



EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

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Patient Health Protection

Fifteenth pandemic pharmacovigilance update

This report summarises the adverse drug reactions reported after the use of the centrally authorised pandemic vaccines Arepanrix, Celvapan, Focetria and Pandemrix and the antiviral Tamiflu. It also provides information on the evolution of the H1N1 pandemic, an estimate of how many doses of vaccines and antivirals have been distributed or administered in Europe, and other available information on the benefits and risks of the vaccines and antivirals.

This update includes reports of *suspected* reactions that were observed after the medicines were administered. This does not mean that these reactions were caused by the medicines. They could be a symptom of another illness, or they could be associated with another product taken by the patient. Healthcare professionals are actively encouraged to report events occurring after vaccination.

Due to different number of people receiving each vaccine, the number of reports for the four different vaccines cannot be used to compare the safety or the benefit-risk balance of the vaccines.

As a single patient may experience several reactions that will be included in a single report, the total number of reactions may not be equal to the total number of patients. In addition, as some patients have received two doses of the vaccines, the total number of doses administered is not necessarily equal to the total number of patients vaccinated.

Reports are collected in EudraVigilance, a database and management system administered by the European Medicines Agency for the collection and evaluation of reports of suspected adverse drug reactions to medicinal products. EudraVigilance allows the transfer of reports from national regulatory agencies and marketing authorisation holders to the Agency, and the early detection and monitoring of possible safety signals in relation to reported adverse reactions.

This update includes reports received by EudraVigilance up to 28 March 2010. Except for Arepanrix, which is not marketed in the European Economic Area (EEA), the graphs represent aggregated data related to the EEA only, and provide an overview of the reporting situation in the EEA. The updated safety information also considers worldwide cases from EudraVigilance.

A list of the most frequently reported suspected adverse reactions is presented for the organ systems with the largest number of reports.



Key messages

As of 31 March 2010, at least 42.3 million people in the EEA, including at least 488,600 pregnant women, had been vaccinated with one of the three centrally authorised vaccines marketed in the EEA, Celvapan, Focetria or Pandemrix. When the information available for the nationally authorised vaccines is included, the total rises to at least 49.9 million people. Some of these have received two doses of a vaccine, but their percentage varies between countries. The steep increase between the 13th and 14th reports reflects renewed efforts by regulatory agencies in the EU to collect exposure data rather than sudden increase in vaccinations.

The vast majority of the adverse reactions that had been reported as of 28 March 2010 are considered to be non-serious.

The benefit-risk balance of the centrally-authorised pandemic vaccines and antivirals for the current H1N1 influenza pandemic continues to be positive.

For further information on the known adverse reactions included in the authorised product information for the centrally authorised pandemic vaccines Arepanrix, Celvapan, Focetria and Pandemrix and the antiviral Tamiflu, visit the Agency's [pandemic influenza \(H1N1\) website](#).

For information regarding products authorised at a national level, please contact the relevant national competent authority (see [regulatory bodies in the European Union](#) for links).

Pandemic information

In its [weekly influenza surveillance overview](#) dated 26 March 2010, the European Centre for Disease Prevention and Control (ECDC) confirmed for a third consecutive week that all 24 reporting countries experienced low intensity.

The ECDC report also states that although the world remains in pandemic Phase 6, influenza activity caused by the 2009 pandemic influenza A(H1N1) virus is well past its winter peak in EU/EEA countries. However, transmission associated with sporadic cases continues to occur. Most cases of influenza-like illness in EU/EEA countries are not due to influenza virus infection.

In the week ending March 26, EU/EFTA Member States announced 20 deaths on their national websites, meaning that as of March 26 there were 2,839 deaths due to the pandemic announced by these states. Click [here](#) for the breakdown by country.

See the [ECDC pandemic website](#) and its [weekly executive update](#) for additional information

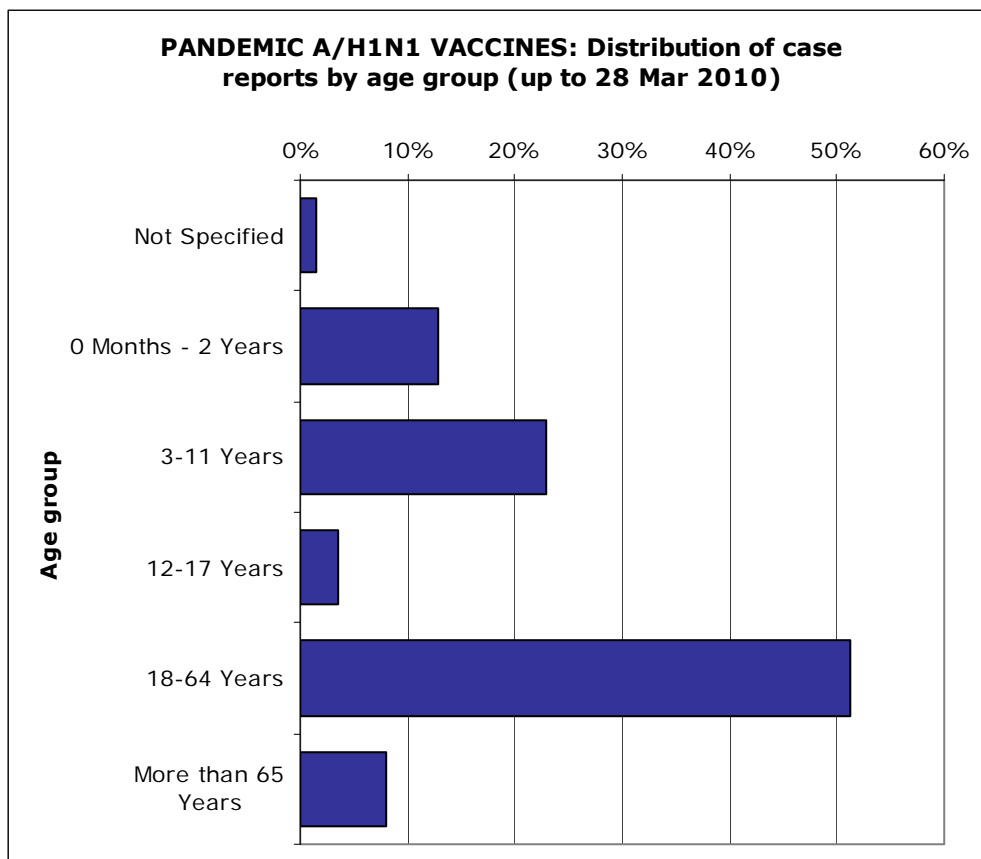
In its [weekly update](#) dated 26 March 2010, the World Health Organization (WHO) reports that, as of 21 March, worldwide more than 213 countries and overseas territories or communities have reported laboratory confirmed cases of pandemic influenza H1N1 2009, including over 16,931 deaths.

