Treatment with TREDAPTIVE (nicotinic acid/laropiprant, MSD) should be discontinued

Dear Healthcare Professional,

In the light of new data available from the HPS2-THRIVE study, which has been thoroughly reviewed by the European Medicines Agency (EMA), MSD would like to inform you that TREDAPTIVE (nicotinic acid/laropiprant, MSD) is being suspended and that treatment should be discontinued:

Summary

- Preliminary results from HPS2-THRIVE have failed to show a beneficial effect of TREDAPTIVE on the reduction of major vascular events. The study also showed a significant increase in the incidence of some types of non-fatal serious adverse events in the group that received TREDAPTIVE. Consequently the balance of risks and benefits is no longer considered to be favourable.

- TREDAPTIVE should no longer be prescribed. Patients currently receiving TREDAPTIVE should be reviewed in a timely manner in order to discontinue treatment.

- TREDAPTIVE will no longer be available from *[recall date to be inserted nationally]*.

Further information about the EMA's review and the HPS2-THRIVE study:

On 17 December 2012, MSD informed the EMA of the preliminary results from the HPS2-THRIVE study, which showed that the study did not meet its primary endpoint of reduction of major vascular events. The study also showed a significant increase in the incidence of some types of non-fatal serious adverse events (blood and lymphatic, gastrointestinal, infections, metabolism, musculoskeletal, respiratory and skin) in the group that received TREDAPTIVE.

On request of the European Commission, the Pharmacovigilance Risk Assessment Committee (PRAC) and the Committee for Human Medicinal Products (CHMP) have assessed the impact of the findings from the HPS2-THRIVE study on the benefit/risk balance of TREDAPTIVE. The PRAC and CHMP have concluded that the benefits of TREDAPTIVE no longer outweigh its risks. MSD agrees with this conclusion. As a consequence, TREDAPTIVE will no longer be available from [recall date to be inserted nationally].

HPS2-THRIVE (Heart Protection Study 2-Treatment of HDL to Reduce the Incidence of Vascular Events) was designed to assess the effect of

TREDAPTIVE on a composite endpoint of major vascular events (which included the combination of coronary deaths, non-fatal heart attacks, strokes or revascularisation). HPS2-THRIVE compared TREDAPTIVE plus statin therapy versus statin therapy alone. The study enrolled 25,673 patients considered to be at high risk for cardiovascular events. Of those enrolled, 14,741 were from Europe and 10,932 were from China. Patients were followed for a median of 3.9 years.

The information in this communication has been agreed with the European Medicines Agency (EMA).

The therapeutic indication for TREDAPTIVE is as follows:

> TREDAPTIVE is indicated for the treatment of dyslipidemia, particularly in patients with combined mixed dyslipidemia (characterized by elevated levels of LDL-C and TG and low HDL-C) and in patients with primary hypercholesterolemia (heterozygous familial and nonfamilial) in combination with HMG-CoA reductase inhibitors (statins), when the cholesterol lowering effect of HMG-CoA reductase inhibitor monotherapy is inadequate.
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> It can be used as monotherapy only in patients in whom HMG-CoA reductase inhibitors are considered inappropriate or not tolerated. Diet and other non-pharmacological treatments (e.g. exercise, weight reduction) should be continued during therapy with TREDAPTIVE.

Call for reporting

Healthcare professionals should still report any suspected adverse reactions associated with use of Tredaptive to [LOCAL CONTACT DETAILS OF MAH]

Alternatively any suspected adverse reactions can also be reported to Medicines Authority Post-licensing Directorate, 203, Level 3, Rue D'Argens, Gzira GZR 1368, MALTA, or at:
http://www.medicinesauthority.gov.mt/pub/adr.doc.

Company contact point

If you have any questions or require additional information regarding the use of TREDAPTIVE, please call MSD on 8007 4433.

Yours sincerely,

Dr Monica Kyriakou
Medical Manager