Date:07-Oct-2015

Subject: Risks of Thyroid C-Cell Tumors and Acute Pancreatitis Associated with Saxenda®

Dear Healthcare Professional:

This letter is to remind you of important safety information about SAXENDA® (liraglutide [rDNA origin]) injection. SAXENDA® is indicated as an adjunct to a reduced-calorie diet and increased physical activity for weight management in adult patients with an initial Body Mass Index (BMI) of

- ≥ 30 kg/m² (obese), or
- ≥ 27 kg/m² to < 30 kg/m² (overweight) in the presence of at least one weightrelated comorbidity such as dysglycaemia (pre-diabetes or type 2 diabetes mellitus), hypertension, dyslipidaemia or obstructive sleep apnoea.

Treatment with Saxenda should be discontinued after 12 weeks on the 3.0 mg/day dose if patients have not lost at least 5% of their initial body weight.

You should note the following risks of SAXENDA®:

Risk of Thyroid C-Cell Tumors

- Non-lethal thyroid C-cell tumours were seen in two year carcinogenicity studies in rats and mice. In rats, a no observed adverse effect level (NOAEL) was not observed.
- These tumours were not seen in monkeys treated for 20 months.
- These findings in rodents are caused by a non-genotoxic, specific GLP-1 receptor-mediated mechanism to which rodents are particularly sensitive.
- The relevance for humans is likely to be low but cannot be completely excluded. No other treatment related tumours have been found.
- In clinical trials in type 2 diabetes, thyroid adverse events, including increased blood calcitonin, goitre and thyroid neoplasm have been reported in particular in patients with pre-existing thyroid disease. Cases of increased blood calcitonin were also observed in the weight management clinical trials. Liraglutide should therefore be used with caution in patients with thyroid disease.

Risk of Acute Pancreatitis

- Use of GLP-1 receptor agonists has been associated with the risk of developing acute pancreatitis. There have been few reported events of acute pancreatitis with liraglutide in clinical trials.
- Patients should be informed of the characteristic symptoms of acute pancreatitis.
- If pancreatitis is suspected, SAXENDA® should be discontinued.
- If acute pancreatitis is confirmed, SAXENDA® should not be restarted.
- Caution should be exercised in patients with a history of pancreatitis.

This information has been agreed with the Saudi Food and Drug Authority (SFDA).

Adverse Events

Novo Nordisk Gulf
Market Access, Regulatory Affairs and Pricing Department
P.O. Box 250151
11391-Riyadh
Saudi Arabia
Telephone: +966 11 462 1440
Direct dial: +966 554488433
Telefax: +966 11 4661170
E-mail: manr@novonordisk.com
Internet: www.novonordisk.com

Healthcare professionals should report any serious adverse events thought to be associated with SAXENDA® to the SFDA National Pharmacovigilance and Drug Safety Center (NPC) or Novo Nordisk Pharmacovigilance department by using one of the following methods of reporting:

- Fax: +966-11-205-7662
- Toll-free Number: 8002490000
- Email: npc.drug@sfda.gov.sa
- online: http://ade.sfda.gov.sa/

- Novo Nordisk Gulf
  P.O. Box 250151
  Riyadh 11391, Saudi Arabia
  Tel: +966 11 4621440 ext.: 345/245
  Fax: +966 11 4661170
  Email: nngulfsafety@novonordisk.com

Sincerely,

Dr. Mohammed Al-Nasser
Regulatory Affairs and Pricing Director

Novo Nordisk Gulf

002579718 1.0

Novo Nordisk Gulf
Market Access, Regulatory Affairs and Pricing Department
P.O. Box 250151
11391-Riyadh
Saudi Arabia
Telephone: +966 11 462 1440
Direct dial: +966 554488433
Telefax: +966 11 4661170
E-mail: manr@novonordisk.com
Internet: www.novonordisk.com