SUS																				
2023US019655																				
I. REACTION INFORMATION																				
1. PATIENT INITIALS	GE		4-6 REA	ACTI	TION ONSET					8-12 CHECK ALL										
(first, last) Masked	Year		Years 87	Male	Day	·	Mont	h	Year		\dashv	T(O AD\	PRIAT VERSI	ΓE Ξ					
	ed PANAMA Day Month Year 87 Masked Masked Masked Masked 87 ESCRIBE REACTION(S) (including relevant tests/lab data)									Jan		2024			К	REACT	ION			
	8))								P.	ATIEN	T DIED									
1) Loss of muscle tone (Muscle tone decreased (10028344), Hypotonia (10021118)) (/Jan/2024 -) - Not Recovered/Not Resolved/Ongoing																	IREATE	NIN	G	
2) Urinary tract infection/ This infection became complicated (Complicated urinary tract infection (10080628), Urinary tract infection (10046571))													P	ROLO	'ED OR NGED I	NPA	TIENT			
(/May/2025 -) - Recovering/Resolving												¬ R	RESULT							
3) Dehydration (Dehydration (10012174), Dehydration (10012174)) Not Recovered/Not Resolved/Ongoing												M	s	IGNIFI	TENCE CANT LITY/ING					
4) Diarrhea (Diarrhea (10012727), Diarrhoea (10012735))															_		NITAL			
Not Recovered/Not Resolved/Ongoing													Con	t	_ 7 ¦	THER	MEDIC	ALLY	Y	
COTIL. MPORTANT CONDI												THON								
AA QUEDECT DDUG	0)/:		ı	I. SUSPECT	DRU	G(S)INF	ORMAT	ION						Inc		ID EV	/CNT			
14. SUSPECT DRUG(S)(include generic name) 1) Enzalutamide (ENZALUTAMIDE, Enzalutamide) (Suspect) (Open-Label) (40 Milligram, Capsule)(Unknown)											20.		ID EV BATE	AFTE PING D	R	20				
, ,	,		, , ,	,	,	`	,	• /	`		,		Cont			YES			na	
15. DAILY DOSE(S) 16.							TE(S) OF ADMINISTRATION 21. DID EVENT													
1) 160 milligram(s) (160 milligram(s), 1 in 1 Day)						1) Oral									Al	EAPP		OTIC	SNI SNI	
							REINTRODUCTION VES NO NA													
														1)	NA :	: Not	Applic	cabl		
17. INDICATION(S) FO																				
18. THERAPY DATE(S									1											
			III. (CONCOMITA	ANT D	RUG(S)	AND HIS	STORY	,											
22. CONCOMITANT D	` '	ES OF ADI	MINISTRATI	ON (exclude t	hose us	sed to tre	at reaction	1)												
No concomitants us	ed/reported																			
23. OTHER RELEVAN	T HISTORY (e.g. o	liagnostics,	allergies, pr	egnancy with	last mo	nth of pe	eriod, etc.)													
	, ,					·														
				IV. MANUFA	CTUF	RER INF	ORMATI	ON												
24a. NAME AND ADDI								Study Information												
Name : Astellas Pha 2375 Waterview Driv		elopment,	Inc.					dy Nam			tami	ide P	atien	t Sup	port	t Prog	gr (Co	nt))	
Northbrook, IL, 6006			EudraCT Number: Protocol No.: Enzalutamide_Astellas PSP																	
		Center No.:																		
	Sub	ject Id	:																	
24.REPORT NULLIFIED 24b. MFR CONTROL NO.																				
24c. DATE RECEIVED	4c. DATE RECEIVED 24d. REPORT SOURCE																			
BY MANUFACTU	RER		STUDY	LITE	RATURE	Ē														
04/Jun/2025 HEALTH PROFESSIONAL																				
DATE OF THIS REPO	RT	25 	a. REPORT																	
10/Jun/2025 Initial Followup																				

= Continuation attached sheet(s)..

