

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)
Diarrhea [Diarrhoea]
Tiredness [Fatigue]
Little hunger [Decreased appetite]
Diarrhea (second episode) [Diarrhoea]
Patient administered Verzenio 150 mg 1 per day, indicated by the treating physician [Off label use]

Case Description: This solicited case, reported by consumer via patient support program (PSP) from business partner, with additional information from the reporting consumer via PSP from business partner, concerned a

(Continued on Additional Information Page)

II. SUSPECT DRUG(S) INFORMATION

14. SUSPECT DRUG(S) (include generic name) #1) Abemaciclib (Abemaciclib) Tablet (Continued on Additional Information Page)		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 / Unknown	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	25b. NAME AND ADDRESS OF REPORTER NAME AND ADDRESS WITHHELD. NAME AND ADDRESS WITHHELD. NAME AND ADDRESS WITHHELD.
24c. DATE RECEIVED BY MANUFACTURER 14-JUL-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 21-JUL-2025	25a. REPORT TYPE <input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> FOLLOWUP: 2	

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

71-year-old female patient of an unknown origin.

Medical history included high pressure, and high cholesterol. Concomitant medication included rosuvastatin calcium for high cholesterol and acetylsalicylic acid, amlodipine and ivabradine hydrochloride, all for unknown indications.

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 was treated with loperamide and the next day the diarrhea was less and on an unknown date, she recovered from the diarrhea. On 05-April-2025, she experienced a second, mild episode of diarrhea. In May-2025, she would undergo tests to see how she reacted 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. On 08-May-2025, per medical indication, abemaciclib dosage was started at 150 mg twice a day. Since May-2025, she felt tired, which was occasional and mild, and she was not very hungry because she does not have much room for food. She did not receive any corrective treatment for tiredness. Information regarding corrective treatment for the remaining events was not provided. Since an unknown date, she was recovering from tiredness, and the outcome of the off-label use was not provided. She had not recovered from the remaining events. Status of abemaciclib therapy continued.

The reporting consumer related the second diarrhea episode and the tiredness to abemaciclib therapy whereas did not provide relatedness of the remaining 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.

Update 16-May-2025: Additional information received on 08-May-2025 from the initial reporter via a PSP. Added an abemaciclib dosage regime, and the dosages and route of administrations of: letrozole, rosuvastatin, acetylsalicylic acid, amlodipine and ivabradine were added. Updated narrative with new information.

Update 17-Jul-2025: Additional information was received on 14-Jul-2025 from the initial reporter via PSP from business partner. Added onset date, severity and frequency of tiredness, as well as updated its outcome from not recovered to recovering, treatment received from unknown to no, and relatedness from not reported to yes. Updated narrative accordingly.

Lilly Analysis Statement: 21-Jul-2025: The company considered the first diarrhea episode, and the decreased appetite related to the abemaciclib.

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	Metastatic breast cancer in bone (Breast cancer metastatic)	08-MAY-2025 / Ongoing; Unknown