



Early Access to Medicines Scheme – Treatment protocol – Information on the pharmacovigilance system and requirements for reporting safety data

Introduction

The aim of the Early Access to Medicines Scheme (EAMS) is to provide earlier availability of promising new unlicensed and 'off label' medicines to UK patients that have a high unmet clinical need. The medicinal products included in the scheme are those that are intended to treat, diagnose or prevent seriously debilitating or life threatening conditions where there are no adequate treatment options. In some cases the safety profile of the EAMS medicine may not yet be fully established and it is therefore particularly important that any harmful or unintended responses to EAMS medicines are reported. More information about the scheme can be found here:

<http://www.mhra.gov.uk/Howweregulate/Innovation/EarlyaccesstomedicinesschemeEAMS/index.htm>

Healthcare professionals should enroll any patients receiving EAMS medicines in the registry which the pharmaceutical company will have in place to enable systematic collection of information on adverse events.

Suspected adverse drug reactions (ADRs) for any patients, particularly those not enrolled in a study (or registry), can be reported directly to the MHRA via the Yellow card scheme at www.mhra.gov.uk/yellowcard.

When reporting please provide as much information as possible, including information about medical history, any concomitant medication, onset, treatment dates, outcome and results of any test results or investigations. Alternatively, healthcare professionals can report ADRs which occur in patients not enrolled in any study (or registry) directly to the pharmaceutical company who manufactures the EAMS medicine.

The information below is intended for healthcare professionals and is provided by the pharmaceutical company that manufactures the medicine. The description below summarises the requirements for clinical monitoring and reporting of adverse events with medicines used under the scheme.

Prescribing doctors should also consult the relevant detailed information provided by the company.

Information on the Pharmacovigilance system:

Prior to EAMS enrolment, a written contract will be executed between Pfizer and the participating institutions. Enrolment of a patient in to the EAMS will be initiated through a dedicated Pfizer EAMS website PfizerEAMS.co.uk. The treating physician or designee will be required to enter limited anonymised patient information and to complete the inclusion /exclusion criteria in order for Pfizer to check patient eligibility against the criteria of the EAMS. It will be necessary for all healthcare professionals (HCPs) involved in the EAMS to register on the website for training purposes. Following registration, HCPs will be able to download the programme materials from the website. Participation in all applicable training will be conducted through the website.

These materials will include information on the collection and reporting of adverse events.

HCPs involved in the EAMS will be instructed to report to the company all serious and non-serious adverse events (AEs) and lack of efficacy and at risk scenarios* whether or not there is an associated AE, within 24 hours of the HCP's knowledge of the event. AE data collection will commence at first dosing and end 28 calendar days after the last administration of the medicinal product. If only limited information is initially available, further follow-up will be requested by the company and all events will be followed to resolution or stabilisation.

*At risk scenarios include:

- Exposure during pregnancy (maternal and paternal)
- Exposure during breast feeding
- Medication errors
- Overdose and Misuse
- Occupational exposure

More detailed information on how and what to report will be included with the programme materials available for download from the website.

Training for Healthcare Professionals (HCPs)

HCPs involved in the EAMS will be required to read and understand these obligations regarding adverse event reporting before enrolling a patient in to the EAMS.

Additional information:

Provision of Vyndaqel (tafamadis) through the EAMS is designed to provide patients with wild-type or hereditary ATTR-CM access to this medicine prior to licensing the product in the UK for this indication.

Following the HCP's registration via the website, HCPs will be requested to confirm the patient has signed an informed consent form and provide the following baseline characteristics and diagnosis data:

- Demography (date of birth, age and gender)
- Results of diagnostic investigations as per algorithm
 - Scintigraphy Perugini grade (0-3)
 - Serum free light chain (sFLC) assay (positive/negative)
 - Serum immunofixation electrophoresis (IFE) (positive/negative)
 - Urine IFE (positive/negative)
 - Assessment at the National Amyloidosis Centre and histological confirmation of ATTR in patients with Scintigraphy Perugini grade 1 and/or positive monoclonal protein screen

- Results or date of future TTR genotyping investigation
- Medical history including history of heart failure, NYHA classification and comorbidities
- Concomitant medications

Following entry of this information, the HCP will receive a unique patient identifier. Pfizer will confirm patient eligibility via email. If the patient is eligible and in England, the HCP will also register the patient with NHS England through the online Blueteq system to obtain a unique NHS EAMS number for that patient. Medication will not be supplied until it is confirmed that the patient has signed the informed consent and that all HCPs involved in the programme have read the EAMS materials and will comply with the adverse event reporting requirements.

During the EAMS, every effort should be made to ensure that all required tests and procedures are completed as described in the programme materials. All adverse events will be reported to Pfizer in line with the requirements for adverse event reporting.

Once treatment commences, the treating physicians will receive an email alert via the website every month as a reminder to report any adverse events. HCPs will also be asked when entering information on to the website at each patient clinic visit that they are complying with the requirements to report adverse events to Pfizer. If treatment has been discontinued due to an adverse event, the HCP will be prompted to complete an adverse event form or confirm that the adverse event has already been reported to Pfizer.

All adverse event data reported will be entered into the Pfizer safety database and will be linked to the patient by the assigned EAMS Protocol Number and unique patient number. Pfizer will report all serious related adverse events to the MHRA within 15 calendar days of receipt by the company and non-serious related events within 90 calendar days of receipt by the company. In addition, data on the safety and usage of the product under the scheme will be discussed in periodic reports submitted to the MHRA.

A summary of active pharmacovigilance activities is provided in the summary of the risk management plan for Vyndaqel (tafamadis).

Contact details:

Contact details for reporting AEs:

Via Tafamidis EAMS website PfizerEAMS.co.uk or

Email Transmission: GBR.AEReporting@pfizer.com

Facsimile Transmission: 0800 015 6401 (toll free) 0845 300 8032 (toll) (alternatively + 1 973 660 8929)

Contact details for the EAMS programme (excluding AE reporting)

Via Tafamidis EAMS website PfizerEAMS.co.uk or

Email: tafamidisEAMS@pfizer.com