Important information – Do not discard!

▼ PROTELOS®
(strontium ranelate)

Important Risk Minimisation Information
for Healthcare Providers

PREScriber Guide and CheckList

This information is non-promotional and should be read carefully before prescribing Protelos. Following is important information on minimising cardiovascular risks, venous thromboembolism and skin reactions with Protelos.

This information does not replace the Summary of Product Characteristics (SmPC) which should be read and understood in full before initiating therapy.

▼ This medicinal product is subject to additional monitoring. This will allow quick identification of new safety information. Healthcare professionals are asked to report any suspected adverse reactions (see the page 4 for details on how to report).

Prescribing Information is located on the back page.

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This guide provides you with information and recommendations for the appropriate use of Protelos (strontium ranelate)

- Therapeutic indications.
- Before prescribing Protelos.
- Contraindications.
- Special warnings and recommendations for use.
- Monitoring of cardiovascular risks.
- Counselling your patient.

**Therapeutic indications of Protelos**

Treatment of severe osteoporosis:

- in postmenopausal women,
- in adult men,

at high risk of fracture, for whom treatment with other medicinal products approved for the treatment of osteoporosis is not possible due to, for example, contraindications or intolerance. In postmenopausal women, Protelos reduces the risk of vertebral and hip fractures.

The decision to prescribe Protelos should be based on an assessment of the individual patient's overall risks.

**Before prescribing Protelos**

Treatment should only be initiated by a physician with experience in the treatment of osteoporosis.

**Assessment of the individual patient’s overall risk**

The decision to initiate Protelos should be based on an assessment of the individual patient’s overall risk. The patient should be fully informed of these risks and treatment should be re-evaluated every 6 to 12 months especially with regards to any changes in the patient’s cardiovascular risks.

The Protelos Patient Alert Card should be given to each patient.
CONTRAINDICATIONS

Protelos should not be used in patients with:

- Current or previous ischaemic heart disease, peripheral arterial disease and/or cerebrovascular disease.
- Uncontrolled hypertension.
- Current or previous venous thromboembolic events (VTE), including deep vein thrombosis and pulmonary embolism.
- Temporary or permanent immobilisation (e.g. post-surgical recovery or prolonged bed rest).
- Hypersensitivity to the active substance (strontium ranelate) or to any of the excipients (refer to SmPC for a full list of excipients).

Warnings and recommendations:

- Patients with significant risk factors for cardiovascular events such as hypertension, hyperlipidaemia, diabetes mellitus, or smoking, should only be treated with Protelos after careful consideration.
- Protelos should be used with caution in patients at risk of VTE.
- The need for continued treatment with Protelos should be re-evaluated in patients over 80 years who have been diagnosed at risk of VTE.
- Protelos should be discontinued as soon as possible in the event of an illness or a condition leading to immobilisation and adequate preventive measures taken. Therapy should not be restarted until the initiating condition has resolved and the patient is fully mobile. If VTE occurs, Protelos should be stopped.
- If symptoms or signs of Stevens-Johnson Syndrome (SJS) or Toxic Epidermal Necrolysis (TEN) (e.g. progressive skin rash often with blisters or mucosal lesions) or Drug Rash with Eosinophilia and Systemic Symptoms (DRESS) (e.g. rash, fever, eosinophilia and systemic involvement, (e.g. adenopathy, hepatitis, interstitial nephropathy, interstitial lung disease)) are present, Protelos treatment should be discontinued immediately and not re-started at any time.
  Patients should be advised of the signs and symptoms and monitored closely for skin reactions. The highest risk for occurrence of SJS or TEN is within the first weeks of treatment and usually around 3-6 weeks for DRESS.
- Protelos is not recommended in patients with a creatinine clearance below 30ml/min.

Monitoring of cardiovascular risks

- Before starting treatment, patients should be evaluated with respect to cardiovascular risk.
- Cardiovascular risks should be monitored every 6 to 12 months.
- Treatment should be stopped if the patient develops ischaemic heart disease, peripheral arterial disease, cerebrovascular disease or if hypertension is uncontrolled.
Counselling your patient about Protelos

As part of discussions with your patients or their care givers, please ensure that:

- You provide a full explanation of the potential cardiovascular, venous thromboembolic and skin reaction risks of Protelos,
- You instruct the patient to read the Package Information Leaflet carefully,
- Your patient is given a Patient Alert Card that he/she needs to read and keep during the course of their treatment, and this is shown to any doctor or nurse involved in their treatment.

