ARMACO boletim de **IGILÂNCIA**

E-learning on Adverse Reactions



According to recent research by the **SCOPE** (Strengthening Collaboration for Operating Pharmacovigilance in Europe) project, educational materials on adverse drug reaction (ADR) reporting are not easily available. An e-learning module has been developed to fill that gap. It is available on the project's website and includes case studies. It aims to support healthcare professionals in obtaining clear information and guidance on ADR reporting.

This online course will also help healthcare professionals to understand the impact their ADR reports have on the safety assessment of medicinal products through the National Pharmacovigilance System.

The e-learning targets healthcare professionals at any stage of their careers, and is accredited by the European Accreditation Council for Continuing Medical Education (EACCME) for the EU and other countries, as a CME (continuing medical education) activity. Its completion awards 1 European credit (ECMC).

Click **here** now to start the course.



Loperamide

Serious adverse cardiac reactions from abuse and misuse





Quick Read

Very high doses of loperamide may be associated with the occurrence of serious adverse cardiac reactions, such as QT interval prolongation, torsades de pointes, other ventricular arrhythmias and even cardiac arrest. These reactions have been reported in the USA in cases of abuse and misuse. No cases have been reported in Portugal.

Loperamide is a GI motility modifying drug that belongs to the group of opioids. By binding to the μ receptors in the intestinal wall it inhibits the release of acetylcholine and prostaglandins and reduces propulsive peristalsis, thus prolonging intestinal transit time and increasing anal sphincter tonus, which in turn reduces faecal incontinence. Loperamide is used therefore, for the treatment of acute and chronic diarrhoea, as it decreases the number and volume of stools and increases its consistency.

Based on an alert from the US Food and Drug Administration (FDA), a safety signal (suspected problem) was raised in Europe regarding an association between abuse and misuse of loperamide in high doses and the occurrence of serious cardiac events.

Due to its high affinity to the gut wall and its significant first pass metabolism, therapeutic doses of loperamide hardly reach the systemic circulation at all. However, when used in doses higher than those recommended, loperamide can cause serious adverse cardiac events, namely QT interval prolongation, torsades de pointes or other ventricular arrhythmias, syncope and even cardiac

Most cases that were reported in the USA occurred in individuals who had intentionally misused or abused the medicine in an attempt to find relief for opioid withdrawal syndrome or to reach a state of euphoria. In Portugal no cases of abuse or misuse have been reported.

Once all available data had been assessed, the PRAC recommended an update of the information of products containing loperamide (see overleaf).

INDEX CARD

Director: Fátima Canedo

Editor: Rui Pombal

Assistant Editor: Leonor Nogueira Guerra

Contributors: Ana Sofia Martins, António Leandro Ponte, Cristina Mousinho, Fátima Bragança, Fátima Hergy, Leonor Nogueira Guerra, Magda Pedro, Márcia Silva, Silvia Duarte, Vanda Araújo

Publishing Assistant: Inocência Pinto

Advisory Board: Conselho Diretivo do INFARMED, I.P. – Comissão de Avaliação de Medicamentos INFARMED – Autoridade Nacional do Medicamento e Produtos de Saúde, I.P. Parque de Saúde de Lisboa, Av. do Brasil, N.º 53, 1749-004 Lisboa

Phone: +351 217 987 100 E-mail: infarmed@infarmed.pt

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Loperamide

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Summary of product characteristics

4.4. Special warnings and precautions for use

Cardiac events including QT prolongation and torsades de pointes have been reported in association with overdose. Some cases had a fatal outcome (see section 4.9). Patients should not exceed the recommended dose and/or the recommended duration of treatment.

4.9. Overdose

In individuals who have ingested overdoses of loperamide HCl, cardiac events such as QT interval prolongation, torsades de pointes, other serious ventricular arrhythmias, cardiac arrest and syncope have been observed (see section 4.4). Fatal cases have also been reported.

5.3. Preclinical safety data

Non-clinical in vitro and in vivo evaluation of loperamide indicates no significant cardiac electrophysiological effects within its therapeutically relevant concentration range and at significant multiples of this range (up to 47-fold). However, at extremely high concentrations associated with overdoses (see section 4.4), loperamide has cardiac electrophysiological actions consisting of inhibition of potassium (hERG) and sodium currents, and arrhythmias.

Beatriz Tavares da Costa

ADRs in the Literature

Antidepressants in pregnancy not associated with autism spectrum disorders



A retrospective cohort study (Brown HK et al, 2017), within the scope of the public provincial health system of Ontario (Canada), included children born to mothers who received prescriptions of serotoninergic antidepressants while pregnant between 2002 and 2010. This cohort of newborns corresponds to 4.2% of all births in that period. The children were followed up until early 2014.

No statistically significant association was found between exposure to those drugs in pregnancy and occurrence of **autism spectrum** disorders, namely when compared with children born to non-exposed mothers.

