

IMPORTANT RISK MINIMIZATION INFORMATION FOR HEALTHCARE PROFESSIONALS PRESCRIBING OLUMIANT[®] (BARICITINIB)

This guide contains important information to assist the initial discussion with your patients when prescribing baricitinib. It should be read in conjunction with the enclosed Summary of Product Characteristics (SmPC).

Baricitinib is a selective and reversible JAK1/2 inhibitor indicated for the treatment of atopic dermatitis (AD) and alopecia areata (AA).

The background information and points for discussion here provide context and appropriate risk management for key safety aspects of the prescribing information, namely:

- Pregnancy and breast feeding
- Infections
- Changes in lipid parameters
- Venous thromboembolism

As part of the initial discussion with your patients, please:

- Provide a **Patient Alert Card** to each patient and explain that it contains important information they should be aware of before and during treatment with baricitinib.
- Advise them that the Card should be read in conjunction with the **Patient Information Leaflet**.

Pregnancy and Breast Feeding

Please discuss these points with your female patients if they are of childbearing potential:

- **Baricitinib must not be used during pregnancy.** There is insufficient experience with baricitinib at this time to determine whether it can be safely used in pregnancy.
- **Baricitinib should not be used in women who are breast feeding or intend to breast feed.** As there is no information on the excretion of baricitinib into human milk, it is unknown if it is safe to use during breast feeding.

As a result, it is important to:

- **Ask** patients if they are, might be, or intend to become pregnant, or are breast feeding prior to prescribing baricitinib. If a planned pregnancy is considered, baricitinib treatment should be stopped.

- **Advise** women to use effective contraception both during treatment and for at least 1 week after discontinuing treatment, considering the short half-life of baricitinib.
- **Advise** patients to inform you immediately if they think they could be pregnant or if pregnancy is confirmed in order to facilitate the appropriate discussions on the potential risks.

Background pre-clinical safety information

As described in section 4.6 and 5.3 of the SmPC, animal studies showed reduced foetal growth and produced skeletal malformations at exposures approximately 10 times the human exposure.

As there are no adequate data on the use of baricitinib in human pregnancy, the implications of these non-clinical findings on use in women are not known. Therefore, the advice provided on use in pregnancy is given as a precautionary measure.

Infections

Baricitinib increases the potential risk of infections, and viral reactivation.

It is important to instruct patients to seek immediate medical attention if signs or symptoms suggesting infection appear, in order to ensure rapid evaluation and appropriate treatment.

If an infection develops, monitor the patient carefully and:

- Temporarily interrupt baricitinib in case of herpes zoster infection or for any infection that is not responding to standard therapy. Do not resume baricitinib treatment until the infection resolves.
- Screen patients to rule out active tuberculosis and active viral hepatitis before starting baricitinib.
- Do not use live, attenuated vaccines during, or immediately prior to, baricitinib therapy.

Changes in Lipid Parameters

In AD and AA clinical trials, increases in total cholesterol, LDL cholesterol and HDL cholesterol were observed at 12 weeks. Mean total and LDL cholesterol increased through week 52. There was no change in LDL/HDL ratio. The long-term consequences of these changes are unknown.

As a result of these considerations, it is important to:

- Assess lipid parameters approximately 12 weeks following initiation of baricitinib therapy.
- Manage patients according to clinical guidelines for hyperlipidaemia thereafter.
- Correct elevations in LDL cholesterol with statin treatment, if necessary.

Venous Thromboembolism

Events of deep venous thrombosis (DVT) and pulmonary embolism (PE) have been reported in patients receiving baricitinib. Baricitinib should be used with caution in patients with risk factors for DVT/PE, such as older age, obesity, a medical history of DVT/PE, or patients undergoing surgery and immobilisation. If clinical features of DVT/PE occur, baricitinib treatment should be discontinued and patients should be evaluated promptly, followed by appropriate treatment.

As a result, it is important to advise patients to inform you immediately if any of the following symptoms are experienced:

- Swelling or pain in one leg
- Warmth or redness in one leg
- Shortness of breath which is unexpected
- Rapid breathing
- Chest pain

Call for reporting

Please report any suspected adverse drug reactions, including medication errors or product complaints, to the Malta Medicines Authorities. You can report via:

Filling in the Adverse Drug Reactions form available on line at www.medicinesauthority.gov.mt/adrportal and sending it to The Medicines Authority Sir Temi Zammit Buildings, Malta Life Sciences Park, San Gwann SGN 3000, Malta or via e – mail to postlicensing.medicinesauthority@gov.mt. Alternatively, you can report a suspected side effect calling or mailing Ms. Dorianne Mifsud, Pharmacovigilance officer, Charles de Giorgio Ltd at pv@charlesdegiorgio.com or call on 99741387, Monday to Friday between 9am and 5pm. You can leave a message outside of these hours.

Company contact point

This communication is not intended as a complete description of the risks associated with the use of Olumiant. Please refer to the attached Summary of Product Characteristics (SmPC) for a complete description of risks.

Please contact Lilly at: 01256 315000, if you have any questions about the information in this letter or the safe and effective use of baricitinib.

To retrieve, or print the patient alert card, go to the Medicines Authority's website at:

<http://www.medicinesauthority.gov.mt/rmm>