

Part VI: Summary of the risk management plan

Summary of risk management plan for Dexine (dexamfetamine), tablets:

This is a summary of the risk management plan (RMP) for Dexine tablets. The RMP details important risks of Dexine, how these risks can be minimised, and how more information will be obtained about Dexine's risks and uncertainties (missing information).

Dexine summary of product characteristics (SmPC) and its package leaflet give essential information to healthcare professionals and patients on how Dexine should be used.

I. The medicine and what it is used for

Dexine is authorised for treatment of attention deficit/hyperactivity disorder as a part of a comprehensive treatment programme (see SmPC for the full indication).

It contains dexamfetamine as the active substance and it is given by oral administration.

II. Risks associated with the medicine and activities to minimise or further characterise the risks

Important risks of Dexine, together with measures to minimise such risks and the proposed studies for learning more about Dexine's risks, are outlined below.

Measures to minimize the risks identified for medicinal products are:

- Specific information, such as warnings, precautions, and advice on correct use, in the package leaflet and SmPC addressed to patients and healthcare professionals;
- Important advice on the medicine's packaging;
- The authorized pack size — the amount of medicine in a pack is chosen so to ensure that the medicine is used correctly;
- The medicine's legal status — the way a medicine is supplied to the patient (e.g., with or without prescription) can help to minimize its risks.

Together, these measures constitute routine risk minimization measures.

In the case of Dexine, these measures are supplemented with additional risk minimisation measures mentioned under relevant important risks, below.

In addition to these measures, information about adverse reactions is collected continuously and regularly analysed, including PSUR assessment, so that immediate action can be taken as necessary. These measures constitute *routine pharmacovigilance activities*.

II.A List of important risks and missing information

Important risks of Dexine are risks that need special risk management activities to further investigate or minimise the risk, so that the medicinal product can be safely taken. Important risks can be regarded as identified or potential. Identified risks are concerns for which there is sufficient proof of a link with the use of Dexine. Potential risks are concerns for which an association with the use of this medicine is possible based on available data, but this association has not been established yet and needs further evaluation. Missing information refers to information on the safety of the medicinal product that is currently missing and needs to be collected (e.g., on the long-term use of the medicine).

List of important risks and missing information	
Important identified risks	• Drug abuse, misuse, diversion and dependence • Cardiovascular disorders (arterial hypertension, arrhythmias, cardiac ischaemia, and cardiotoxicity) • Psychiatric disorders (including depression, suicidality, aggression and psychosis) • Growth and development restriction
Important potential risks	None
Missing information	• Long-term safety (cardiovascular, growth, neurological, cognition and psychotic)

II.B Summary of important risks

Important identified risk: Drug abuse, misuse, diversion and dependence	
Evidence for linking the risk to the medicine	The stimulant medications used for ADHD treatment have been suggested to be associated with potential to drug abuse, misuse, diversion and dependence.
Risk factors and risk groups	Patients with history of drug abuse or alcohol abuse (contraindication); Adolescents aged 13-17 years.
Risk minimisation measures	Routine risk minimisation measures: SmPC sections 4.1, 4.3 and 4.4 PL section 2 and 3 Additional risk minimisation measures: Guide for Healthcare Professionals and Guide for Carers
Important identified risk: Cardiovascular disorders (arterial hypertension, arrhythmias, cardiac ischaemia, and cardiotoxicity)	
Evidence for linking the risk to the medicine	The stimulant medications used for ADHD treatment have been suggested to be associated with serious cardiovascular events such as sudden cardiac death. FDA safety review (2011) concluded that there is no association between

	pharmacotherapy with ADHD medications and adverse cardiac events in children.
Risk factors and risk groups	Patients with pre-existing cardiovascular diseases.
Risk minimisation measures	Routine risk minimisation measures: SmPC sections 4.3, 4.4, 4.5 and 4.8 PL section 2 and 4 Additional risk minimisation measures: Guide for Healthcare Professionals
Important identified risk: Psychiatric disorders (including depression, suicidality, aggression and psychosis)	
Evidence for linking the risk to the medicine	Irritability, anxiety, obsessive thoughts, depressed mood, euphoria, self-injury and suicidality have been reported in association with use of dexamfetamine.
Risk factors and risk groups	Patients with pre-existing psychiatric disorders.
Risk minimisation measures	Routine risk minimisation measures: SmPC sections 4.3, 4.4 and 4.8 PL section 2 and 4 Additional risk minimisation measures: Guide for Healthcare Professionals
Important identified risk: Growth and development restriction	
Evidence for linking the risk to the medicine	Moderately reduced weight gain and growth retardation have been reported with the long-term use of dexamfetamine in children. The effects of dexamfetamine on final height and final weight are currently unknown and being studied.
Risk factors and risk groups	Children and adolescents.
Risk minimisation measures	Routine risk minimisation measures: SmPC section 4.4, 4.8 PL section 2, section 4 Additional risk minimisation measures: Guide for Healthcare Professionals

Missing information: Long-term safety (cardiovascular, growth, neurological, cognition and psychotic)	
Risk minimisation measures	Routine risk minimisation measures: SmPC sections 4.3, 4.4 and 4.8 PL section 3 and 4

II.C Post-authorisation development plan

II.C.1 Studies which are conditions of the marketing authorisation

There are no studies which are conditions of the marketing authorisation or specific obligation of Dexine.

II.C.2 Other studies in post-authorisation development plan

There are no studies required for Dexine.