RYSTIGGO®

SUMMARY OF RISK MANAGEMENT PLAN

Version 1.0

Active substance(s) (INN or common name):	Rozanolixizumab
Product(s) concerned (brand name(s)):	RYSTIGGO ®
Marketing authorization holder:	UCB Pharma-AG
Version number :	2.0 (summary of EU RMP v2.0 , dated 04-Nov-2024)
Date of final sign off :	10-Dec-2024

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 Rystiggo® 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 Rystiggo® in Switzerland is the "Arzneimittelinformation / Information sur le médicament" (see www.swissmedic.ch) approved and authorized by Swissmedic. UCB-Pharma AG is fully responsible for the accuracy and correctness of the content of the published summary RMP of Rystiggo®.

Date: 10 December 2024 20241210rmp summary-v1.0-pxl-ch

Contents

PART I: THE MEDICINE AND WHAT IT IS USED FOR

Pharmaceutical form(s) and strength(s)	Current: Solution for injection 140mg/mL Each 2mL vial contains 280mg of rozanolixizumab
	Proposed: Not Applicable
Is/will the product be subject to additional monitoring in the EU?	Yes
Is/will the product be subject to additional monitoring in Switzerland ?	Yes

Rystiggo is authorized as an add-on to standard therapy for the treatment of generalized myasthenia gravis (gMG) in adult patients who are anti-acetylcholine receptor or anti-muscle specific kinase antibody positive (see SmPC Section 4.1 for the full indication). Rystiggo contains rozanolixizumab as the active substance and it is given subcutaneously via infusion.

Further information about the evaluation of Rystiggo's benefits can be found in Rystiggo's EPAR, including in its plain-language summary, available on the European Medicine Agency (EMA) website, under the medicine's webpage: Rystiggo | European Medicines Agency (EMA).

PART II: RISKS ASSOCIATED WITH THE MEDICINE AND ACTIVITIES TO MINIMIZE OR FURTHER CHARACTERISE THE RISKS

Important risks of Rystiggo, together with measures to minimize such risks and the proposed studies for learning more about Rystiggo 's risks, are outlined below.

Measures to minimize 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 (eg, with or without prescription) can help to minimize its risks.

Together, these measures constitute *routine risk minimization measures*.

In addition to these measures, information about adverse reactions is collected continuously and regularly analysed, including periodic safety update report assessment 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 Rystiggo is not yet available, it is listed under 'missing information' below.

2.1 List of important risks and missing information

Important risks of Rystiggo are risks that need special risk management activities to further investigate or minimize 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 Rystiggo. 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 (eg, on the long-term use of the medicine).

Table 2–1: List of important risks and missing information

List of important risks and missing information	
Important identified risks	Aseptic meningitis (drug-induced aseptic meningitis [DIAM])
Important potential risks	Serious infections
Missing information	Use during pregnancy and lactation
	Long-term safety

2.2 Summary of important risks

Table 2–2: Summary of important risks

Important identified risk: aseptic meningitis (DIAM)	
Evidence for linking the risk to the medicine	Aseptic meningitis (DIAM) has been reported following rozanolixizumab treatment with subsequent recovery without sequelae. The mechanism of aseptic meningitis (DIAM) with rozanolixizumab is unknown.
Risk factors and risk groups	Patients with chronic migraine are at higher risk of developing DIAM, given the experience seen with IVIg (Yelehe-Okouma et al, 2018, Sekul et al, 1994).
Risk minimization measures	Routine risk minimization measures: − SmPC Section 4.2 (Posology and method of administration) − SmPC Section 4.4 (Special warnings and precautions for use) − SmPC Section 4.8 (Undesirable effects) − PL Section 2 (What you need to know before you use Rystiggo). SmPC Section 4.2 (Posology and method of administration): Treatment should be initiated and supervised by specialist healthcare professionals experienced in the management of patients with neuromuscular or neuro-inflammatory disorders. SmPC Section 4.4 (Special warnings and precautions for use): Recommendation for monitoring for signs of aseptic meningitis and performing diagnostic workup and treatment. PL Section 2 (What you need to know before you use Rystiggo): Recommendation to inform the doctor of any signs or symptoms of aseptic meningitis. Additional risk minimization measures: None
Additional pharmacovigilance activities	Additional pharmacovigilance activities: Real-world rozanolixizumab safety study using secondary data (PASS MG0027) See Section 2.3 of this summary for an overview of the postauthorization development plan.