The most active areas of pandemic influenza virus transmission currently are in parts of Southeast Asia, West Africa, and in the tropical zone of the Americas. In Europe, overall pandemic influenza virus transmission continued to decline or remained low in most countries.

Overview of centrally authorised vaccines

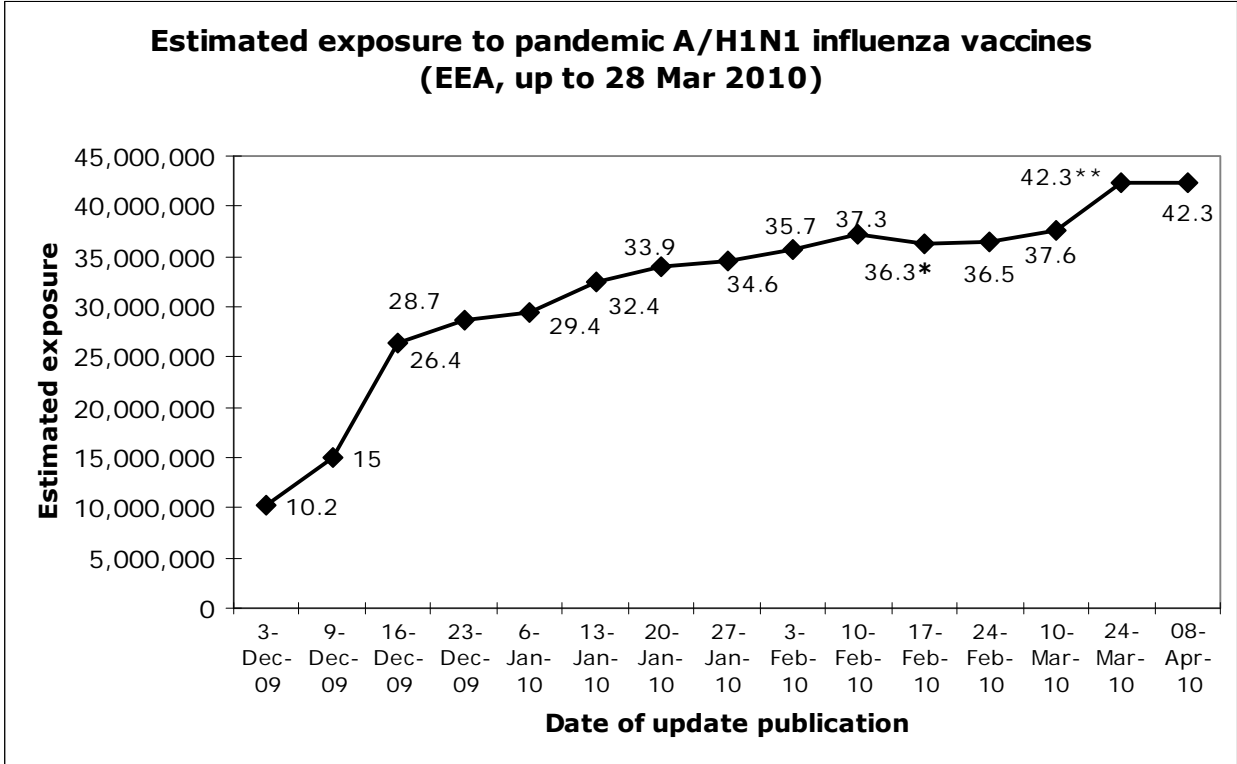
As of 28 March 2010, a total of 14,243 case reports had been received from the EEA by EudraVigilance since the authorisation of the centrally authorised vaccines in the EEA (Arepanrix, Celvapan, Focetria

and Pandemrix). This represents an increase of 228 reports compared with the previous update. The graph below displays the age distribution of all the reports received by EudraVigilance.



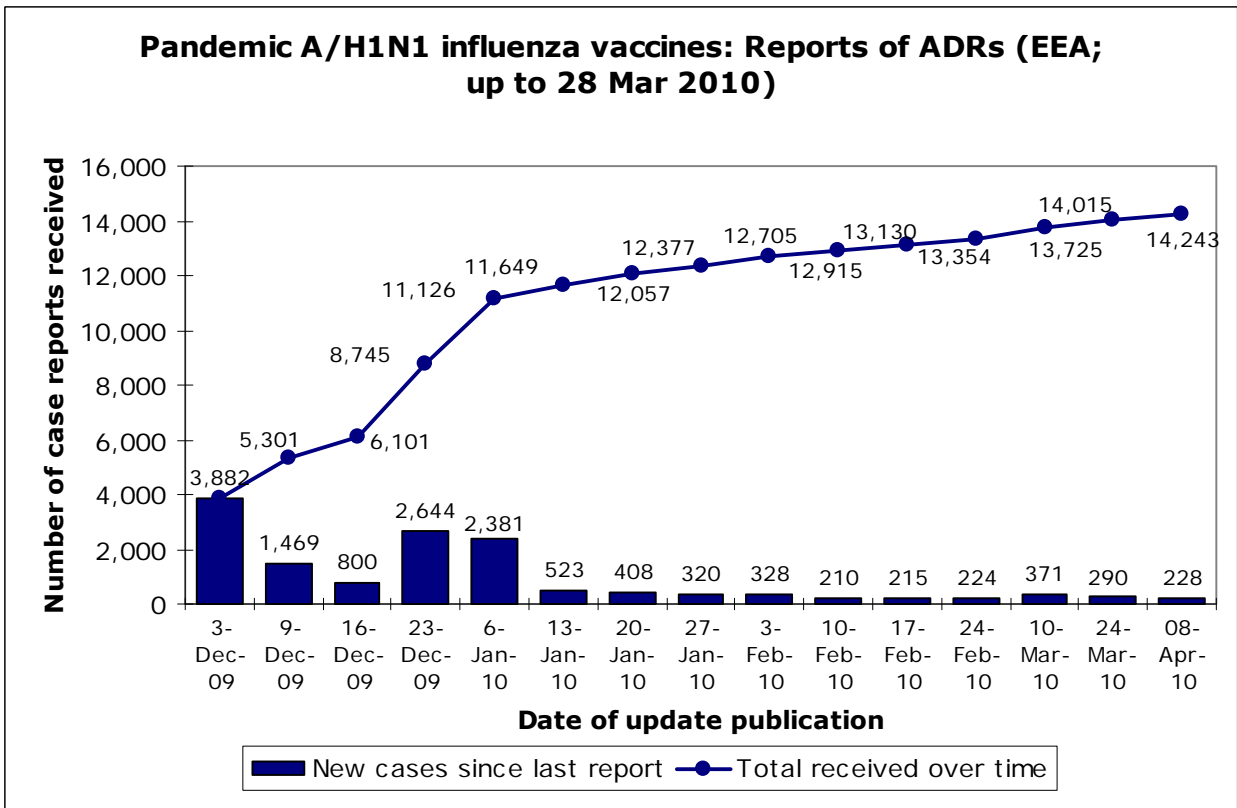
Data available on 31 March 2010 from Member States and from the vaccine marketing authorisation holders indicate that at least 159.6 million doses had been distributed and at least 42.3 million patients had been vaccinated with one of the three vaccines marketed in the EEA. From the limited information received from several countries, at least 488,600 pregnant women had been vaccinated. When the information available for the nationally authorised vaccines is included, at least 167 million doses had been distributed, with at least 49.9 million people (including at least 544,000 pregnant women) vaccinated in Europe. The increase in number of doses distributed is connected with the receipt of new company information for two of the centralised vaccines. The increase in the numbers of vaccinated individuals reflects new information received by the Agency regarding the number of patients vaccinated with unspecified centralised vaccines.

