**ПЕРЕЛІК**

**ЛІКАРСЬКИХ ЗАСОБІВ ЩОДО ЯКИХ ЗАВЕРШЕНО РОЗГЛЯД РЕЄСТРАЦІЙНИХ МАТЕРІАЛІВ ПРО ВНЕСЕННЯ ЗМІН ДО РЕЄСТРАЦІЙНИХ МАТЕРІАЛІВ ПРОТЯГОМ ДІЇ РЕЄСТРАЦІЙНОГО ПОСВІДЧЕННЯ НА ЛІКАРСЬКІ ЗАСОБИ, ЯКІ ЗАРЕЄСТРОВАНІ КОМПЕТЕНТНИМИ ОРГАНАМИ СПОЛУЧЕНИХ ШТАТІВ АМЕРИКИ, ШВЕЙЦАРСЬКОЇ КОНФЕДЕРАЦІЇ, ЯПОНІЇ, АВСТРАЛІЇ, КАНАДИ, ЛІКАРСЬКИХ ЗАСОБІВ, ЩО ЗА ЦЕНТРАЛІЗОВАНОЮ ПРОЦЕДУРОЮ ЗАРЕЄСТРОВАНІ КОМПЕТЕНТНИМ ОРГАНОМ ЄВРОПЕЙСЬКОГО СОЮЗУ**

| ***№ п/п*** | ***Назва лікарського засобу*** | ***Форма випуску (лікарська форма, упаковка)*** | ***Заявник*** | ***Країна*** | ***Виробник*** | ***Країна*** | ***Реєстраційна процедура*** | ***Умови відпуску*** | ***Номер реєстраційного посвідчення*** |
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|  | **ПАРСАБІВ®** | розчин для ін'єкцій, 5 мг/мл; по 0,5 мл (2,5 мг) у флаконі, по 6 флаконів у картонній коробці; по 1 мл (5 мг) у флаконі, по 6 флаконів у картонній коробці; по 2 мл (10 мг) у флаконі, по 6 флаконів у картонній коробці | Амджен Європа Б.В. | Нiдерланди | маркування, вторинне пакування, випуск серії: Амджен Європа Б.В., Нідерланди контроль якості при випуску: Амджен Текнолоджі (Айеленд) Анлімітед Компані, Ірландiя виробництво, первинне пакування, контроль якості та випробування стабільності: Патеон Мануфекчурінг Сервісез Ел.Ел.Сі., США виробництво, первинне пакування, контроль якості та випробування стабільності:  Амджен Мануфекчурінг Лтд, США контроль якості при випуску (ідентифікація методом мас-спектрометрії): ППД Девелопмент, Л.П., США | Нідерланди/ Ірландiя/ США | C.I.11.z type IB - Introduction of, or change(s) to, the obligations and conditions of a marketing authorisation, including the RMP - Other variation The MAH has submitted a Type IB variation for PARSABIV (etelcalcetide) to update the RMP to remove the completed category 3 PASS study 20170561 ("An Observational Study to Evaluate the Potential Association Between Parsabiv and Gastrointestinal Bleeding") as an additional pharmacovigilance activity and the risk of "Gastrointestinal haemorrhage" as an important potential risk, following approval of procedure EMEA/H/C/003995/II/0021,  The proposed changes, to be implemented in RMP version 4.0 (DLP 10 November 2023, final sign-off date 21 February 2024) for PARSABIV, are the following:  Part/Module/Annex Part I: Product(s) Overview Part II: Safety Specification SI: Epidemiology of the Indication(s) and Target Population(s) SIII: Clinical Trial Exposure  SIV: Populations Not Studied in Clinical Trials SV: Post-authorization Experience  SVII: Identified and Potential Risks  SVIII: Summary of the Safety Concerns Part III: Pharmacovigilance Plan (Including Postauthorization Safety Studies) Part V: Risk Minimization Measures (Including Evaluation of the Effectiveness of Risk Minimization Activities) Part VI: Summary of the Risk Part VII: Annexes Annex 2: Tabulated Summary of Planned, Ongoing, and Completed Pharmacovigilance Study Program Annex 3: Protocols for Proposed, Ongoing, and Completed Studies in the Pharmacovigilance Plan Major Change(s) Updated to show that etelcalcetide is not subject to additional monitoring in the European Union.  Updated epidemiology data.  Clinical trial exposure data updated to a data lock point of 10 November 2023. Exposure of special populations updated to a data lock point of 10 November 2023. Post-authorization exposure data updated to a data lock point of 10 November 2023. Removed important potential risk of 'gastrointestinal hemorrhage.' Removed important potential risk of 'gastrointestinal hemorrhage.' Removed completed category 3 Study 20170561.  Removed important potential risk of 'gastrointestinal hemorrhage.' Updated per changes listed above for Module SVII and Parts III and V.  Updated category 3 Study 20170561 from ongoing to completed. Removed protocol for Study 20170561.  