VI.2 Elements for a Public Summary

Amlodistad, 5 mg and 10 mg, tablets.

VI.2.1 Overview of disease epidemiology

Raised blood pressure (hypertension)
Hypertension is a chronic medical condition in which the blood pressure in the arteries is raised. Hypertension puts persistent strain on the heart, leading to hypertensive heart disease and coronary artery disease if untreated. Hypertension is also a major risk factor for stroke, arteriosclerotic complications and chronic kidney disease. Primary (essential) hypertension is the most common form of hypertension, accounting for 90–95% of all cases of hypertension. In Europe, hypertension occurs in about 30-45% of people as of 2013 with an increase with age. Treatment options include lifestyle modifications (such as dietary changes, physical exercise, and weight loss) and treatment with other antihypertensive medications or combinations thereof.

Chronic stable angina pectoris and vasospastic (Prinzmetal's) angina

Angina is chest pain that occurs when the blood supply to the heart is restricted. It is usually a symptom of hardening and/or narrowing of arteries supplying the heart. The pain is usually triggered by physical activity or stress and typically only lasts for a few minutes. Stable angina is an angina where attacks occur due to an obvious trigger (such as exercise) and improve with medication and rest. On the contrary, with unstable angina, attacks are more unpredictable, occurring with no obvious trigger and continuing despite resting. Vasospastic (Prinzmetal's) angina is where chest pain occurs at rest, but in cycles. Worldwide, prevalence of angina is estimated to be 6.7% in women and 5.7% in men. Prevalence is also higher among non-white ethnic groups than among whites. Pinzmetal's angina is rare, affecting approximately 4 out of 100,000 people, and usually occurs in younger patients. Treatment includes a statin medicine to lower cholesterol, low-dose aspirin to help prevent a heart attack, and a beta-blocker medicine to help protect the heart and to prevent angina pains. Sometimes angioplasty or surgery are options to widen, or to bypass, narrowed arteries.

VI.2.2 Summary of treatment benefits

<Product Name> contains the active substance amlodipine which belongs to a group of medicines called calcium antagonists. It is used to treat high blood pressure (hypertension) or a certain type of chest pain called angina, a rare form of which is Prinzmetal's or variant angina. In patients with high blood pressure <Product Name> works by relaxing blood vessels, so that blood passes through them more easily. In patients with angina <Product Name> works by improving blood supply to the heart muscle which then receives more oxygen and as a result chest pain is prevented. <Product Name> does not provide immediate relief of chest pain from angina.

VI.2.3 Unknowns relating to treatment benefits

Use of <Product Name> has not been studied in children younger than 6 years. The long-term efficacy of amlodipine on the reduction of cardiovascular morbidity and mortality in adulthood has also not been established.

VI.2.4 Summary of safety concerns

Important identified risks

Risk	What is known	Preventability
Failure of the pump action of the heart (Cardiogenic shock)	Cardiogenic shock is a condition in which the heart suddenly cannot pump enough blood to meet body's needs. The condition is most often caused by a severe heart attack. Cardiogenic shock is fatal if not treated immediately. If treated immediately, about half the people who develop the condition survive.	Contact your doctor **immediately** if you experience any of the following: •Chest pain •Nausea and vomiting •Dyspnoea •Profuse sweating •Confusion/disorientation •Palpitations •Faintness/syncope
Concomitant therapy with drugs which act as inhibitors of CYP3A4 hepatic enzymes (Concomitant therapy with CYP3A4 inhibitors)	Concomitant use of <Product Name> with drugs which act as inhibitors of CYP3A4 hepatic enzymes (such as some antibiotics, e.g. clarithromycin) may give rise to significant increase in amlodipine exposure. This may be more pronounced in the elderly. With increase in amlodipine exposure, over-dosing and a higher incidence of adverse events are possible.	Contact your doctor **immediately** if you experience any of the following: •Palpitations •Low blood pressure •Chest pain •Faintness/syncope •Confusion/disorientation Your doctor may perform a more intensive monitoring of <Product Name> dose. Dose adjustments may be needed if higher amlodipine exposure is suspected. You should comply with recommended dose changes in order to avoid over-dosing.