Continuation Sheet for CIOMS report

- 7+13 DESCRIBE REACTION(S) (including relevant tests/lab data) (Continuation...)
- 5) Weakness when walking (Weakness (10047862), Asthenia (10003549) Not Recovered/Not Resolved/Ongoing)
- 6) Could not urinate due to infection (Unable to urinate (10076880), Urinary retention (10046555) Unknown)
- 7) Obstructed urethra (Urethral obstruction (10046459), Urethral obstruction (10046459) Unknown)

Event Description:

This case was received by Astellas business partner Tecnofarma S.A., on 28-Jun-2023, by an Other Health Professional (patient support manager) referring to an 87 years-old male patient and was received at Astellas from Tecnofarma S.A., on 28-Jun-2023 who was enrolled in post-marketing study: Enzalutamide Patient Support Program who was on Enzalutamide, Capsule (160 milligram(s), 1 every 1 Day). Indication for use was Prostate cancer.

Study no: Enzalutamide_Astellas PSP: Open label study.

The patient received enzalutamide for prostate cancer according to the following dosage regimen: (start date not provided) - (stop date not provided): Oral 160 mg, once daily.

The patient received Eligard (leuprorelin) for prostate cancer according to the following dosage regimen: 13-Oct-2022 - (ongoing): Subcutaneous 45 mg other (every 6 months) (Lyophilized for suspension).

Action taken with enzalutamide treatment in response to events (dehydration, diarrhea, weakness, urinary tract infection/ this infection became complicated, obstructed urethra and could not urinate) was withdrawn and action taken with leuprorelin treatment in response to events was no change.

Action taken with enzalutamide treatment in response to event loss of muscle tone was unknown.

On an unspecified date, the patient has had diarrhea for a week (no date indicated) and was taken to the hospital in an emergency because of dehydration due to diarrhea (dehydration). The patient continued with the symptoms mentioned above. They were not been able to make an appointment with the urologist because of current diarrhea.

On an unspecified date, the patient's wife reported that the patient had not been using the enzalutamide treatment for 2 weeks (no date indicated) by medical decision, because the medication caused a lot of diarrhea and this symptom caused a lot of weakness when walking. The patient's wife mentioned that patient will no longer continue with enzalutamide treatment but will continue with the leuprorelin treatment. She declined to provide further information

Upon follow up, patient's relative (wife) reported that three months ago (in Jan-2024), the patient lost muscle tone and was now in bed, where all his daily needs must be taken care of. The use of other medication other than leuprorelin was not reported, but follow-up will be done to confirm if the patient was still being treated with enzalutamide 40 mg.

Upon follow up on 04-Jun-2025, The patient reported that he had a urinary tract infection (intensity: severe) that occurred in May-2025 and was hospitalized for 12 days. The patient treated with antibiotic treatment in hospital. This infection became complicated because his urethra became obstructed and he required bladder surgery to be able to urinate, as he was unable to urinate due to the infection.

The outcome of events dehydration, diarrhea, weakness when walking and loss of muscle tone was reported as not recovered/not resolved. The outcome of the event urinary tract infection/ this infection became complicated was reported as recovering/resolving (was in recovery) as of 24-May-2025, the outcome of the events obstructed urethra and could not urinate due to infection was unknown.

Medical history was not reported.

Past medications were not reported.

Concomitant medications were not reported.

No relevant lab data was reported.

The other health professional and patient's wife assessed the following events with respect to enzalutamide and leuprorelin:

- Dehydration (seriousness: Serious (Hospitalization); causality: Not Assessed)
- Diarrhea (seriousness: Serious (Hospitalization); causality: Not Assessed)
- Weakness when walking (seriousness: Serious (Medically Significant); causality: Not Assessed)
- Loss of muscle tone (seriousness: Serious (Disability); causality: Not Assessed)

The patient assessed the following events with respect to enzalutamide and leuprorelin:

- Urinary tract infection/ This infection became complicated (seriousness: Serious (Hospitalization); causality: Not Assessed)
- Obstructed urethra (seriousness: Serious (Hospitalization); causality: Not Assessed)
- Could not urinate due to infection (seriousness: Serious (Hospitalization, Disability); causality: Not Assessed)

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Consent to contact patient and Other health professional for follow-up information was denied.

Tracking of changes

28-Jun-2023: Initial information was received.

Follow-up information was received on 25-Jul-2023: New event (Weakness when walking) added, enzalutamide therapy details, action taken and clinical description updated.

