

Thalidomide Celgene[®] Pregnancy Prevention Programme

Information for Women of Childbearing Potential and their Partners Taking Thalidomide Celgene[®]

Warning:

Severe life-threatening birth defects. If Thalidomide Celgene[®] is taken during pregnancy it can cause severe birth defects or death to an unborn baby. Thalidomide Celgene[®] must never be used by women who are pregnant, as just one capsule can cause severe birth defects. Thalidomide Celgene[®] must never be used by women who are able to become pregnant unless they follow the Thalidomide Celgene[®] Pregnancy Prevention Programme.

This booklet contains information about:

- **Preventing harm to unborn babies:** If Thalidomide Celgene[®] is taken during pregnancy it can cause severe birth defects or death to an unborn baby.

Other side effects of Thalidomide Celgene[®]: These include nerve damage, blood clots in your veins or arteries and severe skin problems, .

- **Thalidomide Celgene[®] Pregnancy Prevention Programme:** This Programme is designed to make sure that unborn babies are not exposed to Thalidomide Celgene[®]. It will provide you with information about what to expect from your treatment, and explain the risks and your responsibilities.

This booklet will help you understand these problems and make sure you know what to do before, during and after taking Thalidomide Celgene[®].

For your own health and safety, please read this booklet carefully. If you do not understand something, please ask your doctor to explain it again.

Introduction

Thalidomide Celgene[®] belongs to a group of medicines known as 'immunosuppressive' medicines. These work by acting on the cells involved in your immune system. The immune system is part of the body's defence which helps to fight illness and infection. Thalidomide Celgene[®] also has anti-angiogenic properties. This means that it prevents the development of new blood vessels (angiogenesis). Angiogenesis is important for cancers because they need to produce new blood vessels in order to grow. Thalidomide Celgene[®] was investigated in cancer to see whether it would stop cancer growing by preventing the development of new blood vessels.

A large number of trials have shown the benefits of Thalidomide Celgene[®] in multiple myeloma (cancer of the plasma cells in the bone marrow). Thalidomide Celgene[®] is now approved in the European Union for the treatment of this cancer in combination with melphalan and prednisone.

The information leaflet which came with your medicine tells you more about Thalidomide Celgene[®].

This booklet is part of the "Thalidomide Celgene[®] Pregnancy Prevention Programme", which is necessary because if Thalidomide Celgene[®] is taken during pregnancy it can cause severe birth defects or death to an unborn baby. In the 1950s and 1960s thalidomide was prescribed to pregnant women as a sedative and to relieve morning sickness. As a result approximately 12,000 children were born with severe birth defects caused by thalidomide, and approximately 5,000 are alive today.



The Thalidomide Celgene[®] Pregnancy Prevention Programme is designed to make sure that unborn babies are not exposed to Thalidomide Celgene[®]. It makes sure you know what to do before, during and after taking the medicine:

- Thalidomide Celgene[®] can cause severe birth defects or death to an unborn baby
- Birth defects may include shortened arms or legs, malformed hands or feet, eye or ear defects, and internal organ problems

This booklet contains important information about the Thalidomide Celgene[®] Pregnancy Prevention Programme. You must read the information carefully, and before starting your treatment you should:

- Understand the risks of Thalidomide Celgene[®] treatment.

- Understand the guidelines for taking Thalidomide Celgene[®] safely, including how to prevent pregnancy.
- Understand what to expect during your initial and follow-up consultations with your doctor.

Your doctor will have explained to you the risks of Thalidomide Celgene[®] treatment, and specific instructions that you must follow.

- Please make sure that you understand what your doctor has told you before starting Thalidomide Celgene[®].
- **If you don't understand something, please ask your doctor to explain it again.**

Thalidomide Celgene[®] and Birth Defects

All medicines can cause unwanted effects or 'side effects'. The most important side effect of Thalidomide Celgene[®] is that if taken during pregnancy, it can cause severe birth defects or death to an unborn baby. The birth defects include shortened arms or legs, malformed hands or feet, eye or ear defects, and internal organ problems. This means Thalidomide Celgene[®] must never be taken by:

- Women who are pregnant
- Women who could become pregnant unless they follow the Thalidomide Celgene[®] Pregnancy Prevention Programme.