An abnormal build-up of fluid in the lungs in patients with heart failure (Pulmonary oedema (in patients with heart failure))	Research suggests that in patients with severe heart failure, the incidence of abnormal build-up of fluid in the lungs (pulmonary oedema) is higher in patients treated with amlodipine. <Product Name> should therefore be used with caution in patients with heart failure, as they may have an increased risk of future cardiovascular events and mortality.	Tell your doctor if you have or have ever been diagnosed with heart failure. Tell your doctor **immediately** if you experience any of the following: •Extreme shortness of breath or difficulty breathing that worsens when lying down •Anxiety or restlessness •A cough with sputum that may be tinged with blood •Chest pain •Palpitations

Important potential risks

Risk	**What is known (Including reason why it is considered a potential risk)**
Attempted and completed suicide/suicidal ideation	Patients treated with the medicinal product may be at an increased risk of experiencing suicidal ideations.
Toxic skin eruptions	Patients treated with the medicinal product may be at an increased risk of experiencing toxic skin eruptions.
Interstitial lung disease	Patients treated with the medicinal product may be at an increased risk of experiencing progressive scarring of lung tissue (interstitial lung disease).
Parkinson's disease and parkinsonis	Patients treated with the medicinal product may be at an increased risk of experiencing Parkinson’s disease and/or parkinsonian symptom(s) (parkinsonism).
Pseudolymphoma	Patients treated with the medicinal product may be at an increased risk of experiencing a condition which mimics a type of blood cancer (pseudolymphoma).
Breast cancer	Patients treated with the medicinal product may be at an increased risk of experiencing breast cancer.

Missing information

Risk	What is known
Pregnancy, lactation and fertility	The safety of <Product Name> in human pregnancy has not been established. Use in pregnancy is only recommended when there is no safer alternative and when the disease itself carries greater risk for the mother and the baby. It is not known whether <Product Name> is excreted in breast milk. A decision on whether to continue/discontinue breast-feeding or to continue/discontinue therapy with <Product Name> should be made taking into account the benefit of breast-feeding to the child and the benefit of amlodipine therapy to the mother. Reversible biochemical changes in the head of spermatozoa have been reported in some patients treated by calcium channel blockers (the group of medicine to which <Product Name> belongs to). Clinical data are insufficient regarding the potential effect of <Product Name> on fertility.
Patients with severe hepatic impairment	Dosage recommendations have not been established in patients with mild to moderate hepatic impairment; therefore dose selection should be cautious and the lowest dose possible should be used. Slow dose increases and careful monitoring may be required in patients with severe hepatic impairment.
Concomitant therapy with CYP3A4 inducers	There is no data available regarding the effect of drugs which induce hepatic CYP3A4 enzymes involved in metabolism of <Product Name>. The concomitant use of such drugs (e.g. some anti-tuberculosis drugs, such as rifampicin) may lower concentration of <Product Name>. <Product Name> should be used with caution together with such drugs.
Use in children younger than 6 years	Use of <Product Name> has not been studied in children younger than 6 years.

VI.2.5 Summary of risk minimisation measures by safety concern

All medicines have a Summary of Product Characteristics (SPC) which provides physicians, pharmacists and other health care professionals with details on how to use the medicine, the risks and recommendations for minimising them. An abbreviated version of this in lay language is provided in the form of the package leaflet (PL). The measures in these documents are known as routine risk minimisation measures.

This medicine has no additional risk minimisation measures.

VI.2.6 Planned post authorisation development plan

No post-authorisation studies have been imposed or are planned.

VI.2.7 Summary of changes to the Risk Management Plan over time

Not applicable