

# 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>62</b> Years	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
		Day	Month	Year				Day	Month	Year	
			<b>PRIVACY</b>					<b>12</b>	<b>JUN</b>	<b>2025</b>	

7 + 13 DESCRIBE REACTION(S) (including relevant tests/lab data)  
Event Verbatim [PREFERRED TERM] (Related symptoms if any separated by commas)  
Taking 150 milligrams once a day for one week [Off label use]  
Mild fatigue [Fatigue]

Case Description: This solicited case, reported by a consumer via a patient support program (PSP), concerned a 62-year-old female patient of an unknown ethnicity.

Medical history and concomitant medications were not provided.

The patient received abemaciclib (Verzenio) tablet, at 150 mg dose,

(Continued on Additional Information Page)

## II. SUSPECT DRUG(S) INFORMATION

14. SUSPECT DRUG(S) (include generic name) #1 ) Abemaciclib (Abemaciclib) Film-coated 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 ) Breast cancer (Breast cancer)		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 ) 12-JUN-2025 / 19-JUN-2025	19. THERAPY DURATION #1 ) 8 days	

## 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 Unknown		

## IV. MANUFACTURER INFORMATION

24a. NAME AND ADDRESS OF MANUFACTURER Eli Lilly & Company Dario Merchant Cl 74 Y Av 3b Sur San Fco PANAMA Phone: 507 430-1733		26. REMARKS
	24b. MFR CONTROL NO. <b>PA202506019183</b>	25b. NAME AND ADDRESS OF REPORTER NAME AND ADDRESS WITHHELD.
24c. DATE RECEIVED BY MANUFACTURER <b>18-JUL-2025</b>	24d. REPORT SOURCE <input checked="" type="checkbox"/> STUDY <input type="checkbox"/> LITERATURE <input type="checkbox"/> HEALTH PROFESSIONAL <input type="checkbox"/> OTHER:	NAME AND ADDRESS WITHHELD.
DATE OF THIS REPORT <b>24-JUL-2025</b>	25a. REPORT TYPE <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> FOLLOWUP:	NAME AND ADDRESS WITHHELD.

ADDITIONAL INFORMATION

7+13. DESCRIBE REACTION(S) continued

daily, orally for the indication of breast cancer beginning on 12-Jun-2025. Since 12-Jun-2025, she was administering abemaciclib 150 mg once a day for one week (Off label use) and discontinued this regimen on 19-Jun-2025. On 20-Jun-2025, she started administering full dose of abemaciclib which was 150 mg every 12 hours (twice daily). On 08-Jul-2025, while on abemaciclib therapy, she experienced mild fatigue that had already been resolved. No corrective treatment was reported for the events fatigue and off label use. The outcome for the events was recovered. The status of abemaciclib was ongoing with 150 mg twice daily regimen. Follow-up was not possible with reporter and treating physician as reporter did not agree to be contacted for future follow-up.

The initial reporting consumer assessed the relatedness of event fatigue as related to abemaciclib and assessed as not related for the event off label use with abemaciclib therapy.

Update 23-Jun-2025: This case was determined to be non-valid as there was no identifiable valid event; it was reported that the doctor started her on a reduced dose: taking 150 mg once a day for one week and then, she should begin taking 150 mg twice a day. As of 18-Jun-2025, abemaciclib was ongoing at daily dose. On 20-Jun-2025, she would start abemaciclib at twice daily dose. Follow-up could not be attempted since the reporter did not agree to be contacted nor treating physician.

Update 28-Jun-2025: Additional information received on 23-Jun-2025 from initial consumer. Added stopped date for 150 mg once a day dose. Updated outcome of event from recovering to recovered. On 19-Jun-2025, the patient stopped off label dosing of abemaciclib 150 mg once a day dose. She started receiving abemaciclib 150mg twice a day on 20-Jun-2025. The patient continued abemaciclib 150mg twice a day dose. The case remain non-valid as there was no identifiable adverse event. Follow up was not possible as consent to contact denied by the initial reporter and healthcare professional (HCP).

Update 23-Jul-2025: This case was initially determined to be non-valid due to no identifiable valid adverse event; however additional medically significant information received from the initial reporter on 18-Jul-2025 via PSP which contained valid non-serious adverse event of fatigue. Added event of fatigue. Updated report type from non-valid to valid and narrative amended accordingly.

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) Film-coated tablet; Regimen #2	150 mg, bid; Oral	Breast cancer (Breast cancer)	20-JUN-2025 / Ongoing; Unknown