During treatment if you miss or think you have missed a period, or you have any unusual menstrual bleeding, or suspect you are pregnant, or if you have heterosexual intercourse without using an effective method of contraception you must **stop treatment** and **tell your doctor straight away**.

Thalidomide Celgene[®] and Other Possible Side Effects

Like all medicines, Thalidomide Celgene[®] can cause side effects although not everybody gets them. It is important that you talk to your doctor if you have any side effects from Thalidomide Celgene[®] treatment.

Stop taking Thalidomide Celgene[®] and see a doctor straight away if you notice the following serious side effect, as you may need urgent medical treatment:

- **Severe skin reactions** including **rashes** and **blistering of the skin and mucosa**. You may have a high temperature (fever) at the same time.

See a doctor straight away if you notice any of the following serious side effects:

- **Numbness, tingling, or pain in your hands and feet**. This may be due to nerve damage (called 'peripheral neuropathy'), which usually happens after you have been taking this medicine for several months but can happen sooner than this. It can also happen some time after treatment has stopped. It may not go away, or may go away slowly
- **Chest pain spreading to the arms, neck, jaw, back or stomach, feeling sweaty and breathless, feeling sick or vomiting**. This may be due to blood clots in the arteries, (which may be symptoms of a heart attack/myocardial infarction).
- Sudden **pain in your chest** or difficulty in breathing. This may be due to blood clots in the artery leading to your lungs (called 'pulmonary embolism'), which can happen during treatment, or after treatment has stopped
- **Pain or swelling in your legs**, especially in your lower leg or calves. This may be due to blood clots in the veins of your leg (deep vein thrombosis). These can happen during treatment, or after treatment has stopped

Section 4 of the patient information leaflet which is provided with your medicine tells you more about the possible Thalidomide Celgene[®] side effects.

Thalidomide Celgene[®] Treatment

Before Starting

Your doctor will talk to you about what to expect from your treatment, and explain the risks and your responsibilities. If there is anything you do not understand, please ask your doctor to explain it again.

Before starting treatment your doctor will ask you to read and sign a *Treatment Initiation Form*, which confirms that while taking Thalidomide Celgene[®]:

- You understand the risks of birth defects
- You agree not to become pregnant
- You understand the other important safety messages that must be followed.

Your doctor will keep this form with your medical records, and you will be given a copy.

Pregnancy Prevention Methods

Prior to starting treatment your doctor will talk to you about the pregnancy prevention measures that you must follow. If you could become pregnant you must use one effective method of pregnancy prevention:

- At least 4 weeks before starting Thalidomide Celgene[®] treatment
- During treatment, even if there are breaks in your treatment
- Until at least 4 weeks after stopping treatment.

Effective female pregnancy prevention methods are:

- Hormonal pregnancy prevention measures implanted under the skin
- Pregnancy prevention coil placed in the uterus
- Long acting pregnancy prevention hormonal injection
- Female sterilisation
- Progestogen-only pill that prevents release of an egg from the ovaries
- Male partners vasectomy, which must be confirmed by two negative semen test
- Abstinence from heterosexual intercourse.

It is important that you do not change pregnancy prevention methods without talking to your doctor first.

Each pregnancy prevention method has a different level of effectiveness and mode of action, including in some cases, the prevention of implantation in the womb. Their published success/failure rate is based on using them perfectly.

You must talk to your doctor, fertility expert or gynaecologist about which method is most appropriate for you.

Pregnancy Testing

If you are pregnant or trying to become pregnant, you must not take Thalidomide Celgene[®]. If you are able to have children your doctor will perform regular pregnancy tests to confirm that you are not pregnant before taking Thalidomide Celgene[®].

