SUSPECT ADVERSE REACTION REPORT

I. REACTION INFORMATION

1. PATIENT INITIALS (first, last)	1a. COUNTRY	2. DATE OF BIRTH			2a. AGE	3. SEX	3a. WEIGHT	4-6 REACTION ONSET			8-12 CHECK ALL APPROPRIATE TO ADVERSE REACTION
		Day	Month	Year				Day	Month	Year	
PRIVACY	COSTA RICA		PRIVACY		49 Years	Female	67.00 kg	01	NOV	2023	

7 + 13 DESCRIBE REACTION(S) (including relevant tests/lab data)
Event Verbatim [PREFERRED TERM] (Related symptoms if any separated by commas)

Other Serious Criteria: Medically significant
Defenses were very low [Decreased immune responsiveness]
Severe stomach pain [Abdominal pain upper]
Neuropathy [Neuropathy peripheral]
Severe pain, pain was spreading downwards, from the right side through the ribs downwards [Pain]
Abdominal colic [Abdominal pain]
Cramps are in the lower part of her abdomen, pain on the right side [Abdominal pain lower]
Stomach was full of gas [Flatulence]

(Continued on Additional Information Page)

- ☐ PATIENT DIED
- ☒ INVOLVED OR PROLONGED INPATIENT HOSPITALISATION
- ☐ INVOLVED PERSISTENT OR SIGNIFICANT DISABILITY OR INCAPACITY
- ☐ LIFE THREATENING

II. SUSPECT DRUG(S) INFORMATION

14. SUSPECT DRUG(S) (include generic name)
#1) Abemaciclib (Abemaciclib) Tablet
#2) ACETAMINOPHEN (ACETAMINOPHEN) Unknown
(Continued on Additional Information Page)

20. DID REACTION ABATE AFTER STOPPING DRUG? ☒ YES ☐ NO ☐ NA

15. DAILY DOSE(S)	16. ROUTE(S) OF ADMINISTRATION
#1) 150 mg, bid	#1) Oral
#2) UNK UNK, unknown	#2) Unknown

17. INDICATION(S) FOR USE
#1) Breast cancer (Breast cancer)
#2) Severe pain (Pain)

21. DID REACTION REAPPEAR AFTER REINTRODUCTION? ☒ YES ☐ NO ☐ NA

18. THERAPY DATES(from/to)	19. THERAPY DURATION
#1) 01-NOV-2023 / DEC-2023	#1) Unknown
#2) Unknown	#2) Unknown

III. CONCOMITANT DRUG(S) AND HISTORY

22. CONCOMITANT DRUG(S) AND DATES OF ADMINISTRATION (exclude those used to treat reaction)
#1) CALCIUM (CALCIUM) Unknown ; Unknown
#2) ANASTROZOL (ANASTROZOL) Unknown ; Unknown
#3) VITAMIN D [COLECALCIFEROL] (COLECALCIFEROL) Unknown ; Unknown

23. OTHER RELEVANT HISTORY. (e.g. diagnostics, allergies, pregnancy with last month of period, etc.)

From/To Dates	Type of History / Notes	Description
Unknown		

IV. MANUFACTURER INFORMATION

24a. NAME AND ADDRESS OF MANUFACTURER
Eli Lilly Interamerica Inc (AR Branch)
Tronador 4890 - Piso 12
Buenos Aires, Capital Federal CP: 1430 ARGENTINA
Phone: 54 1145464000

26. REMARKS

24b. MFR CONTROL NO.
CR202401007437

24c. DATE RECEIVED BY MANUFACTURER
08-JUL-2025

24d. REPORT SOURCE
☒ STUDY ☐ LITERATURE ☐ HEALTH PROFESSIONAL ☐ OTHER:

DATE OF THIS REPORT
14-JUL-2025

25a. REPORT TYPE
☐ INITIAL ☒ FOLLOWUP: 1

25b. NAME AND ADDRESS OF REPORTER
NAME AND ADDRESS WITHHELD.

NAME AND ADDRESS WITHHELD.

ADDITIONAL INFORMATION

7+13. DESCRIBE REACTION(S) continued

Stomach got bloated/ Stomach becomes bloated [Abdominal distension]
Very strong colitis [Colitis]
Very high fever [Pyrexia]
Inflammation [Inflammation]
Gastritis [Gastritis]
Body pain [Pain]
stomach starts to cramp, strong pain in the pit of her stomach [Abdominal pain upper]
Back pain [Back pain]
Bone pain [Bone pain]
Heaviness in the eyes [Asthenopia]
Anxiety attack [Anxiety]
pain in leg [Pain in extremity]
she thinks it was something viral [Viral infection]
fever of 38.8 - 38.7 [Pyrexia]
Feeling of stomach discomfort [Abdominal discomfort]
Feels a lot of salivation in the mouth [Salivary hypersecretion]
Stomach pain [Abdominal pain upper]
She has been having headaches [Headache]
Little dizziness [Dizziness]
Not very hungry [Decreased appetite]
Nausea [Nausea]
Itching in her arms and legs after bathing [Pruritus]
Diarrhea/discomfort of the diarrhoea [Diarrhoea]
vomiting [Vomiting]
spent the whole week with nausea/felt like vomiting [Nausea]
tiredness [Fatigue]