Please advise your patient that, if symptoms of myocardial infarction, VTE or severe skin reactions occur during treatment, they should stop taking Protelos and seek urgent medical advice.

Please also ensure that you provide this counselling to patients who are currently being prescribed Protelos.

Further information on Protelos

For further information on Protelos, please read the Summary of Product Characteristics.

Call for reporting

Please report any suspected adverse reactions through the Yellow Card Scheme. The easiest way to report is online at [www.mhra.gov.uk/yellowcard](http://www.mhra.gov.uk/yellowcard). Alternatively, complete a paper Yellow Card form which you can post to FREEPOST YELLOW CARD. Yellow Cards can be found in the BNF, MIMS or ordered by calling the Yellow Card Information Service freephone on 0800 731 6789.

Suspected adverse reactions may also be reported to SERVIER Laboratories Ltd:

   Email: pharmacovigilance@uk.netgrs.com
   Tel: 01753 666409

Company contact point

For further inquiries concerning this information, please contact the Medical Information Department of SERVIER in the UK

   Telephone: **01753 666409**

   Email: Medical.Information@uk.netgrs.com

   SERVIER Laboratories Ltd
   Wexham Springs
   Framewood Road
   Wexham
   Slough SL3 6PJ

Please also refer to the Protelos Prescriber Checklist on page 5 to assist you when prescribing Protelos.
CONTRAINDICATIONS

Protelos should not be used in patients with:

- Current or previous ischaemic heart disease, peripheral arterial disease and/or cerebrovascular disease.
- Uncontrolled hypertension.
- Current or previous Venous Thromboembolic Events (VTE), including deep vein thrombosis and pulmonary embolism.
- Temporary or permanent immobilisation (e.g. post-surgical recovery or prolonged bed rest).
- Hypersensitivity to strontium ranelate or to any of the excipients.

WARNINGS AND RECOMMENDATIONS

- Patients with significant risk factors for cardiovascular events such as hypertension, hyperlipidaemia, diabetes mellitus, or smoking, should only be treated with Protelos after careful consideration.
- Cardiovascular risk should be monitored every 6 to 12 months.
- Treatment should be stopped if the patient develops ischaemic heart disease, peripheral arterial disease, cerebrovascular disease or if hypertension is uncontrolled.
- Protelos should be used with caution in patients at risk of VTE.
- The need for continued treatment with Protelos should be re-evaluated in patients over 80 years who have been diagnosed at risk of VTE.
- Protelos should be discontinued as soon as possible in the event of an illness or a condition leading to immobilisation and adequate preventive measures taken. Therapy should not be restarted until the initiating condition has resolved and the patient is fully mobile. If VTE occurs, Protelos should be stopped.
- If symptoms or signs of Stevens-Johnson Syndrome (SJS) or Toxic Epidermal Necrolysis (TEN) (e.g. progressive skin rash often with blisters or mucosal lesions) or Drug Rash with Eosinophilia and Systemic Symptoms (DRESS) (e.g. rash, fever, eosinophilia and systemic involvement, e.g. adenopathy, hepatitis, interstitial nephropathy, interstitial lung disease)) are present, Protelos treatment should be discontinued immediately and not re-started at any time.
- Patients should be advised of the signs and symptoms and monitored closely for skin reactions. The highest risk for occurrence of SJS or TEN is within the first weeks of treatment and usually around 3-6 weeks for DRESS.
- Protelos is not recommended in patients with a creatinine clearance below 30ml/min.
Prescribing Information
▼PROTELOS® 2g granules for oral suspension
Strontium ranelate

Refer to the Summary of Product Characteristics (SPC) before prescribing.