Follow-up information was received by Astellas business partner Tecnofarma S.A. on 20-Mar-2024 from another healthcare professional via patient's wife and was received at Astellas from Tecnofarma S.A. on 21-Mar-2024: Added new event Loss of muscle tone, clinical description, updated seriousness of the event Weakness when walking from non-serious to Serious (Medically Significant) and added leuprorelin therapy details, updated action taken statement.

Follow-up information was received by Astellas business partner Adium on 04-Jun-2025, 05-Jun-2025 from patient and was received at Astellas from Adium on 05-Jun-2025, 06-Jun-2025: Reporter details, leuprorelin details (lot number, expiry date) added new events "urinary tract infection/ this infection became complicated", "obstructed urethra" and "could not urinate due to infection" added and narrative was updated.

Company Remarks (Sender's Comments):

Event Information:

Unable to urinate was assessed as Serious due to Disability/Permanent Damage and Caused/Prolonged Hospitalization.

Weakness was assessed as Non-Serious, based on event not meeting ICH seriousness criteria.

Muscle tone decreased was assessed as Serious due to Disability/Permanent Damage.

Dehydration, Diarrhea, Urethral obstruction and Complicated urinary tract infection were assessed as Serious due to Caused/Prolonged Hospitalization.

All events coded to closest available MedDRA terms to reflect reported information.

Product: Enzalutamide

Astellas assessed Diarrhea and Weakness as Related based on temporal relationship. The confounders for Weakness include concurrent event: Diarrhoea, underlying malignancy and elderly age of patient. Dehydration was assessed as Not Related, as it can be attributed to Diarrhea. The de challenge was negative. Muscle tone decreased and Urethral obstruction as Not Related, based on available information for this case, a reasonable possibility to suggest a relationship between the suspect therapy and the reported events cannot be established. The confounders include elderly age of patient and underlying malignancy. Astellas assessed Complicated urinary tract infection as Not Related, as it can be attributed to Urethral obstruction and low immune state due to elderly age of patient, underlying malignancy. Unable to urinate as Not Related as it can be attributed to Urethral obstruction.

Product: Leuprorelin

Astellas assessed Dehydration, Weakness as Not Related, as these events were due to Diarrhoea. Additional confounders for Weakness include underlying malignancy and elderly age of patient. Diarrhoea as Not Related, as it can be attributed to enzalutamide. Muscle tone decreased and Urethral obstruction as Not Related, based on available information for this case, a reasonable possibility to suggest a relationship between the suspect therapy and the reported events cannot be established. The confounders include elderly age of patient and underlying malignancy. Astellas assessed Complicated urinary tract infection as Not Related, as it can be attributed to Urethral obstruction and low immune state due to elderly age of patient, underlying malignancy. Unable to urinate as Not Related as it can be attributed to Urethral obstruction.

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

Product-Reaction Level

1) Drug : Enzalutamide (ENZALUTAMIDE)

Active Substance : 1) Enzalutamide
Coding Class : Open-Label
Drug Characterization : Suspect
Form Strength : 1) 40 Milligram
Form of Admin : 1) Capsule
Lot Number : 1) Unknown

Daily Dose : 1) 160 milligram(s) (160 milligram(s), 1 in 1 Day)

Route of Admin : 1) Oral

Indications : 1) Prostate cancer [10060862 - Prostate cancer]

Action(s) Taken With Drug : Drug withdrawn

Causality

1) Loss of muscle tone (Muscle tone decreased - 10028344, Hypotonia - 10021118)

Causality as per reporter : Not assessed
Causality as per Mfr : Not Related
ReChallenge : Not Applicable

2) Urinary tract infection / This infection became complicated (Complicated urinary tract infection - 10080628, Urinary tract infection - 10046571)

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Causality as per reporter : Not assessed
Causality as per Mfr : Not Related
DeChallenge : Not applicable

3) Dehydration (Dehydration - 10012174, Dehydration - 10012174)

Causality as per reporter Not assessed Causality as per Mfr Not Related DeChallenge : Negative ReChallenge : Not Applicable 4) Diarrhea (Diarrhea - 10012727, Diarrhoea - 10012735) Causality as per reporter : Not assessed Causality as per Mfr Related DeChallenge : Negative ReChallenge : Not Applicable

