

Date: Jan/ 2017

Direct Health Care Professional Communication

شركة أدوية الحكمة المكتب العلمي

Ketamine (Tekam®), Midazolam (Hikma Midazolam®) and Isoflurane (Floran®): safety communication regarding repeated or lengthy use of general anesthetic and sedation drugs during surgeries or procedures in children younger than 3 years or in pregnant women during their third trimester

Dear Healthcare professional,

Hikma Pharmaceuticals would like to inform you of the following

Summary:

- It was found that repeated or lengthy use of general anesthetic and sedation drugs during surgeries or procedures in children younger than 3 years or in pregnant women during their third trimester may affect the development of children's brains.
- As a risk minimization measure; kindly note that we are in the process of updating these products labels and we will continue to monitor the use of these drugs in children and pregnant women.

This information is being sent in agreement with the Saudi Food & Drug Authority.

Saudi Food and Drug Authority will continue to monitor safety information associated with the use of those products as it does for all medicinal products on the Saudi market, to identify and assess potential harms, and the SFDA will keep Healthcare providers updated.

Further information on the safety concern and the recommendations:

Published studies in pregnant animals and young animals have shown the use of general anesthetic and sedation drugs for more than 3 hours caused widespread loss of nerve cells in the brain. Studies in young animals suggest these changes result in long-term effects on the animals' behavior or learning³⁻²². Studies have also been conducted in children, some of which support findings from previous animal studies, particularly after repeated or prolonged exposure to these drugs early in life ²³⁻⁴⁵. All the studies in children had limitations, and it is unclear whether any negative effects seen in children's learning or behavior were due to the drugs or to other factors, such as the underlying medical condition that led to the need for the surgery or procedure.

Consistent with animal studies, recent human studies suggest that a single, relatively short exposure to general anesthetic and sedation drugs in infants or toddlers is unlikely to have negative effects on behavior or learning.



شركة أدوية الحكمة المكتب العلمي

Anesthetic and sedation drugs are necessary for infants, children, and pregnant women who require surgery or other painful and stressful procedures, especially when they face life-threatening conditions requiring surgery that should not be delayed. In addition, untreated pain can be harmful to children and their developing nervous systems.

Currently, Tekam® (Ketamine), Hikma Midazolam® (Midazolam) and Floran® (Isoflurane) are registered in Saudi Arabia and fall under this safety communication. We are in the process of updating these products labels and we will continue to monitor the use of these drugs in children and pregnant women.

We kindly ask you to balance the benefits of appropriate anesthesia in young children and pregnant women against the potential risks, especially for procedures that may last longer than 3 hours or if multiple procedures are required in children under 3 years.

Further information:

Tekam® is indicated:

- As the sole anesthetic agent for diagnostic and surgical procedures that do not require skeletal muscle relaxation.
- For short procedures; but it can be used, with additional doses, for longer procedures.
- For the induction of anesthesia prior to the administration of other general anesthetic agents.
- To supplement low-potency agents such as nitrous oxide.

Hikma Midazolam® is a short-acting sleep-inducing drug that is indicated: In adults

- Conscious sedation before and during diagnostic or therapeutic procedures with or without local anaesthesia
- Anaesthesia
 - Premedication before induction of anaesthesia
 - · Induction of anaesthesia
 - As a sedative component in combined anaesthesia
- Sedation in intensive care units

In children

- Conscious sedation before and during diagnostic or therapeutic procedures with or without local anaesthesia
- Anaesthesia
 - · Premedication before induction of anaesthesia
- Sedation in intensive care units

Isoflurane is indicated as a general anaesthetic for use in patients of all ages.

هاتف : ۱۳۸۱۱۹۵ ۲ ۲۲۹۰ فاكس : ۱۵۸۱۷۱۰۲ ۲۹۹۰ المنطقة الصناعية بيسادر وادي السيسر ص.ب ۱۸۲۲۰۰ عمان ، الأردن



شركة أدوية الحكمة المكتب العلمي

Call for reporting:

Healthcare professionals are encouraged to report any adverse reactions related to mentioned medications to the National Pharmacovigilance and Drug Safety Centre (NPC).

The National Pharmacovigilance and Drug Safety Centre (NPC)

Fax: +966-11-205-7662 Toll free phone: 8002490000 E-mail: npc.drug@sfda.gov.sa Website: https://ade.sfda.gov.sa/

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Annexes

Literature references:

- 1. Safety communication received from the SFDA. Received on 26-Dec-2016.
- 2. Safety communication published by the US-FDA. Published on 14-Dec-2016. Available at: http://www.fda.gov/drugs/drugsafety/ucm532356.htm
- 3. Brambrink AM, Back SA, Riddle A, Gong X, Moravec MD, Dissen GA, et al. Isoflurane-induced apoptosis of oligodendrocytes in the neonatal primate brain. Ann Neurol 2012;72:525-35.
- 4. Brambrink AM, Evers AS, Avidan MS, Farber NB, Smith DJ, Martin LD, et al. Ketamine-induced neuroapoptosis in the fetal and neonatal rhesus macaque brain. Anesthesiology 2012;116:372-84.
- Briner A, De Roo M, Dayer A, Muller D, Habre W, Vutskits L. Volatile anesthetics rapidly increase dendritic spine density in the rat medial prefrontal cortex during synaptogenesis. Anesthesiology 2010;112:546-56.
- 6. Briner A, Nikonenko I, De Roo M, Dayer A, Muller D, Vutskits L. Developmental Stage-dependent persistent impact of propofol anesthesia on dendritic spines in the rat medial prefrontal cortex. Anesthesiology 2011;115:282-93.
- Creeley C, Dikranian K, Dissen G, Martin L, Olney J, Brambrink A. Propofol-induced apoptosis of neurones and oligodendrocytes in fetal and neonatal rhesus macaque brain. Br J Anaesth 2013;110 Suppl 1:i29-38.
- 8. Creeley CE, Dikranian KT, Dissen GA, Back SA, Olney JW, Brambrink AM. Isoflurane-induced apoptosis of neurons and oligodendrocytes in the fetal rhesus macaque brain. Anesthesiology 2014;120:626-38.



شركة أدوية الحكمة

الكتب العلم

- De Roo M, Klauser P, Briner A, Nikonenko I, Mendez P, Dayer A, et al. Anesthetics rapidly promote synaptogenesis during a critical period of brain development. PLoS One 2009;4:e7043
- 10. Haberny KA, Paule MG, Scallet AC, Sistare FD, Lester DS, Hanig JP, et al. Ontogeny of the N-methyl-D-aspartate (NMDA) receptor system and susceptibility to neurotoxicity. Toxicol Sci 2002;68:9-17.
- 11. Ikonomidou C, Bosch F, Miksa M, Bittigau P, Vöckler J, Dikranian K, et al. Blockade of NMDA receptors and apoptotic neurodegeneration in the developing brain. Science 1999;283:70-4.
- 12. Jevtovic-Todorovic V, Hartman RE, Izumi Y, Benshoff ND, Dikranian K, Zorumski CF, et al. Early exposure to common anesthetic agents causes widespread neurodegeneration in the developing rat brain and persistent learning deficits. J Neurosci 2003;23:876-82.
- 13. Paule MG, Li M, Allen RR, Liu F, Zou X, Hotchkiss C, et al. Ketamine anesthesia during the first week of life can cause long-lasting cognitive deficits in rhesus monkeys. Neurotoxicol Teratol 2011;33:220-30.
- 14. Scallet AC, Schmued LC, Slikker W Jr, Grunberg N, Faustino PJ, Davis H, et al. Developmental neurotoxicity of ketamine: morphometric confirmation, exposure parameters, and multiple fluorescent labeling of apoptotic neurons. Toxicol Sci 2004;81:364-70.
- 15. Slikker W Jr, Zou X, Hotchkiss CE, Divine RL, Sadovova N, Twaddle NC, et al. Ketamine-induced neuronal cell death in the perinatal rhesus monkey. Toxicol Sci 2007;98:145-58.
- 16. Stefovska VG, Uckermann O, Czuczwar M, Smitka M, Czuczwar P, Kis J, et al. Sedative and anticonvulsant drugs suppress postnatal neurogenesis. Ann Neurol 2008;64:434-45.
- 17. Stratmann G, Sall JW, May LD, Bell JS, Magnusson KR, Rau V, et al. Isoflurane differentially affects neurogenesis and long-term neurocognitive function in 60-day-old and 7-day-old rats. Anesthesiology 2009;110:834-48.
- 18. Wagner M, Ryu YK, Smith SC, Patel P, Mintz CD. Review: effects of anesthetics on brain circuit formation. J Neurosurg Anesthesiol 2014;26:358-62.
- 19. Zhu C, Gao J, Karlsson N, Li Q, Zhang Y, Huang Z, et al. Isoflurane anesthesia induced persistent, progressive memory impairment, caused a loss of neural stem cells, and reduced neurogenesis in young, but not adult, rodents. J Cereb Blood Flow Metab 2010;30:1017-30.
- 20. Zou X, Liu F, Zhang X, Patterson TA, Callicott R, Liu S, et al. Inhalation anesthetic-induced neuronal damage in the developing rhesus monkey. Neurotoxicol Teratol 2011;33:592-7.
- 21. Zou X, Patterson TA, Divine RL, Sadovova N, Zhang X, Hanig JP, et al. Prolonged exposure to ketamine increases neurodegeneration in the developing monkey brain. Int J Dev Neurosci 2009;27:727-31.
- 22. Bartels M, Althoff RR, Boomsma DI. Anesthesia and cognitive performance in children: no evidence for a causal relationship. Twin Res Hum Genet 2009;12:246-53.
- 23. Bong CL, Allen JC, Kim JT. The effects of exposure to general anesthesia in infancy on academic performance at age 12. Anesth Analg 2013;117:1419-28.
- Elsinga RM, Roze E, Van Braeckel KN, Hulscher JB, Bos AF. Motor and cognitive outcome at school age
 of children with surgically treated intestinal obstructions in the neonatal period. Early Hum Dev
 2013;89:181-5.
- 25. Fan Q, Cai Y, Chen K, Li W. Prognostic study of sevoflurane-based general anesthesia on cognitive function in children. J Anesth 2013;27:493-9.
- 26. Filan PM, Hunt RW, Anderson PJ, Doyle LW, Inder TE. Neurologic outcomes in very preterm infants undergoing surgery. J Pediatr 2012;160:409-14.