The graphs below display the cumulative numbers of adverse reaction reports received by EudraVigilance for the three centrally-authorized vaccines marketed in the EEA and the estimated number of people vaccinated, as given in the previous weekly updates. The estimated exposure is derived from information obtained from Member States and is considered to be an underestimate of the true number of people vaccinated. Both curves are reaching a plateau, which indicates a decrease in the number of new adverse reaction reports received by EudraVigilance and the number of new vaccinations with these three centrally-authorized vaccines.



* This number decreased due to a correction in the number of vaccinated people in two Member States.

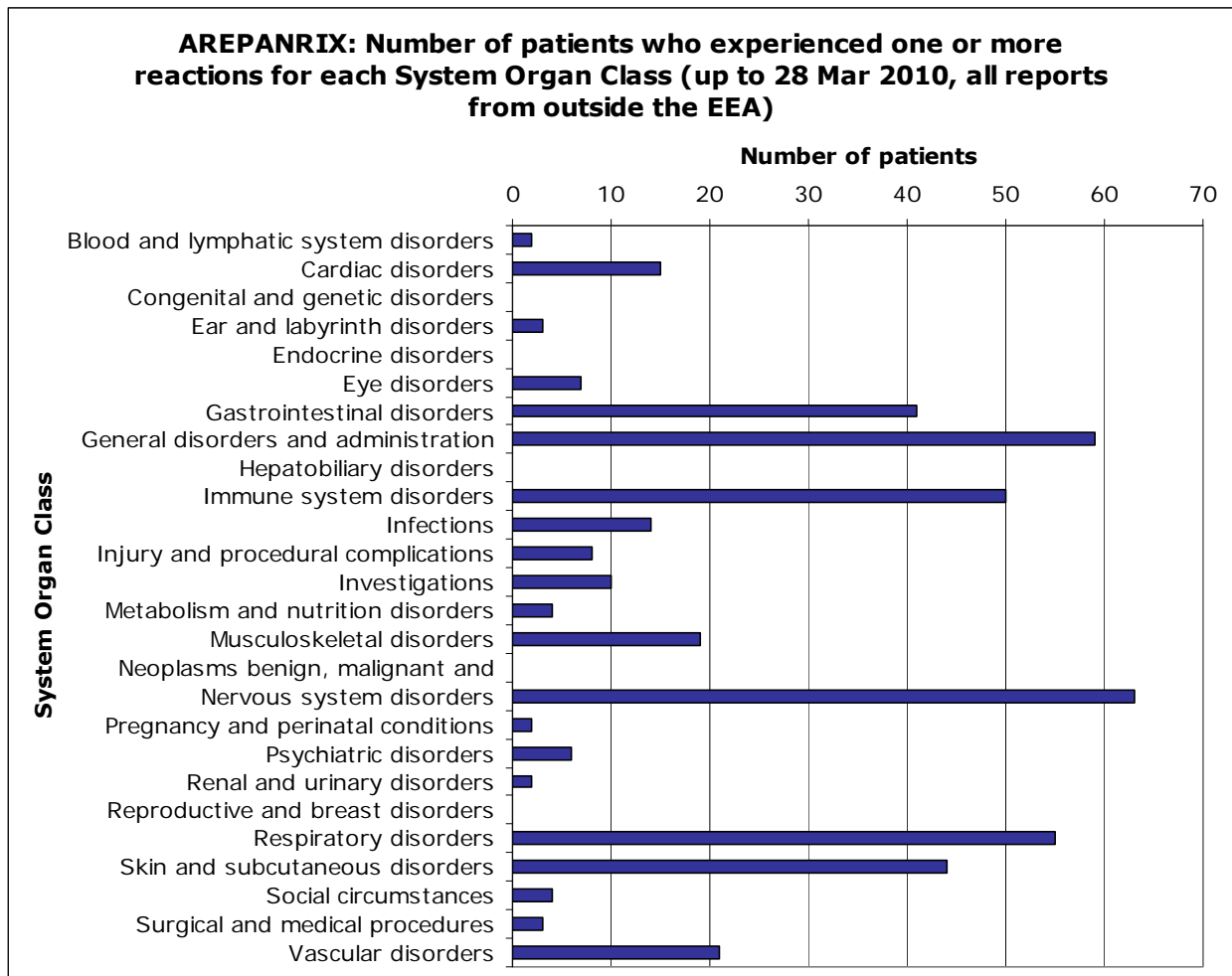
** These numbers are reported as received by the Agency: dates reflect when the Agency received the information, rather than when the vaccinations took place.



A list of specific topics discussed in previous updates is included in the [appendix](#).

Arepanrix

Although authorised, Arepanrix is not marketed in the EEA but has been available in Canada since October 2009. In accordance with EU legislation, unexpected serious adverse reactions are reported from outside the EEA. As of 28 March 2010, a total of 113 reports had been received by EudraVigilance from outside the EEA. This represents an increase of five reports compared with the previous update.



Distribution of adverse reactions by system organ class

In reports of serious unexpected adverse reactions received from outside the EEA, the most frequently reported suspected adverse reactions in each system organ class (SOC) experienced by patients since the authorisation of the vaccine are listed below. Because known reactions to the vaccine are not reported from outside the EU, the profile of reports received for Arepanrix is different from those of the products marketed in the EU.