Assessment: In more details, the following sections of the RMP were amended: PARTI: PRODUCT OVERVIEW Information that the product is not subject to additional monitoring Part II SI Data on incidence, prevalence of secondary hyperparathyroidism, demographic of indicated population, risk factors for the disease have been updated in accordance to Registry of European Renal Association- European Dialysis and Transplant Association (ERA-EDTA). Part II SIII Total Subject Exposure to Etelcalcetide in Clinical Trials has been updated. The total number of patients raised from 1719 (2433.58 subject/year) to 2090 (2612.92). All the concerned table have been updated: exposure by Indication and Duration, by age group and gender, by indication and race. Part II SIV Regarding patients with hepatic impairment it has been reported that no dedicated studies have been performed in these patients, although the clinical development program included subjects with a reported medical history of hepatic impairment. Exposure of population with relevant different ethnic origin has been updated, as well as paediatric patients (from 38 of RMP ver 3.0 to 38) and elderly (from 520 of RMP ver 3.0 to 577). Part II SIV Estimated Number of Patient-years of Exposure to Etelcalcetide, by Region, in the Postmarketing Setting changed from 134 916 to 373 473. Patients exposure estimated from business partners changed from 109 594 patient-years to 305 058. Part II SVII Section "New Safety Concerns and Reclassification With a Submission of an Updated RMP" has been updated. Gastrointestinal hemorrhage, previously classified as an important potential risk, has been removed from the list of safety concerns in the EU RMP, as per PRAC request in the procedure EMEA/H/C/003995/II/0021. The RMP has been updated with the information that the findings from Study 20170561 do not suggest an elevated risk of gastrointestinal bleeding for hemodialysis patients exposed to etelcalcetide. The EMA requested to "remove from the RMP the category 3 PASS study 20170561 as additional pharmacovigilance activity and the risk of "Gastrointestinal haemorrhage" as important potential risk, at the first regulatory opportunity. In consideration of the limitations of study results (e.g. scarce sample size), the MAH is requested to maintain "Gastrointestinal haemorrhage" as important potential risk for the scope of the PSURs, and provide cumulative reviews in the context of the PSURs submitted in the future." Part III Study 20170561 has been removed from the table of ongoing and planned additional pharmacovigilance activities. Part V Gastrointestinal hemorrhage has been removed as safety concern from the table of Description of Routine Risk Minimization Measures by Safety Concern, as well as from Summary Table of Pharmacovigilance Activities and Risk Minimization Activities by Safety Concern. Part VI References to the important potential risk Gastrointestinal hemorrhage and to the Study 20170561 have been removed from the concerned parts of the RMP summary. Annex 2  Study 20170561 has been reported as completed study. Annex 3  Protocol of Study 20170561 has been removed. The editorial changes are acceptable. Conclusion: The issue of gastrointestinal bleeding and ulceration is closely monitored in EU since the first PSUR. In the procedure EMEA/H/C/003995/II/0021the FSR of the case-control observational PASS study 20170561 was evaluated. In general, data emerged from this study does not raise safety concerns, though several limitations (i.e. limited sample size) may have impacted the results. The MAH was requested to remove from the RMP the category 3 PASS study 20170561 as additional pharmacovigilance activity and the risk of "Gastrointestinal haemorrhage" as important potential risk, at the first regulatory opportunity. The MAH was requested to maintain "Gastrointestinal haemorrhage" as important potential risk for the scope of the PSURs, and provide cumulative reviews in the context of the PSURs submitted in the future. | *за рецептом* | UA/17068/01/01 |