# Part VI: Summary of the risk management plan

# Summary of risk management plan for Mepsevii (vestronidase alfa)

This is a summary of the risk management plan (RMP) for Mepsevii (vestronidase alfa), which details the measures to be taken in order to ensure that Mepsevii is used as safely as possible.

Mepsevii's summary of product characteristics (SmPC) and its package leaflet give essential information to healthcare professionals and patients on how Mepsevii should be used.

This RMP summary should be read in conjunction with the European Public Assessment Report (EPAR) summary and the product information for Mepsevii.

#### I. The medicine and what it is used for

Mepsevii (vestronidase alfa) is indicated for the treatment of non-neurological manifestations of Mucopolysaccharidosis VII (MPS VII, Sly syndrome). It contains vestronidase alfa as the active substance and it is administered by intravenous infusion every two weeks.

This treatment should be supervised by a healthcare professional experienced in the management of patients with MPS VII or other inherited metabolic disorders. Administration of Mepsevii should be carried out by an appropriately trained healthcare professional with the ability to manage medical emergencies.

Further information about the evaluation of the Mepsevii's benefits can be found in the Mepsevii's EPAR, including in its plain-language summary, available on the European Medicines Agency (EMA) website, under the medicine's <a href="webpage">webpage</a>.

# II. Risks associated with the medicine and activities to minimise or further characterise the risks

Important risks of Mepsevii, together with measures to minimise such risks and the proposed studies for learning more about the medicinal product risks, are outlined below.

Measures to minimise the risks identified for a medicinal product include:

- Specific information, such as warnings, precautions, advice on administration and undesirable effects in the package leaflet and SmPC addressed to patients and healthcare professionals;
- The medicine's legal status the way a medicine is supplied to the patient (with prescription) can help to minimise its risks.

Together, these measures constitute routine risk minimisation measures.

In addition to these measures, information about adverse reactions is collected continuously and regularly analysed, including Periodic Safety Update Report assessment so that immediate action can be taken as necessary.

Additionally, the prospective, longitudinal program (UX003-CL401) is planned to assess the long-term effectiveness and safety of Mepsevii in treated patients with MPS VII.

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

# II.A List of important risks and missing information

Important risks of Mepsevii are risks that need special risk management activities to further investigate or minimise the risk, so that the medicinal product can be safely administered. 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 Mepsevii. 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.

List of important risks and missing information	
Important identified risks	Infusion associated reactions – including severe hypersensitivity reactions
Important potential risks	Spinal/Cervical Cord Compression     Immunogenicity
Missing information	<ul> <li>Use in pregnancy and lactation</li> <li>Use in patients with hepatic and renal impairment</li> <li>Long term use</li> </ul>

# II.B Summary of important risks

The safety information in the Product Information is aligned to the reference medicinal product.

Important Identified Risk: Infusion associated reactions – including severe hypersensitivity reactions		
Evidence for linking the risk to the medicine	Clinical trials	
Risk factors and risk groups	None identified	
Risk minimisation measures	Routine risk minimisation measures	
	See SmPC	
	Section 4.2 Posology and method of administration	
	Section 4.4 Special warning and precautions for use	
	Section 4.8 Undesirable effects	
Additional pharmacovigilance activities	UX003-CL401: Mucopolysaccharidosis VII Disease Monitoring Program (MPS VII DMP)	
	See Section II.C of this summary for an overview of the post-authorisation development plan.	
Important Potential Risk: Immunogenicity		
Evidence for linking the risk to the medicine	Clinical trials	

Risk factors and risk groups	None identified
Risk minimisation measures	Routine risk minimisation measures
	See SmPC
	Section 4.8 Undesirable effects
Additional pharmacovigilance activities	UX003-CL401: Mucopolysaccharidosis VII Disease Monitoring Program (MPS VII DMP)
	See Section II.C of this summary for an overview of the post-authorisation development plan.
Important potential Risk: Spinal/Cervical	Cord Compression
Evidence for linking the risk to the medicine	Clinical trials
Risk factors and risk groups	None identified
Risk minimisation measures	Routine risk minimisation measures
	See SmPC
	Section 4.4 Special warnings and precautions for use
Additional pharmacovigilance activities	UX003-CL401: Mucopolysaccharidosis VII Disease Monitoring Program (MPS VII DMP)
	See Section II.C of this summary for an overview of the post-authorisation development plan.
Missing Information: Use in pregnancy ar	nd lactation
Risk minimisation measures	Routine risk minimisation measures
	See SmPC
	Section 4.6 Fertility, pregnancy and lactation
Missing Information: Use in patients with	hepatic impairment
Risk minimisation measures	Routine risk minimisation measures
	See SmPC
	Section 5.2 Pharmacokinetic properties
Additional pharmacovigilance activities	UX003-CL401: Mucopolysaccharidosis VII Disease Monitoring Program (MPS VII DMP)
	See section II.C of this summary for an overview of the post-authorisation development plan
Missing Information: Use in patients with	renal impairment
Missing Information: Use in patients with	Routine risk minimisation measures
Missing Information: Use in patients with Risk minimisation measures	
	Routine risk minimisation measures

	See section II.C of this summary for an overview of the post-authorisation development plan	
Missing information: Long term use		
Risk minimisation measures	None	
Additional pharmacovigilance activities	UX003-CL401: Mucopolysaccharidosis VII Disease Monitoring Program (MPS VII DMP)	
	See section II.C of this summary for an overview of the post-authorisation development plan	

# II.C Post-authorisation development plan

#### II.C.1 Studies which are conditions of the marketing authorisation

Category 2 Study: UX003-CL401: Mucopolysaccharidosis Type VII Disease Monitoring Program (MPS VII DMP)

Below are the objectives of this program:

- Characterise MPS VII disease presentation and progression over time in patients treated and not treated with Mepsevii.
- Assess long-term effectiveness of Mepsevii in patients with MPS VII.
- Assess long-term safety of Mepsevii including hypersensitivity reactions and immunogenicity in patients with MPS VII.
- Prospectively investigate the longitudinal change in biomarker(s), clinical assessments, and patient/caregiver-reported outcome measures, and other possible predictors of MPS VII disease progression and mortality.

# II.C.2 Other studies in post-authorisation development plan

Not applicable.