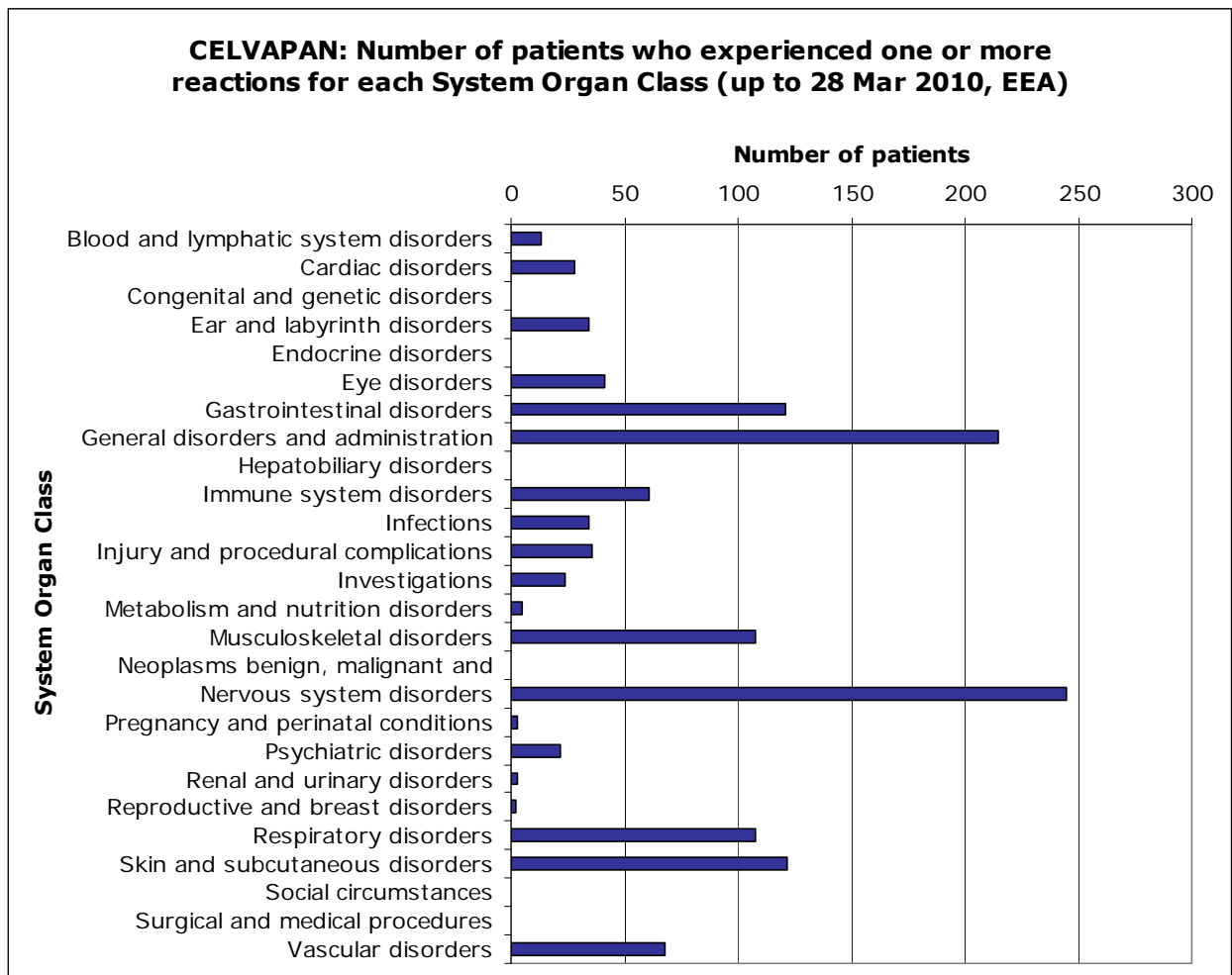
- Nervous-system disorders: Guillain-Barré syndrome, paraesthesia, dizziness, hyporeflexia, paralysis flaccid, hypoaesthesia, cranial nerve paralysis, headache
- General disorders and administration-site conditions: asthenia, product quality issue, pyrexia, fatigue
- Respiratory disorders: dyspnoea, throat tightness, cough, pharyngeal oedema, respiratory paralysis, respiratory disorder

- Immune disorders: anaphylactic reaction, hypersensitivity
 - Skin and subcutaneous conditions: angioedema, urticaria, erythema
 - Gastrointestinal disorders: nausea
 - Vascular disorders: flushing, pallor
 - Musculoskeletal disorders: muscular weakness, pain in extremity, myalgia
 - Cardiac disorders: cyanosis, tachycardia
 - Infections: transmission of an infectious agent via a medicinal product
-
- The most frequently reported suspected adverse reactions in children since authorisation included urticaria, angioedema, dyspnoea, anaphylactic reaction, cough, anaphylactic shock, erythema, cyanosis, flushing, hypersensitivity, pyrexia, rash, nausea, pallor, pruritus, skin discolouration, throat tightness and tremor.

Celvapan

As of 28 March 2010, a total of 533 reports had been received by EudraVigilance (an increase of 15 reports since the previous update). According to the information provided by the company¹ and Member States, at least 11.4 million doses had been distributed to EEA countries up to 22 March 2010. It is estimated that at least 659,400 patients have been vaccinated with Celvapan in the EEA.

¹ As stated by the marketing authorisation holder in the periodic safety update report dated 22 March 2010.



Distribution of adverse reactions by system organ class

- In reports received from the EEA, the most frequently reported suspected adverse reactions in each system organ class (SOC) experienced by patients since the authorisation of the vaccine were:
 - Nervous-system disorders: headache, dizziness, syncope, paraesthesia, hypoaesthesia, lethargy;
 - General disorders and administration-site conditions: pyrexia, malaise, fatigue, chills, asthenia, influenza-like illness, feeling hot, injection-site pain, chest discomfort, pain;
 - Gastrointestinal disorders: nausea, vomiting, diarrhoea, abdominal pain, oral paraesthesia;
 - Musculoskeletal disorders: myalgia, arthralgia, pain in extremity, muscular weakness;
 - Skin and subcutaneous conditions: hyperhidrosis, pruritus, urticaria, rash, erythema;
 - Respiratory disorders: oropharyngeal pain, cough, dyspnoea;
 - Vascular disorders: pallor, flushing, hypotension;
 - Immune disorders: hypersensitivity, anaphylactic reaction, anaphylactoid reaction;
 - Eye disorders: vision blurred;
 - Ear and labyrinth disorders: vertigo;