Table 2–2: Summary of important risks

Important potential risk: serious infections	
Evidence for linking the risk to the medicine	Rozanolixizumab blocks the activity of FcRn and accelerates the catabolism of IgG antibodies, leading to a transient decrease of IgG levels, which may increase the risk of infections. Rozanolixizumab has no impact on other immunoglobulin isotypes (eg, IgM, IgA) or on the function of T-and B-cells. Following repeated cyclic treatment in Phase III studies in gMG, infections were reported in 45.2% of patients treated with rozanolixizumab and no increase in the incidence of infections was observed with each subsequent cycle. Most infections reported by the patients treated with rozanolixizumab were nonserious, mild to moderate, and did not lead to permanent study discontinuation. Serious infections were reported in 4.3% of patients treated with rozanolixizumab. There were no opportunistic infections reported in MG0003 or safety pools S2 and S1.
Risk factors and risk groups	Muscle weakness, autoimmune disease mechanism and immunosuppressive treatment are the risk factors for infection in people with MG (Gilhus et al, 2018). Thymus disorder or thymectomy could also predispose to infections or to infection severity. Rurality, COPD, hypertension, prior infection, frailty and comorbidity burden have been deemed as risk factors for infection amongst patients with MG (Kassardjian et al, 2020).
Risk minimization measures	Routine risk minimization measures: − SmPC Section 4.2 (Posology and method of administration) − SmPC Section 4.4 (Special warnings and precautions for use) − PL Section 2 (What you need to know before you use Rystiggo) SmPC Section 4.2 (Posology and method of administration): Treatment should be initiated and supervised by specialist healthcare professionals experienced in the management of patients with neuromuscular or neuro-inflammatory disorders. SmPC Section 4.4 (Special warnings and precautions for use): Recommendation for monitoring of infections and measures related to infections. PL Section 2 (What you need to know before you use Rystiggo): Recommendation to inform the doctor of any infections before starting or during treatment with rozanolixizumab. Additional risk minimization measures: None

Table 2–2: Summary of important risks

Important potential risk: serious infections	
Additional pharmacovigilance activities	Additional pharmacovigilance activities: Real-world rozanolixizumab safety study using secondary data (PASS MG0027) See Section 2.3 of this summary for an overview of the postauthorization development plan.
Missing information: Use during pregnancy	
Risk minimization measures	Routine risk minimization measures: − SmPC Section 4.2 (Posology and method of administration) − SmPC Section 4.6 (Fertility, pregnancy, and lactation) − PL Section 2 (What you need to know before you use Rystiggo) SmPC Section 4.2 (Posology and method of administration): Treatment should be initiated and supervised by specialist healthcare professionals experienced in the management of patients with neuromuscular or neuro-inflammatory disorders. Additional risk minimization measures: None
Additional pharmacovigilance activities	Additional pharmacovigilance activities: Real-world rozanolixizumab safety study using secondary data (PASS MG0027). See Section 2.3 of this summary for an overview of the postauthorization development plan.
Missing information: Long-term safety	
Risk minimization measures	Routine risk minimization measures: SmPC Section 4.2 (Posology and method of administration): Treatment should be initiated and supervised by specialist healthcare professionals experienced in the management of patients with neuromuscular or neuro-inflammatory disorders. Additional risk minimization measures: None
Additional pharmacovigilance activities	Additional pharmacovigilance activities: Real-world rozanolixizumab safety study using secondary data (PASS MG0027) See Section 2.3 of this summary for an overview of the postauthorization plan.

COPD=chronic obstructive pulmonary disease; DIAM=drug-induced aseptic meningitis; Ig=immunoglobulin; MG=myasthenia gravis; PASS=post-authorization safety study; PL=package leaflet; SmPC=summary of product Characteristics

2.3 Post-authorization development plan

2.3.1 Studies which are conditions of the marketing authorization

There are no studies which are conditions of the marketing authorization or specific obligation of Rystiggo.

2.3.2 Other studies in post-authorization development plan

Additional pharmacovigilance activities include the following studies:

2.3.2.1 Real-world rozanolixizumab safety study using secondary data in patients with MG (MG0027)

• **Study short name:** Real-world rozanolixizumab safety study using secondary data in patients with myasthenia gravis (MG) (MG0027).

Purpose of the study: The aim of this study is to investigate the long-term safety of rozanolixizumab. Serious infections and serious opportunistic infections will be described and gMG patients exposed to rozanolixizumab and exposed to other gMG treatments (not exposed to rozanolixizumab) will be compared. A safety outcome with low incidence during the clinical development such as nonbacterial meningitis (as a proxy for drug induced aseptic meningitis), will also be assessed. Generalized myasthenia gravis treatment usage in real-world settings and the safety profile of rozanolixizumab used during pregnancy will be described.