Case Description: This solicited case, reported by consumer via the Patient Support Program (PSP), with additional information from the initial reporter via PSP, concerned a 49-year-old (at the time of initial report) female patient of an unspecified origin.

Medical history was not reported. Concomitant medications were calcium and vitamin D; both used for unknown indications.

The patient received abemaciclib (Verzenio) tablet, 150 mg twice a day via orally for the treatment of breast cancer, beginning on 01-Nov-2023; concomitant medication was anastrozole used for unknown indication. Also she received gabapentin (unknown manufacturer) at an unknown dose and frequency via an unknown route for the treatment of neuropathy, beginning on an unknown date. Also, she took acetaminophen (unknown manufacturer) at an unknown dose and frequency via an unknown route for the treatment of pain, beginning on an unknown date. On an unknown date in Nov-2023, after starting abemaciclib therapy, she felt dizzy and heaviness in her eyes that makes her eyes close, she could fall asleep anywhere, but it did not make her very sleepy, it was more like a fainting spell. On 1-Nov-2023, since starting of the therapy, she had nausea, stomach pain and diarrhea. As a corrective treatment for stomach pain, she received omeprazole and diarrhea received loperamide. On 18-Dec-2023, she developed a very high fever and ended up to the hospital emergency room as her defenses were very low. Furthermore, she was admitted to the hospital and put in an isolated room. Due to this her abemaciclib therapy was discontinued for 15 days. On 02-Jan-2024, her abemaciclib therapy was restarted. On 05-Jan-2024, she experienced itching in her arms and legs after bathing, she did not consult with her treating physician. On 10-Jan-2024, she began to have diarrhea. As a corrective treatment she received loperamide (unknown manufacturer) twice a day. Dose, route and start date not provided. She indicates that it worked for her, only that it causes pain, but the pain was not so severe. On 17-Jan-2024, she went about six times to the bathroom due to diarrhea and she could not get up from the bathroom because of it. On 19-Jan-2024, she was not feeling very hungry in the morning but by lunch she was hungrier. She believes that the broccoli she had for dinner the day before was the reason she did not wake up very hungry. Also, on same in the morning, she had pain, wanted to vomit (nauseous), had cramps, and colic. Furthermore, she explained that she had cramps at the lower part of abdomen but that lately she has been having pain on the right side, as if the pain was spreading downwards, from the right side through the ribs downwards. She was going back and forth to the bathroom. So, she took one loperamide pill. But she indicates that previously she was taking loperamide as instructed, but ended up in the hospital because of severe stomach pain. She indicates that when she took loperamide her stomach gets bloated and started having gas. So, she did not take too many dose of loperamide, she tries to take about two a day. She indicates that due to the situation in the hospital her doctor told her that maybe the best thing to do was to take something for the stomach, but not loperamide because what it was blocking completely due to which she had colitis. As a corrective treatment she received buscapine or hyoscine for colitis and flatulence. The events of low defense and abdominal pain were considered as serious by the reporter due to its medical significance reason. As of 16-Feb-2024, she was experiencing stomach pain immediately after consuming half a cup of coffee in the mornings. There was a decrease in diarrhea, but if she did not take loperamide, she experiences diarrhea. She was taking one loperamide pill every morning. Needing to take at least two loperamides, one in the morning and one at night. She indicates that when she leaves her house, she always takes one loperamide, and sometimes she skips it at night. However, she wakes up in the early morning with stomach pain and had to go to the bathroom due to diarrhea (two or four times). Taking one loperamide this morning, and there was no diarrhea. Having eaten meat, potatoes, and salad for lunch today, and after eating, she experienced stomach pain and inflammation. When she felt stomach pain and inflammation, it sometimes improves over time, and other times it leads to diarrhea. On 10-Feb-2024, she ate a vigoron (as