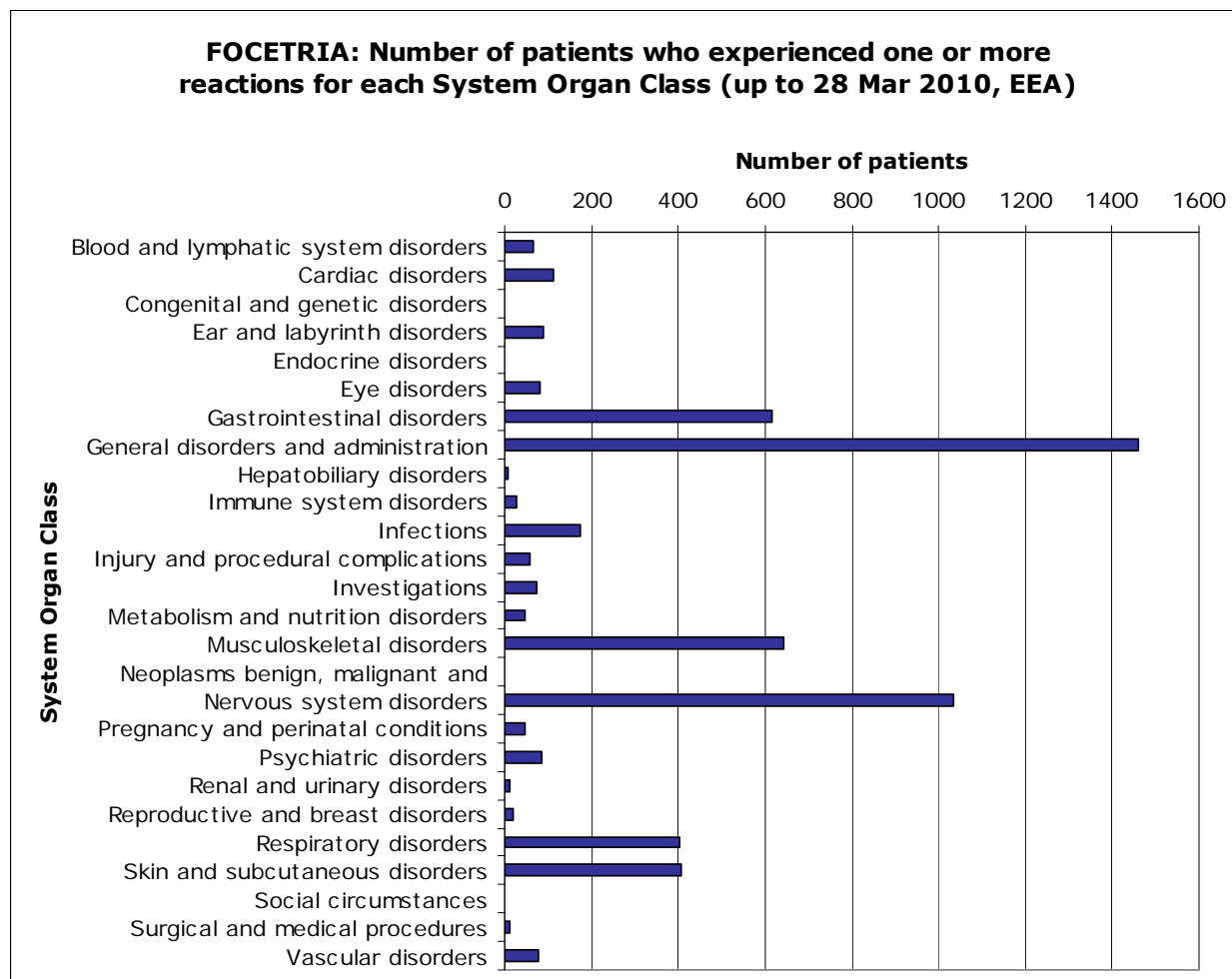
- Infections: rhinitis, nasopharyngitis;
- Cardiac disorders: tachycardia, palpitations;
- Investigations: body temperature increased;
- Psychiatric disorders: sleep disorder;
- Injury and procedural complications: medication error.

Updated safety information

- The most frequently reported suspected adverse reactions in children since authorisation included hypersensitivity, medication error, vomiting, syncope, pyrexia, dizziness, pallor, rash, nausea, headache, malaise, urticaria vision blurred, chills, cough, pruritus, dyspnoea, fatigue, hyperhidrosis and somnolence.
- Since the last update, no fatal cases have been reported in people vaccinated with Celvapan. One case of pregnancy complication has been received: death hours after premature birth with suspected placenta abruption

Focetria

As of 28 March 2010, a total of 2,972 reports had been received by EudraVigilance (an increase of 25 reports since the previous update). Data available on 19 March 2010 from Member States and from the company² indicated that at least 36 million doses of Focetria had been distributed in the EEA, and at least 6.5 million patients had been vaccinated.



Distribution of adverse reactions by system organ class

- In reports received from the EEA, the most frequently reported suspected adverse reactions in each SOC experienced by patients since the authorisation of the vaccine were:
 - General disorders and administration-site conditions: pyrexia, fatigue, injection-site pain, influenza-like illness, malaise, chills, injection-site erythema, hyperpyrexia, injection-site swelling, injection-site induration, chest pain, asthenia, pain, injection-site pruritus, feeling cold, injection-site haematoma, injection-site warmth, feeling hot, oedema peripheral;
 - Nervous-system disorders: headache, dizziness, paraesthesia, somnolence, syncope, tremor, dysgeusia, hypoaesthesia, Guillain-Barré syndrome, presyncope, convulsion, migraine;

² As stated by the marketing authorisation holder in the periodic safety update report dated 4 March 2010.

- Musculoskeletal disorders: myalgia, pain in extremity, arthralgia, musculoskeletal stiffness, muscular weakness, neck pain, muscle spasms, musculoskeletal pain, back pain, sensation of heaviness, rheumatoid arthritis;
- Gastrointestinal disorders: nausea, diarrhoea, vomiting, abdominal pain, abdominal discomfort, upper abdominal pain, dyspepsia;
- Skin and subcutaneous conditions: rash, pruritus, urticaria, erythema, hyperhidrosis, rash pruritic, dermatitis allergic, angioedema, rash generalised, swelling face, eczema;
- Respiratory disorders: cough, dyspnoea, oropharyngeal pain, asthma, bronchospasm, dysphonia, productive cough, throat irritation;
- Infections: rhinitis, nasopharyngitis, pneumonia, influenza, herpes zoster, pharyngitis;
- Cardiac disorders: palpitations, tachycardia, atrial fibrillation, cyanosis;
- Ear and labyrinth disorders: vertigo, tinnitus, ear pain;
- Psychiatric disorders: listlessness, insomnia, nightmare, restlessness, tearfulness;
- Eye disorders: visual impairment, eyelid oedema, eye irritation, eye swelling, vision blurred, diplopia, eye pain, conjunctivitis;
- Vascular disorders: hypotension, flushing, hypertension, pallor, haematoma, peripheral coldness;
- Investigations: body temperature increased, blood pressure increased, heart rate increased;
- Blood and lymphatic disorders: lymphadenopathy;
- Metabolism and nutrition disorders: decreased appetite;
- Immune system disorders: hypersensitivity, anaphylactic reaction.

