

Part VI: Summary of the risk management plan

Summary of risk management plan for [Product name] (rivaroxaban)

This is a summary of the risk management plan (RMP) for [Product name]. The RMP details important risks of [Product name], how these risks can be minimised, and how more information will be obtained about [Product name]'s risks and uncertainties (missing information).

[Product name]'s summary of product characteristics (SmPC) and its package leaflet give essential information to healthcare professionals and patients on how [Product name] should be used.

Important new concerns or changes to the current ones will be included in updates of [Product name]'s RMP.

I. The medicine and what it is used for

[Product name] is authorised for in adults for prevention of stroke and systemic embolism in patients with non-valvular atrial fibrillation and treatment of deep vein thrombosis (DVT) and pulmonary embolism (PE), and prevention of recurrent DVT and PE and in paediatric population for treatment of venous thromboembolism (VTE) and prevention of VTE recurrence (see SmPC for the full indication). It contains rivaroxaban as the active substance and it is given by oral administration.

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

Important risks of [Product name], together with measures to minimise such risks and the proposed studies for learning more about [Product name]'s 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 patient (e.g., with prescription) can help to minimise its risks.

Together, these measures constitute *routine risk minimisation* measures.

In the case of [Product name], these measures are supplemented with *additional risk minimisation measures* mentioned under relevant important risks, below.

In addition to these measures, information about adverse reactions 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 [Product name] is not yet available, it is listed under 'missing information' below.

II.A List of important risks and missing information

Important risks of [Product name] are risks that need special risk management activities to further investigate or minimise the risk, so that the medicinal product can be safely taken. 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 [Product name]. 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).

List of important risks and missing information	
Important identified risks	Haemorrhage
Important potential risks	Embryo-foetal toxicity
Missing information	Patients with severe renal impairment (CrCl <30 mL/min) Patients receiving concomitant systemic inhibitors of CYP 3A4 or P-gp other than azole antimycotics (e.g., ketoconazole) and HIV-protease inhibitors (e.g., ritonavir) Remedial pro-coagulant therapy for excessive haemorrhage Pregnant or breast-feeding women Patients with atrial fibrillation (AF) and a prosthetic heart valve Long-term therapy with rivaroxaban in treatment of DVT, PE, SPAF and ACS in real-life setting Patients with significant liver diseases (severe hepatic impairment/Child Pugh C)

II.B Summary of important risks

Important identified risk: Haemorrhage	
Risk minimisation measures	Routine risk minimisation measures: <i>SmPC sections 4.3, 4.4 and 4.8. Corresponding sections of PL.</i> <i>Pack size: Limited pack sizes</i> <i>Legal status: Prescription-only medicine</i> Additional risk minimisation measures: <i>Healthcare Professional Guide</i> <i>Patient alert card</i>

Important potential risk: <i>Embryo-foetal toxicity</i>	
Risk minimisation measures	<p>Routine risk minimisation measures:</p> <p><i>SmPC sections 4.3, 4.6 and 5.3. Corresponding sections of PL.</i></p> <p><i>Pack size: Limited pack sizes</i></p> <p><i>Legal status: Prescription-only medicine</i></p>

Missing information: <i>Patients with severe renal impairment (CrCl <30 mL/min)</i>	
Risk minimisation measures	<p>Routine risk minimisation measures:</p> <p><i>SmPC sections 4.2 and 4.4. Corresponding sections of PL.</i></p> <p><i>Pack size: Limited pack sizes</i></p> <p><i>Legal status: Prescription-only medicine</i></p>
Additional pharmacovigilance activities	<p>Routine pharmacovigilance activities.</p> <p>Routine pharmacovigilance activities beyond adverse reactions reporting and signal detection:</p> <p><i>Specific adverse reaction follow-up questionnaire</i></p>

Missing information: <i>Patients receiving concomitant systemic inhibitors of CYP 3A4 or P-gp other than azole antimycotics (e.g., ketoconazole) and HIV-protease inhibitors (e.g., ritonavir)</i>	
Risk minimisation measures	<p>Routine risk minimisation measures:</p> <p><i>SmPC sections 4.4 and 4.5. Corresponding sections of PL.</i></p> <p><i>Pack size: Limited pack sizes</i></p> <p><i>Legal status: Prescription-only medicine</i></p>

Missing information: <i>Remedial pro-coagulant therapy for excessive haemorrhage</i>	
Risk minimisation measures	<p>Routine risk minimisation measures:</p> <p><i>SmPC section 4.9. Corresponding section of PL.</i></p> <p><i>Pack size: Limited pack sizes</i></p> <p><i>Legal status: Prescription-only medicine</i></p>

Missing information: <i>Pregnant or breast-feeding women</i>	
Risk minimisation measures	<p>Routine risk minimisation measures:</p> <p><i>SmPC sections 4.3, 4.6 and 5.3. Corresponding sections of</i></p>

Missing information: <i>Pregnant or breast-feeding women</i>	
	<p><i>PL.</i></p> <p><i>Pack size: Limited pack sizes</i></p> <p><i>Legal status: Prescription-only medicine</i></p>

Missing information: <i>Patients with atrial fibrillation (AF) and a prosthetic heart valve</i>	
Risk minimisation measures	<p>Routine risk minimisation measures:</p> <p><i>SmPC section 4.4. Corresponding section of PL.</i></p> <p><i>Pack size: Limited pack sizes</i></p> <p><i>Legal status: Prescription-only medicine</i></p>

Missing information: <i>Long-term therapy with rivaroxaban in treatment of DVT, PE, SPAF and ACS in real-life setting</i>	
Risk minimisation measures	No risk minimisation measures.

Missing information: <i>Patients with significant liver diseases (severe hepatic impairment/Child Pugh C)</i>	
Risk minimisation measures	<p>Routine risk minimisation measures:</p> <p><i>SmPC sections 4.2, 4.3 and 5.2. Corresponding sections of PL.</i></p> <p><i>Pack size: Limited pack sizes</i></p> <p><i>Legal status: Prescription-only medicine</i></p>
Additional pharmacovigilance activities	<p>Routine pharmacovigilance activities.</p> <p>Routine pharmacovigilance activities beyond adverse reactions reporting and signal detection:</p> <p><i>Specific adverse reaction follow-up questionnaire</i></p>

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 [Product name].

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

There are no studies required for [Product name].