Prescribing Information: Cerdelga (eliglustat) ▼ 84mg hard capsules

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

Presentation: Each capsule contains 84.4 mg of eliglustat (as tartrate).

Indication: Cerdelga is indicated for the long-term treatment of adult patients with Gaucher disease type 1 (GD1), who are CYP2D6 poor metabolisers (PMs), intermediate metabolisers (IMs) or extensive metabolisers (EMs).

Dosage and administration: Therapy with Cerdelga should be initiated and supervised by a physician knowledgeable in the management of Gaucher disease. The recommended dose is 84mg eliglustat twice daily in CYP2D6 IMs and EMs and 84mg once daily in CYP2D6 PMs. If a dose is missed, the prescribed dose should be taken at the next scheduled time; the next dose should not be doubled. Cerdelga is to be taken orally, swallowed whole, preferably with water, and should not be crushed, dissolved, or opened. The capsules may be taken with or without food. **Special populations:** ***CYP2D6 ultra-rapid metabolisers (URMs) and indeterminate metabolisers:*** Cerdelga should not be used. ***Patients with hepatic impairment:*** In CYP2D6 EMs with mild hepatic impairment (Child-Pugh class A), no dosage adjustment is required. In CYP2D6 EMs with moderate hepatic impairment (Child-Pugh class B), Cerdelga is not recommended CYP2D6 EMs with mild hepatic impairment taking a weak CYP2D6 inhibitor or a strong, moderate or weak CYP3A inhibitor, a dose of 84 mg eliglustat once daily should be considered. Use of Cerdelga in CYP2D6 IMs or PMs with any degree of hepatic impairment is not recommended. ***Patients with renal impairment:*** In CYP2D6 EMs with mild, moderate or severe renal impairment, no dosage adjustment is required and the recommended dose is 84 mg eliglustat twice daily. In CYP2D6 EMs with end stage renal disease (ESRD), Cerdelga is not recommended. In CYP2D6 IMs or PMs with mild, moderate or severe renal impairment or ESRD, Cerdelga is not recommended. ***Elderly patients (≥65 years):*** No significant differences were found in the efficacy and safety profiles of elderly patients and younger patients. ***Paediatric population:*** No data are available.

Contraindications: Hypersensitivity to the active substance or to any of the excipients. This product contains lactose. Patients with rare hereditary problems of galactose intolerance, Lapp lactase deficiency or glucose-galactose malabsorption should not take this medicine. Contraindicated in patients who are CYP2D6 IMs or EMs taking a strong or moderate CYP2D6 inhibitor concomitantly with a strong or moderate CYP3A inhibitor, and patients who CYP2D6 PMs who are taking a strong CYP3A inhibitor. Cerdelga is contraindicated in CYP2D6 EMs with severe hepatic impairment (Child-Pugh class C) and in CYP2D6 EMs with mild or moderate hepatic impairment taking a strong or moderate CYP2D6 inhibitor.

Warnings and Precautions: ***CYP2D6 genotyping:*** Before initiation of treatment, patients should be genotyped for CYP2D6 to determine the CYP2D6 metaboliser status. **Agents that may increase eliglustat exposure:** ***CYP2D6 inhibitors (in IMs and EMs):*** When a strong CYP2D6 inhibitor (e.g. paroxetine, fluoxetine, quinidine, bupropion) is used concomitantly, a dose of eliglustat 84 mg once daily should be considered. Caution should be used with moderate CYP2D6 inhibitors (e.g. duloxetine, terbinafine, moclobemide). ***CYP3A inhibitors (in IMs and EMs):*** Caution should be used with strong CYP3A inhibitors (e.g. clarithromycin, ketoconazole, itraconazole) and weak CYP3A inhibitors (e.g. amlopidine, cilostazol, fluvoxamine, goldenseal, isoniazid, ranitidine, ranolazine). Use of a moderate CYP3A inhibitor (e.g. erythromycin, ciprofloxacin, fluconazole, diltiazem, verapamil, cimetidine) with eliglustat is not recommended. Consumption of grapefruit or its juice should be avoided. **Agents that may decrease eliglustat exposure:** ***Strong CYP3A inducers (in IMs, EMs and PMs):*** Use of a strong CYP3A inducer (e.g. rifampicin, carbamazepine, phenobarbital, phenytoin, rifabutin and St. John's wort) with eliglustat is not recommended. **Agents whose exposure may be increased by eliglustat:** ***P-gp substrates:*** Lower doses of P-gp substrates (e.g. digoxin, colchicine, dabigatran, phenytoin, pravastatin) may be required. ***CYP2D6 substrates:*** Lower doses of CYP2D6 substrates (e.g. metoprolol) may be required. These include certain antidepressants (tricyclic antidepressants, e.g. nortriptyline, amitriptyline, imipramine, and desipramine), phenothiazines, dextromethorphan and atomoxetine. The list of substances mentioned above is not an inclusive list and the prescriber is advised to consult the SmPC of all other prescribed medicinal products for potential drug-drug interactions with eliglustat. **Patients with pre-existing cardiac conditions:** use of Cerdelga should be avoided in patients with cardiac disease (congestive heart failure, recent acute myocardial infarction, bradycardia, heart block, ventricular arrhythmia), long QT syndrome, and in combination with Class IA (e.g. quinidine) and Class III (e.g. amiodarone, sotalol) antiarrhythmic medicinal products. **Monitoring of clinical response:** Some treatment-naïve patients showed less than 20% spleen volume reduction (sub-optimal results) after 9 months of treatment. For these patients, monitoring for further improvement or an alternative treatment modality should be considered. **Fertility, Pregnancy and lactation:** It is recommended to avoid the use of Cerdelga during pregnancy. It is unknown whether Cerdelga is excreted in human milk. When deciding whether to discontinue breast-feeding or to discontinue from Cerdelga therapy, the benefit of the breast-feeding child and the benefit of therapy for the woman must be taken into account. Animal studies have shown effects on spermatogenesis. Fertility effects in humans are unknown.

Undesirable effects: The majority of adverse reactions are mild and transient. Common (≥1/100 to <1/10): Headache, dizziness, dysgeusia, palpitations, throat irritation, dyspepsia, abdominal pain upper, diarrhoea, nausea, constipation, abdominal pain, gastroesophageal reflux disease, abdominal distension, gastritis, dysphagia, vomiting, dry mouth, flatulence, dry skin, urticaria, arthralgia, pain in extremity, back pain and fatigue. The most frequently reported serious adverse reaction in clinical studies was syncope (0.8%). For further information on adverse reactions, please refer to the SPC.

Legal classification: POM. **Marketing Authorisation Number:** EU/1/14/974/001 (56 capsules), EU/1/14/974/002 (196 capsules), EU/1/14/974/003 (14 capsules). **Marketing Authorisation Holder:** Genzyme Europe B.V., Paasheuvelweg 25, 1105 BP Amsterdam, The Netherlands. **Further information is available from:** Medical Information, Sanofi, 410 Thames Valley Park Drive, Reading, Berkshire, RG6 1PT, UK. uk-medicalinformation@sanofi.com Tel: 0845 372 7101. **Date of Preparation: January 2020.**

Adverse events should be reported.
Reporting forms and information can be found at: www.hpra.ie; E-mail: medsafety@hpra.ie.
Adverse events can also be reported to Sanofi Ireland Ltd. Tel: 01 403 5600.
Alternatively, send via Email to IEPharmacovigilance@sanofi.com