



هَيْئَةُ الدَّوَاءِ الْمِصْرِيَّة



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## EPVC Mission

Pharmaceutical Vigilance administra-  
tion is the way through which the pro-  
cesses for authorizing, regulat-  
ing, monitoring and evaluating the  
safety of any pharmaceutical product  
or medical device take place, in addi-  
tion to disseminating any safety infor-  
mation for public health programs,  
healthcare professionals, and the  
Egyptian citizen.

The Pharmaceutical vigilance ad-  
ministration is an integral part of the  
Central Administration of Pharma-  
ceutical Care that works on the en-  
hancement of the pharmaceutical  
services to guarantee safe and effec-  
tive use of medications in Egypt, un-  
der the patronage of the Egyptian  
Drug Authority.

## Newsletter

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## Obeticholic acid: Restriction of use in primary biliary cholangitis (PBC) patients with advanced cirrhosis due to risk of serious liver injury

Obeticholic acid is used to treat Primary biliary cholangitis (PBC) in adults and is sometimes used together with another drug called ursodeoxycholic acid (UDCA). PBC is a chronic liver disease that gradually destroys bile ducts in the liver.

The benefits of Obeticholic acid continue to outweigh the risks for adults with PBC who do not have advanced cirrhosis and have had an inadequate response to or are unable to tolerate UDCA.

### Review of risk

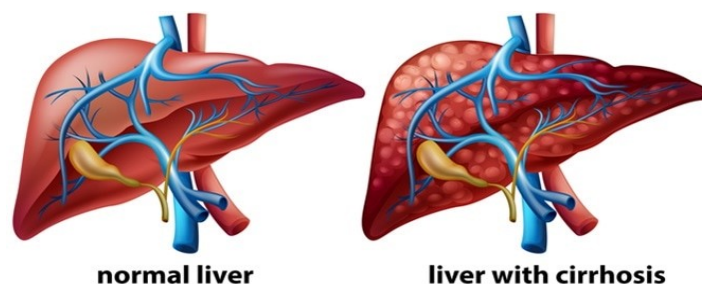
Restriction to the use of the liver disease medicine Obeticholic acid in patients having primary biliary cholangitis (PBC) with advanced cirrhosis of the liver was initiated because it can cause serious harm. PBC is a rare, chronic disease affecting the ducts in the liver that carry bile, which helps with digestion. Some PBC patients with cirrhosis who took Obeticholic acid, especially those with evidence of advanced cirrhosis, developed liver failure, sometimes requiring liver transplant.

### In reference to FDA; Advice for Patients:

- \* A restriction to the use of Obeticholic acid has been initiated in patients who have primary biliary cholangitis (PBC) with advanced liver cirrhosis because the medicine can cause serious harm such as severe liver damage or liver transplant.
- \* Talk to your health care professional about these new warnings if you have PBC with advanced cirrhosis and are taking Obeticholic acid. Do not stop taking your medicine without first talking to your health care professional so they can determine if an alternative treatment may be appropriate for you.

### In reference to FDA; Advice for Healthcare Professionals:

- \* A restriction to the use of Obeticholic acid has been initiated in patients who have primary biliary



ary cholangitis (PBC) with advanced liver cirrhosis because the medicine can cause serious harm in these patients.

- \* Advanced cirrhosis is defined as cirrhosis with current or prior evidence of hepatic decompensation (e.g., encephalopathy, coagulopathy) or portal hypertension (e.g., ascites, gastroesophageal varices, persistent thrombocytopenia).
- \* Obeticholic acid has been found to cause liver failure in some PBC patients with advanced cirrhosis, in some cases resulting in liver transplant.
- \* Determine whether a patient has advanced cirrhosis before starting Obeticholic acid because it is contraindicated in these patients.
- \* Reassess patients with laboratory and clinical assessments at regular intervals while to monitor for progression of PBC to determine whether the medicine needs to be discontinued. Permanently discontinue Obeticholic acid in patients with cirrhosis who progress to advanced cirrhosis.
- \* Also monitor patients for clinically significant liver-related adverse reactions that may manifest as development of acute-on-chronic liver disease with nausea, vomiting, diarrhea, jaundice, scleral icterus, and/or dark urine. Permanently discontinue Obeticholic acid in patients developing these symptoms.
- \* Educate patients on the symptoms of potential liver injury or advanced cirrhosis.

