EMA/PRAC/154100/2015
Pharmacovigilance Risk Assessment Committee (PRAC)

Ariclaim/Cymbalta/Xeristar/Yentreve

Scientific conclusions and grounds recommending the variation to the terms of the marketing authorisation

Active substance:DULOXETINE

Procedure no.: EMEA/H/C/PSUSA/00001187/201408

Period covered by the PSUR: 03.08.11 - 03.08.14

Risk Management Plan: v.12

30 Churchill Place ● Canary Wharf ● London E14 5EU ● United Kingdom
Telephone +44 (0)20 3660 6000 **Facsimile** +44 (0)20 3660 5520
Send a question via our website www.ema.europa.eu/contact

Scientific conclusions

Taking into account the PRAC Assessment Report on the PSUR for DULOXETINE, the scientific conclusions of CHMP are as follows:

A signal of cutaneous vasculitis was identified by the EMA in November, 2013 during routine signal detection activities. Four cases were considered as supportive of a signal and 15 other cases poorly documented, lacked biopsies or there were alternative causes. During the evaluation of this PSUR, a search in Eudravigilance yielded 30 cases, including cases previously identified by the MAH. The information regarding the causality is limited but in the light of the cases provided an involvement of the duloxetine treatment in the cases of vasculitis cannot be discarded. Among five selected cases, three of them contain concomitant medication associated with the development of vasculitis but in all of them the time to onset is very short from the first intake of duloxetine ranging between 1 day and 3 weeks suggesting a temporal relationship between the drug and the event. All of them have histological confirmation of vasculitis and did not present other risk factors attributable to the development of the event. In addition, vasculitis has been reported with other selective serotonin re-uptake inhibitors (SSRIs) and is labelled for Fluoxetine.

The PRAC therefore agreed that the term “cutaneous vasculitis” should be included in section 4.8 within “skin and subcutaneous tissue disorders” SOC with a “very rare” frequency based on the available data from clinical trials. Therefore, in view of available data regarding cutaneous vasculitis, the PRAC considered that changes to the product information were warranted.

The PRAC further agreed in deleting the paragraph to the table of adverse events in section 4.8, which refers to the numbers of patients included in placebo-controlled trials for depression, generalised anxiety disorder and diabetic neuropathic pain, since this is information is not mandatory.

The CHMP agrees with the scientific conclusions made by the PRAC.

In addition, the MAH took the opportunity to make small editorial corrections throughout the Product Information in line with the current QRD template, to which the CHMP agreed.

Grounds recommending the variation to the terms of the Marketing Authorisation

On the basis of the scientific conclusions for DULOXETINE the CHMP is of the opinion that the benefit-risk balance of the medicinal products containing DULOXETINE is favourable subject to the proposed changes to the product information

The CHMP recommends that the terms of the Marketing Authorisations should be varied.