

<p style="text-align: center;">SUSPECT ADVERSE REACTION REPORT</p> <p>PA-Tolmar-TLM-2025-01201</p>												

I. REACTION INFORMATION

1. PATIENT INITIALS (first, last) P-R	1a. COUNTRY PANAMA	2. DATE OF BIRTH			2a. AGE Years 88	3. SEX Male	4-6 REACTION ONSET			8-12 CHECK ALL APPROPRIATE TO ADVERSE REACTION <input type="checkbox"/> PATIENT DIED <input type="checkbox"/> LIFE THREATENING <input type="checkbox"/> INVOLVED OR PROLONGED INPATIENT HOSPITALIZATION <input type="checkbox"/> RESULTS IN PERSISTENCE OR SIGNIFICANT DISABILITY/INCAPACITY <input type="checkbox"/> CONGENITAL ANOMALY <input type="checkbox"/> OTHER MEDICALLY IMPORTANT CONDITION
		Day 18	Month Jan	Year 1937			Day	Month	Year	
7+13 DESCRIBE REACTION(S) (including relevant tests/lab data) 1) Cessation of therapy by the healthcare professional (Therapy cessation by healthcare provider (10072906), Therapy cessation (10065154)) Unknown 2) didn't feel like doing anything (Depressed mood (10012374), Depressed mood (10012374)) Not Recovered/Not Resolved/Ongoing 3) A lot of weakness (Weakness (10047862), Asthenia (10003549)) Not Recovered/Not Resolved/Ongoing										

II. SUSPECT DRUG(S) INFORMATION

14. SUSPECT DRUG(S)(include generic name) 1) Eligard® (Leuprolide acetate, Leuprolide acetate) (Suspect) (Injection)(Unknown)(Unknown)		20. DID EVENT ABATE AFTER STOPPING DRUG? <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> NA 21. DID EVENT REAPPEAR AFTER REINTRODUCTION <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> NA (NA : Not Applicable)
15. DAILY DOSE(S) 1) (45 milligram(s), 1 in 6 Month) 2) (45 milligram(s), 1 in 6 Month)	16. ROUTE(S) OF ADMINISTRATION 1) Subcutaneous 2) Subcutaneous	
17. INDICATION(S) FOR USE 1) Prostate cancer [10060862 - Prostate cancer]		
18. THERAPY DATE(S) (from/to) 1) (31/Mar/2023 - UNK)	19. THERAPY DURATION	

III. CONCOMITANT DRUG(S) AND HISTORY

22. CONCOMITANT DRUG(S) AND DATES OF ADMINISTRATION (exclude those used to treat reaction) 1) Amlodipine(AMLODIPINE)	Cont..
23. OTHER RELEVANT HISTORY (e.g. diagnostics, allergies, pregnancy with last month of period, etc.) 1) PROSTATE CANCER (10060862, Prostate cancer) (Continuing: Yes)	Cont..

IV. MANUFACTURER INFORMATION

24a. NAME AND ADDRESS OF MANUFACTURER Name : Tolmar, Inc 701 Centre Avenue Fort Collins, CO, 80526, UNITED STATES OF AMERICA debbie.maierhofer@tolmar.comand+1-4129158447		Study Information Study Name: NA EudraCT Number: Protocol No.: NA Center No.: Subject Id :	
24. REPORT NULLIFIED <input type="checkbox"/> YES <input type="checkbox"/> NO	24b. MFR CONTROL NO. PA-Tolmar-TLM-2025-01201		
24c. DATE RECEIVED BY MANUFACTURER 28/Apr/2025	24d. REPORT SOURCE <input checked="" type="checkbox"/> STUDY <input type="checkbox"/> LITERATURE <input type="checkbox"/> HEALTH PROFESSIONAL		
DATE OF THIS REPORT 09/May/2025	25a. REPORT TYPE <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> FOLLOWUP		

= Continuation attached sheet(s)..

