SUS																				
											_	_		_					_	<del>- 1</del>
2025-094536(1)																				
I. REACTION INFORMATION														•	•					
1. PATIENT INITIALS	GE	E 3. SEX 4-6 REACTION ONSET									2 CHE									
(first, last) Unknown	HONDURAS	Day	Month	Year Unknown		ears known	Male	Da	у	Mor	nth		Yea	r	1	TO A	AD۱	PRIA VERS	TE E	
Offictiowif		Unknown	Unknown					Unkn	own	Ju	n	2025				REA	4C I	ION	ON	
7+13 DESCRIBE REA	. , .	ng relevant t	ests/lab da	a)			•								ĪZ	PAT	IEN	T DIE	)	
MedDRA Version : v.28.0   1) DEATH (Death NOS (10011914), Death (10011906))													LIFE THREATENING							
(/Jun/2025 - ) - Fatal														INVOLVED OR PROLONGED INPATIENT						
														HOSPITALIZATION RESULTS IN						
															PERSISTENCE OR SIGNIFICANT DISABILITY/INCAPACITY					
															CONGENITAL ANOMALY					
														OTHER MEDICALLY IMPORTANT CONDITION						
				I. SUSPECT	DDLI	C/C/INE	ODMAT	ION							1					
14. SUSPECT DRUG(	S)(include generic	name)		1. 303FECT	טאט	G(S)IINF	OKIVIAT	ION							20.	DID				
ABRAXANE (NAB-PACLITAXEL) (Suspect) (Powder for suspension for injection)(Unknown)  Cont											nt		ABA STO	TE PP	AFTE ING E	R DRU	G?			
													00	/I IL	ļ L	YES	_	N	0	NA
15. DAILY DOSE(S)		6. ROUTE(S) OF ADMINISTRATION ) Unknown										21. DID EVENT REAPPEAR								
Unknown							,									AFTER REINTRODUCTION				
															L	YES	_	N.		<b>∠</b> NA
17. INDICATION(S) FOR USE													(IN	IA : N	iot	Appii	cab	ie)		
Product used for unknown indication [10070592 - Product used for unknown indication]     IB. THERAPY DATE(S) (from/to)													1							
(Unknown - /May/2025)																				
III. CONCOMITANT DRUG(S) AND HISTORY																				
22. CONCOMITANT DRUG(S) AND DATES OF ADMINISTRATION (exclude those used to treat reaction)																				
No concomitants us	ed/reported																			
23. OTHER RELEVAN	T HISTORY (e.g. o	liagnostics,	allergies, pr	egnancy with I	ast mo	nth of pe	riod, etc.)	1												
MedDRA Version : v	v.28.0																			
Olikilowii																				
				IV. MANUFA	CTUF	ER INF	ORMAT	ION												
24a. NAME AND ADDI	RESS OF MANUFA	ACTURER																		
Name : BMS UNITED STATES O	F AMERICA																			
aepbusinessprocess																				
24.REPORT NULLIFIED 24b. MFR CONTROL NO.																				
2025-094536(1)																				
24c. DATE RECEIVED BY MANUFACTU		240	d. REPORT	SOURCE																
13/Jul/2025																				
DATE OF THIS REPORT  25a. REPORT TYPE																				
15/Jul/2025																				

= Continuation attached sheet(s)..

Mfr. CONTROL NO: 2025-094536(1)

Continuation Sheet for CIOMS report

7+13 DESCRIBE REACTION(S) (including relevant tests/lab data) (Continuation...)

## **Event Description:**

The below follow-up report was received by business partner {BP} Adium Pharma S.A. (formerly Tecnofarma) (reference number: HN-ADIUM-HN-0273-20250619) on 13-Jul-2025 and forwarded to BMS on 14-Jul-2025.

On July 1, 2025, a review of the VEEVA platform report covering the period from June 16, 2025, to June 22, 2025, was conducted. The comment reported by APM Doris Matute, from physician Enrique Guillermo Flores Conde, was identified. The comment was entered into the platform on June 19, 2025, on line 5648. The comment describes the situation: The doctor wants to know if we have evidence of squamous cell lung cancer. The active patient he had on Abraxane died. He has one patient under treatment. The results of the melanoma patient's mutations are pending. Study 067 was also presented to him to confirm that, regardless of BRAF, the melanoma patient is responding.

On July 1, 2025, a follow-up was conducted with APM, and the following was confirmed: The patient was not on Abraxane therapy when he died.

The patient completed treatment with Abraxane one month before his death in June. The patient completed treatment with Abraxane one month before his death in June. The source document does not mention the batch and expiration date of the medication. Reporting category: physician.

Further information cannot be obtained as there is no confirmation from the physician that Pharmacovigilance will contact him for future follow-up.

This report is related to DEVIATION-ACC-FV-003\_25.

This new information was received on July 13, 2025, via email, following up on a request from the licensor:

The notifier states that they cannot provide a causality assessment because the patient was in palliative care.

The notifier reports that the patient awaiting results is another patient.

The notifier has no information on additional products to report, no information on additional adverse events, and no information related to the patient (date of birth, age, race, ethnicity, age group, other causes of death, etiological factors, autopsy, family history, relevant medical history).

The notifier refers to the question: additional adverse events that do NOT apply were not adverse events; the patient died in palliative care and was not undergoing treatment.

The notifier has no further information as this information cannot be obtained.

Company Remarks (Sender's Comments):

This patient had died one month after completing therapy with nab-paclitaxel. Based on the limited information regarding the cause of death and autopsy reports, the reported fatal event is assessed not related to suspect therapy.

14.SUSPECT DRUG(S) (Continuation...)

Product-Reaction Level

1) Drug : ABRAXANE Active Substance : NAB-PACLITAXEL

Drug Characterization : Suspect

Form of Admin : Powder for suspension for injection

Lot Number : Unknown Route of Admin : Unknown

Indications : Product used for unknown indication [10070592 - Product used for unknown indication]

Therapy Dates : From : Unknown To :/May/2025

Action(s) Taken With Drug : Not applicable

Causality

1) DEATH (Death NOS - 10011914, Death - 10011906)
Causality as per reporter : No Information
Causality as per Mfr : Not Related
DeChallenge : Not applicable
ReChallenge : Not Applicable

Labeling:

1) DEATH

CORE UnLabeled

Mfr. CONTROL NO:2025-094536(1)

Continuation Sheet for CIOMS report

15. DAILY DOSE(S) (Continuation...)

Dosage Text : Drug 1 :ABRAXANE

1) Presentation: ABRAXANE 100 MG x 1 INY x 1 FCO

Primary Reporter: Name:Masked Masked Masked Physician HONDURAS