SUSPECT ADVERSE REACTION REPORT

I. REACTION INFORMATION

1. PATIENT INITIALS (first, last)	1a. COUNTRY	2. DATE OF BIRTH Day	Month	Year	2a. AGE	3. SEX	3a. WEIGHT	4-6 REACTION ONSET Day	Month	Year
PRIVACY	COSTA RICA		PRIVACY		38 Years	Female	Unk		Unk	

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

Other Serious Criteria: med sig
Genetic mutation in PTEN gene [Malignant neoplasm progression]
Upset stomach/stomach dicomfort [Abdominal discomfort]
Stomach pain [Abdominal pain upper]
Stomach bloating [Abdominal distension]
Constipation [Constipation]
Gallstones [Cholelithiasis]
Sweating [Hyperhidrosis]
he forgets to take Verzenio in the evening and in the mornings she takes all the pills together. [Product dose omission issue]

(Continued on Additional Information Page)

8-12 CHECK ALL APPROPRIATE TO ADVERSE REACTION

- ☐ 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) LOPERAMIDE (LOPERAMIDE) Unknown
(Continued on Additional Information Page)

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) Diarrhea (Diarrhoea)

18. THERAPY DATES(from/to)	19. THERAPY DURATION
#1) 08-JUL-2024 / Ongoing	#1) Unknown
#2) Unknown	#2) Unknown

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

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

III. CONCOMITANT DRUG(S) AND HISTORY

22. CONCOMITANT DRUG(S) AND DATES OF ADMINISTRATION (exclude those used to treat reaction)
#1) ANASTROZOLE (ANASTROZOLE) Tablet ; Unknown
#2) LEVOTHYROXINE (LEVOTHYROXINE) Unknown ; Unknown
#3) GEMFIBROZIL (GEMFIBROZIL) Unknown, 600 mg; Unknown
#4) GOSERELIN (GOSERELIN) Unknown ; Unknown
#5) CLONAZEPAM (CLONAZEPAM) Unknown ; Unknown
#6) PROPANOLOL [PROPRANOLOL] (PROPRANOLOL) Unknown ; Unknown
(Continued on Additional Information Page)

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

From/To Dates	Type of History / Notes	Description
Unknown	Medical Condition	Hypothyroidism (Hypothyroidism)

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.
CR202408007821

24c. DATE RECEIVED BY MANUFACTURER
21-MAR-2025

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

DATE OF THIS REPORT
27-MAR-2025

25a. REPORT TYPE
☒ INITIAL ☐ FOLLOWUP:

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

ADDITIONAL INFORMATION

7+13. DESCRIBE REACTION(S) continued

Diarrhea [Diarrhoea]
Less appetite [Decreased appetite]
Nausea [Nausea]
Dizziness [Dizziness]

Case Description: This solicited case, reported by a consumer via a patient support program (PSP), concerned a 38-year-old female patient of an unknown origin.

Medical history included hypothyroidism and concomitant medications included levothyroxine for thyroid and gemfibrozil for cholesterol and high triglyceride, clonazepam, propranolol and imipramine used for depression.

The patient received abemaciclib (Verzenio) tablet, 150 mg twice daily, via oral route, for breast cancer, beginning on 08-Jul-2024 in combination with anastrozole and goserelin as anti-hormonal drug concomitantly. She also received venlafaxine, used for depression, beginning on an unknown date. Information regarding dose, frequency and route of administration was not provided. Reportedly, when she took venlafaxine it caused her nausea, dizziness and sweating. Also, sometimes she forgot to take abemaciclib in the evening and in the morning, she took all the pills together. On an unknown date, after starting abemaciclib therapy, she had a lot of stomach inflation (stomach distension), sometimes diarrhea and sometimes constipation. On day she woke up with diarrhea and the other day, with constipation. As a corrective treatment for diarrhea, she took loperamide but caused her constipation. Information regarding trade name, formulation, dose, frequency, route and start date of loperamide was not provided. On an unknown date, she had an ultrasound, and she was diagnosed with gallstones, but she did not go the doctor to the results. She had discomfort in her stomach, stomach pain and then she had to run to the bathroom because of the diarrhea. She did not know whether it was caused by the gallstones or abemaciclib. On 10-Feb-2025, she had a radical mastectomy in her left breast. Later, on an unknown date, she had a right breast biopsy performed due to the presence of a small mass. Confirmed by the ultrasound results, it was discovered that she had a genetic mutation in the PTEN gene. She would undergo a radical mastectomy on the right breast. The event of malignant neoplasm progression was considered serious by the company due to medically significant reason. Information regarding other corrective treatments was not provided. Outcome of the events of abdominal distention and constipation was resolving, resolved for the event of diarrhea and decreased appetite, unknown for the events of nausea, dizziness, missed dose and sweating, while not resolved for the remaining events. Abemaciclib therapy status was ongoing, loperamide therapy was discontinued, while the status of venlafaxine was not provided.

The reporting consumer did not know relatedness of the events of abdominal discomfort, stomach pain and diarrhea, while did not provide relatedness of the other events with abemaciclib therapy or loperamide hydrochloride. The reporting consumer related the events of nausea, dizziness and sweating with venlafaxine therapy while did not provide the relatedness assessment of the remaining events with venlafaxine therapy.

Update 18-Sep-2024: Additional information was received from initial reporting consumer on 13-Sep-2024 via PSP. Added three concomitant medications clonazepam, propranolol and imipramine, one co-suspect medication venlafaxine, four non-serious events of dizziness, nausea, sweating and missed dose. Updated outcome of the events abdominal distention from not resolved to resolving, constipation from not resolved to resolving, diarrhea from not resolved to resolved. Updated the narrative with new information accordingly.

Update 26-Mar-2025: Additional information was received from initial reporting consumer on 21-Mar-2025 via a PSP. This case was upgraded to serious upon addition of a serious event of malignant neoplasm progression with criteria of medical significance. Added one lab data. Updated narrative with new information accordingly.

13. Lab Data

#	Date	Test / Assessment / Notes	Results	Normal High / Low
1		Biopsy breast a genetic mutation in the PTEN gene		
2		Ultrasound scan Patient had gallstones no values, units and reference ranges were provided		

14-19. SUSPECT DRUG(S) continued

Mfr. Control Number: CR202408007821

ADDITIONAL INFORMATION

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
#3) VENLAFAXINE (VENLAFAXINE) Unknown; Regimen #1	UNK UNK, unknown; Unknown	Depression (Depression)	Unknown; Unknown

22. CONCOMITANT DRUG(S) AND DATES OF ADMINISTRATION continued

#7) IMIPRAMINE (IMIPRAMINE) Unknown ; Unknown