															CIC	MS	3 F	OF	RM
SHEDE/																			
SUSPEC	CT ADVERSE	KEACI	ION REPO	ıK I															
											<u> </u>			丄					<u> </u>
			I. REA	CTION	INFOR	MATION													
PATIENT INITIALS (first, last)	1a. COUNTRY	2. Day	ATE OF BIRTH Month Year	2a. AGE	3. SEX	3a. WEIGHT	4-6 Day	_	Month		SET Year	8-12	AF	CHECK AL	OPRIA [®]				
PRIVACY	PANAMA		RIVACY	38 Years	Female	Unk	Day		Unk		Teal		AD	VEF	RSE R	EACT	ION		
7 + 13 DESCRIBE REACTION(S) (including relevant tests/lab data) Event Verbatim [LOWER LEVEL TERM] (Related symptoms if any separated by commas) swelling in her knees [Knee swelling] normally, it should have been two injections, but to avoid running out, she tried to use only one [Intentional misuse by dose change] what had been flaring up were joint pains [Clinical flare reaction] Case Description: This is a spontaneous report received from a Consumer or other non HCP, Program ID:											PATIENT DIED INVOLVED OR PROLONGED INPATIENT HOSPITALISATION INVOLVED PERSISTENT OR SIGNIFICANT DISABILITY OR INCAPACITY								
A 38-year-old female patient received etanercept (ENBREL), since 2012 (ongoing) (Lot number: LE3059,											☐ UFE								
Expiration Date: Oct2026) at 50 mg weekly. (Continued on Additional Information Page											Page	<u> </u>	→ TH	IREA	ATENIN	NG			
			II. SUSPEC	T DRU	JG(S) IN	FORMA	TION	1											
14. SUSPECT DRUG(S) (include generic name) #1) Enbrel (ETANERCEPT) Solution for injection in pre-filled syringe {Lot # LE3059; Exp.Dt. OCT-2026} #2) Enbrel (ETANERCEPT (DEVICE CONSTITUENT)) Solution for injection in pre-filled syringe											20. DID REACTION ABATE AFTER STOPPING DRUG?								
15. DAILY DOSE(S) #1) 50 mg, weekly #2)		#1) Unkno	. ROUTE(S) OF ADMINISTRATION) Unknown 2) Unknown							YES NO NA									
17. INDICATION(S) FOR USE #1) Unknown #2) Unknown										21. DID REACTION REAPPEAR AFTER REINTRODUCTION?									
#1) 2012 / Ongoing						THERAPY DURATION) Unknown) Unknown							YES NO NA						
m2 y children																			
22 CONCOMITANT DRI	JG(S) AND DATES OF ADI		CONCOMIT		,) AND H	ISTC	DR'	<u>′</u>										
22. CONCOMITANT DRO	JG(3) AND DATES OF ADI	WIINISTRATI	ON (exclude those us	sed to treat i	eaction														
23. OTHER RELEVANT I From/To Dates Unknown	HISTORY. (e.g. diagnostics		regnancy with last mo e of History / Notes	onth of perio	od, etc.) Description														
			I) / MANII IE	-ACTU	DED INI														
IV. MANUFACTURER INFORMATION 24a. NAME AND ADDRESS OF MANUFACTURER 26. REMARKS																			
Pfizer S.A. Laura Arce Mora Avenida Escazú, Torre Lexus, piso 7. Escazú San jose, COSTA RICA																			
	24b. MFR CO			25b. NAME AND ADDRESS OF REPORTER NAME AND ADDRESS WITHHELD.															
24c. DATE RECEIVED BY MANUFACTURE	24d. REPOR	T SOURCE			NAM	E AND ADD	RESS	WI	THHE	ELD.	•								
20-AUG-2025																			
DATE OF THIS REPORT 25-AUG-2025	25a. REPOR		FOLLOWUP:																

ADDITIONAL INFORMATION

7+13. DESCRIBE REACTION(S) continued

The patient's relevant medical history and concomitant medications were not reported.

The following information was reported: INTENTIONAL PRODUCT MISUSE (non-serious), outcome "unknown", described as "normally, it should have been two injections, but to avoid running out, she tried to use only one"; CONDITION AGGRAVATED (non-serious), outcome "unknown", described as "what had been flaring up were joint pains"; JOINT SWELLING (non-serious), outcome "unknown", described as "swelling in her knees". The action taken for etanercept was dosage not changed.

Additional information: The patient reported she administered the Enbrel herself. Her doctor was a private consultant, and during the last appointment, he gave her a prescription that would last until the following month. On 19Aug2025 she administered one of the injections; normally, it should have been two, but to avoid running out, she tried to use only one, since she was quite stable. What had been flaring up, her doctor had already warned her, was joint pains. Recently, she experienced swelling in her knees, something that hadn't happened before. For the time being, she would not be able to visit the doctor because she didn't have the financial resources to pay for the consultation. When she was without medication, she didn't inject herself; she bought topical creams, like betamethasone, just to avoid breaking out and to prevent lesions on her body.