Gilenya EU Basic Succinct Statement for use by the Global Brand Team on materials produced by Global for use within the EU.
Prescribing Information:

GILENYA® (fingolimod)

Important note: Before prescribing, consult Summary of Product Characteristics (SmPC).

Presentation: Hard capsule containing 0.5 mg fingolimod (as hydrochloride).

Indications: Gilenya is indicated as single disease modifying therapy in highly active relapsing remitting multiple sclerosis for the following adult patient groups:

- Patients with highly active disease despite a full and adequate course of treatment with at least one disease modifying therapy (refer to EU Product Information for exceptions and information about washout period).
- Patients with rapidly evolving severe relapsing remitting multiple sclerosis defined by 2 or more disabling relapses in one year, and with 1 or more Gadolinium enhancing lesions on brain MRI or a significant increase in T2 lesion load as compared to a previous recent MRI.

Dosage: Adults: Treatment should be initiated and supervised by a physician experienced in multiple sclerosis. One 0.5 mg capsule to be taken orally once daily. Use with caution in patients aged 65 years and over. Safety and efficacy of Gilenya in children up to 18 years has not been established. Do not discontinue therapy in patients with acute renal impairment or mild to moderate hepatic impairment. Exercise caution in patients with mild to moderate hepatic impairment. Do not use in patients with severe hepatic impairment (Child-Pugh class C). Use with caution in patients with diabetes mellitus due to an increased risk of macular oedema.

Contraindications: Known immunodeficiency syndrome, patients with increased risk for opportunistic infections, including immunocompromised patients. Infection strategy should be repeated for the second dose or those immunocompromised by prior therapies, severe active infections, active chronic infections (hepatitis, tuberculosis), known active malignancies, severe liver impairment (Child-Pugh class C), hypersensitivity to the active substance or to any of the excipients.

Warnings/Precautions: Bradyrhythmia: Initiation of treatment results in a transient decrease in heart rate which may be associated with atrioventricular block (AVB) levels at the same precautions apply after an interval of one severe renal impairment or mild to moderate hepatic impairment. Exercise caution in patients with mild to moderate hepatic impairment. Do not use in patients with severe hepatic impairment (Child-Pugh class C). Use with caution in patients with diabetes mellitus due to an increased risk of macular oedema.

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the skin is recommended at initiation and then at least yearly. The patient should be referred to a dermatologist in case suspicious lesions are detected. **Stopping therapy:** Gilenya is cleared from the circulation in 6 weeks. Caution is indicated with the use of immunosuppressants soon after the discontinuation of Gilenya due to possible additive effects on the immune system.

**Interactions:** Anti-neoplastic, immunomodulatory or immunosuppressive therapies should not be co-administered due to the risk of additive immune system effects. Exercise caution when switching patients from long-acting therapies with immune effects, e.g. natalizumab, teriflunomide or mitoxantrone. In multiple sclerosis clinical studies, no increased rate of infection was seen with concomitant treatment of relapses with a short course of corticosteroids. **Vaccination:** may be less effective during and for up to 2 months after Gilenya treatment. Avoid use of live attenuated vaccines due to infection risk. Gilenya should not be initiated in patients receiving beta blockers, or class Ia and III antiarrhythmics, heart rate lowering calcium channel blockers (e.g. verapamil or diltiazem), digoxin, anticholinesteratic agents or pilocarpine. Caution is indicated with substances that may inhibit CYP3A4. Co-administration of fingolimod with ketoconazole increases fingolimod exposure. No interaction has been observed with oral contraceptives when co-administered with fingolimod. Co-administration of fingolimod with strong CYP3A4 enzyme inducers such as carbamazepine, rifampicin, phenobarbital, phenytoin and efavirenz may reduce the AUC of fingolimod and should therefore be used with caution. Concomitant administration with St. John’s wort is not recommended.

**Fertility, pregnancy and lactation:** There is potential for serious risk to the fetus with Gilenya. A negative pregnancy test is required before initiation of Gilenya. Female patients must use effective contraception during treatment with Gilenya and for 2 months after discontinuation. Discontinue Gilenya if a patient becomes pregnant. Fingolimod is excreted into breast milk. Women receiving Gilenya should not breast feed. Fingolimod is not associated with a risk of reduced fertility.

**Undesirable effects:** Very common (≥1/10): Influenza, sinusitis, headache, cough, diarrhoea, back pain, Hepatic Enzyme increased (increased ALT, GGT, AST). Common (≥1/100 to <1/10): herpes viral infections, bronchitis, linea versicolor, lymphopenia, leucopenia, depression, dizziness, migraine, blurred vision, bradycardia, atrioventricular block, hypertension, dyspnoea, eczema, alopecia, pruritus, asthenia, increased blood triglycerides, BCC. Uncommon (≥1/1,000 to <1/100): pneumonia, depressed mood, macular oedema, decreased neutrophil count, nausea. Rare (≥1/10,000 to <1/1,000): Posterior reversible encephalopathy syndrome (PRES), lymphoma. Very rare (<1/10,000); T-wave inversion. Not known (frequency cannot be estimated from the available data): Hypersensitivity reactions, including rash, urticaria and angioedema upon treatment initiation, Rash, Cryptococcal infections, peripheral oedema. Very rare cases of haemophagocytic syndrome (HPS) with fatal outcome have been reported.

**Marketing Authorisation Holder:** Novartis Europharm Ltd, Frimley Business Park, Camberley GU16 7 SR, UK.

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