Part VI: Part VI: Summary of the risk management plan

Summary of risk management plan for Ixbelor (Edoxaban tosylate monohydrate)

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

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

Important new concerns or changes to the current ones will be included in updates of Ixbelor's RMP.

I. The medicine and what it is used for

Ixbelor is authorised for the prevention of stroke and systemic embolism in adult patients with nonvalvular atrial fibrillation (NVAF) with one or more risk factors, such as congestive heart failure, hypertension, age \geq 75 years, diabetes mellitus, prior stroke or transient ischaemic attack (TIA) and the treatment of deep vein thrombosis (DVT) and pulmonary embolism (PE), and for the prevention of recurrent DVT and PE in adults (see SmPC for the full indication). It contains Edoxaban tosylate monohydrate as the active substance and it is given by oral route of administration.

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

Important risks of Ixbelor, together with measures to minimise such risks and the proposed studies for learning more about Ixbelor'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 or without prescription) can help to minimise its risks.

Together, these measures constitute routine risk minimisation measures.

In the case of Ixbelor these measures are supplemented with additional risk minimisation measures mentioned under relevant important risks, below.

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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 Ixbelor is not yet available, it is listed under 'missing information' below.

II.A List of important risks and missing information

Important risks of Ixbelor 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 Ixbelor. 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	Bleeding or Bleeding due to: Drug interaction in combination with other drugs known to increase the risk of bleeding eg, aspirin, NSAID Inappropriate administration of the 60-mg dose /inadvertent overdose by use of the 60-mg dose, eg in combination with use of strong P-gp inhibitors; in patients with low body weight ≤60 kg; and in patients with moderate to severe renal impairment (CrCL 15–50 mL/min)	
Important potential risks	 Hepatic dysfunction Trend towards decreasing efficacy in NVAF subjects with high CrCL 	
Missing information	 Lack of reversal agent Reproductive and development toxicity (Pregnancy and lactation) Patients with hepatic impairment Patients with severe renal impairment (CrCL <30 mL/min) or end-stage renal disease (CrCL <15 mL/min or on dialysis) Patients with mechanical heart valves Combination with dual antiplatelet therapy Off-label use in Europe in populations or indications outside the approved indications per European SmPC 	

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II.B Summary of important risks

Important identified risk: Bleeding or Bleeding due to:

- Drug interaction in combination with other drugs known to increase the risk of bleeding eg, aspirin, NSAID
- Inappropriate administration of the 60-mg dose /inadvertent overdose by use of the 60-mg dose, eg in combination with use of strong P-gp inhibitors; in patients with low body weight ≤60 kg; and in patients with moderate to severe renal impairment (CrCL 15-50 mL/min)

Risk minimisation measures	Routine risk minimisation measures:
	SmPC sections:4.2-4.6, 4.8, 4.9
	PL sections: 2-4
	Prescription only medicine
	Additional risk minimisation measures:
	Prescriber Guide
	Patient Alert Card

Important potential risk: Hepatic dysfunction		
Risk minimisation measures	Routine risk minimisation measures:	
	SmPC sections: 4.2-4.4	
	PL sections: 2, 4	
	Prescription only medicine	
	Additional risk minimisation measures:	
	None	

Important potential risk: Trend Towards Decreasing Efficacy in NVAF Subjects with High Creatinine Clearance		
Risk minimisation measures	Routine risk minimisation measures:	
	SmPC section: 4.4	
	Prescription only medicine	
	Additional risk minimisation measures:	
	None	

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Missing Information

- Lack of reversal agent
- Reproductive and development toxicity (Pregnancy and lactation)
- Patients with hepatic impairment
- Patients with severe renal impairment (CrCL <30 mL/min) or end-stage renal disease (CrCL <15 mL/min or on dialysis)
- Patients with mechanical heart valves
- Combination with dual antiplatelet therapy
- Off-label use in Europe in populations or indications outside the approved indications per European SmPC)

Routine risk minimisation measures:
SmPC sections: 4.2-4.4, 4.6, 4.9
PL section: 2
Prescription only medicine
Additional risk minimisation measures:
Prescriber Guide

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 Ixbelor.

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

There are no studies required for Ixbelor.

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