SPEVIGO (Spesolimab)
Konzentrat zur Herstellung einer Infusionslösung
ZL-Nr.: 68625

Public Risk Management Plan (RMP) Summary

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The Risk Management Plan (RMP) is a comprehensive document submitted as part of the application dossier for market approval of a medicine. The RMP summary contains information on the medicine's safety profile and explains the measures that are taken in order to further investigate and follow the risks as well as to prevent or minimise them. The RMP summary of Spevigo is a concise document and does not claim to be exhaustive. As the RMP is an international document, the summary might differ from the “Arzneimittelinformation / Information sur le médicament” approved and published in Switzerland, e.g. by mentioning risks occurring in populations or indications not included in the Swiss authorization.
Please note that the reference document which is valid and relevant for the effective and safe use of Spevigo in Switzerland is the “Arzneimittelinformation/ Information sur le médicament” (see www.swissmedic.ch) approved and authorized by Swissmedic.

Boehringer Ingelheim (Schweiz) GmbH is fully responsible for the accuracy and correctness of the content of the published summary RMP of Spevigo.

SUMMARY OF RISK MANAGEMENT PLAN FOR SPEVIGO (SPESOLIMAB)

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

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

This summary of the RMP for Spevigo should be read in the context of all this information including the assessment report of the evaluation and its plain-language summary, all which is part of the European Public Assessment Report (EPAR).

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

I. THE MEDICINE AND WHAT IT IS USED FOR

Spevigo is authorised as monotherapy for treatment of flares in adult patients with generalized pustular psoriasis (see SmPC for the full indication). It contains spesolimab as the active substance and it is given by i.v. infusion (concentrate for solution for infusion, 450 mg).

Further information about the evaluation of Spevigo's benefits can be found in Spevigo's EPAR, including in its plain-language summary, available on the EMA website, under the medicine's webpage.

II. RISKS ASSOCIATED WITH THE MEDICINE AND ACTIVITIES TO MINIMISE OR FURTHER CHARACTERISE THE RISKS

Important risks of Spevigo, together with measures to minimise such risks and the proposed studies for learning more about Spevigo'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 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 Spevigo is not yet available, it is listed under 'missing information' below.

II.A List of important risks and missing information

Important risks of Spevigo are risks that need special risk management activities to further investigate or minimise the risk, so that the medicinal product can be safely administered. 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 Spevigo. 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	None
Important potential risks	Serious or opportunistic infections
	Systemic hypersensitivity reaction
	Malignancy
	Peripheral neuropathy
Missing information	Pregnant or breast-feeding women

II.B Summary of important risks

Important identified risks
None

Important potential risks

Serious or opportunistic infections	
Evidence for linking the risk to the medicine	No increased occurrence observed in clinical trials with spesolimab.
Risk factors and risk groups	Increased age, impaired immune function, comorbidities, and duration of exposure to and number of concomitant immunosuppressive therapies.
Risk minimisation measures	Routine risk minimisation measures: EU-SmPC sections 4.3, 4.4 PL section 2 Prescription only medicine, administration in a healthcare setting by physicians experienced in the management of patients with inflammatory skin diseases Additional risk minimisation measures: None
Additional pharmacovigilance activities	Additional pharmacovigilance activities: PASS 1368-0128 See section II.C of this summary for an overview of the post-authorisation development plan.
Systemic hypersensitivity reaction	
Evidence for linking the risk to the medicine	General risk from proteins to cause hypersensitivity reactions. As the antibody is humanised, the risk for hypersensitivity reactions (including DRESS) in patients treated with spesolimab is considered low. Hypersensitivity events observed in trial 1368-0013 were not related to spesolimab treatment.
Risk factors and risk groups	Risk groups or risk factors are unknown. Potential intrinsic risk for spesolimab to induce a T-cell humoral immune response.
Risk minimisation measures	Routine risk minimisation measures: EU-SmPC sections 4.3, 4.4 PL section 2 Prescription only medicine, administration in a healthcare setting by physicians experienced in the management of patients with inflammatory skin diseases Additional risk minimisation measures: None

Additional pharmacovigilance activities	Additional pharmacovigilance activities: PASS 1368-0128 See section II.C of this summary for an overview of the post-authorisation development plan.
Malignancy	
Evidence for linking the risk to the medicine	Clinical data on malignancy associated with IL-36R inhibition is limited by duration and number of treated individuals. In related mechanisms, meta-analyses of cancer incidence among patients with immune suppression therapy (e.g. TNFs, methotrexate) did not yield clear correlation between tumour incidence and therapies not intended to completely ablate immune function.
Risk factors and risk groups	Tumour location, genetic susceptibility, alcohol consumption, smoking, obesity, increased age, race, family history, exposure to chemicals or UV (e.g. PUVA treatment for psoriasis) or other substances, chronic inflammation, immunosuppression, infectious agents, radiation
Risk minimisation measures	Routine risk minimisation measures: Prescription only medicine, administration in a healthcare setting by physicians experienced in the management of patients with inflammatory skin diseases Additional risk minimisation measures: None
Additional pharmacovigilance activities	Additional pharmacovigilance activities: PASS 1368-0128 See section II.C of this summary for an overview of the post-authorisation development plan.
Peripheral neuropathy	
Evidence for linking the risk to the medicine	In preclinical toxicity studies with a surrogate antibody, no histopathological changes were noted in the nervous system. Cases of peripheral neuropathy reported in clinical trials were not assessed as related to spesolimab.
Risk factors and risk groups	Risk factors and risk groups are unknown.
Risk minimisation measures	Routine risk minimisation measures: EU-SmPC section 4.4 PL section 2 Prescription only medicine, administration in a

	healthcare setting by physicians experienced in the management of patients with inflammatory skin diseases Additional risk minimisation measures: None
Additional pharmacovigilance activities	Additional pharmacovigilance activities: PASS 1368-0128 See section II.C of this summary for an overview of the post-authorisation development plan.

Missing information

Pregnant or breast-feeding women	
Risk minimisation measures	Routine risk minimisation measures: EU-SmPC section 4.6 PL section 2 Prescription only medicine, administration in a healthcare setting by physicians experienced in the management of patients with inflammatory skin diseases Additional risk minimisation measures: None

II.C Post-authorisation development plan

II.C.1 Studies which are conditions of the marketing authorisation

SOB 1368-0120
Purpose of the study: To evaluate efficacy and safety and the impact of immunogenicity on efficacy, safety, and pharmacokinetics of spesolimab i.v. in treatment of patients with GPP presenting with a recurrent flare following their initial GPP flare treatment with spesolimab i.v.

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

PASS 1368-0128
Purpose of the study: A 5-year active surveillance, post-authorisation safety study to characterise the safety of spesolimab for flare treatment in patients with GPP

ABBREVIATIONS

DRESS	Drug reaction with eosinophilia and systemic symptoms
EMA	European Medicines Agency
EPAR	European Public Assessment Report
EU	European Union
GPP	Generalized pustular psoriasis
i.v.	Intravenous
IL-36 (R)	Interleukin 36 (receptor)
PASS	Post-authorisation safety study
PL	Package Leaflet
PUVA	Combination treatment of psoralen and UVA (long wave UV radiation)
RMP	Risk Management Plan
SmPC	Summary of Product Characteristics
SOB	Specific Obligation
TNF	Tumour necrosis factor
UV	Ultraviolet