make minor changes through the product information and to bring the PI in line with the latest QRD template version 10.1. C.I.4 - Change(s) in the SPC, Labelling or PL due to new quality, preclinical, clinical or pharmacovigilance data	28/05/2020	26/06/2020	SmPC, Annex II, Labelling and PL	No dose adjustment is required for patients with mild renal impairment (60 mL/min ≤ creatinine clearance [CrCL] < 90 mL/min). For patients with moderate renal impairment (30 mL/min ≤ CrCL < 60 mL/min), the recommended starting dose of Talzenna is 0.75 mg once daily. For patients with severe renal impairment (15 mL/min ≤ CrCL < 30 mL/min), the recommended starting dose of Talzenna is 0.5 mg once daily. Talzenna has not been studied in patients with CrCL < 15 mL/min or patients requiring haemodialysis. For more information, please refer to the Summary of Product Characteristics.
PSUSA/10781 /201910	Periodic Safety Update EU Single assessment - talazoparib	14/05/2020	n/a		PRAC Recommendation - maintenance
IB/0003/G	This was an application for a group of variations. B.I.d.1.a.4 - Stability of AS - Change in the re-test period/storage period - Extension or introduction of a re-test period/storage period supported by real time data B.II.f.1.b.1 - Stability of FP - Extension of the shelf	27/03/2020	26/06/2020	SmPC	

	life of the finished product - As packaged for sale (supported by real time data)				