PART VI: SUMMARY OF THE RISK MANAGEMENT PLAN

Summary of risk management plan for lacosamide Mylan 50 mg, 100 mg, 150 mg, 200 mg Film-coated tablets (lacosamide)

This is a summary of the risk management plan (RMP) for lacosamide Mylan 50 mg, 100 mg, 150 mg, 200 mg Film-coated tablets. The RMP details important risks of lacosamide, how these risks can be minimised, and how more information will be obtained about lacosamide's risks and uncertainties (missing information).

Lacosamide Mylan 50 mg, 100 mg, 150 mg, 200 mg Film-coated tablet's summary of product characteristics (SmPC) give essential information to healthcare professionals and patients on how it should be used.

I. The medicine and what it is used for

Lacosamide Mylan 50 mg, 100 mg, 150 mg, 200 mg Film-coated tablets is indicated as monotherapy and adjunctive therapy in the treatment of partial-onset seizures with or without secondary generalisation in adults, adolescents and children from 4 years of age with epilepsy. It contains lacosamide as the active substance and it is given by oral route.

II. Risks associated with the medicine and activities to minimise or further characterise the risks

Important risks of lacosamide Mylan 50 mg, 100 mg, 150 mg, 200 mg Film-coated tablets, together with measures to minimise such risks are outlined below.

Measures to minimise the risks identified for medicinal products can be:

- Specific Information, such as warnings, precautions, and advice on correct use, in the package leaflet and SmPC addressed to patients and healthcare professionals;
- Important advice on the medicine's packaging;
- The authorised pack size the amount of medicine in a pack is chosen so to ensure that the medicine is used correctly;
- The medicine's legal status the way a medicine is supplied to the public (e.g. with or without prescription) can help to minimises its risks.

Together, these measures constitute routine risk minimisation measures.

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In addition to these measures, information about adverse events is collected continuously and regularly analysed, so that immediate action can be taken as necessary. These measures constitute routine pharmacovigilance activities.

If important information that may affect the safe use of <invented name> is not yet available, it is listed under 'missing information' below.

II.A List of important risks and missing information

Important risks of lacosamide Mylan 50 mg, 100 mg, 150 mg, 200 mg Film-coated tablets are risks that need special risk management activities to further investigate or minimise the risk, so that the medicinal product can be safely taken by patients. Important risks can be regarded as identified or potential. Identified risks are concerns for which there is sufficient proof of a link with the use of lacosamide Mylan 50 mg, 100 mg, 150 mg, 200 mg Film-coated tablets. Potential risks are concerns for which an association with the use of this medicine is possible based on available data, but this association has not been established yet and needs further evaluation. Missing information refers to information on the safety of the medicinal product that is currently missing and needs to be collected (e.g. on the long-term use of the medicine/use in special patient populations etc.);

Table 6 Part	VI: Si	ummary o	of safety	concerns
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List of important risks and missing information						
Important identified risks	• Cardiac AEs that may be potentially associated with PR					
	i	interval pr	olongati	on and sodiun	n channel mo	dulation
Important potential risks	None					
Missing information	•]	Pregnant o	or lactati	ng women		
	•]	Impact	on	long-term	growth,	long-term
	1	neurodeve	lopment	t, and on puber	rty in pediatri	c population
	8	aged 4 to <	< 16 yea	rs		

II.B Summary of important risks

The safety information in the proposed Product Information is aligned to the reference medicinal product.



Carutac AEs that may be potentiany associated with 1 K interval protongation and sourum		
channel modulation		
Evidence for linking the	In line with the reference RMP, this safety concern has been	
risk to the medicine	classified as an important identified risk.	
Risk factors and risk	The risk factors for developing AEs related to PR prolongation	
groups	include a presence of pre-existing heart failure or a recent	
	myocardial infarction or known conduction abnormalities (Ryvlin	
	et al, 2013; Strzelczyk et al, 2008; Rocamora et al, 2003). Studies	
	on the risk factors for AEs related to PR prolongation have been	
	done in the general population. The incidence of atrial fibrillation	
	increases with age (Friberg et al, 2010). Other risk factors for atrial	
	fibrillation include a history of hypertension, cardiac diseases	
	including valvular, ischemic and congestive heart failure (Krahn et	
	al, 1995). The frequency of cardiac syncope also increases with age	
	from approximately 1.1% in people less than 40 years to 16% in	
	individuals more than 75 years of age (Rvylin et al, 2013; Olde et	
	al, 2009; Ungar et al, 2006). Ictal bradycardia is most prevalent in	
	individuals with temporal lobe epilepsy (Monté et al, 2007; Reeves	
	et al, 1996). There is no data available on the risk factors specific to	
	antiepileptic drugs (AEDs).	
	Lacosamide should be used with caution in patients with underlying	
	proarrhythmic conditions such as patients with known cardiac	
	conduction problems or severe cardiac disease (eg, myocardial	
	ischemia/ infarction, heart failure, structural heart disease or cardiac	
	sodium channelopathies) or patients treated with medicinal	
	products affecting cardiac conduction, including antiarrhythmics	
	and sodium channel blockers. Older age (>65 years) and/or iv	
	therapy were not identified as independent risk factors.	
Risk minimisation	Routine risk minimization measures: SmPC sections 4.2, 4.3, 4.4,	
measures	4.5, 4.8 and 5.3	

Cardiac AEs that may be potentially associated with PR interval prolongation and sodium

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Cardiac AEs that may be potentially associated with PR interval prolongation and sodium		
channel modulation		
	Other risk minimisation measures beyond the Product Information:	
	Medicine's legal status: POM	
	Additional risk minimisation measures	
	Not applicable as there are no additional risk minimisation measures	
	for this safety concern	

Pregnant or lactating women		
Risk minimisation	Routine risk minimization measures: SmPC sections 4.6 and 5.3	
measures	Additional risk minimisation measures	
	Not applicable as there are no additional risk minimisation measures	
	for this safety concern	
Additional	Additional pharmacovigilance activities:	
pharmacovigilance	In order to support the collection of additional data on pregnancy	
activities	under therapy with lacosamide and for comparison of different anti-	
	epileptics regarding teratogenicity, the marketing authorisation	
	holder encourages reporters to register and to report pregnant	
	women with epilepsy in the European Registry of Antiepileptic	
	Drugs and Pregnancy (EURAP).	
	See section II.C of this summary for an overview of the post-	
	authorisation development plan.	

Impact on long-term growth, long-term neurodevelopment, and on puberty in pediatric population aged 4 to < 16 years		
Risk	minimisation	Routine risk minimisation measures
measures		No additional wording in SmPC
		Additional risk minimisation measures
		None

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II.C Post-authorisation development plan

II.C.1 Studies which are conditions of the marketing authorisation

There are no studies which are conditions of the marketing authorisation or specific obligation of lacosamide Mylan 50 mg, 100 mg, 150 mg, 200 mg Film-coated tablets.

II.C.2 Other studies in post-authorisation development plan

There are no studies required for lacosamide Mylan 50 mg, 100 mg, 150 mg, 200 mg film-coated tablets.