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Summary of risk management plan for Prasugrel Mylan (prasugrel)

This is a summary of the risk management plan (RMP) for Prasugrel Mylan. The RMP details important risks of prasugrel, how these risks can be minimised, and how more information will be obtained about prasugrel's risks and uncertainties (missing information).

Prasugrel Mylan's summary of product characteristics (SmPC) and its package leaflet give essential information to healthcare professionals and patients on how it should be used.

This summary of the RMP for Prasugrel Mylan 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 Prasugrel Mylan‘s RMP.

I. The medicine and what it is used for

Prasugrel Mylan co administered with acetylsalicylic acid (ASA), is authorised for the prevention of atherothrombotic events in adult patients with acute coronary syndrome. It contains prasugrel as the active substance and it is given orally.

Further information about the evaluation of Prasugrel Mylan’s benefits can be found in Prasugrel Mylan’s EPAR, including in its plain-language summary, available on the EMA website, under the medicine’s webpage.

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

Important risks of Prasugrel Mylan together with measures to minimise such 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 public (e.g. with or without prescription) can help to minimises its risks.

Together, these measures constitute routine risk minimisation measures.

In addition to these measures, information about adverse events is collected continuously and is 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 Prasugrel Mylan is not yet available, it is listed under 'missing information' below.

In the case of Prasugrel Mylan, the routine measures described above are supplemented with additional risk minimisation measures, mentioned under relevant risks below.

II.A List of important risks and missing information

Important risks of Prasugrel Mylan are those risks that need special risk management activities to further investigate or minimise them, so that the medicinal product can be safely taken by patients. 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 Prasugrel Mylan. Potential risks are concerns for which an association with the use of this medicine is possible based on available data, but the definite causal 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/use in special patient populations etc.);

Summary of safety concerns

List of important risks and missing information	

Important identified risks	• Bleeding risks, including:
	  • Intracranial haemorrhage
	  • Gastrointestinal haemorrhage
	  • Intraocular haemorrhage
	  • Epistaxis
	  • PCI-related haemorrhage
	  • CABG-related haemorrhage
	  • Associated with Prasugrel use prior to coronary angiography in NSTEMI patients
	  • Other procedure-related haemorrhage
	• Hypersensitivity including angioedema
	• Thrombocytopenia and Thrombotic thrombocytopenic purpura

Important potential risks	• Drug-induced hepatic injury • Potential off-label use in patients with prior Transient Ischaemic Attack (TIA)/ stroke • Colorectal cancer
Missing information	• Concomitant use with fibrinolytics, other tienopyridines, warfarin and chronic use of NSAIDs • Use in paediatric population • Use in pregnant/lactating women • Use in patients with compromised CV status (cardiogenic shock, class IV CHF, refractory ventricular arrhythmia) • Use in subjects with severe hepatic impairment • Use in subjects without clinical manifestation of ACS

II.B Summary of important risks

Bleeding risks, including: • **Intracranial haemorrhage** • **Gastrointestinal haemorrhage** • **Intraocular haemorrhage** • **Epistaxis** • **PCI-related haemorrhage** • **CABG-related haemorrhage** • **Associated with Prasugrel use prior to coronary angiography in NSTEMI patients** • **Other procedure-related haemorrhage**	
Evidence for linking the risk to the medicine	In line with the originator RMP, this safety concern has been classified as an important identified risk.
Risk factors and risk groups	Patients suffering from: anaemia; thrombocytopaenia or with a history of pathological intracranial findings. Patients with acute coronary syndromes undergoing PCI treated with prasugrel and ASA showed an increased risk of major and minor bleeding according to the TIMI classification system
Risk minimisation measures	**Routine risk minimisation measures** Section 4.4, 4.5 and 4.8 of SPC Section 2 and 4 of PL **Additional risk minimisation measures** Educational material

Hypersensitivity including angioedema	
Evidence for linking the risk to the medicine	In line with the originator RMP, this safety concern has been classified as an important identified risk.
Risk factors and risk groups	patients with a history of hypersensitivity reaction to clopidogrel
Risk minimisation measures	**Routine risk minimisation measures** Section 4.4 and 4.8 of SPC Section 2 and 4 of PL

Thrombocytopenia and Thrombotic thrombocytopenic purpura	
Evidence for linking the risk to the medicine	In line with the originator RMP, this safety concern has been classified as an important identified risk.
Risk factors and risk groups	Not applicable
Risk minimisation measures	**Routine risk minimisation measures** Section 4.4 and 4.8 of SPC Section 2 and 4 of PL

Drug-induced hepatic injury	
Evidence for linking the risk to the medicine	In line with the originator RMP, this safety concern has been classified as an important identified/potential risk.
Risk factors and risk groups	Patients with mild to moderate hepatic impairment (Child Pugh class A and B) as there is limited therapeutic experience. Prasugrel Mylan is contraindicated in patients with severe hepatic impairment (Child Pugh class C).
Risk minimisation measures	**Routine risk minimisation measures** Section 4.2 of SPC

Potential off-label use in patients with prior Transient Ischaemic Attack (TIA) / stroke	
Evidence for linking the risk to the medicine	In line with the originator RMP, this safety concern has been classified as an important identified/potential risk.
Risk factors and risk groups	patients with history of stroke or transient ischaemic attack
Risk minimisation measures	**Routine risk minimisation measures** Section 4.3 of SPC Section 2 of PL

Colorectal cancer	
Evidence for linking	In line with the originator RMP, this safety concern has been

Colorectal cancer	
the risk to the medicine	classified as an important identified/potential risk.
Risk factors and risk groups	Not applicable
Risk minimisation measures	**Routine risk minimisation measures** Section 4.8 of SPC Section 4 of PL

Concomitant use with fibrinolytics, other tienopyridines, warfarin and chronic use of NSAIDs	
Risk minimisation measures	**Routine risk minimisation measures** Section 4.4 and 4.5 of SPC Section 2 of PL

Use in paediatric population	
Risk minimisation measures	Routine risk minimisation measures Section 4.2 and 5.2 of SPC Section 2 of PL

Use in pregnant/lactating women	
Risk minimisation measures	**Routine risk minimisation measures** Section 4.2 of SPC Section 2 of PL

Use in patients with compromised CV status (cardiogenic shock, class IV CHF, refractory ventricular arrhythmia)	
Risk minimisation measures	**Routine risk minimisation measures** Not applicable

Use in subjects with severe hepatic impairment	
Risk minimisation measures	**Routine risk minimisation measures** Section 4.2, 4.3 and 5.2 of SPC Section 2 of PL

Use in subjects without clinical manifestation of ACS

Use in subjects without clinical manifestation of ACS	
Risk minimisation measures	**Routine risk minimisation measures** Section 4.1 of SPC

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 Prasugrel Mylan (prasugrel).

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

There are no studies required for Prasugrel Mylan.