شركة أدوية الحكمة

- 27. Hansen TG, Pedersen JK, Henneberg SW, Pedersen DA, Murray JC, Morton NS, et al. Acadèmic performance in adolescence after inguinal hernia repair in infancy: a nationwide cohort study. Anesthesiology 2011;114:1076-85.
- 28. Hansen TG, Pedersen JK, Henneberg SW, Morton NS, Christensen K. Paediatr Anaesth 2013;23:883-90.
- 29. Ko WR, Liaw YP, Huang JY, Zhao DH, Chang HC, Ko PC, et al. Exposure to general anesthesia in early life and the risk of attention deficit/hyperactivity disorder development: a nationwide, retrospective matched-cohort study. Paediatr Anaesth 2014;24:741-8.
- 30. Kalkman CJ, Peelen L, Moons KG, Veenhuizen M, Bruens M, Sinnema G, et al. Behavior and development in children and age at the time of first anesthetic exposure. Anesthesiology 2009;110:805-12.
- 31. Yang HK, Chungh DS, Hwang JM. The effect of general anesthesia and strabismus surgery on the intellectual abilities of children: a pilot study. Am J Ophthalmol 2012;153:609-13.
- 32. Block RI, Thomas JJ, Bayman EO, Choi JY, Kimble KK, Todd MM. Are anesthesia and surgery during infancy associated with altered academic performance during childhood? Anesthesiology 2012;117:494-503.
- DiMaggio C, Sun LS, Kakavouli A, Byrne MW, Li G. A retrospective cohort study of the association of anesthesia and hernia repair surgery with behavioral and developmental disorders in young children. J Neurosurg Anesthesiol 2009;21:286-91.
- 34. DiMaggio C, Sun LS, Li G. Early childhood exposure to anesthesia and risk of developmental and behavioral disorders in a sibling birth cohort. Anesth Analg 2011;113:1143-51.
- 35. Flick RP, Katusic SK, Colligan RC, Wilder RT, Voigt RG, Olson MD, et al. Cognitive and behavioral outcomes after early exposure to anesthesia and surgery. Pediatrics 2011;128:e1053-61.
- 36. Ing C, DiMaggio C, Whitehouse A, Hegarty MK, Brady J, von Ungern-Sternberg BS, et al. Long-term differences in language and cognitive function after childhood exposure to anesthesia. Pediatrics 2012;130:e476-85.
- 37. Ing CH, DiMaggio CJ, Malacova E, Whitehouse AJ, Hegarty MK, Feng T, et al. Comparative analysis of outcome measures used in examining neurodevelopmental effects of early childhood anesthesia exposure. Anesthesiology 2014;120:1319-32.
- 38. Morriss FH Jr, Saha S, Bell EF, Colaizy TT, Stoll BJ, Hintz SR, et al. Surgery and neurodevelopmental outcome of very low-birth-weight infants. JAMA Pediatr 2014;168:746-54.
- 39. Naumann HL, Haberkern CM, Pietila KE, Birgfeld CB, Starr JR, Kapp-Simon KA, et al. Duration of exposure to cranial vault surgery: associations with neurodevelopment among children with single-suture craniosynostosis. Paediatr Anaesth 2012;22:1053-61.
- 40. Sprung J, Flick RP, Katusic SK, Colligan RC, Barbaresi WJ, Bojanić K, et al. Attention-deficit/hyperactivity disorder after early exposure to procedures requiring general anesthesia. Mayo Clin Proc 2012;87:120-9
- 41. Walker K, Halliday R, Holland AJ, Karskens C, Badawi N. Early developmental outcome of infants with infantile hypertrophic pyloric stenosis. J Pediatr Surg 2010;45:2369-72.
- 42. Walker K, Badawi N, Halliday R, Stewart J, Sholler GF, Winlaw DS, et al. Early developmental outcomes following major noncardiac and cardiac surgery in term infants: a population-based study. J Pediatr 2012;161:748-752.



شركة أدوية الحكمة

- 43. Wilder RT, Flick RP, Sprung J, Katusic SK, Barbaresi WJ, Mickelson C, et al. Early exposure to anesthesia and learning disabilities in a population-based birth cohort. Anesthesiology 2009;110:796-804.
- 44. Davidson AJ, Disma N, de Graaff JC, Withington DE, Dorris L, Bell G, et al. Neurodevelopmental outcome at 2 years of age after general anaesthesia and awake-regional anaesthesia in infancy (GAS): an international multicentre, randomised controlled trial. Lancet 2016;387:239-50.
- 45. Sun LS, Li G, Miller TL, Salorio C, Byrne MW, Bellinger DC, et al. Association between a single general anesthesia exposure before age 36 months and neurocognitive outcomes in later childhood. JAMA 2016;315:2312-20.