Summary of the Risk Management Plan

Summary of risk management plan for Emtricitabine/ Tenofovir disoproxil Zentiva (emtricitabine + tenofovir)

This is a summary of the risk management plan (RMP) for Emtricitabine/ Tenofovir disoproxil Zentiva. The RMP details important risks of Emtricitabine/ Tenofovir disoproxil Zentiva, how these risks can be minimised, and how more information will be obtained about Emtricitabine/ Tenofovir disoproxil Zentiva's risks and uncertainties (missing information).
Emtricitabine/ Tenofovir disoproxil Zentiva's summary of product characteristics (SmPC) and its package leaflet give essential information to healthcare professionals and patients on how Emtricitabine/ Tenofovir disoproxil Zentiva should be used.

This summary of the RMP for Emtricitabine/ Tenofovir disoproxil Zentiva should be read in the context of all this information including the assessment report of the evaluation and its plain-language summary, all which is part of the European Public Assessment Report (EPAR).

Important new concerns or changes to the current ones will be included in updates of Emtricitabine/ Tenofovir disoproxil Zentiva's RMP.

I. The medicine and what it is used for

Emtricitabine/ Tenofovir disoproxil Zentiva is authorised in antiretroviral combination therapy for the treatment of HIV-1 infected adults and adolescents. It is also authorised for pre-exposure prophylaxis (PrEP) in combination with safer sex practices to reduce the risk of sexually acquired HIV-1 infection in adults and adolescents at high risk (see SmPC for the full indication). It contains emtricitabine and tenofovir as the active substances and it is given by oral route.

Further information about the evaluation of Emtricitabine/ Tenofovir disoproxil Zentiva's benefits can be found in Emtricitabine/ Tenofovir disoproxil Zentiva's EPAR, including in its plain-language summary, available on the EMA website, under the medicine's webpage: https://www.ema.europa.eu/documents/overview/emtricitabine/tenofovir-disoproxil-zentiva-epar-summary-public_en.pdf.

II. Risks associated with the medicine and activities to minimise or further characterise the risks

Important risks of Emtricitabine/ Tenofovir disoproxil Zentiva together with measures to minimise such risks and the proposed studies for learning more about Emtricitabine/ Tenofovir disoproxil Zentiva's risks, are outlined below.
Measures to minimise the risks identified for medicinal products can be:

- Specific information, such as warnings, precautions, and advice on correct use, in the package leaflet and SmPC addressed to patients and healthcare professionals;
- Important advice on the medicine's packaging;
- The authorised pack size — the amount of medicine in a pack is chosen so to ensure that the medicine is used correctly;
- The medicine's legal status — the way a medicine is supplied to the patient (e.g. with or without prescription) can help to minimise its risks.

Together, these measures constitute routine risk minimisation measures.

In the case of Emtricitabine/ Tenofovir disoproxil Zentiva, these measures are supplemented with additional risk minimisation measures mentioned under relevant important risks, below.

In addition to these measures, information about adverse reactions is collected continuously and regularly analysed so that immediate action can be taken as necessary. These measures constitute routine pharmacovigilance activities.

If important information that may affect the safe use of Emtricitabine/ Tenofovir disoproxil Zentiva is not yet available, it is listed under 'missing information' below.

II.A List of important risks and missing information

Important risks of Emtricitabine/ Tenofovir disoproxil Zentiva are risks that need special risk management activities to further investigate or minimise the risk, so that the medicinal product can be safely taken. Important risks can be regarded as identified or potential. Identified risks are concerns for which there is sufficient proof of a link with the use of Emtricitabine/ Tenofovir disoproxil Zentiva. Potential risks are concerns for which an association with the use of this medicine is possible based on available data, but this association has not been established yet and needs further evaluation. Missing information refers to information on the safety of the medicinal product that is currently missing and needs to be collected (e.g. on the long-term use of the medicine);

Summary of safety concerns	
Important identified risks	• Renal toxicity (TD) • Bone events due to proximal renal tubulopathy/ loss of bone mineral density (TD) • HIV-1 acquisition, including infection resulting from non-adherence) (ETZ) • Development of resistance in patients with unrecognized or acute HIV-1 infection (ETZ)
Important potential risks	None
Missing information	• Safety in pregnancy and lactation (TD)

II.B Summary of important risks

Summary of important risks that have corresponding additional risk minimisation activities are:

Renal toxicity	
Risk minimisation measures	<u>Routine risk minimisation measures:</u> SmPC sections 4.2, 4.4, 4.5, 4.8. PL sections 2 and 4. Prescription only medicine. The therapy should be initiated by a physician experienced in the management of HIV infections. <u>Additional risk minimisation measures:</u> Educational materials for physicians: HIV paediatric renal educational brochure.
Bone events due to proximal renal tubulopathy/ loss of bone mineral density	
Risk minimisation measures	<u>Routine risk minimisation measures:</u> SmPC sections 4.4 and 4.8.

	PL section 4. Prescription only medicine. The therapy should be initiated by a physician experienced in the management of HIV infections. <u>Additional risk minimisation measures:</u> Educational materials for physicians: HIV paediatric renal educational brochure.
HIV-1 acquisition, including infection resulting from non-adherence (PrEP indication)	
Risk minimisation measures	<u>Routine risk minimisation measures</u>: SmPC section 4.4 PL section 2 and 3 Prescription only medicine. The therapy should be initiated by a physician experienced in the management of HIV infection. <u>Routine risk minimization activities recommending specific clinical measures to address the risk:</u> SmPC Section 4.4: Warning that HIV-1 uninfected individuals should be counselled at frequent intervals to strictly adhere to the recommended Emtricitabine/Tenofovir disoproxil Zentiva daily dosing schedule. <u>Additional risk minimisation measures:</u> Educational materials for physicians and individuals at risk • PrEP educational brochure for prescribers • PrEP Checklist for prescribers • PrEP educational brochure for the individual at risk • PrEP reminder card
Development of resistance in patients with unrecognized or acute HIV-1 infection (PrEP indication)	
Risk minimisation measures	<u>Routine risk minimisation measures</u>: SmPC section 4.3 and 4.4 PL section 2 Prescription only medicine. The therapy should be initiated by a physician experienced in the management of HIV infection. <u>Routine risk minimization activities recommending specific clinical measures to address the risk:</u> SmPC Section 4.4: Warning that individuals should be re-confirmed to be HIV-negative at frequent intervals (e.g., at least every 3 months) using a combined antigen/antibody test while taking Emtricitabine/Tenofovir disoproxil Zentiva for PrEP. <u>Additional risk minimisation measures:</u> Educational materials for physicians and individuals at risk • PrEP educational brochure for prescribers • PrEP Checklist for prescribers • PrEP educational brochure for the individual at risk • PrEP reminder card

II.C Post-authorisation development plan

II.C.1 Studies which are conditions of the marketing authorisation

There are no studies which are conditions of the marketing authorisation or specific obligation of Emtricitabine/ Tenofovir disoproxil Zentiva.

II.C.2 Other studies in post-authorisation development plan

There are no studies required in post-authorisation development plan for Emtricitabine/ Tenofovir disoproxil Zentiva.