5) Weakness when walking (Weakness - 10047862, Asthenia - 10003549)

Causality as per reporter : Not assessed
Causality as per Mfr : Related
DeChallenge : Negative
ReChallenge : Not Applicable

6) Could not urinate due to infection (Unable to urinate - 10076880, Urinary retention - 10046555)

Causality as per reporter : Not assessed
Causality as per Mfr : Not Related
DeChallenge : Not applicable

7) Obstructed urethra (Urethral obstruction - 10046459, Urethral obstruction - 10046459)

Causality as per reporter : Not assessed
Causality as per Mfr : Not Related
DeChallenge : Not applicable

Labeling:

1) Loss of muscle tone

CORE UnLabeled
IB UnLabeled
2) Urinary tract infection/ This infection became complicated
CORE UnLabeled
IB UnLabeled

3) Dehydration

CORE UnLabeled IB UnLabeled

4) Diarrhea

CORE Labeled IB Labeled

5) Weakness when walking

CORE Labeled IB Labeled

6) Could not urinate due to infection

CORE UnLabeled IB UnLabeled

7) Obstructed urethra

CORE UnLabeled IB UnLabeled

2) Drug : Eligard (LEUPRORELIN)
Active Substance : 1) LEUPRORELIN

Drug Characterization : Suspect
Form Strength : 1) 45 Milligram
Form of Admin : 1) Injection
Lot Number : 1) L15276CUY

Daily Dose : 1) 0.25 milligram(s) (45 milligram(s), 1 in 6 Month)

Route of Admin : 1) Subcutaneous

Indications : 1) Prostate cancer [10060862 - Prostate cancer]
Therapy Dates : 1) From : 13/Oct/2022 To :Continuing

Action(s) Taken With Drug : Dose not changed

Causality

1) Loss of muscle tone (Muscle tone decreased - 10028344, Hypotonia - 10021118)

Causality as per reporter : Not assessed
Causality as per Mfr : Not Related
DeChallenge : Not applicable

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ReChallenge : Not Applicable

2) Urinary tract infection / This infection became complicated (Complicated urinary tract infection - 10080628, Urinary tract infection - 10046571)

Causality as per reporter : Not assessed
Causality as per Mfr : Not Related
DeChallenge : Not applicable
ReChallenge : Not Applicable

3) Dehydration (Dehydration - 10012174, Dehydration - 10012174)

Causality as per reporter : Not assessed Causality as per Mfr : Not Related DeChallenge : Not applicable ReChallenge : Not Applicable 4) Diarrhea (Diarrhea - 10012727, Diarrhoea - 10012735) Causality as per reporter : Not assessed Causality as per Mfr : Not Related DeChallenge : Not applicable ReChallenge : Not Applicable

5) Weakness when walking (Weakness - 10047862, Asthenia - 10003549)

Causality as per reporter : Not assessed
Causality as per Mfr : Not Related
DeChallenge : Not applicable
ReChallenge : Not Applicable

6) Could not urinate due to infection (Unable to urinate - 10076880, Urinary retention - 10046555)

Causality as per reporter : Not assessed
Causality as per Mfr : Not Related
DeChallenge : Not applicable
ReChallenge : Not Applicable

7) Obstructed urethra (Urethral obstruction - 10046459, Urethral obstruction - 10046459)

Causality as per reporter : Not assessed
Causality as per Mfr : Not Related
DeChallenge : Not applicable
ReChallenge : Not Applicable

Labeling:

1) Loss of muscle tone

CORE UnLabeled IB UnLabeled
2) Urinary tract infection/ This infection became complicated CORE Labeled IB Labeled

3) Dehydration

CORE UnLabeled IB UnLabeled

4) Diarrhea

CORE Labeled lB Labeled

5) Weakness when walking

CORE Labeled IB Labeled

6) Could not urinate due to infection

CORE Labeled IB Labeled

7) Obstructed urethra

CORE UnLabeled IB UnLabeled

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

Dosage Text : Drug 1 :Enzalutamide 1) 160 mg, once daily

Drug 2 :Leuprorelin

1) 45 mg, other (every 6 months, lyophilized, for suspension)

24a. NAME AND ADDRESS OF MANUFACTURER (Continuation...)

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Study # :Enzalutamide_Astellas PSP