

## SUSPECT ADVERSE REACTION REPORT

## I. REACTION INFORMATION

|  |                                  |  |                               |                         |                          |  |  |
|--|----------------------------------|--|-------------------------------|-------------------------|--------------------------|--|--|
| 1. PATIENT INITIALS<br>(first, last)<br><b>PRIVACY</b>   | 1a. COUNTRY<br><b>COSTA RICA</b> | 2. DATE OF BIRTH<br>Day Month Year<br><b>PRIVACY</b> | 2a. AGE<br><b>38</b><br>Years | 3. SEX<br><b>Female</b> | 3a. WEIGHT<br><b>Unk</b> | 4-6 REACTION ONSET<br>Day Month Year<br><b>26 AUG 2024</b> | 8-12 CHECK ALL<br>APPROPRIATE TO<br>ADVERSE REACTION<br><br><input type="checkbox"/> PATIENT DIED<br><br><input type="checkbox"/> INVOLVED OR<br>PROLONGED INPATIENT<br>HOSPITALISATION<br><br><input type="checkbox"/> INVOLVED PERSISTENT<br>OR SIGNIFICANT<br>DISABILITY OR<br>INCAPACITY<br><br><input type="checkbox"/> LIFE<br>THREATENING |
| 7 + 13 DESCRIBE REACTION(S) (including relevant tests/lab data)<br>Event Verbatim [PREFERRED TERM] (Related symptoms if any separated by commas)<br><b>Stomach heaviness [Abdominal discomfort]</b><br><b>Patient administered 1 tablet of Verzenio all day, reason not provided; NO AE [Intentional product use issue]</b><br><b>Diarrhea/ Five bowel movements per day [Diarrhoea]</b><br><br>Case Description: This solicited case, reported by a consumer via patient support program (PSP) of business partner, with additional information from the initial reporter, concerned a 38-year-old female patient of unknown origin.<br><br><b>(Continued on Additional Information Page)</b> |                                  |  |                               |                         |                          |  |  |

## II. SUSPECT DRUG(S) INFORMATION

|   |  |
|---|--|
| 14. SUSPECT DRUG(S) (include generic name)<br><b>#1 ) Abemaciclib (Abemaciclib) Tablet {Lot # D689937; Exp.Dt. MAY-2026}</b><br><b>(Continued on Additional Information Page)</b> | 20. DID REACTION<br>ABATE AFTER STOPPING<br>DRUG?<br><br><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> NA     |
| 15. DAILY DOSE(S)<br><b>#1 ) 150 mg, bid</b>  | 16. ROUTE(S) OF ADMINISTRATION<br><b>#1 ) Oral</b>   |
| 17. INDICATION(S) FOR USE<br><b>#1 ) Breast cancer (Breast cancer)</b>  | 21. DID REACTION<br>REAPPEAR AFTER<br>REINTRODUCTION?<br><br><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> NA |
| 18. THERAPY DATES(from/to)<br><b>#1 ) 26-AUG-2024 / Unknown</b>   | 19. THERAPY DURATION<br><b>#1 ) Unknown</b>  |

## III. CONCOMITANT DRUG(S) AND HISTORY

|   |  |
|---|--|
| 22. CONCOMITANT DRUG(S) AND DATES OF ADMINISTRATION (exclude those used to treat reaction)<br><b>#1 ) ARIMIDEX (ANASTROZOLE) Unknown ; Unknown</b><br><b>#2 ) GABAPENTIN (GABAPENTIN) Unknown ; Unknown</b><br><b>#3 ) CALCIUM (CALCIUM) Unknown ; Unknown</b><br><b>#4 ) VITAMIN D [VITAMIN D NOS] (VITAMIN D [VITAMIN D NOS]) Unknown ; Unknown</b> |  |
| 23. OTHER RELEVANT HISTORY. (e.g. diagnostics, allergies, pregnancy with last month of period, etc.)<br>From/To Dates Type of History / Notes Description<br><b>Unknown Medical Condition Neuropathic pain (Neuralgia)</b><br><b>Unknown Procedure Chemotherapy (Chemotherapy)</b>  |  |

