

# SUSPECT ADVERSE REACTION REPORT

## I. REACTION INFORMATION

1. PATIENT INITIALS (first, last) <b>PRIVACY</b>	1a. COUNTRY <b>PANAMA</b>	2. DATE OF BIRTH			2a. AGE <b>36 Years</b>	3. SEX <b>Female</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 <input type="checkbox"/> CONGENITAL ANOMALY  <input type="checkbox"/> OTHER
		Day	Month	Year				Day	Month	Year	
7 + 13 DESCRIBE REACTION(S) (including relevant tests/lab data) Event Verbatim [LOWER LEVEL TERM] (Related symptoms if any separated by commas) <b>Severe pain in her hips [Pain in hip] Headache [Headache]</b>  Case Description: This non-serious Solicited report (PANSL2023084108) was reported to Amgen on 15/MAY/2023 by a consumer from a patient support program (PSP10850) and involves a 36 year old female patient who had severe pain in her hips [PT: arthralgia] while receiving Amgevita (adalimumab, manufacturer Amgen).  No historical medical condition was reported.											
(Continued on Additional Information Page)											

## II. SUSPECT DRUG(S) INFORMATION

14. SUSPECT DRUG(S) (include generic name) <b>#1 ) AMGEVITA (adalimumab) Solution for injection</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 ) 40 milligram, q2wk</b>	16. ROUTE(S) OF ADMINISTRATION <b>#1 ) Subcutaneous use</b>	
17. INDICATION(S) FOR USE <b>#1 ) Rheumatoid arthritis (Rheumatoid arthritis)</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 ) 15-APR-2023 / 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 to Ongoing      Current Condition      Rheumatoid arthritis (Rheumatoid arthritis)</b>		

## IV. MANUFACTURER INFORMATION

24a. NAME AND ADDRESS OF MANUFACTURER <b>Amgen Ltd. Ana Carolina Uribe Cra 7 No. 123-35 Torre 123 Piso 6 Bogotá, COLOMBIA Phone: 57 3157008539</b>		26. REMARKS
	24b. MFR CONTROL NO. <b>PANSL2023084108</b>	
24c. DATE RECEIVED BY MANUFACTURER <b>09-JUN-2025</b>	24d. REPORT SOURCE <input type="checkbox"/> STUDY <input type="checkbox"/> LITERATURE <input type="checkbox"/> HEALTH PROFESSIONAL <input checked="" type="checkbox"/> OTHER: Solicited	
DATE OF THIS REPORT <b>12-JUN-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>

---

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

The patient's current medical condition included rheumatoid arthritis. No concomitant medications were provided. The physician advised patient to initiate prednisolone and Enantyum. No co-suspect medications were reported.

The patient began Amgevita on 15/APR/2023. Approximately 3 weeks later, on 11/MAY/2023, the patient had severe pain in her hips. No treatment information was received. The outcome of the event arthralgia was reported as not recovered/not resolved. Action taken with Amgevita was continued for the event arthralgia.

The causal relationship between the event arthralgia and Amgevita was not provided by the consumer. The follow up not been requested.

**ADDITIONAL INFORMATION RECEIVED ON 09/JUN/2025:**

On 31/MAY/2025, the patient experienced headache approximately two days after administering the medication (Amgevita) [PT: headache]. She managed it by taking acetaminophen. Treatment for the event headache included Acetaminophen (acetaminophen). The outcome of event headache was reported as recovered resolved. The event headache was resolved on 02/JUN/2025. Action taken with Amgevita was continued for the event headache. The consumer reported that the event headache was possibly related to Amgevita. No follow-up attempts are possible. No further information is expected.