

1. Abstract

Title

Final Report: Post-Authorisation Safety Study of Esbriet (Pirfenidone):

A Prospective Observational Registry to Evaluate Long-Term Safety in a Real-World Setting (PASSPORT), April 2017


on behalf of Roche Safety Science
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Keywords

Registry, PASS, Observational, Long-term Safety

Rationale and Background

This registry sought to evaluate the long-term safety profile of Esbriet treatment under real-world conditions. This registry complied with the requirement of a PASS, and as a post-authorization commitment, was approved by the CHMP.

Research Question and Objectives

To evaluate the long-term safety profile of Esbriet in patients with IPF, and to monitor for known and any potentially newly emerging risks associated with treatment with Esbriet under real-world conditions.

Amendment and Updates to Protocol

Protocol Amendment 1: blood dyscrasias was added to important potential risks.

Protocol Amendment 2: additional data to be collected on concomitant treatment with Warfarin.

Protocol Amendment 3: angioedema was added to the list of important potential risks.

Protocol Amendment 4: the study sponsor and MAH were changed to Roche Registration Limited.

Study Design & Setting

This product registry was a multicenter, long-term, prospective, observational study. Patients from select European Union countries received Esbriet at the discretion of their physicians under real-world conditions. Each patient was followed until discontinuation of the study or up to a maximum of 2 years. The registry enrolled 1009 adult patients from approximately 100 pulmonary clinics.

Variables and Data Sources

ADRs were reported at baseline and every 3 months thereafter for the duration of the patients' participation in study:

- Serious and Non-Serious Adverse Drug Reactions of Special Interest
- Other Serious and Non-Serious Adverse Drug Reactions Related and judged by the investigator to be otherwise clinically significant.

Results

A total of 1006 patients received the prescription for the indication of IPF. Patients discontinued from the study due to ADRs known to be associated with Esbriet (27%), and due to death (15.9%) or other factors anticipated in the elderly IPF population (12.9%).

The key findings of this long term follow up study of Esbriet use under real world conditions are:

- The safety experience across all analyses conducted was consistent with the known safety profile of Esbriet. This includes ADRs, ADRSIs, and all pre-specified subgroups.
- There was no new safety signal associated with Esbriet exposure that emerged over the long-term follow-up of the patients in these subgroups.

Discussion

This study was a long-term prospective observational registry of patients taking Esbriet. The inclusion and exclusion criteria were minimally restrictive, allowing for a broader patient population, with patients at multiple sites across multiple countries in Europe, each of which may have had different standards for treatment under real-world conditions.

Conclusions

The results of this long-term prospective study in real-world populations remain consistent with the known safety profile of Esbriet and/or the underlying presentation and progression of patients with IPF and/or the age-related underlying comorbidities and risk profile of this target population. They strengthen the current understanding of the safe use of Esbriet in subgroups previously deemed to have missing information.

The overall benefit-risk profile of Esbriet remains unchanged