**References:** FDA ([Click here](#))





## Local Case Report



### Case Report from Sohag: Convulsions and Sudden Death associated with the use of Fluorouracil in different chemotherapy regimens

The regional center in Sohag received 5 cases with different Fluorouracil regimen; one of them manifested with convulsions and the others experienced convulsions and death. The cases presented as follows:

- \* Three cases suffered from convulsions then sudden death occurred.
- \* One case died suddenly
- \* One case suffered from convulsions, drowsiness and fall.

#### Background :

**Fluorouracil** is a member of the drug class antimetabolites and is used to treat Anal Cancer, Breast Cancer, Breast Cancer - Palliative, Cancer, Cervical Cancer, Colorectal Cancer, Pancreatic Cancer and Stomach Cancer.

"5-fluorouracil" is a fluorine-substituted derivative of uracil which inhibits DNA synthesis and is used as a chemotherapy drug in the treatment of cancer. <sup>(3)</sup>

**Convulsions:** It is a sudden attack of brain activity that causes you to lose control of your actions. You may have jerking of your face, arms, or legs. There are many different kinds of seizures. Seizures may last seconds or minutes and can happen to people of any age <sup>(1)</sup>

**Sudden death :** death occurring rapidly and generally unexpected due to cardiac causes (usually from a cardiac dysrhythmia or myocardial infarction) that occurs in a short time period (generally within 1 hour of symptom onset) in a person with known or unknown cardiac disease, but also from any cause of rapid death, for example, pulmonary embolus, stroke, ruptured aortic aneurysm, aortic dissection. <sup>(6)</sup>



#### Labeled information:

According to Fluorouracil 50 mg/ml Solution for Injection or Infusion Summary of product Characteristics (SmPC) it was stated under section: (4.8 Undesirable effects): "Cardiac disorders: Very rare: Cardiac arrest, sudden cardiac death & nervous system disorders: Very rare: Symptoms of leucoencephalopathy including convulsion or coma" <sup>(4)</sup>

According to Fluorouracil 50 mg/ml Solution for Injection or Infusion Summary of product Characteristics (SmPC) it was stated under section: (4.4 Special warnings and precautions for use): "Cardiotoxicity has been associated with fluoropyrimidine therapy, including cardiogenic shock, sudden death and electrocardiographic changes (including very rare cases of QT prolongation). These adverse events are more common in patients receiving continuous infusion of 5-fluorouracil rather than bolus injection." <sup>(4)</sup>





## Case Report from Sohag: Convulsions and Sudden Death associated with the use of Fluorouracil in different chemotherapy regimens-



### Recommendations for Healthcare Professionals :

1. Prior history of coronary artery disease may be a risk factor for cardiac adverse reactions. Care should therefore be exercised in treating patients who experienced chest pain during courses of treatment, or patients with a history of heart disease.
2. Cardiac function should be regularly monitored during treatment with fluorouracil.
3. In case of severe cardiotoxicity the treatment should be discontinued.
4. 5-Fluorouracil Therapeutic drug monitoring (TDM): TDM of 5-fluorouracil may improve clinical outcomes in patients receiving continuous 5-fluorouracil infusions by reducing toxicities and improving efficacy. AUC is supposed to be between 20 and 30mg x h/L.
5. Combination of 5-fluorouracil and folinic acid: The toxicity profile of 5-fluorouracil may be enhanced or shifted by folinic acid. When 5-fluorouracil and folinic acid are used in combination, the fluorouracil dosage must be reduced more in cases of toxicity than when fluorouracil is used alone.
6. Increased incidence of cerebral infarction has been reported in oropharyngeal cancer patients treated with fluorouracil and cisplatin.
7. Serious, potentially life-threatening mucositis may occur following co-administration of vinorelbine and 5-fluorouracil/folinic acid.
8. Fluorouracil is incompatible with folinic acid, Carboplatin, Cisplatin and Filgrastim.
9. Formulated solutions are alkaline and it is recommended that admixture with acidic drugs or preparations should be avoided.
10. The product should be discarded if it appears brown or dark yellow in solution.
11. If a precipitate has formed as a result of exposure to low temperatures, re-dissolve by heating to 60°C accompanied by vigorous shaking. Allow to cool to body temperature prior to use.