Continuation Sheet for CIOMS report

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

Event Description :

This study report from Panama was received by Adium via Patient Support Program (Reference number: PA-ADIUM-PA-0046-20250428) on 28-Apr-2025 from a consumer (non-healthcare professional) regarding an elderly, 88-year-old male patient who experienced non-serious events of 'a lot of weakness' (asthenia), 'didn't feel like doing anything' (depressed mood), 'Cessation of therapy by the healthcare professional' (therapy cessation) during Eligard (leuprolide acetate) 45 mg therapy for Prostate cancer. The needle component of the constituent device was not identified in the report. The report was sent to Tolmar on 01-May-2025.

The patient's medical history was unknown and current condition included prostate cancer and hypertension.

Concomitant medication included amlodipine.

On 31-Mar-2023, the patient began receiving Eligard 45 mg, every 6 months, via subcutaneous route, for Prostate cancer (Lot numbers and Expiration dates were not provided).

On an unknown date, the patient received Eligard 45 mg, every 6 months, via subcutaneous route, for prostate cancer (Lot numbers and Expiration dates were not provided). He experienced extreme weakness and a lack of desire to do anything that he continued to experience the symptoms but assumed that those aforementioned symptoms were normal because the testosterone hormone kept him agile and energetic. It was his hormone the body needs and gave him motivation, and if it was reduced due to a lack of testosterone.

On 21-Apr-2025, the patient had a testosterone test.

On 22-Apr-2025, the patient went to see the doctor to validate the results, which were 0.05 ng/ml. The doctor told the patient these were the levels he should have and scheduled his next appointment (for 20 or 25-May-2025), to have his testosterone levels checked again and determine whether or not to administer Eligard. The patient mentioned that his testosterone levels were being monitored with blood tests to validate his levels, and based on the results, he was given Eligard.

Corrective treatment was not reported.

Relevant test results included:

On 21-Apr-2025: Testosterone: 0.05 ng/ml (Ref. range not provided)

On an unknown date: Testosterone: Testosterone levels continued to be low (Ref. range not provided)

Action taken with Eligard in response to events was unknown. De-challenge and re-challenge were not applicable.

The outcomes of asthenia, depressed mood were not resolved, and therapy cessation was unknown.

The reporter did not assess the seriousness of asthenia, depressed mood and therapy cessation.

The reporter did not provide the causality of asthenia, depressed mood and therapy cessation in relationship to Eligard and Eligard unspecified device.

No follow-up queries were raised.

Listedness

Therapy cessation >Eligard® >unlisted as per CCDS Eligard®> 7-Nov-2024

Therapy cessation> Eligard® >unlisted as per Canadian Monograph Eligard®> 2-Apr-2025

Therapy cessation> Eligard®>unlisted as per USPI Eligard®>Feb-2025

Therapy cessation> Eligard® Unspecified Device>unlisted as per USPI Eligard®>Feb-2025

Asthenia>Eligard® >listed as per CCDS Eligard®> 7-Nov-2024

Asthenia> Eligard® >listed as per Canadian Monograph Eligard®> 2-Apr-2025

Asthenia> Eligard®>listed as per USPI Eligard®>Feb-2025

Asthenia> Eligard® Unspecified Device> listed as per USPI Eligard®>Feb-2025

Depressed mood >Eligard® >listed as per CCDS Eligard®> 7-Nov-2024

Depressed mood > Eligard® >listed as per Canadian Monograph Eligard®> 2-Apr-2025

Depressed mood > Eligard®>listed as per USPI Eligard®>Feb-2025

Depressed mood > Eligard® Unspecified Device> listed as per USPI Eligard®>Feb-2025

Company Remarks (Sender's Comments) :

Evaluator comment (Tolmar): This is regarding an elderly, 88-year-old male patient who experienced asthenia (a lot of weakness), depressed mood (didn't feel like doing anything) and therapy cessation (Cessation of therapy by the healthcare professional) during Eligard (leuprolide acetate) 45 mg therapy for Prostate cancer. Tolmar assessed the reported events as non-serious since they did not meet the ICH seriousness criteria. The causality of events asthenia and depressed mood were assessed as related to suspect drug Eligard(not related to device) considering the known safety profile

of the drug, elderly age and prostate cancer could be confounders for the events. The causality of the event therapy cessation was assessed as not related to suspect Eligard(drug and device) as it was a decision made by health care professional in response to the underlying condition and testosterone values.

