

Patient/Parent/Legal Guardian guide

Drug Substance ravulizumab

ULTOMIRIS[®] (ravulizumab)

Patient/Parent/Legal Guardian Guide

- ▼ This medicine is subject to additional monitoring.
This will allow quick identification of new safety information.
You can help by reporting any side effects you may get.

This document is approved by The Executive Directorate of Pharmacovigilance, at SFDA.

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Please see Patient Information Leaflet for ravulizumab, including information regarding serious meningococcal infection.

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1 INTRODUCTION

Ravulizumab is used to treat adults and children with:

- Paroxysmal Nocturnal Haemoglobinuria (**PNH**)
- Atypical Haemolytic Uremic Syndrome (**aHUS**)

Ravulizumab is also used to treat adults with:

- Generalized Myasthenia Gravis (**gMG**)

This guide is to explain important safety information related to ravulizumab to patients and parents/legal guardians of infants and children who are prescribed ravulizumab

Ravulizumab must be prescribed by a doctor.

You will receive the following material from your doctor:

- **Patient Card**
 - It is very important to rapidly identify and treat certain types of infection in patients who receive ravulizumab; therefore, you will be given a card that lists the specific symptoms you must always look for.
 - You must carry this card at all times throughout the duration of your ravulizumab therapy and for 8 months after the last dose of ravulizumab and show it to any healthcare professional you see.
- **Patient/Parent/Legal Guardian guide** which includes paediatric safety information card
- **Ravulizumab Patient Information Leaflet**

2 SAFETY CONSIDERATIONS RELATED TO RAVULIZUMAB

Risk of Meningococcal infection

- **Ravulizumab may reduce your natural resistance to a certain bacteria called *Neisseria meningitidis* that may increase your risk of meningococcal infection. The meningococcal infection can lead to severe swelling of the tissues surrounding the brain and spinal cord (meningitis) and/or a severe infection of the blood (septicaemia, also known as blood poisoning or sepsis)**
- **These infections require urgent and appropriate care as they may become rapidly fatal or life-threatening or lead to major disabilities².**

Before starting treatment with ravulizumab

- ▶ Your doctor will vaccinate you against meningococcal infection, at least 2 weeks before beginning therapy. If ravulizumab treatment is initiated less than 2 weeks after receiving meningococcal vaccine, your doctor will make sure that you take antibiotics to reduce the risk of infection until 2 weeks after you have been vaccinated
- ▶ Vaccination reduces the risk of developing meningococcal infection, but it does not remove the risk completely. Your doctor might consider that you need additional measures to prevent infection.
- ▶ Vaccination or revaccination may further activate complement and, as a result, patients with complement-mediated diseases may experience increased signs and symptoms of their underlying disease.

Ask your doctor if you have any questions about vaccinations about the vaccinations you require before starting ravulizumab.

During treatment with ravulizumab

- ▶ Be aware of the signs and symptoms of meningococcal infection and notify your doctor immediately if any of these occur.

The signs and symptoms of meningococcal infection you must look for are:

- Headache with nausea or vomiting
 - Headache and fever
 - Headache with a stiff neck or stiff back
 - Fever
 - Fever and Rash
 - Confusion
 - Muscle aches with flu-like symptoms
 - Eyes sensitivity to light
- ▶ **Carry the patient card at all times throughout the duration of your ravulizumab therapy and for 8 months after the last dose of ravulizumab and show it to any health care professional you see.**
 - ▶ **If you cannot reach your doctor, go to an emergency department and show them your patient card.**

The signs and symptoms of meningitis can be different in infants and children. These are described under the important safety information for infants and children who are taking ravulizumab

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Please see Patient Information Leaflet for ravulizumab, including information regarding serious meningococcal infection.

Risk of other infections

- Ravulizumab treatment may reduce your natural resistance to other similar bacterial infections including gonorrhea which is a sexually transmitted disease.
- Before starting ravulizumab, tell your doctor if you have any infections.
- If you know that you are at risk of gonorrhea (a sexually transmitted infection), ask your doctor or pharmacist for advice before using this medicine.
- Your doctor will administer a vaccine to your child aged less than 18 years against Haemophilus influenzae and pneumococcal infections according to the national vaccination recommendations for each age group.
- Administer ravulizumab therapy with caution to patients with active systemic infections.