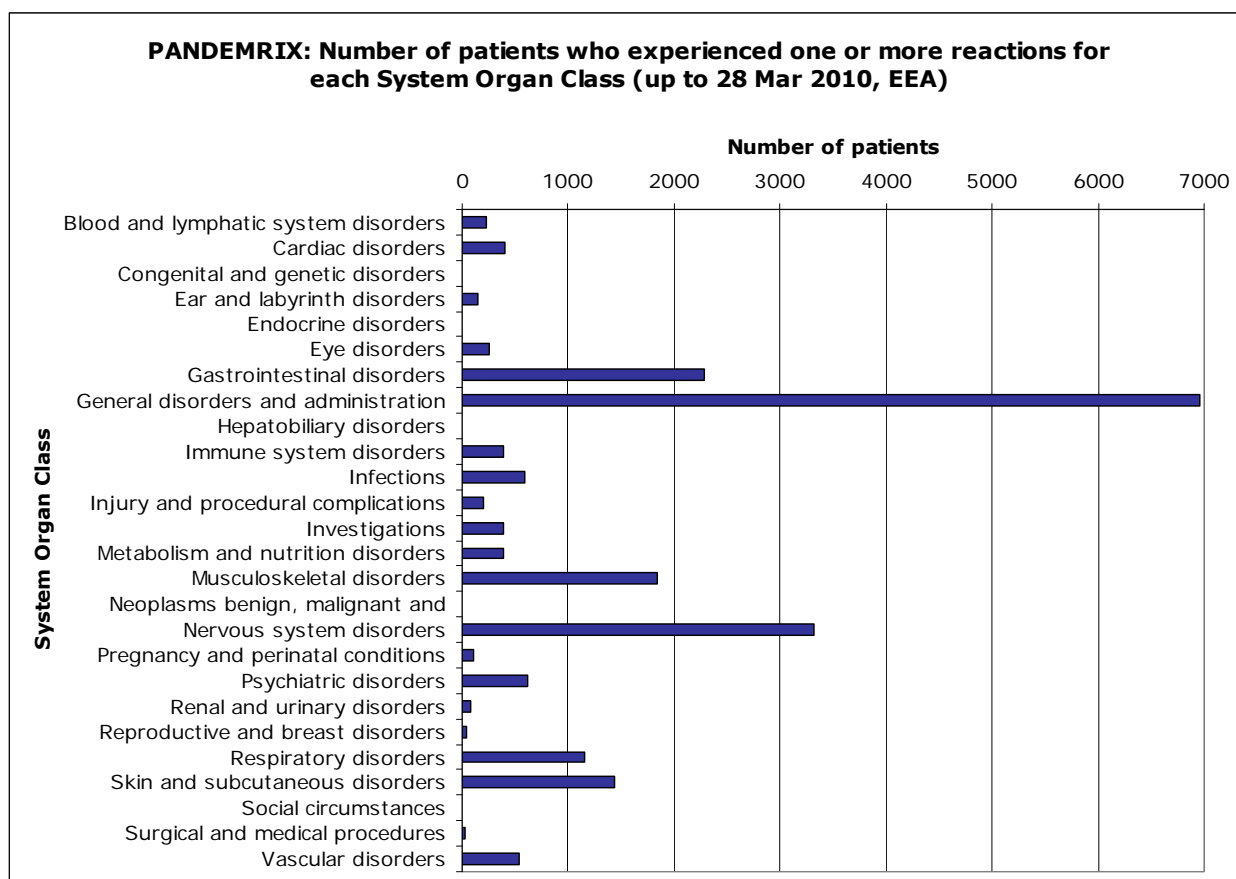
Updated safety information

- The most frequently reported suspected adverse reactions in children since authorisation included pyrexia, headache, hyperpyrexia, vomiting, cough, nausea, abdominal pain, diarrhoea, injection-site pain, myalgia, fatigue, influenza-like illness, rash, dyspnoea, drug exposure during pregnancy, malaise, urticaria, convulsion and asthma.
- Since the last update, one fatal case has been reported in people vaccinated with Focetria. It was an elderly patient with multiple co-medication and severe pre-existing conditions.

Pandemrix

As of 28 March 2010, a total of 10,763 reports had been received by EudraVigilance (an increase of 189 reports since the previous update). Data available on 19 March 2010 from Member States and from the company³ indicate that at least 112.1 million doses of Pandemrix had been distributed in the EEA. It is estimated that at least 28.9 million patients have been vaccinated. A small decrease from the numbers in the previous safety update report reflects corrections received from some Member States.

³ As stated by the marketing authorisation holder in the periodic safety update report dated 12 March 2010.



Distribution of adverse reactions by system organ class

- In reports received from the EEA, the most frequently reported suspected adverse reactions in each SOC experienced by patients since the authorisation of the vaccine were:
 - General disorders and administration-site conditions: pyrexia, hyperpyrexia, injection-site pain, fatigue, influenza-like illness, malaise, chills, injection site erythema, injection-site swelling, pain, oedema peripheral, asthenia, injection-site induration, chest pain, injection-site inflammation, feeling hot, chest discomfort, local reaction;
 - Nervous-system disorders: headache, dizziness, paraesthesia, syncope, somnolence, hypoaesthesia, crying, febrile convulsion, convulsion, lethargy, tremor, loss of consciousness, Guillain-Barré syndrome, presyncope, hypersomnia, facial palsy, hypotonia, poor quality sleep;
 - Gastrointestinal disorders: vomiting, nausea, diarrhoea, abdominal pain, upper abdominal pain, paraesthesia oral, lip swelling, swollen tongue, dysphagia, abdominal discomfort, dry mouth, hypoaesthesia oral, lower abdominal pain;
 - Musculoskeletal disorders: myalgia, pain in extremity, arthralgia, muscular weakness, musculoskeletal stiffness, back pain, musculoskeletal pain, limb discomfort, neck pain, muscle spasms, arthritis;
 - Skin and subcutaneous conditions: rash, erythema, urticaria, hyperhidrosis, pruritus, rash generalised, angioedema, cold sweat, swelling face, rash erythematous, rash macular, rash pruritic, dermatitis allergic, pruritus generalised, rash maculo-papular, facial hypoaesthesia, petechiae, eczema, vesicular rash, skin reaction;

- Respiratory disorders: dyspnoea, cough, oropharyngeal pain, asthma, rhinorrhoea, wheezing, epistaxis, throat tightness, tachypnoea, pharyngeal oedema, bronchospasm, respiratory failure, respiratory distress, sneezing, pulmonary embolism, dysphonia, productive cough, hyperventilation, stridor;
- Psychiatric disorders: listlessness, insomnia, tearfulness, sleep disorder, restlessness, hallucination, nightmare, anxiety, confusional state;
- Infections: rhinitis, pneumonia, nasopharyngitis, influenza, herpes zoster, swine influenza, cellulitis, bronchitis, lower respiratory tract infection, ear infection, gastroenteritis, respiratory tract infection;
- Vascular disorders: pallor, hypotension, circulatory collapse, flushing, hypertension, peripheral coldness, hot flush;
- Metabolism and nutrition disorders: decreased appetite, oligodipsia, dehydration, polydipsia ;
- Cardiac disorders: tachycardia, palpitations, cyanosis, myocardial infarction, cardiac failure, atrial fibrillation, cardiac arrest, bradycardia, myocarditis, angina pectoris;
- Immune disorders: hypersensitivity, anaphylactic reaction, anaphylactic shock, anaphylactoid reaction;
- Investigations: body temperature increased, blood pressure decreased, blood pressure increased, heart rate increased, heart rate decreased, body temperature decreased, weight decreased, C-reactive protein increased;
- Eye disorders: vision blurred, eye pain, eye swelling, visual impairment, ocular hyperaemia, eyelid oedema, photophobia, diplopia, conjunctivitis;
- Blood and lymphatic system disorders: lymphadenopathy, thrombocytopenia;
- Injury and procedural disorders: medication error, vaccination failure, contusion;
- Ear and labyrinth disorders: vertigo, tinnitus, ear pain.

