

SUSPECT ADVERSE REACTION REPORT

I. REACTION INFORMATION

1. PATIENT INITIALS (first, last) PRIVACY	1a. COUNTRY GUATEMALA	2. DATE OF BIRTH			2a. AGE 71 Years	3. SEX Female	3a. WEIGHT Unk	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	
			PRIVACY					19	MAR	2025	

7 + 13 DESCRIBE REACTION(S) (including relevant tests/lab data)
Event Verbatim [PREFERRED TERM] (Related symptoms if any separated by commas)
Patient administered Verzenio 150 mg 1 per day, indicated by the treating physician [Off label use]
Diarrhea [Diarrhoea]
Tiredness [Fatigue]
Little hunger [Decreased appetite]

Case Description: This solicited case, reported by consumer via patient support program (PSP), concerned a 71-year-old female patient of an unknown origin.

(Continued on Additional Information Page)

II. SUSPECT DRUG(S) INFORMATION

14. SUSPECT DRUG(S) (include generic name) #1) Abemaciclib (Abemaciclib) Tablet		20. DID REACTION ABATE AFTER STOPPING DRUG? <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> NA
15. DAILY DOSE(S) #1) 150 mg, daily	16. ROUTE(S) OF ADMINISTRATION #1) Oral	
17. INDICATION(S) FOR USE #1) Metastatic breast cancer in bone (Breast cancer metastatic)		21. DID REACTION REAPPEAR AFTER REINTRODUCTION? <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> NA
18. THERAPY DATES(from/to) #1) 19-MAR-2025 / Ongoing	19. THERAPY DURATION #1) Unknown	

III. CONCOMITANT DRUG(S) AND HISTORY

22. CONCOMITANT DRUG(S) AND DATES OF ADMINISTRATION (exclude those used to treat reaction) #1) FAMARA (LETROZOLE) Unknown ; Unknown #2) CRESTOR (ROSUVASTATIN CALCIUM) Unknown ; Unknown #3) CARDIO ASPIRIN (ACETYLSALICYLIC ACID) Unknown ; Unknown #4) AMLODIPINE (AMLODIPINE) Unknown ; Unknown #5) PROCORALAN (IVABRADINE HYDROCHLORIDE) 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	Medical Condition	Blood pressure increased (Blood pressure increased)
Unknown	Medical Condition	Blood cholesterol increased (Blood cholesterol increased)

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. GT202504007259	
24c. DATE RECEIVED BY MANUFACTURER 07-APR-2025	24d. REPORT SOURCE <input checked="" type="checkbox"/> STUDY <input type="checkbox"/> LITERATURE <input type="checkbox"/> HEALTH PROFESSIONAL <input type="checkbox"/> OTHER:	
DATE OF THIS REPORT 16-APR-2025	25a. REPORT TYPE <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> FOLLOWUP:	

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

NAME AND ADDRESS WITHHELD.

NAME AND ADDRESS WITHHELD.

16-Apr-2025 05:30

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

Medical history included blood pressure increased and blood cholesterol increased. Concomitant medication included rosuvastatin calcium, acetylsalicylic acid, amlodipine and ivabradine hydrochloride for an unknown indication.

The patient received abemaciclib (Verzenio) tablet, 150 mg daily (off label use), via oral route of administration, for the treatment of metastatic breast cancer in bone, beginning on 19-Mar-2025. She also received letrozole as a combination therapy, for an unknown indication. On 30-Mar-2025, after starting abemaciclib therapy, she ate something that caused diarrhea. The diarrhea did not stop for three days and treated with loperamide and the next day the diarrhea was less. Since an unknown date, she felt tired and she was not very hungry because she does not have much room for food. In May-2025, she would undergo tests to see how she reacts to the pill and according to the results, the doctor would tell her if she would have to go up the dose. The doctor would tell her whether to increase the dose to 1 tablet of 150 mg every 12 hours. As of 07-Apr-2025, she no longer had diarrhea. Information regarding corrective treatment for remaining events was not provided. Outcome of diarrhea was recovered, off label use was unknown and not recovered for remaining events. Status of abemaciclib therapy was continued.

The initial reporting consumer did not provide relatedness of events with abemaciclib therapy.

Update 09-Apr-2025: This case was determined to be non-valid due to no valid identifiable adverse event reported (off label use).

Update 15-Apr-2025: This case was initially determined to be non-valid as there was no valid identifiable adverse event. Additional information received on 07-Apr-2025 from the initial reporting consumer via PSP, which contained valid adverse events. Added medical histories of high pressure and high cholesterol, concomitant medications of letrozole, rosuvastatin calcium, acetylsalicylic acid, amlodipine and ivabradine hydrochloride, one treatment medication of loperamide and three non-serious events of diarrhea, tiredness and decreased appetite. Updated narrative with new information.