

## **PART VI: SUMMARY OF THE RISK MANAGEMENT PLAN**

### **Summary of the RMP for levetiracetam**

This is a summary of the RMP for Keppra®/levetiracetam UCB. The RMP details important risks of Keppra/levetiracetam UCB, how these risks can be minimized, and how more information will be obtained about levetiracetam's risks and uncertainties (missing information).

The SmPC of Keppra/levetiracetam UCB and its package leaflet give essential information to healthcare professionals and patients on how levetiracetam should be used.

This summary of the RMP for Keppra/levetiracetam UCB should be read in the context of all this information including the assessment report of the evaluation and its plain-language summary, all of which is part of the European Public Assessment Report (EPAR).

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

### **1 THE MEDICINE AND WHAT IT IS USED FOR**

Keppra/levetiracetam UCB is authorized as a monotherapy for treatment of partial-onset seizures with or without secondary generalization in subjects from 16 years of age with newly diagnosed epilepsy and as an adjunctive therapy for partial-onset seizures with or without secondary generalization in adults, children, and infants from 1 month of age with epilepsy, myoclonic seizures in adults and adolescents from 12 years of age with juvenile myoclonic epilepsy, and primary generalized tonic-clonic seizures in adults and adolescents from 12 years of age with idiopathic generalized epilepsy (see SmPC for the full indication). Keppra contains levetiracetam as the active substance and is given via oral routes in the following strengths: tablets: 250mg, 500mg, 750mg, 1000mg; oral solution: 100mg/mL; and concentrate for solution for infusion: 100mg/mL.

Further information about the evaluation of levetiracetam's benefits can be found in levetiracetam's EPAR, including in its plain-language summary, available on the EMA website, under the medicine's webpage: <https://www.ema.europa.eu/en/medicines/human/EPAR/keppra>

### **2 RISKS ASSOCIATED WITH THE MEDICINE AND ACTIVITIES TO MINIMIZE OR FURTHER CHARACTERIZE THE RISKS**

Important risks of Keppra/levetiracetam UCB, together with measures to minimize such risks and the proposed studies for learning more about Keppra/levetiracetam UCB risks, are outlined below.

Measures to minimize the risks identified for medicinal products can be as follows:

- 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 as to ensure that the medicine is used correctly

- The medicine’s legal status: the way a medicine is supplied to the patient (eg, with or without prescription) can help minimize its risks

Together, these measures constitute routine risk minimization measures.

If important information that may affect the safe use of levetiracetam is not yet available, it is listed under “missing information” below.

## 2.1 List of important risks and missing information

Important risks of Keppra/levetiracetam UCB are risks that need special risk management activities to further investigate or minimize 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 Keppra/levetiracetam UCB. 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 (eg, on the long-term use of the medicine).

**Table 2–1: List of important risks and missing information**

<b>List of important risks and missing information for patients aged 1 month to less than 4 years</b>	
Important identified risks	None
Important potential risks	None
Missing information	Long-term effects on learning, intelligence, growth, endocrine function, puberty, and childbearing potential in children with epilepsy or in children exposed in utero
<b>List of important risks and missing information for patients aged 4 years and older</b>	
Important identified risks	None
Important potential risks	None
Missing information	Long-term effects on learning, intelligence, growth, endocrine function, puberty, and childbearing potential in children with epilepsy or in children exposed in utero Worsening of seizure control during pregnancy

## 2.2 Summary of important risks and missing information

**Table 2–2: Summary of important risks and missing information (patients aged 1 month to less than 4 years)**

<b>Important identified risks: None</b>
<b>Important potential risks: None</b>
<b>Missing information: long-term effects on learning, intelligence, growth, endocrine function, puberty, and childbearing potential in children with epilepsy or in children exposed in utero</b>

Risk minimization measures	Routine risk minimization measures: Available by prescription only Summary of Product Characteristics (SmPC) <a href="#">Section 4.4</a> (Special warnings and precautions) and <a href="#">Section 4.6</a> (Fertility, pregnancy and lactation) Additional risk minimization measures: None
Additional pharmacovigilance activities	European and International Registry of Antiepileptic Drugs and Pregnancy (EURAP) and North American Antiepileptic Drug Pregnancy Registry (NAAPR)

EURAP=European and International Registry of Antiepileptic Drugs and Pregnancy; NAAPR=North American Antiepileptic Drug Pregnancy Registry; SmPC=summary of product characteristics

**Table 2–3: Summary of important risks and missing information (patients aged 4 years and older)**

<b>Important identified risks: None</b>	
<b>Important potential risks: None</b>	
<b>Missing information: long-term effects on learning, intelligence, growth, endocrine function, puberty, and childbearing potential in children with epilepsy or in children exposed in utero</b>	
Risk minimization measures	Routine risk minimization measures: Available by prescription only Summary of Product Characteristics (SmPC) <a href="#">Section 4.4</a> (Special warnings and precautions) and <a href="#">Section 4.6</a> (Fertility, pregnancy and lactation) Additional risk minimization measures: None
Additional pharmacovigilance activities	European and International Registry of Antiepileptic Drugs and Pregnancy (EURAP) and North American Antiepileptic Drug Pregnancy Registry (NAAPR)
<b>Missing information: deterioration of seizure control during pregnancy</b>	
Risk minimization measures	Routine risk minimization measures: Available by prescription only SmPC <a href="#">Section 4.6</a> (Fertility, pregnancy and lactation) Additional risk minimization measures: None
Additional pharmacovigilance activities	EURAP and NAAPR

EURAP=European and International Registry of Antiepileptic Drugs and Pregnancy; NAAPR=North American Antiepileptic Drug Pregnancy Registry; SmPC=summary of product characteristics

## **2.3 Postauthorization development plan**

### **2.3.1 Studies which are conditions of the marketing authorization**

There are no studies which are conditions of the marketing authorization or specific obligation of Keppra/levetiracetam UCB.

### **2.3.2 Other studies in postauthorization development plan**

Additional pharmacovigilance activities include the following:

Registry studies to monitor pregnancy outcomes: support of EURAP and NAAPR.

Activities include provision of requested data from registries to UCB and regular review of interim outputs from the registries. The protocols for EURAP and NAAPR include possible activities to follow-up on the children.

Prescribers and reporters of pregnancy cases are encouraged to register pregnant women exposed to AEDs into the EURAP or NAAPR. Also, women can register themselves directly with the NAAPR, and they are encouraged to do so in the US Medication Guide.

### **3 REFERENCES:**

None.