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November 2024

Welireg® ▼ (belzutifan) Patient alert cards

IMPORTANT: RISK MINIMISATION MATERIALS TO MINIMISE THE RISK OF HYPOXIA-RELATED ADVERSE REACTIONS

Provision of patient card

Direct Healthcare Professional Communication

Dear Healthcare Professional,

Merck Sharp & Dohme (UK) Limited (MSD) would like to inform you that as part of the agreed risk management plan with the MHRA, a patient alert card should be provided to all UK patients prescribed Welireg to specifically provide guidance related to the risks of treatment associated hypoxia.

- Belzutifan can cause severe hypoxia that may require discontinuation, supplemental oxygen, or hospitalisation (see Summary of Product Characteristics).
- Patients should be monitored for oxygen saturation with pulse oximetry before initiation of and periodically throughout treatment with belzutifan with more frequent monitoring within the first 6 months of treatment.
- In the event of Grade 2 hypoxia, providing supplemental oxygen and continuing or withholding treatment should be considered. If withheld, belzutifan should be resumed at a reduced dose.
- For patients who have Grade 3 hypoxia, belzutifan should be withheld, hypoxia treated, and dose reduction should be considered. If Grade 3 hypoxia continues to recur, treatment should be discontinued.
- For Grade 4 hypoxia, treatment should be permanently discontinued.

We request that prescribing clinicians ensure that all patients are supplied with the wallet sized card after treatment initiation and that they are advised to carry it with them at all times. Please request a card by telephoning MSD Medical Information services on 0208 1548000 (see example copy of card in appendix below).

Welireg is indicated for the treatment of adult patients with VHL disease who require therapy for VHL-associated renal cell carcinoma (RCC), central nervous system (CNS) haemangioblastomas, or pancreatic neuroendocrine tumours (pNET), and for whom localised procedures are unsuitable or undesirable.

Call for reporting

- Welireg ▼ is subject to additional monitoring. This will allow quick identification of new safety information.
- Please report ANY suspected adverse drug reactions (ADRs) to drugs and vaccines identified by the black triangle ▼ to the MHRA through the Yellow Card Scheme.

Please report:

- all suspected ADRs that are serious or result in harm. Serious reactions are those that are fatal, life-threatening, disabling or incapacitating, those that cause a congenital abnormality or result in hospitalisation, and those that are considered medically significant for any other reason.
- all suspected ADRs associated with new drugs and vaccines identified by the black triangle ▼

You can report via:

- the Yellow Card website
- the free Yellow Card app available from the Apple App Store or Google Play Store
- some clinical IT systems (EMIS/SystmOne/Vision/MiDatabank) for healthcare professionals

Alternatively, you can report a suspected side effect to the Yellow Card scheme by calling 0800 731 6789 for free, Monday to Friday between 9am and 5pm.

When reporting please provide as much information as possible, including information about medical history, any concomitant medication, timing onset, treatment dates, and product brand name.

Company contact point: If you require further information about Welireg please contact medicalinformationuk@msd.com or call MSD Medical Information services on 0208 1548000. The SmPC, Patient Information Leaflet and the risk minimisation materials are also available at www.medicines.org.uk/emc.

Regards.

Yours sincerely

Country Executive Medical Director MSD UK & Ireland

Appendix: Copy of patient alert card for your awareness (please order original for patient use):



Name of specialist	Specialist phone number	Specialist after-hours phone number
My name	My phone	
Emergency contact (name)	Emergency contact (phone number)
VHL-associated renal cell carcinoma (RCC whom localised procedures are unsuitable	reatment with Welireg (belzutifan) for the treatment 3, central nervous system (CNS) hemangioblastoma	of adult patients with VHL disease who require therapy is, or pancreatic neuroendocrine tumours (pNET), and for te management of hypoxia.
Please note that this patient is receiving t VHL-associated renal cell carcinoma (RCC whom localised procedures are unsuitable	reatment with Welireg (belzutifan) for the treatment 3, central nervous system (CNS) hemangioblastoma a or undesirable.	is, or pancreatic neuroendocrine tumours (pNET), and fo
Please note that this patient is receiving t VHL-associated renal cell carcinoma (RCC whom localised procedures are unsuitable	restment with Welireg (belzutifan) for the treatment 1, central nervous system (CNS) hemangioblastoms 2 or undesirable. Please refer to the product information regarding the Welireg Patient V.medicines.org.uk/eme/	is, or pancreatic neuroendocrine tumours (pNET), and fo
Please note that this patient is receiving t VHL-associated renal cell carcinoma (RCC whom localised procedures are unsuitable). Welireg may increase the risk of hypoxa. For more information, consult the Information Leaflet at https://www.	restment with Welireg (belzutifan) for the treatment 1, central nervous system (CNS) hemangioblastoms 2 or undesirable. Please refer to the product information regarding the Welireg Patient V.medicines.org.uk/eme/	is, or pancreatic neuroendocrine tumours (pNET), and fo