- You must have been using an effective pregnancy prevention method for at least 4 weeks before Thalidomide Celgene[®] can be prescribed
- A pregnancy test will take place every 4 weeks
- Your doctor will perform the pregnancy test during the consultation when Thalidomide Celgene[®] is prescribed, or in the previous three days
- Additional pregnancy tests must be performed if you miss your period or have any unusual menstrual bleeding
- A pregnancy test will take place at least 4 weeks after stopping treatment.

Pregnancy Prevention Summary

It is important that you understand and follow the **pregnancy prevention methods** and **pregnancy testing** information described.

- Pregnancy tests must be performed every 4 weeks even if you think there is no chance you have become pregnant since your last test.
- Pregnancy prevention methods must be followed 4 weeks before starting treatment, during treatment, and until at least 4 weeks after stopping treatment.
- Talk to your doctor before changing any pregnancy prevention method.
- If you have heterosexual intercourse without using an effective pregnancy prevention method, stop taking Thalidomide Celgene[®] and talk to your doctor straight away.
- If you think you are pregnant, stop taking Thalidomide Celgene[®] and contact your doctor straight away.

Additional Safety Measures

There are additional measures you must understand while taking Thalidomide Celgene.

- Please remember that your Thalidomide Celgene[®] must only be used by you. Do not share your medicine with anyone else, even if they have similar symptoms to you.
- Store your Thalidomide Celgene[®] capsules safely, so no one else could take them by accident.
- Keep Thalidomide Celgene[®] out of reach and sight of children.
- You must not donate blood while you are being treated with Thalidomide Celgene[®], and for one week after stopping treatment.
- If you are breastfeeding, your doctor will advise you either to stop breastfeeding or to stop taking Thalidomide Celgene[®] while breastfeeding. It is not known if Thalidomide Celgene[®] is passed into human breast milk.

Receiving Your Prescription

When your doctor writes your prescription they will also provide you with a 'Patient Card' that must be provided to the pharmacist, which confirms that all of the Thalidomide Celgene[®] Pregnancy Prevention Programme measures have been followed. Your pharmacist will ask to review the 'Patient Card' prior to dispensing your Thalidomide Celgene[®].

Your doctor will write a prescription for no more than 4 weeks supply. Ideally, you should have the prescription dispensed within seven days of either the prescription date or your last pregnancy test date, whichever comes first. You will need to see your doctor each time you need a repeat prescription.

End of Treatment

After completing your Thalidomide Celgene[®] treatment, it is important that:

- You return any unused Thalidomide Celgene[®] capsules to your pharmacist
- You continue using your effective pregnancy prevention method for at least further 4 weeks
- Your doctor will perform a final pregnancy test after at least 4 weeks
- You do not donate blood for 1 week.

Personal Notes

Please use this space to write down any questions for your doctor for discussion at your next appointment.

Check List

Please use this check list to confirm that you have understood all of the important information regarding your Thalidomide Celgene[®] treatment.

Yes, I have received and understood all the information on the risks of birth defects associated with taking Thalidomide Celgene [®] .	
Yes, I have received and understood all the information on the risks of other side effects associated with taking Thalidomide Celgene [®] .	
Yes, I understand that I need to sign the <i>Treatment Initiation Form</i> before starting treatment.	
Yes, I have received and understood the pregnancy prevention advice.	
Yes, I will begin using one effective method of pregnancy prevention for at least before 4 weeks starting, during therapy and even in case of dose interruptions and for at least 4 weeks after Thalidomide Celgene [®] treatment.	
Yes, I understand that I need to have a negative pregnancy test result before starting to take my treatment, and every 4 weeks during treatment and at least 4 weeks after stopping treatment.	

Further Information

Further information regarding your Thalidomide Celgene[®] treatment can be obtained from the following organisations:

- International Myeloma Foundation www.myeloma.org
- Myeloma Euronet www.myeloma-euronet.org
- Myeloma UK www.myelomaonline.org.uk