# PUBLIC SUMMARY OF RISK MANAGEMENT PLAN (RMP)

## OXYCODONE ORION (OXYCODONE)

## 5 MG, 10 MG, 15 MG, 20 MG, 30 MG, 40 MG, 60 MG, 80 MG

### PROLONGED-RELEASE TABLETS

## ORION CORPORATION

### DATE: 03-10-2013, VERSION 1.1

## VI.2 Elements for a Public Summary

### *VI.2.1 Overview of disease epidemiology*

Although pain – including moderate to severe pain - is a very common symptom, data on the number of people in a given population who are reported to suffer from pain are inconsistent. For example, estimates of the number of people suffering from long-lasting (chronic) pain vary widely and typically range between 10 and 30% of the adult population, although rates ranging from 2 to 55% have been reported. This wide variation may reflect true differences between populations, but also the use of different definitions and classifications of chronic pain, for example duration of more than three or more than six months, and differences in assessment methods. Based on a literature review, the percentage of persons suffering from moderate to severe noncancer pain was estimated to be 16% in Denmark and 18% in Sweden. In a group of patients with cancer, 55% reported to have pain and 44% reported moderate to severe pain. 65% of late-stage cancer patients were reported to suffer from pain.

### *VI.2.2 Summary of treatment benefits*

- Current standards of treatment of pain

  The World Health Organization (WHO) recommends a "pain ladder" for managing pain: If pain occurs, there should be oral administration of drugs in the following order:

  - Nonsteroidal anti-inflammatory drugs such as acetyl salicylic acid, a class of drugs that provide pain relieving and fever-reducing effects, and, in higher doses, inflammation-reducing effects

  - then, as necessary, mild narcotic drugs (opioids)

  - then strong narcotic drugs (opioids) such as morphine or oxycodone

  This three-step approach is effective in the majority of patients.

- Where the medicinal product fits in the therapeutic armamentarium

  Oxycodone is a strong pain killer and is only used for the treatment of severe pain, which cannot be adequately managed with other medicinal products

### *VI.2.3 Unknowns relating to treatment benefits*

See Part VI: VI.2.4 Important missing information.

### *VI.2.4 Summary of safety concerns*

**Important identified risks**

| **Risk** | **What is known** | **Preventability** |
|---|---|---|
| Respiratory depression (breathing abnormalities) | Disturbance of breathing caused by strong pain killers such as oxycodone can range from decrease in breathing rate to breathing arrest. It may be lifethreatening and result in death. | Careful dosing as directed in the patient information leaflet and careful supervision of the patient are necessary. |
| Drug dependence and withdrawal | Physical dependence is common to strong pain killers (this does not equal addiction). Abruptly stopping these medications will cause a withdrawal response. Such withdrawal response may as well occur dramatically reducing opiate drugs after prolonged use. Withdrawal symptoms can include restlessness, watery eyes (lacrimation), running nose, yawning, perspiration, chills, muscle pain, dilation of the pupil and irregular heartbeat, irritability, anxiety, backache, joint pain, weakness, abdominal cramps, insomnia, nausea, anorexia, vomiting, diarrhea, or increased blood pressure, respiratory rate or heart rate. These symptoms can occur 8 – 16 hours after the last dose and can last up to 72 hours or longer. | In patients who no longer need the product, it is recommended to taper the dose gradually in order to prevent symptoms of withdrawal. |
| Abuse, misuse, diversion | Abuse is the self-administration of medications to alter one's state of consciousness. This is an intentional use of a medication. The pharmaceutical form of Oxycodone hydrochloride 5 – 80 mg prolonged-release tablets does not make it a suitable drug for abuse. Abuse of this drug is however likely when it is removed from the matrix and the prolonged-release system is | Oxycodone hydrochloride 5 – 80 mg prolonged-release tablets must be swallowed whole and must not be crushed, divided or chewed.<br><br>Patients treated with strong pain killers such as Oxycodone hydrochloride 5 – 80 mg prolonged-release tablets should be supervised carefully. |

| Risk | What is known | Preventability |
|---|---|---|
| | destroyed.<br><br>Misuse (noncompliant use) is the intentional or unintentional use of a prescribed medication in a manner that is contrary to directions, regardless of whether a harmful outcome occurs.<br><br>Diversion is the redirection of a prescription drug from its lawful purpose to illicit use. | |

**Important potential risks**

| Risk | What is known | Preventability |
|---|---|---|
| Accidental exposure | As with other strong pain killers, accidental ingestion of oxycodone, especially in children, can result in a fatal overdose. | Keep this medication in a safe and secure place and protect it from loss or theft. Never pass the product on to other persons for whom it was not prescribed. This medicine must be kept out of the sight and reach of children. |
| Medication errors | Medication errors may result in overdose | Oxycodone hydrochloride 5 – 80 mg prolonged-release tablets should be dosed as directed. The dosing regimen has to be initiated for each patient individually. Continual reevaluation of the patient receiving this treatment is important. |
| Overdose | The following symptoms may occur: constricted pupils (miosis), depressed breathing (respiratory depression), skeletal muscle flaccidity and drop in blood pressure. In severe cases circulatory collapse, mental and motor inactivity (torpor), unconsciousness (coma) slowing of the heart rate and accumulation of water in the lungs (non-cardiogenic lung oedema) may occur. | Oxycodone hydrochloride 5 – 80 mg prolonged-release tablets should be dosed as directed. The dosing regimen has to be initiated for each patient individually. Continual reevaluation of the patient receiving this treatment is important. |
| Dose dumping | Alcohol may enhance the effects of strong pain killers by affecting | Unlike medicinal products with a fast release of the active |

| Risk | What is known | Preventability |
|---|---|---|
| | the relase of the active substance from the tablet or capsule. | substance, the presence of alcohol appears to have a minor effect on the release of the active substance of prolonged-release tablets. However, Oxycodone hydrochloride 5 – 80 mg prolonged-release tablets must not be taken with alcoholic beverages. |

**Important missing information**

| Risk | What is known |
|---|---|
| Safety in children younger than 12 years | Safety and effectiveness of oxycodone have not been established in children younger than 12 years. Therefore, Oxycodone hydrochloride 5 – 80 mg prolonged-release tablets are not recommended for children and adolescents under 12 years of age. Depending on age and body weight, the risk for overdose may be increased in younger children. |
| Safety and efficacy of use during pregnancy and lactation | Experience with the use of oxycodone during human pregnancy is insufficient and does not allow a final assessment. Use of oxycodone, the active substance contained in Oxycodone hydrochloride 5 – 80 mg prolonged-release tablets, during early pregnancy was reported to be associated with defects of the infant's heart. Infants born to mothers with longer-term intake of oxycodone may exhibit withdrawal symptoms following birth (e.g. irritability, hyperactivity, abnormal sleep pattern, high-pitched cry, tremor, vomiting, diarrhea, weight loss, and failure to gain weight) and are at increased risk of sudden infant death.<br><br>Oxycodone crosses the placenta and may produce disturbance of breathing in newborns. Oxycodone has been detected in maternal milk. Accordingly, oxycodone should not be taken by pregnant or breastfeeding women. |

### *VI.2.5 Summary of risk minimisation measures by safety concern*

See Part VI: VI.1.4

### *VI.2.6 Planned post authorisation development plan (if applicable)*

Not applicable.

### *VI.2.7 Summary of changes to the risk management plan over time*

Not applicable.