**Presentation:** Sachets containing 2g strontium ranelate, yellow granules for oral suspension. **Indication:** In the following patients for whom treatment with other medicinal products approved for the treatment of osteoporosis is not possible due to, for example, contraindications or intolerance: Treatment of severe osteoporosis in postmenopausal women at high risk of fracture to reduce the risk of vertebral and hip fractures; Treatment of severe osteoporosis in adult men at high risk of fracture. The decision to prescribe strontium ranelate should be based on an assessment of the individual patient's overall risks. **Dosage and Administration:** One 2g sachet once daily by oral administration. The granules must be taken as a suspension in a glass of water. Treatment should only be initiated by a physician with experience in the treatment of osteoporosis. The bioavailability of strontium ranelate is reduced by food, dairy and calcium containing products and therefore Protelos® should be taken preferably at bedtime at least two hours after eating. **Elderly and patients with hepatic impairment and/or mild to moderate renal impairment:** No dosing modification required. **Severe renal impairment (ClCR < 30ml/min):** Not recommended. **Children and adolescents:** Not recommended. **Contraindications:** Hypersensitivity to strontium ranelate or excipients. Current or previous venous thromboembolic events (VTE), including deep vein thrombosis and pulmonary embolism. Temporary or permanent immobilisation due to e.g. post-surgical recovery or prolonged bed rest. Established, current or past history of ischaemic heart disease, peripheral arterial disease and/or cerebrovascular disease. Uncontrolled hypertension. **Precautions:** Cardiac ischaemic events: Evaluate patients with respect to cardiovascular risk before starting treatment and at regular intervals generally every 6 to 12 months. Patients with significant risk factors for cardiovascular events (e.g. hypertension, hyperlipidaemia, diabetes mellitus, smoking) should only be treated after careful consideration. Discontinue immediately if the following develop: ischaemic heart disease, peripheral arterial disease, cerebrovascular disease, uncontrolled hypertension. **Venous thrombo-embolism:** Re-evaluate the need for treatment in patients over 80 years at risk of VTE. Discontinue Protelos® as soon as possible and take adequate preventive measures in the event of an illness or a condition leading to immobilisation. Discontinue if a VTE occurs. **Renal impairment:** Monitor renal function in chronic renal impairment. **Skin reactions:** Discontinue immediately in case of Stevens-Johnson syndrome (SJS) or toxic epidermal necrolysis (TEN) (e.g. progressive skin rash often with blisters or mucosal lesions) or drug rash with eosinophilia and systemic syndromes (DRESS) (e.g. rash, fever, eosinophilia and systemic involvement (e.g. adenopathy, hepatitis, interstitial nephropathy, interstitial lung disease). Rare higher incidence of hypersensitivity reactions including reactions skin rash, SJS and TEN in patients of Asian origin. **Excipients:** Contains aspartame a source of phenylalanine, which may be harmful for people with phenylketonuria. **Interactions:** Strontium may reduce the absorption of oral tetracycline (e.g. doxycycline) or quinolone antibiotics (e.g. ciprofloxacin): discontinue Protelos® during treatment. It is preferable to take antacids at least two hours after Protelos® as concomitant intake, though acceptable, may cause a slight decrease in the absorption of strontium. **Side effects:** Adverse reactions were usually mild and transient. **Very common:** hypersensitivity skin reactions (rash, pruritus, urticaria, angioedema), musculoskeletal pain (muscle spasm, myalgia, bone pain, arthralgia and pain in extremity). **Common:** Hypercholesterolaemia, insomnia, headache, disturbances in consciousness, memory loss, dizziness, paraesthesia, vertigo, myocardial infarction, venous thromboembolism, bronchial hyperreactivity, nausea, diarrhoea, vomiting, gastrointestinal pain, gastroesophageal reflux, dyspepsia, constipation, flatulence, hepatitis, eczema, peripheral oedema, blood creatinine kinase increased. **Uncommon:** Lymphadenopathy (in association with hypersensitivity reactions), confusion, seizures, alopecia. **Rare:** Bone marrow failure, DRESS, eosinophilia (in association with hypersensitivity reactions). **Very rare:** Severe cutaneous adverse reactions (SCARs): Stevens-Johnson syndrome and toxic epidermal necrolysis. Consult SPC for full list of side effects. **NHS price:** 28 pack - £ 27.08 **Legal Category:** POM **Product Licence Number:** EU/1/04/288/003 **Further information:** Servier Laboratories Ltd, Rowley, Wexham Springs, Slough SL3 6PJ; Tel (01753) 666409 **Date of Revision:** June 2014

Adverse events should be reported. Reporting forms and information can be found at www.mhra.gov.uk/yellowcard.
Adverse events should also be reported to Servier Laboratories Ltd.
Tel (01753) 666409