Infusion/Allergic reactions

- Ravulizumab contains a protein, and proteins may cause infusion or allergic reactions (including anaphylaxis) in some patients.
- If you experience any signs or symptoms after receiving ravulizumab, you should consult your healthcare professional

Blood abnormalities and cancers

- If you are a patient with PNH, you will be monitored for changes in blood cells.
- The PNH laboratory monitoring may potentially alert your doctor to blood abnormalities and cancers. The PNH laboratory monitoring continues during ravulizumab treatment and for a period not less than 16 weeks after ravulizumab is stopped.

Pregnancy and breast feeding

- Ravulizumab is not recommended during pregnancy and in women of childbearing potential not using contraception.
- Ask your doctor for advice before using ravulizumab if you are pregnant or breast-feeding, think you may be pregnant, or are planning to have a baby,
- Adequate contraception during treatment and up to 8 months after treatment should be used in women who are able to get pregnant.
- Breastfeeding should be avoided during ravulizumab treatment and up to 8 months after treatment.
- Male patients on ravulizumab should not father a child or donate sperm during treatment or up to 8 months after treatment.

3 HOW LONG WILL I NEED TO TAKE RAVULIZUMAB?

As you have a chronic disease, ravulizumab is intended to be an ongoing therapy.

Do not stop treatment without first discussion with your doctor.

If you stop using ravulizumab for PNH

Interrupting or stopping treatment with ravulizumab may cause your PNH symptoms to come back more severely.

Your doctor will discuss the possible side effects with you and explain the risks.

Your doctor will monitor you closely for at least 16 weeks.

The risks of stopping ravulizumab include increased breakage of your red blood cells, which may cause:

- An increase in your lactate dehydrogenase (LDH) levels, a laboratory marker of destruction of red blood cells,
- A large drop in the number of red blood cells (anaemia),
- Dark urine,
- Fatigue,
- Abdominal pain,
- Shortness of breath,
- Difficulty swallowing,
- Impotence (erectile dysfunction),
- Confusion or change in how alert you are,
- Chest pain, or angina,
- Problems with your kidneys (an increase in your serum creatinine level) or
- Blood clotting (thrombosis).

If you have any of the above contact your doctor.

If you stop using ravulizumab for aHUS

Interrupting or ending treatment with ravulizumab may cause your aHUS symptoms to come back.

Your doctor will discuss the possible side effects with you and explain the risks.

Your doctor will monitor you closely.

The risks of stopping ravulizumab include an increase in small blood vessel damage, which may cause:

- A large drop in the number of platelets (thrombocytopenia),
- A large increase in destruction of your red blood cells (anaemia),
- An increase in your lactate dehydrogenase (LDH) levels, a laboratory marker of destruction of red blood cells,
- Problems with your kidneys (decreased urination),
- Problems with your kidneys (an increase in your creatinine level),
- Confusion or change in how alert you are,
- Change in your vision,
- Chest pain (angina),
- Shortness of breath,
- Abdominal pain, diarrhoea or
- Blood clotting (thrombosis).

If you have any of the above, contact your doctor.

4 IMPORTANT SAFETY INFORMATION FOR INFANTS AND CHILDREN WHO ARE TAKING RAVULIZUMAB

This section is for parents/ legal guardians of infants and young children who are receiving ravulizumab.

Meningococcal infections are extremely dangerous and may become life-threatening within hours. Early symptoms of meningitis can include:^{2,3}

- Fever
- Headache
- Vomiting
- Diarrhoea
- Muscle pain
- Stomach cramps
- Fever with cold hands and feet

Common Signs and Symptoms of Meningitis and Severe Blood Infection (Sepsis) in infants and children:^{3,4}

- Fever, cold hands and feet
- Fretful, dislike being handled
- Rapid breathing or grunting
- Unusual cry, moaning
- Stiff neck, dislike bright lights
- Refusing food and vomiting
- Drowsy, floppy, unresponsive
- Pale, blotchy skin spots/rash
- Tense, bulging fontanelle (soft spot on the baby's head)
- Convulsions/seizures

In children, additional signs and symptoms to those listed for infants may include:⁴

- Severe muscle pain
- Severe headache
- Confusion
- Irritability

Do not wait for a rash^{2,3}. If your child is ill and getting worse, get medical help immediately.