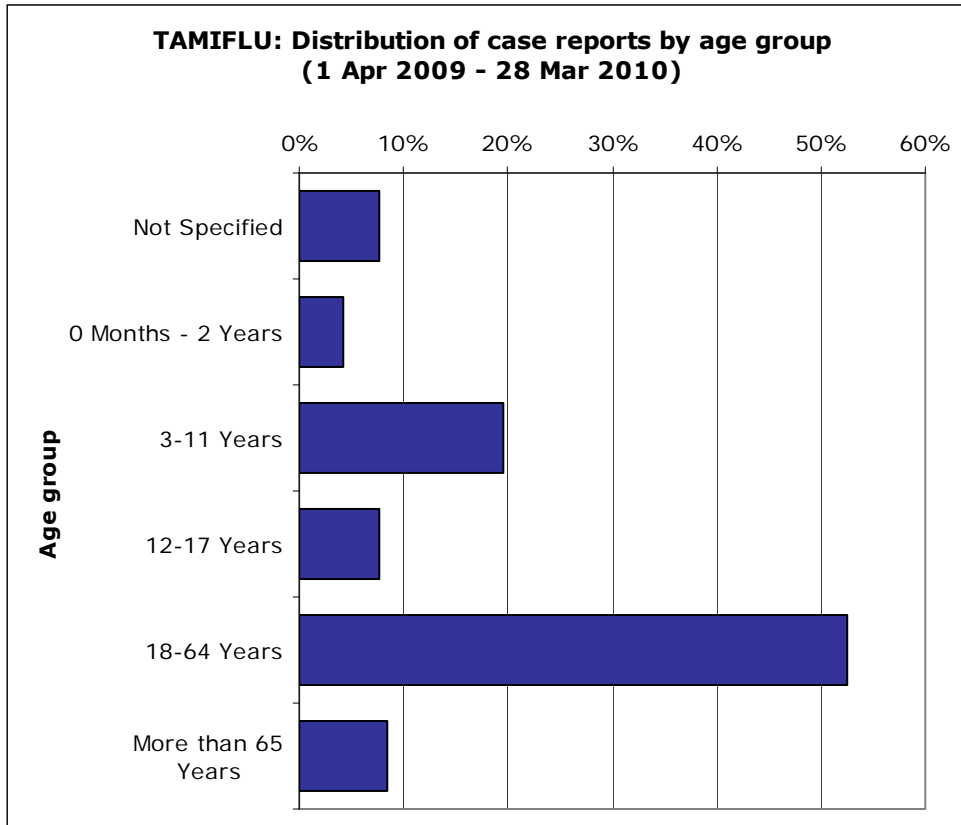
Updated safety information

- The most frequently reported suspected adverse reactions in children since authorisation were pyrexia, hyperpyrexia, vomiting, injection-site pain, headache, diarrhoea, cough, rash, fatigue, decreased appetite, nausea, abdominal pain, malaise, injection-site erythema, crying, somnolence, pallor, listlessness, injection site swelling, syncope, dyspnoea, influenza-like illness, pain in extremity, febrile convulsion, myalgia, urticaria, dizziness, tearfulness and erythema.
- Since the last update, four new fatal cases from the EEA have been received by EudraVigilance. They concerned three men and one woman with ages ranging from 60 to 94 years. All four patients had medical histories and co morbidities that may explain the fatalities.

Antiviral medicines

Tamiflu (oseltamivir)

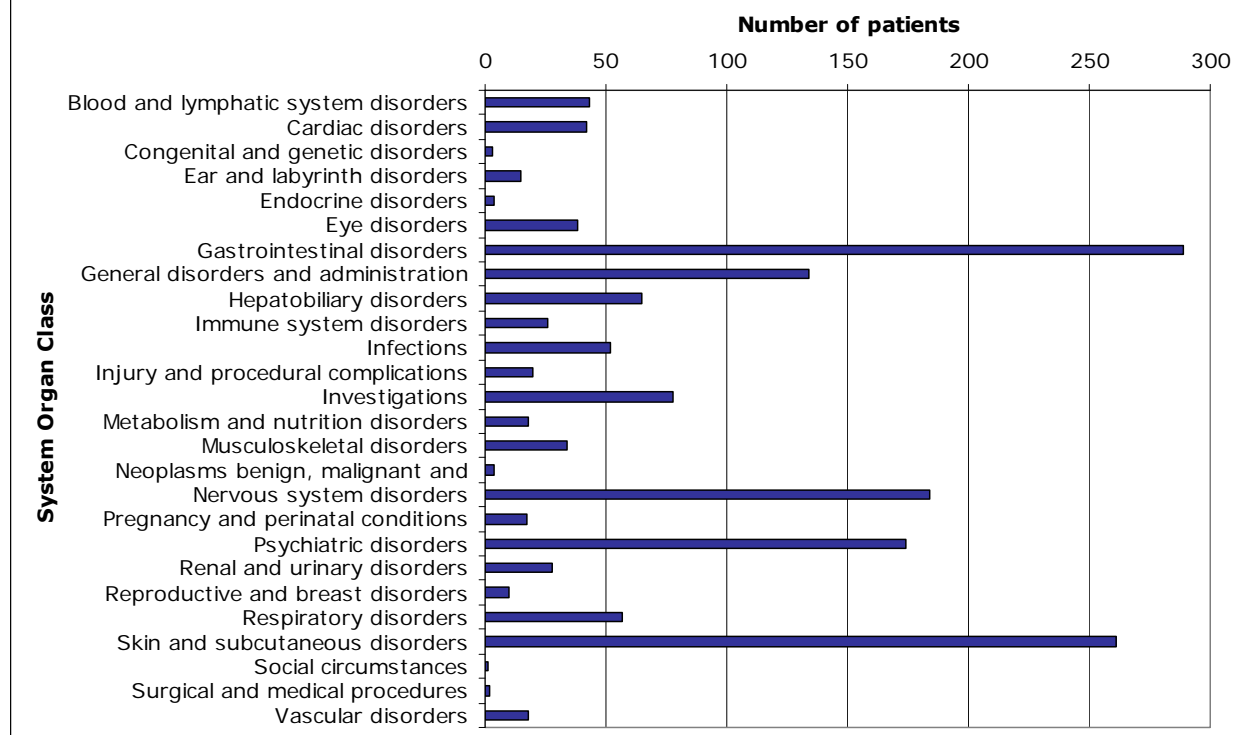
From 1 April 2009 to 28 March 2010, a total of 1,077 reports worldwide were received by EudraVigilance (an increase of 19 reports since the previous update). The graph below displays the age distribution of patients who experienced an adverse reaction reported to EudraVigilance.