ADDITIONAL INFORMATION

7+13. DESCRIBE REACTION(S) continued

reported: chimichurri, chicharrones, yuca), and immediately she felt nauseous. Two or three hours later, she experienced stomach pain and felt the need to go to the bathroom. Sometimes taking loperamide did not completely alleviate the pain, even if it did not cause diarrhoea. Her stomach becomes bloated. At 7 pm, she took abemaciclib, and around 10 pm, her stomach starts to cramp. She felt that tramadol hydrochloride did not cause any discomfort in her stomach, while acetaminophen gave her gastritis. On 15-Feb-2024, she ate a tamale at 5 pm, and at night, she had mashed potatoes, a piece of meat, and a bit of rice. She was having diarrhea at 1 am, then again around 3 am, and once more at 4 am. She took tramadol hydrochloride when experiencing back pain. Reportedly all the treatments given to her cause bone and body pain, so she took a few drops of tramadol hydrochloride, which provides relief. Furthermore, on 24-Mar-2024 (Sunday), she had a strong pain in the pit of her stomach, she thought it was something she ate and that she ate a lot. She also had vomiting and all that day she had a fever of 38.8-38.7 (units not provided). She spent the whole day in bed. On 25-Mar-2024, i.e. on next day she felt better but she spent the whole week with nausea, a lot of diarrhea and a lot of stomach pain. On that day she did not take the medications because she could not resist them in her stomach, or she had diarrhea or vomiting. She thought it was something viral. On 25-Mar-2024, same day, she had a slight fever in the early morning and then it went away. On 28-Mar-2024, she began to feel better about her stomach. She continues to take loperamide for diarrhea but did not take it much because if she takes it and it blocked the diarrhea, her stomach gets very bloated. Currently she felt like vomiting and dizziness. On an unknown date, she had been having headaches. Additionally, she continued to present nausea and after the feeling of stomach discomfort she felt a lot of salivation in the mouth. On an unknown date, her nutritionist have helped her to understand that many of the side effects she has had since she started taking the medication were caused by the it and not by anything else, she had little dizziness, tiredness, diarrhea, body and bone pain. She already noticed that those symptoms were caused by the medication, but that were not symptoms that were unbearable. She only takes loperamide when she was very ill, a lot depends on what she eats, because sometimes she ate things that were not good for her, but she ate them anyway and then paid the consequences, because the discomfort of the diarrhea was sometimes very constant and sometimes not. For stomach pain she was taking hyoscine butylbromide (Bromide). She does not feel recovered from the symptoms of dizziness, tiredness, diarrhea, body and bone pain, because as long as she continues to take the medicine she will always have the these symptoms, but she does take Tramadol and Diclofenac, she takes them for body pain, bone pain because sometimes the body pain was very strong and gives her a lot of pain in her bones and legs. On an unknown date in Jun-2025, she experienced a severe anxiety attack due to various factors such as menopause, and personal circumstances. Nausea and dizziness occurred occasionally. She did not receive any corrective treatment for the events of anxiety attack, nausea and dizziness, while information regarding corrective treatment of the remaining events was not provided. The outcome of the events of neuropathy, pain, fatigue, cramp in lower abdomen, abdominal bloating, eye strain, localised itching, diarrhea, nausea (second episode) vomiting, stomach inflammation, gastritis, back pain, stomach pain and headache was not resolved, outcome of dyspepsia, nausea (first episode) and dizziness was recovering, outcome of abdominal colic, gas in stomach, stomach pain, fever was recovered, while outcome of the remaining events was not provided. Status of abemaciclib therapy was continued, while status of loperamide, acetaminophen, gabapentin, hyoscine butylbromide and hyoscine therapies was not provided.

The initial consumer related diarrhea, dizziness, bone pain, body pain, fatigue with abemaciclib therapy but did not relate bloating, stomach pain, gas in stomach, colitis with abemaciclib therapy while did not provide the relatedness assessment of the remaining events with abemaciclib therapy. The initial consumer related bloating, stomach pain, gas in stomach, colitis with loperamide therapy while did not provide the relatedness assessment of the remaining events with loperamide therapy. Related acetaminophen with gastritis while did not provide the relatedness assessment of the remaining events with acetaminophen therapy. Related bone and body pain with gabapentin, hyoscine butylbromide and hyoscine (all treatment medications) while did not provide the relatedness assessment of the remaining events with them.

Update 25-Jan-2024: Additional information was received from initial reporter via PSP on 20-Jan-2024 and the case was upgraded to serious by addition of two serious events of stomach pain and decreased immune responsiveness with hospitalization as and medically significant as seriousness criteria. Added: one dosage regimen for suspect drug, three concomitant medications, six treatment drugs, thirteen non-serious events of neuropathy, pain, cramp in lower abdomen, abdominal bloating, eye strain, dizziness, diarrhea, abdominal colic, gas in stomach, fever, colitis, decreased appetite, nausea. Updated: Action taken, dechallenge and rechallenge of abemaciclib and narrative with new information.