Meningitis symptoms can appear in any order. Some may not appear at all. It is very important to seek medical care immediately if you see any of the above signs and symptoms.

Paediatric Safety Information Card

The Paediatric Safety Information Card contains important safety information that you or anyone responsible for the care of your child should know throughout the duration of your child's ravulizumab therapy and for 8 months after the last dose of ravulizumab.

Fill out the card and give one to anyone responsible for the care of your child (for example a teacher, babysitter/nanny, daycare centre staff). Also, be sure to carry a set with you at all times. Please contact your doctor if you need extra copies of this guide and Paediatric Safety Information Card.

Tell the person responsible for the care of your child that these cards should be shown to any healthcare professional involved in your child's treatment, should your child need medical attention.

If your child shows any signs or symptoms of meningitis or severe blood infection (sepsis), contact their healthcare provider immediately.

If you cannot reach the healthcare professional, seek immediate emergency care at an emergency department and show the staff the child's Paediatric Safety Information Card.

FURTHER INFORMATION

For more information about ravulizumab or in case of any safety concerns, please contact your doctor

To report any side effect(s), please contact:
The National Pharmacovigilance Centre (NPC):
SFDA Call Center: 19999
E-mail: npc.drug@sfd.gov.sa
Website: <https://ade.sfd.gov.sa/>

Or

The local representative of the Marketing Authorisation Holder in KSA:
Biologix, FZ Co,
Hibatullah Al Ghaffari Street-Suliemaniah
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PAEDIATRIC SAFETY INFORMATION CARD

• IMPORTANT INFORMATION FOR SUPERVISING INDIVIDUALS

- This child is currently being treated with ravulizumab and may have reduced natural resistance to infections, especially meningococcal infections, which include meningitis and severe blood infection or blood poisoning (also known as sepsis). If you notice that the child has any of the signs or symptoms listed on this card, which could indicate a serious infection, call the child's doctor immediately.



- Meningitis can become life-threatening within hours.
- If **ANY** signs or symptoms should appear, seek medical attention immediately

If you cannot reach the child's doctor, take the child to the emergency department immediately and show the staff this card. Even if the child has stopped using ravulizumab, keep this card with you for 8 months after the child's last ravulizumab dose.

Patient name: _____

Parent/Guardian contact information: _____

Physician name: _____

Physician contact information: _____

Meningitis and severe blood infection (sepsis) symptoms for infants and children: COMMON SIGNS AND SYMPTOMS:

- Fever, cold hands and feet
- Stiff neck, dislikes bright lights
- Rapid breathing or grunting
- Pale, blotchy skin; spots/rash
- Refusing food and vomiting
- Fretful, dislikes being handled
- Drowsy, floppy, unresponsive
- Unusual cry, moaning
- Tense, bulging fontanelle (soft spot)
- Convulsions/seizures
- Severe muscle pain
- Severe headache
- Confusion
- Irritability

IMPORTANT SAFETY INFORMATION FOR HEALTHCARE PROFESSIONALS

This patient was prescribed ravulizumab therapy. Ravulizumab is an antibody that inhibits terminal complement activation. Due to its mechanism of action, the use of ravulizumab increases the patient's susceptibility to meningococcal infection (*Neisseria meningitidis*).

Before beginning treatment, this patient should have received a meningococcal vaccine, but they may still be susceptible to meningococcal infections or other general infections. You should carefully monitor the emergence of early signs of meningococcal infection, evaluate immediately if infection is suspected, and treat with antibiotics if necessary.

Some patients have experienced infusion reactions following administration of ravulizumab. Common general disorders or administration site conditions include chest discomfort, chills, fatigue, asthenia, infusion-related reaction, oedema, and pyrexia. For more information about ravulizumab; please refer to ravulizumab SmPC.

To report any side effect(s), please contact:
The National Pharmacovigilance Centre (NPC):
SFDA Call Center: 19999
E-mail: npc.drug@sfd.gov.sa
Website: <https://ade.sfd.gov.sa/>

Or

The local representative of the Marketing Authorisation Holder in KSA:
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