In another retrospective cohort study involving over a million and a half Swedish newborns whose mothers had taken antidepressants during the first trimester of pregnancy, multiple statistical and methodological approaches to adjust for confounding factors led the authors to conclude that there was an association between exposure to antidepressants in the first trimester and a **small increase in the risk of premature birth** (odds ratio 1.3 in the comparison between siblings analysis). However, no association was found with a risk of **small for gestational age babies** or later occurrence of **autism** spectrum or **hyperactivity / attention deficit disorders**.

Association Between Serotonergic Antidepressant Use During Pregnancy and Autism Spectrum Disorder in Children. Brown HK et al. JAMA. 2017;317(15):1544-1552.

Associations of Maternal Antidepressant Use During the First Trimester of Pregnancy With Preterm Birth, Small for Gestational Age, Autism Spectrum Disorder, and Attention-Deficit/Hyperactivity Disorder in Offspring.

Educational Materials published in the **Infomed** product information webpage



Medicinal product (DCI)	Click on the links (in Portuguese)
Cerdelga (eliglustat)	Educational materials for healthcare professionals
	Guia para o prescritor – 1.ª versão
	For paediatricians, haematologists, internists, neurologists and hepatologists (gastroenterologists).
	Educational materials for patients
	Cartão de alerta do doente – 1.ª versão
	Published on 28-04-2017
Erivedge (vismodegib)	Educational materials for healthcare professionals
	Cartão de informação de Erivedge® para o profissional de saúde – 2.ª Versão
	Erivedge: Formulário de Notificação de Gravidez – 2.ª Versão
	<u>Programa de Prevenção de Gravidez de Erivedge®: Informação para os médicos prescritores – 2.ª Versão</u>
	For physician specialists in dermatology, oncology, plastic surgery and radiotherapy.
	Educational materials for patients
	Erivedge: Cartão de informação para o doente – 2.ª Versão
	Formulário de Verificação de Aconselhamento de Erivedge – 2.ª Versão
	Programa de Prevenção de Gravidez de Erivedge®: Informação importante sobre a
	prevenção de gravidez e contraceção para mulheres e homens – 2.ª Versão
	To be handed out to patients by hospital doctors or pharmaceutical services.
	Published on 28-04-2017
Valdoxan (agomelatine)	Educational materials for healthcare professionals
	Valdoxan – Informação de Segurança para os Profissionais de Saúde:
	Monitorização da função hepática – 6.ª Versão
	For psychiatrists, neurologists, internists and family doctors.
	Published on 19-04-2017
Vpriv (velaglucerase alfa)	Educational materials for healthcare professionals
	Guia para Profissionais de Saúde que tratam doentes com a Doença de
	Gaucher – 1.ª Versão
	For doctors who prescribe or may potentially prescribe this medicinal product, namely paediatricians, haematologists, gastroenterologists, internists, and
	pharmacists involved in the treatment of haemophilia.
	Educational materials for patients
	Manual para doentes com doença de Gaucher que recebem VPRIV® por perfusão no domicílio: Risco de reações relacionadas com a perfusão, incluindo reações de hipersensibilidade do tipo alérgico no enquadramento domiciliar – 1.ª Versão
	To be handed out to patients by hospital doctors or pharmaceutical services.
	Published on 10-04-2017

Communications to Healthcare Professionals published on the Infarmed <u>website</u>



Medicinal product (DCI) Click on topic for details (in Port	tuguese)
(trastuzumab) the frequency and seriousness of congestive heart failure For physician specialists in oncolog and internal medicine, who are in experienced in the use of anti-HER2	iac monitoring during therapy to reduce of left ventricular dysfunction and gy, radiotherapy, general surgery, gynaecology, in charge of senology services and who are 2 therapies.
Published on 07-04-2017	
Lovenox Harmonization of expressions of units (IU) of anti-Xa activity and	of expressed dosage, both in international in milligrams (mg)
1 mg of enoxaparin sodiu	
is equivalent to 100 UI of	anti-Xa activity
	es for the treatment of deep venous ulmonary embolism (PE) and use in irment
internal medicine, cardiology, ha gynaecology, intensive care med technical heads of community a national hospital nursing services.	I practice/family medicine, orthopaedic surgery, sematology, surgery, neurology, anaesthetics, dicine, pneumology, immunology, oncology, nd hospital pharmacies, and head nurses of
gynaecology, intensive care med technical heads of community a	dicine, pneumology, imi

Compiled by Magda Pedro

Wh	at do they mean?
ADR	Adverse Drug Reaction
EMA	European Medicines Agency
МА	Marketing Authorization
PIL	Patient Information Leaflet
PRAC	Pharmacovigilance Risk Assessment Committee (EMA)
SmP	C Summary of Product Characteristics