According to information received from the marketing authorisation holder, exposure to Tamiflu is estimated to be at least 22.5 million patients during the pandemic period of 1 May 2009 to 28 February 2010⁴.

⁴ As stated by the marketing authorisation holder in the pandemic safety report dated 24 March 2010.

TAMIFLU/oseltamivir: Number of patients who experienced one or more reactions for each System Organ Class (1 Apr 2009 - 28 Mar 2010, EEA)



Distribution of adverse reactions by system organ class

- The adverse reaction reports received from the EEA are consistent with the safety profile described in the product information. The most frequently reported suspected adverse reactions experienced by patients in each SOC were as follows:
 - Gastrointestinal disorders: vomiting, nausea, diarrhoea, abdominal pain, upper abdominal pain, lip swelling, mouth ulceration, pancreatitis, pancreatitis acute, swollen tongue, dyspepsia, haematemesis, abdominal distension;
 - Skin and subcutaneous conditions: rash, rash generalised, urticaria, erythema, swelling face, pruritus, Stevens-Johnson syndrome, angioedema, rash erythematous, rash pruritic, erythema multiforme, dermatitis bullous, rash macular, blister, rash maculo-papular;
 - Nervous-system disorders: headache, convulsion, paraesthesia, dizziness, epilepsy, tremor, somnolence, syncope, burning sensation, nystagmus, balance disorder, cerebrovascular accident, coordination abnormal, dysgeusia;
 - Psychiatric disorders: hallucination, confusional state, nightmare, insomnia, anxiety, delirium, hallucination visual, disorientation, abnormal behaviour, agitation, panic attack, aggression, sleep disorder, depressed mood, depression, mental disorder, psychotic disorder;
 - General disorders and administration-site conditions: malaise, death, pyrexia, influenza-like illness, chest pain, drug ineffective, oedema peripheral, condition aggravated, drug interaction, fatigue, general physical health deterioration, pain, face oedema, gait disturbance, multi-organ failure;

- Investigations: liver function test abnormal, hepatic enzyme increased, international normalised ratio increased, blood triglycerides increased, alanine aminotransferase increased, blood creatinine increased, gamma-glutamyltransferase increased, aspartate aminotransferase increased, hepatic enzyme abnormal, prothrombin time prolonged;
- Respiratory disorders: epistaxis, dyspnoea, chronic obstructive pulmonary disease;
- Infections: pathogen resistance, influenza, hepatitis A, pneumonia, bacterial infection, bronchitis;
- Hepatobiliary disorders: hepatitis, cholestasis, acute hepatic failure, hepatic failure, cytolytic hepatitis, jaundice.

Updated safety information

- Since the last update, seven new worldwide reports have been received by EudraVigilance with a fatal outcome following oseltamivir use. None of the cases occurred within the EEA. All seven cases had alternative explanations for the deaths: three were related to influenza or pneumonia, two were caused by respiratory failure not related to the treatment with oseltamivir, one was linked to thrombocytopenic purpura in a patient with relevant co-medication, and the last case involved a complex multiorgan failure following pre-existent encephalopathy.
- The most frequently reported suspected adverse reactions reported in children since the beginning of the pandemic in April 2009 were vomiting, rash, hallucination, confusional state, convulsion, nightmare, epistaxis, urticaria, headache, diarrhoea, nausea and abdominal pain.

Appendix

Specific topics discussed for H1N1 vaccines in previous updates

SOC	Topic	Update number		
		Celvapan	Focetria	Pandemrix
Blood and lymphatic system disorders	Haematopoietic cytopenias			8
	Idiopathic thrombocytopenic purpura (ITP)			4, 6
	Leucocytosis, lymphocytosis			8
	Thrombocytopenia		6	6
Cardiac disorders	Cardiovascular accidents		5	
Ear and labyrinth disorders	Sudden hearing loss			4
Eye disorders	Eye disorders	4, 7	7	7
	Photophobia			7
Gastrointestinal disorders	Necrotising oesophagitis and necrotising stomatitis			6
	Pancreatitis	7		10
General disorders and administration site conditions	Death, sudden death	10	10	10
	Fever, local reaction and drowsiness following 2 nd dose in children 6-35 months old			1
	Injection site necrosis			3
Immune system disorders	Anaphylactic reactions in children			1
	Anaphylactic shock		2, 3	2
	Anaphylaxis, angioedema, hypersensitivity	2		
	Delayed hypersensitivity reaction type IV			4
	Serum sickness			6
	Transplant rejection			1, 2, 3

SOC	Topic	Update number		
		Celvapan	Focetria	Pandemrix
Infections and infestations	Herpes zoster	9	9	9
Injury, poisoning and procedural complications	Medication error	7, 10		7, 10
Nervous system disorders	Acute disseminated encephalomyelitis (ADEM)		2, 3	
	Cerebral haemorrhage or infarction		1	3
	Demyelinating disorders	11	11	11
	Encephalitis		3, 5	
	Facial palsy or paresis	8	4, 8	7
	Guillain-Barré syndrome	4, 5, 11	2, 4, 5, 11	1, 3, 4, 5, 6, 11
	Multiple sclerosis	11	5, 11	5, 11
	Neuralgic amyotrophy			9
	Neuritis, polyneuritis, polyradiculoneuritis, peripheral neuropathy, polyneuropathy			6
	Paraesthesia	2		
	Paralysis and paresis	7	8	3
	Seizures		8, 13	13
Seizures with fatal outcome			4	
Pregnancy, puerperium and perinatal conditions	Intra-uterine death		4	
	Pregnancy-related events	11	2, 11	1, 2, 11

SOC	Topic	Update number		
		Celvapan	Focetria	Pandemrix
Skin and subcutaneous tissue disorders	Bullous dermatitis		<u>9</u>	<u>8</u>
	Erythema multiforme, Stevens-Johnson syndrome (SJS) and toxic epidermal necrolysis (TEN)			<u>3, 6</u>
	Leukocytoclastic vasculitis		<u>5</u>	
	Photosensitivity reaction			<u>2</u>
	Systemic lupus erythematosus rash			<u>8</u>
Vascular disorders	Circulatory collapse	<u>3</u>		
	Vasculitis			<u>6</u>