Part VI: Summary of the risk management plan

Summary of risk management plan for Trabectedin STADA (Trabectedin)

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

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

Important new concerns or changes to the current ones will be included in updates of Trabectedin STADA's RMP.

I. The medicine and what it is used for

Trabectedin STADA is authorised for the treatment of adult patients with advanced soft tissue sarcoma, after failure of anthracyclines and ifosfamide, or who are unsuited to receive these agents. Efficacy data are based mainly on liposarcoma and leiomyosarcoma patients. Trabectedin STADA in combination with pegylated liposomal doxorubicin (PLD) is indicated for the treatment of patients with relapsed platinum-sensitive ovarian cancer (see SmPC for the full indication).

It contains trabectedin as the active substance and it is given as an intravenous infusion.

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

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

Measures to minimise the risks identified for medicinal products can be:

- 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 authorised 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 minimise its risks

Together, these measures constitute *routine risk minimisation* measures.

In addition to these measures, information about adverse reactions is collected continuously and regularly analysed 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 Trabectedin STADA are risks that need special risk management activities to further investigate or minimise the risk, so that the medicinal product can be safely administered. 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 Trabectedin STADA. 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).

Important identified risks	Capillary Leak Syndrome (CLS)
	Injection site reactions
Important potential risks	Acute Myeloid Leukaemia / Myelodysplasia (AML/MDS)
	Cardiac Dysfunction
	Pancreatitis, Lipase and/or Amylase increased
Missing information	None

II.B Summary of important risks

The safety information in the proposed Product Information is aligned to the reference medicinal product.

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 Trabectedin STADA.

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

There are no studies required for Trabectedin STADA.