SFDA

Safety Communication

[11/04/2023]

New recommendations for reducing the risk of serious side effects associated with Janus kinase inhibitors in chronic inflammatory diseases.

The Saudi Food and Drug Authority (SFDA) would like to notify healthcare professionals about new recommendations to minimize the risks of serious side effects (cardiovascularevents, blood clots, cancer, serious infections and mortality) associated with the use of Janus Kinase (JAK) inhibitors to treat several chronic inflammatory disorders.

The recommendations are based on a review of available evidence, including the results of a clinical trial conducted by Ytterberg SR, et al [1] that involving the JAK inhibitor tofacitinib.

An increased incidence of cancer, cardiovascular events, serious infections, venous thromboembolism and mortality has been observed in patients with rheumatoid arthritis with certain risk factors using JAK inhibitors compared to Tumor Necrosis Factor Inhibitors.

JAK inhibitors should be used only when no suitable treatments alternatives exist in patients with certain risk factors; age≥65 years, current or past-long time smoking, or other cardiovascular or malignancy risk factors.

Patients with risk factors for blood clots in the lungs and deep veins (venous thromboembolism, VTE) other than those listed above should be advised to use JAK inhibitors with caution. Furthermore, doses should be decreased where possible in patients who are at risk of VTE, cancer or serious cardiovascular problems.

Advice for healthcare professionals:

- JAK inhibitors (tofacitinib, baricitinib and upadacitinib) should be used only when no suitable treatments alternatives exist in patients with certain risk factors; individuals

aged 65 and over, those at increased risk of major cardiovascular problems (such as heart attacks or strokes), those who smoke or have smoked for a considerable period of time, and those who are at greater risk of cancer. Cautious use of JAK inhibitors is also recommended in patients with known risk factors for VTE other than those listed above.

- If JAK inhibitors are needed in patients with these risk factors, a lower dose may be recommended depending on: the medicine, the indication and the specific risk factor.

- Advise the patients to contact their doctor immediately if they experience chest pain or tightness (which may spread to arms, jaw, neck and back), shortness of breath, cold sweat, light headedness, sudden dizziness, weakness in arms and legs or slurred speech.

- Healthcare professionals should discuss the risks associated with JAK inhibitors with their patients.
- It is recommended that healthcare professionals carry out periodic examinations of their patients' skin to check for skin cancer, particularly for patients at risk for skin cancer.
- Instruct the patients to wash their hands with soap and water after administration.
- Counsel the patient to be vigilant for signs of accidental exposure, and to seek medical attention should they occur.

- **Please look at the Summary of Product Characteristics (SPC) of the following products for further information.**

Generics Name	Trade Name	Dosage form	MAH
Tofacitinib	Xeljanz®	Tablet	PFIZER
Baricitinib	Olumiant®	Tablet	ELI LILLY
Upadacitinib	Rinvoq®	Tablet	AbbVie

Call for reporting:

The SFDA urges both healthcare professionals and patients to report ADRs related to use of any medication to the SFDA using the following contact information:

The National Pharmacovigilance Centre (NPC):

Fax: +966-11-205-7662

SFDA Call Center: 19999

E-mail: npc.drug@sfda.gov.sa

Website: https://ade.sfda.gov.sa

RMM:

Reference:

1. Ytterberg SR, et al. Cardiovascular and cancer risk with tofacitinib in rheumatoid arthritis. New Engl J Med 2022;386(4):316-326. doi:: https://www.nejm.org/doi/full/10.1056/NEJMoa2109927 .