Update 22-Feb-2024: Additional information was received from initial reporter via PSP on 16-Feb-2024 Added six non-serious events of inflammation, gastritis, back pain, pain, bone pain and abdominal pain upper. Updated as reported abdominal distension. Updated narrative with new information accordingly.

Update 03-Apr-2024: Additional information was received from the initial reporter via PSP on 01-APR-2024. Updated as reported description for the event of Stomach cramps, updated its LLT from stomach cramps to abdominal pain upper, and its outcome from unknown to recovering. Added a laboratory test. Added non-serious events of vomiting, nausea, viral infection, and fever. Updated narrative with new information.

Update 10-Apr-2024: Additional information was received from the initial reporter via PSP on 05-Apr-2024. Added three non-serious events headache, stomach discomfort and Increased salivation. Updated narrative with new information accordingly.

Update 31-May-2024: Additional information was received from the initial reporter via PSP on 28-May-2024. No medically significant information was received. No changes were made to the case.

Update 01-Jul-2024: Additional information was received from the initial consumer reporter via PSP of business partner on 26-Jun-2024. Added two treatment drugs of tramadol and diclofenac, two non-serious events of fatigue, pain in leg, treatment received for event of bone pain, general body pain. Updated start date of abemaciclib, causality as reported from no to yes for event

ADDITIONAL INFORMATION

7+13. DESCRIBE REACTION(S) continued

of dizziness, bone pain, body pain, outcome of events from not resolved to resolved for event of stomach pain, unknown to not resolved for events of bone pain, general body pain. Upon review, updated outcome of events vomiting, stomach inflammation, gastritis and back pain. Updated narrative with new information.

Update 17-Jun-2025: Additional information was received from the initial consumer reporter via PSP on 11-Jun-2025. Added one non serious event of stomach pain. Updated therapy start date of diarrhea from 10-Jan-2024 to 01-Nov-2023 and nausea from 19-Jan-2024 to 01-Nov-2023, outcome of nausea as not recovered from unknown and narrative with new information.

Update 14-Jul-2025: Additional information was received from the initial reporter consumer via PSP on 08-Jul-2025 and 09-Jul-2025 was processed together. Added one non-serious event of anxiety attack. Updated outcome of the events of dizziness and nausea from not recovered to recovering and frequency to intermittent and treatment received to no. Updated narrative with new information.

Lilly Analysis Statement: 17-Jun-2025: The company considered the events of decreased immune responsiveness, stomach pain, neuropathy, radiating pain, abdominal colic, cramp in lower abdomen, gas in stomach, abdominal bloating, colitis, fever, inflammation, gastritis, general body pain, abdominal pain upper, back pain, bone pain, eye strain, pain in leg, viral infection, fever, stomach discomfort, increased salivation unrelated to the abemaciclib and , stomach pain, headache, dizziness, decreased appetite, nausea, localised itching, diarrhea, vomiting, nausea, tiredness related to abemacicilib therapy.

13. Lab Data

#	Date	Test / Assessment / Notes	Results	Normal High / Low
1	24-MAR-2024	Body temperature Positive fever of 38.8 - 38.7 (units not provided)		

14-19. SUSPECT DRUG(S) continued

14. SUSPECT DRUG(S) (include generic name)	15. DAILY DOSE(S); 16. ROUTE(S) OF ADMIN	17. INDICATION(S) FOR USE	18. THERAPY DATES (from/to); 19. THERAPY DURATION
#1) Abemaciclib (Abemaciclib) Tablet; Regimen #2	150 mg, bid; Oral	Breast cancer (Breast cancer)	02-JAN-2024 / Ongoing; Unknown
#3) LOPERAMIDA [LOPERAMIDE] (LOPERAMIDA [LOPERAMIDE]) Unknown; Regimen #1	UNK UNK, bid; Unknown	Diarrhea (Diarrhoea)	Unknown; Unknown
#3) LOPERAMIDA [LOPERAMIDE] (LOPERAMIDA [LOPERAMIDE]) Unknown; Regimen #2	300 mg, unknown (as needed); Unknown	Diarrhea (Diarrhoea)	Unknown; Unknown
#4) GABAPENTIN (GABAPENTIN) Unknown; Regimen #1	UNK UNK, unknown; Unknown	Neuropathy (Neuropathy peripheral)	Unknown; Unknown
#5) BUSCAPINE (HYOSCINE BUTYLBROMIDE) Tablet; Regimen #1	UNK UNK, unknown (as needed); Unknown	Colitis (Colitis) Flatulence (Flatulence) Stomach pain (Abdominal pain upper) diarrhea (Diarrhoea)	Unknown; Unknown
#6) HYOSCINE (HYOSCINE) Unknown; Regimen #1	UNK UNK, unknown; Unknown	Colitis (Colitis) Flatulence (Flatulence)	Unknown; Unknown