

FDA Advisory Committee

December 14-15, 2006

KETEK[®] (telithromycin)

sanofi-aventis US

Postapproval Safety Experience

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Postapproval Safety Experience

- Introduction
- Pharmacovigilance initiatives
- Overview of postapproval safety experience
- Specific postapproval safety experience:
 - hepatic events
 - visual events
 - syncopal events
 - exacerbation of myasthenia gravis
- Conclusions

The Postmarketing Team

Internal and External Experts

- Global Pharmacovigilance
- Global Epidemiology
- Hepatology
- Cardiology
- Neurology
- NeuroOphthalmology

Postmarketing Experience

- First approved in Europe in July 2001
 - approved in United States April 2004
- ~ 28 million postmarketing exposures to telithromycin worldwide
 - ~ 6 million in United States

Spontaneous Reports Strengths/Weaknesses

- Cornerstone of postmarketing safety surveillance:
 - identify serious, rare events
 - better characterize uncommon events
 - additional information about subpopulations
- Reporting rates are measures of reporting intensity, not incidence and are affected by:
 - severity of AE
 - time since launch/ Weber effect
 - stimulated reporting
 - secular trends
 - health care provider inclination to report

Reporting Rate Calculation

- Since treatment with telithromycin is short term (5-10 days):
 - Reporting rates are expressed in number of cases per million prescriptions

Overview of Postmarketing Reports

- Most frequently reported adverse events:
 - gastrointestinal: nausea, vomiting, diarrhea
 - visual: blurred vision, visual disturbance, diplopia
 - nervous: dizziness, headache
 - skin: pruritus, urticaria, rash
 - general: malaise

Reporting Rates 29 months Postapproval ex-US vs US

| | Ex-US (x 10 ⁶ exposures) (July 01 to Dec 03) | US (x 10 ⁶ exposures) (Apr 04 to Sep 06) |
|-------------------------|--|--|
| Gastrointestinal | | |
| Nausea | 23.5 | 26.8 |
| Diarrhea | 14.1 | 17.0 |
| Vomiting | 10.9 | 14.2 |
| Visual | | |
| Blurred vision | 45.0 | 45.5 |
| Visual disturbance | 12.8 | 18.5 |
| Accommodation disorder | 6.5 | 1.6 |
| Diplopia | 6.2 | 12.3 |

Reporting Rates 29 months Postapproval ex-US vs US

| | Ex-US (x 10 ⁶ exposures) (July 01 to Dec 03) | US (x 10 ⁶ exposures) (Apr 04 to Sep 06) |
|----------------|--|--|
| Nervous | | |
| Dizziness | 20.3 | 25.6 |
| Headache | 13.9 | 11.1 |
| Skin | | |
| Pruritus | 8.6 | 5.7 |
| Urticaria | 6.2 | 6.2 |
| Rash | 7.7 | 10.0 |
| General | | |
| Malaise | 7.2 | 6.6 |

Pharmacovigilance Initiatives: Risk Identification

- Individual case safety reports (ICSR)
 - pre-US approval (May 2003): standardized questionnaires designed to collect detailed information on hepatic, cardiac and visual events
 - intensive follow-up of adverse events (including phone contact)
 - pre-US approval (Aug 2003): expedited reporting of all serious hepatic events

Pharmacovigilance Initiatives: Risk Assessment

- Preapproval
 - routine aggregate reviews of ICSRs
 - cumulative postmarketing report (Jan 2003)
 - monthly postmarketing cumulative analyses (Dec 2003)
 - comparative analyses based on FDA FOI extracted data

Pharmacovigilance Initiatives: Risk Assessment

- Postapproval
 - ad hoc aggregate safety analyses
 - postmarketing visual commitment study
 - preclinical studies
 - comparative analyses based on FDA FOI extracted data
 - two epidemiologic claims database studies for hepatic events

Risk Communication

- Safety information component of physician and patient communication, delivered through a variety of methods:
 - sales representative presentations and handouts
 - mailings to physicians
 - Ketek.com web site
 - educational programs
 - Myasthenia Gravis organizations