### References:

1. Drugs.com ([Click here](#))
2. Drugs.com ([Click here](#))
3. Lexico.com([Click here](#))
4. EMC ([Click here](#))
5. Medscape ([Click here](#))
6. Medical dictionary ([Click here](#))



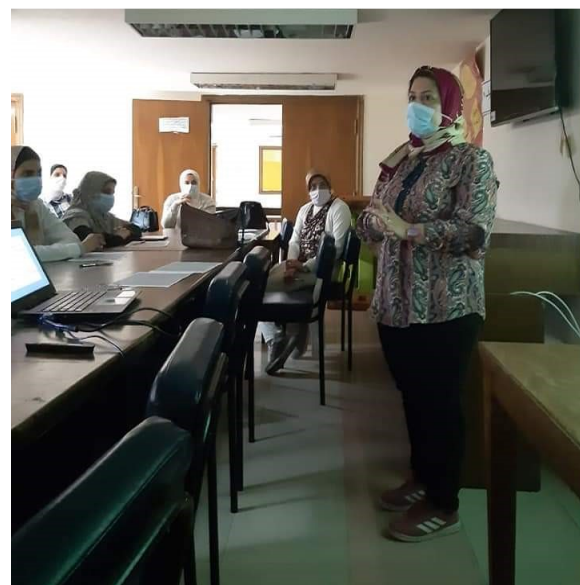
### Continuing Awareness Raising Sessions to Spread Pharmaceutical Vigilance Knowledge

In the context of the Egyptian Pharmaceutical Vigilance Center's mission for increasing awareness regarding drug safety and efficacy, Regional Centers have held Awareness Online sessions and workshops for Healthcare facilities in their governorates.

Alexandria Regional Center for Pharmacovigilance has conducted a lecture and a workshop in collaboration with the "Training Department at East Medical District", for the pharmacists of different healthcare units.

In addition; The Regional Center in Sohag has also conducted online awareness sessions for the focal points "pharmacists" working in the Vaccination Centers in Assuit Health Directorate in presence of Deputy Director of Pharmacists and for Qena Health Directorate pharmacists.

The sessions aimed to provide better pharmaceutical care to the patient and ensure a safe and effective medicine through raising awareness about monitoring drug safety and efficacy, reporting adverse events and other medicinal related problems of drugs, biologicals and Vaccines.





## One report counts

### A call for reporting

#### What is Pharmacovigilance

Pharmacovigilance (PV) is defined as the science and activities relating to the detection, assessment, understanding and prevention of adverse effects or any other drug-related problem.

#### What is the Egyptian Pharmaceutical Vigilance Center?

With the increasing demand for patient's safety which is becoming more stringent, . The Egyptian Pharmaceutical Vigilance Center was established to be responsible for the safety monitoring of the pharmaceutical products throughout its lifecycle and it is the regulatory authority regarding Pharmacovigilance and its applications .

EPVC monitors the safety of all types of pharmaceutical products, including human medicines, biological products, supplements, cosmetics, veterinary medicines, medical devices, Biocides and pesticides

Please remember that you can report safety information of medicines to EPVC using the following communication information:

#### Communication information

The Egyptian Drug Authority (EDA)

Pharmaceutical Care Administration

The Egyptian Pharmaceutical Vigilance Center (EPVC)



Address: 21 Abd El Aziz AlSoud Street. El-Manial, Cairo, Egypt, PO Box: 11451

Telephone: (+2)02 25354100/ (+2)02 23684288/ (+2)02 23648046/ (+2)02 23640368/ (+2)02 23648769

Extension: 1303

Fax: +202 – 23610497

Email: [pv@edaegypt.gov.eg](mailto:pv@edaegypt.gov.eg), [pv.report@edaegypt.gov.eg](mailto:pv.report@edaegypt.gov.eg)

Reporting link: [www.edaegypt.gov.eg](http://www.edaegypt.gov.eg)

<https://sites.google.com/view/epvc-reporting/healthcare-professional-public-adverse-drug-event-reporting/reporting-other-adverse-drug-event-cases>



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