Lab Result :

Test Name	Test Date	Test Result	Normal Value
TESTOSTERONE	21/Apr/2025	0.05 nanogram per milliliter	
TESTOSTERONE	Unknown		

2) Test Name: TESTOSTERONE

Test Date: Unknown

Product-Reaction Level

1) Drug	: Eligard® (Leuprolide acetate)
Active Substance	: 1) Leuprolide acetate
Drug Characterization	: Suspect
Form of Admin	: 1) Injection 2) Injection
Lot Number	: 1) Unknown 2) Unknown
Daily Dose	: (45 milligram(s), 1 in 6 Month) (45 milligram(s), 1 in 6 Month)
Route of Admin	: 1) Subcutaneous 2) Subcutaneous
Indications	: 1) Prostate cancer [10060862 - Prostate cancer]
Therapy Dates	: 1) From : 31/Mar/2023 To :Unknown
Action(s) Taken With Drug	: Unknown

1) Cessation of therapy by the healthcare professional (Therapy cessation by healthcare provider - 10072906, Therapy cessation - 10065154)

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

2) didn't feel like doing anything (Depressed mood - 10012374, Depressed mood - 10012374)

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

3) A lot of weakness (Weakness - 10047862, Asthenia - 10003549)

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

1) Cessation of therapy by the healthcare professional	CORE	UnLabeled
2) didn't feel like doing anything	CORE	Labeled
3) A lot of weakness	CORE	Labeled

2) Drug : Eligard® Unspecified Device (Leuprolide acetate)

Continuation Sheet for CIOMS report

Active Substance : 1) Leuprolide acetate
 Drug Characterization : Suspect
 Form of Admin : 1) Injection
 Lot Number : 1) Unknown
 Indications : 1) Prostate cancer [10060862 - Prostate cancer]
 Action(s) Taken With Drug : Not applicable

Causality

- 1) Cessation of therapy by the healthcare professional (Therapy cessation by healthcare provider - 10072906, Therapy cessation - 10065154)
- Causality as per reporter : Not Reported
 Causality as per Mfr : Not Related
 DeChallenge : Not applicable
 ReChallenge : Not Applicable
- 2) didn't feel like doing anything (Depressed mood - 10012374, Depressed mood - 10012374)
- Causality as per reporter : Not Reported
 Causality as per Mfr : Not Related
 DeChallenge : Not applicable
 ReChallenge : Not Applicable
- 3) A lot of weakness (Weakness - 10047862, Asthenia - 10003549)
- Causality as per reporter : Not Reported
 Causality as per Mfr : Not Related
 DeChallenge : Not applicable
 ReChallenge : Not Applicable

Labeling :

- 1) Cessation of therapy by the healthcare professional
CORE
- 2) didn't feel like doing anything
CORE
- 3) A lot of weakness
CORE

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

Dosage Text :

Drug 1 :Eligard®

- 1) ELIGARD 45 MG x 1 LIO x 1 JER

22.CONCOMITANT DRUG(S) (Continuation...)

1). Drug : Amlodipine

Active Substance : 1) AMLODIPINE

Form Strength :

Daily Dose : 1) (1 in 1 Day)

Indications : 1) hypertension [10020772 - Hypertension]

23. OTHER RELEVANT HISTORY (Continuation...)

- 2) HYPERTENSION (HIGH BLOOD PRESSURE) (10020772 , Hypertension) (Continuing : YES)