

# SUSPECT ADVERSE REACTION REPORT

## I. REACTION INFORMATION

1. PATIENT INITIALS (first, last) <b>PRIVACY</b>	1a. COUNTRY <b>DOMINICAN REPUBLIC</b>	2. DATE OF BIRTH			2a. AGE <b>39 Years</b>	3. SEX <b>Male</b>	3a. WEIGHT <b>Unk</b>	4-6 REACTION ONSET			8-12 CHECK ALL APPROPRIATE TO ADVERSE REACTION  <input type="checkbox"/> PATIENT DIED  <input type="checkbox"/> INVOLVED OR PROLONGED INPATIENT HOSPITALISATION  <input type="checkbox"/> INVOLVED PERSISTENT OR SIGNIFICANT DISABILITY OR INCAPACITY  <input type="checkbox"/> LIFE THREATENING
		Day	Month	Year				Day	Month	Year	
		<b>PRIVACY</b>						<b>Unk</b>			

7 + 13 DESCRIBE REACTION(S) (including relevant tests/lab data)  
 Event Verbatim [LOWER LEVEL TERM] (Related symptoms if any separated by commas)  
**Other Serious Criteria: Medically Significant**  
 colitis was activating [Colitis]  
 fever [Fever]  
 bleeding [Bleeding]  
 there was a virus and it has already caught him/activated by parasites such as Entamoeba histolytica  
 [Infection parasitic]  
 relapse [Clinical flare reaction]

Case Description: This is a spontaneous report received from a Consumer or other non HCP, Program ID: 164974.  
 (Continued on Additional Information Page)

## II. SUSPECT DRUG(S) INFORMATION

14. SUSPECT DRUG(S) (include generic name) <b>#1 ) Xeljanz (TOFACITINIB CITRATE) Tablet (Lot # HR8191; Exp.Dt. SEP-2026)</b>		20. DID REACTION ABATE AFTER STOPPING DRUG?  <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> NA
15. DAILY DOSE(S) <b>#1 ) 5 mg, 2x/day</b>	16. ROUTE(S) OF ADMINISTRATION <b>#1 ) Unknown</b>	
17. INDICATION(S) FOR USE <b>#1 ) Unknown</b>		21. DID REACTION REAPPEAR AFTER REINTRODUCTION?  <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> NA
18. THERAPY DATES(from/to) <b>#1 ) Ongoing</b>	19. THERAPY DURATION <b>#1 ) Unknown</b>	

## III. CONCOMITANT DRUG(S) AND HISTORY

22. CONCOMITANT DRUG(S) AND DATES OF ADMINISTRATION (exclude those used to treat reaction)	
23. OTHER RELEVANT HISTORY. (e.g. diagnostics, allergies, pregnancy with last month of period, etc.) From/To Dates      Type of History / Notes      Description <b>Unknown</b> <b>Relevant Med History</b> <b>Inflammation (Inflammation)</b>	

## IV. MANUFACTURER INFORMATION

24a. NAME AND ADDRESS OF MANUFACTURER <b>Pfizer S.A. Laura Arce Mora Avenida Escazú, Torre Lexus, piso 7. Escazú San Jose, COSTA RICA</b>		26. REMARKS
	24b. MFR CONTROL NO. <b>PV202500040097</b>	
24c. DATE RECEIVED BY MANUFACTURER <b>01-MAY-2025</b>	24d. REPORT SOURCE <input type="checkbox"/> STUDY <input type="checkbox"/> LITERATURE <input type="checkbox"/> HEALTH PROFESSIONAL <input checked="" type="checkbox"/> OTHER: Spontaneous	
DATE OF THIS REPORT <b>07-MAY-2025</b>	25a. REPORT TYPE <input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> FOLLOWUP: 1	
25b. NAME AND ADDRESS OF REPORTER <b>NAME AND ADDRESS WITHHELD.</b>		

07-May-2025 06:22

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**ADDITIONAL INFORMATION****7+13. DESCRIBE REACTION(S) continued**

A 39-year-old male patient received tofacitinib citrate (XELJANZ), (ongoing) (Lot number: HR8191, Expiration Date: Sep2026) at 5 mg 2x/day. The patient's relevant medical history included: "inflammatory disease" (unspecified if ongoing). The patient's concomitant medications were not reported.

The following information was reported: COLITIS (medically significant), outcome "unknown", described as "colitis was activating"; PYREXIA (non-serious), outcome "unknown", described as "fever"; HAEMORRHAGE (non-serious), outcome "unknown", described as "bleeding"; INFECTION PARASITIC (non-serious), outcome "unknown", described as "there was a virus and it has already caught him/activated by parasites such as Entamoeba histolytica"; CONDITION AGGRAVATED (non-serious), outcome "unknown", described as "relapse". Patient indicated that he was half sick. He woke up with a fever and with bleeding it seems that colitis was activating. Besides, there was a virus and it has already caught him. As of 01May2025, patient informed that the recent relapse was not due to Xeljanz but rather to his inflammatory disease, which was activated by parasites such as Entamoeba histolytica. After that, the doctor prescribed medication that restored him, and he did not have to suspend or stop Xeljanz, which he was still taking to date and had just renewed for another 6 months to continue its use. Additionally, he mentioned that the bottle he was taking when the relapse occurred was not expired and had no issues. He was taking the medication normally and was stable to date. The action taken for tofacitinib citrate was dosage not changed.

The reporter considered "relapse" not related to tofacitinib citrate.

Follow-up (01May2025): This is a spontaneous follow-up report received from the same contactable consumer.

Updated information included: new event (relapse, unrelated), medical history (inflammatory disease), action taken (updated from unknown to dose not changed).

Case Comment: The event "relapse" is likely due to the natural course of the underlying disease that is unrelated to tofacitinib.

The impact of this report on the benefit/risk profile of the Pfizer product is evaluated as part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to RAs, Ethics Committees, and Investigators, as appropriate.