## IV. MANUFACTURER INFORMATION

|  |   |
|--|---|
| 24a. NAME AND ADDRESS OF MANUFACTURER<br><b>Eli Lilly Interamerica Inc (AR Branch)</b><br><b>Tronador 4890 - Piso 12</b><br><b>Buenos Aires, Capital Federal CP: 1430 ARGENTINA</b><br><b>Phone: 54 1145464000</b> | 26. REMARKS   |
| 24b. MFR CONTROL NO.<br><b>CR202409001413</b>  | 25b. NAME AND ADDRESS OF REPORTER<br><b>NAME AND ADDRESS WITHHELD.</b>  |
| 24c. DATE RECEIVED<br>BY MANUFACTURER<br><b>27-MAY-2025</b>  | 24d. REPORT SOURCE<br><input checked="" type="checkbox"/> STUDY <input type="checkbox"/> LITERATURE<br><input type="checkbox"/> HEALTH PROFESSIONAL <input type="checkbox"/> OTHER: |
| DATE OF THIS REPORT<br><b>04-JUN-2025</b>  | 25a. REPORT TYPE<br><input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> FOLLOWUP:  |

04-Jun-2025 18:06

ADDITIONAL INFORMATION

7+13. DESCRIBE REACTION(S) continued

Medical history included neuropathic pain and procedure included unspecified chemotherapy. Concomitant medication included calcium, vitamin D for an unknown indication and gabapentin for neuropathy.

The patient received abemaciclib (Verzenio) tablet of 150 mg, twice daily, via oral route for breast cancer, beginning on 26-Aug-2024. She also received concomitant medication of anastrozole for treatment of breast cancer. Same day after starting on abemaciclib therapy, she felt heavy in her stomach because of medication (abemaciclib). On an unknown date sometime in Sep-2024, she experienced a lot of diarrhea, five bowel movements per day. On 22-Sep-2024 and 29-Sep-2024, she intentionally took abemaciclib for once a day. When she took it for once a day, she does not have diarrhea. On an unknown date she again started taking abemaciclib twice a day. As a corrective treatment for diarrhea she took loperamide and lactobacillus reuteri, levoglutamide while corrective treatment for other events was not provided. On 01-May-2025, she experienced stomach heaviness when consuming certain specific food like sugary bread or ice cream. Outcome of the events was not recovered while unknown for intentional dose decreased. The status of abemaciclib therapy was dose reduced to once daily. Therapy was restarted with twice daily frequency and ongoing. This case was received per business alliance and therefore, follow-up will not be pursued. If additional information is received, the case will be updated accordingly.

The initial reporting consumer related the event stomach heaviness while did not provide the relatedness of other events with abemaciclib therapy.

Update 07-Oct-2024: Additional information was received from the initial reporting consumer via PSP on 30-Sep-2024. Added two dosage regimen of suspect product and two non-serious event of diarrhea and intentional dose decreased. Updated narrative with new information.

Update 03-Jun-2025: Additional information received on 27-May-2025 from the initial reporting consumer via a PSP. Information regarding stomach heaviness event was updated in narrative. No other changes were made to the case.

14-19. SUSPECT DRUG(S) continued

| 14. SUSPECT DRUG(S) (include generic name)           | 15. DAILY DOSE(S);<br>16. ROUTE(S) OF ADMIN | 17. INDICATION(S) FOR USE     | 18. THERAPY DATES (from/to);<br>19. THERAPY DURATION |
|--|---|-------------------------------|--|
| #1 ) Abemaciclib (Abemaciclib) Tablet;<br>Regimen #2 | 150 mg, daily; Oral                         | Breast cancer (Breast cancer) | Unknown;<br>Unknown                                  |
| #1 ) Abemaciclib (Abemaciclib) Tablet;<br>Regimen #3 | 150 mg, bid; Oral                           | Breast cancer (Breast cancer) | Ongoing;<br>Unknown                                  |