

Clinical Study Synopsis for Public Disclosure

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A synopsis is not intended to provide a comprehensive analysis of all data currently available regarding a particular drug. More current information regarding a drug is available in the approved labeling information which may vary from country to country..

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Boehringer Ingelheim Korea Re-examination Report

Study No.: 1199-0417

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SYNOPSIS

Study No.:	Version/Revision:	Date of Version/Revision:
1199-0417	1.0	06JAN2023
A Regulatory Required Non-Interventional Study to Monitor the Safety and Effectiveness of Ofev [®] (Nintedanib 150mg/100mg BID) in Korean Patients		
Ofev [®] , safety, efficacy, post-marketing surveillance, Korean		
As per the regulation, a non-interventional study (NIS) should be conducted upon approval of a new chemical entity (NCE). NIS can provide supplementary data to monitor the safety of NCE in a real world situation and additional data from clinical studies. Even if the safety information of Ofev [®] was confirmed in the clinical study setting, it can be administered to more diverse patients in a real world situation compared to patients limited to studies.		
The study aims to monitor the safety profile and effectiveness of Ofev [®] in Korean patients in routine clinical settings.		
Non-interventional, multi-center study in Korea based on new collected data		
 (or) I inters (or) I lung Inclusion Criteria Patieria approx Patieria Patieria Exclusion Criteria Patieria Patieria Exclusion Criteria Intersolution Intersolu	Patients diagnosed with stitial lung disease Patients diagnosed with diseases with a progress teria: nts who have started or oved label in Korea nts who have signed or <u>iteria:</u> nts for whom nintedanic cal label of Ofev [®] Patients with known hypor or soya, or to any of the Women who are pregna	a systemic sclerosis associated th chronic fibrosing interstitial assive phenotype a Ofev [®] in accordance with the a the data release consent form the is contraindicated according persensitivity to Ofev [®] , peanut e excipients
	1199-0417 A Regulatory Safety and B BID) in Kore Ofev®, safety As per the re conducted up provide supp world situation the safety info setting, it can world situation The study ain Ofev® in Kor Non-intervent collected data Diagnosis • Patie • (or) I inters • (or) I lung Inclusion Cri • Patie appro • Patie to loo I. H	1199-0417 1.0 A Regulatory Required Non-Intervers Safety and Effectiveness of Ofevers BID) in Korean Patients Ofev®, safety, efficacy, post-marked As per the regulation, a non-intervers conducted upon approval of a new conducted upon approval approved was setting, it can be administered to new conducted upon approval approved upon approven approved upone

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Total Number of Subjects	70 (safety assessment: 65, efficacy assessment: 20)	
Total Number of Subjects:		
Endpoints and Sources:	Endpoints:	
	Safety Endpoints	
	All adverse events (AEs) that occurred in patients who received at least one dose of Ofev [®] were recorded.	
	Efficacy Endpoints	
	1. Main Endpoint	
	1) Change from baseline in forced vital capacity (FVC, mL) at Weeks 12 and 24 after treatment	
	2. Other Endpoints	
	1) Change from baseline in FVC % predicted at Weeks 12 and 24 after treatment	
	2) Overall efficacy assessment result at Weeks 12 and 24 after treatment	
	Data source: Study of sites collecting new data	
Results:	During the re-examination period, the incidence of AEs reported in 65 subjects assessed for safety was 55.38% (36/65 subjects, 76 events). Among them, the incidences of adverse drug reactions (ADRs) for which the causal relationship to the drug cannot be ruled out, serious adverse events (SAEs), and serious adverse drug reactions (SADRs) were 36.92% (24/65 subjects, 40 events), 24.62% (16/65 subjects, 23 events), and 1.54% (1/65 subject, 1 event), respectively. The incidences of unexpected adverse events (UAEs) and unexpected adverse drug reactions (UADRs) were 36.92% (24/65 subjects, 38 events) and 12.31% (8/65 subjects, 8 events), respectively. The incidence of AEs leading to discontinuation of Ofev [®] was 12.31% (8/65 subjects, 13 events), and the incidence of AEs leading to reintroduction after discontinuation of Ofev [®] was 3.08% (2/65 subjects, 4 events). According to the post-marketing surveillance of Ofev [®] , no significant safety signal was observed. Among 20 subjects assessed for efficacy, the mean (SD) changes in FVC (mL) and FVC % predicted between before and after administration of the drug for 18 subjects assessed at Week 12 after administration were -15.00 (270.73) mL (<i>p</i> -value=0.8170) and 0.26 (6.28) % (<i>p</i> -value=0.8622), respectively, showing no statistically significant change, and the mean (SD) changes in FVC (mL) and FVC % predicted between before and after administration of the drug for 10 subjects assessed at Week 24 after administration were -44.00 (299.49) mL (<i>p</i> -value=0.6533) and -0.31 (7.10) % (<i>p</i> -value=0.8933), respectively, showing no statistically significant change.	

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	According to the overall efficacy assessment result for 20 subjects included in the efficacy assessment, 30.00% (3/10 subjects) of 10 subjects assessed at Week 12 after administration were 'Improved', 60.00% (6/10 subjects) were 'Unchanged', and 10.00% (1/10 subject) was 'Aggravated', showing an effective rate of 30.00%, and according to the overall efficacy assessment result for 10 subjects assessed at Week 24 after administration, 40.00% (4/10 subjects) were 'Improved', 40.00% (4/10 subjects) were 'Aggravated', showing an efficacy rate of 40.00%.		
	According to the efficacy assessment, the efficacy rate was lower than 50% because only 'Improved' was assessed as effective as per the protocol for post-marketing surveillance. However, patients with the indications for Ofev [®] have in general a relentless decline in lung function that can be more or less rapid. Therefore, 'Unchanged' is considered to demonstrate the efficacy of the drug. Given that this drug reduces the rate of FVC decline, some 'Aggravated' cases can also be considered to demonstrate the efficacy.		
	Thus, the therapeutic effect of Ofev [®] in patients with idiopathic pulmonary fibrosis, chronic fibrosing interstitial lung diseases with a progressive phenotype, systemic sclerosis associated interstitial lung disease was assessed as effective.		
Conclusion:	The safety information collected during this re-examination period was confirmed to be consistent with the local label, and its efficacy was favorable in general. Thus, the benefits are determined to outweigh the risks. Spontaneous reporting and relevant study results will continue to be collected in the future to identify factors affecting the safety and efficacy, and every effort will be made to manage the safety.		
Marketing Authorization Holder:	Boehringer Ingelheim International GmbH		
Name and Affiliation of Investigators:	Study site Investigator Image: Study site Image: Study site Image: Study site Image		

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