



03 October 2021

## Direct Health Care Professional Communication

### **Clexane (enoxaparin sodium) and associated names: Updates to strength expression, dose regimens in DVT/PE, use in patients with severe renal impairment**

Sanofi in agreement with the Saudi Food and Drug Authority (SFDA), would like to inform you that, Strength expression, dose regimens in deep vein thrombosis (DVT)/pulmonary embolism (PE) and use in patients with several renal impairment are updated in the local prescribing information as follows:

#### **Summary**

- **Enoxaparin sodium strength previously expressed in international units (IU) of anti-Xa activity will now be expressed both in international units (IU) and in milligrams (mg).**

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| <b>1 mg of enoxaparin sodium is equivalent to 100 IU of anti-Xa activity</b> |
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**For example, for the 0.4 ml pre-filled syringes, the strength will appear as: Clexane® 4000 IU (40 mg) / 0.4 ml solution for injection**

- **The dosage in treatment of deep vein thrombosis (DVT) and pulmonary embolism (PE) has been clarified as follows:**

Enoxaparin sodium can be administered subcutaneously:

- **Either as a once daily injection of 150 IU/kg (1.5 mg/kg):** used in uncomplicated patients with low risk of VTE recurrence.
- **Or as twice daily injections of 100 IU/kg (1 mg/kg):** used in all other patients such as those with obesity, with symptomatic PE, cancer, recurrent VTE or proximal (vena iliaca) thrombosis.

The regimen should be selected by the physician based on an individual assessment including evaluation of the thromboembolic risk and the bleeding risk.

- **Contraindication in patients with severe renal impairment (creatinine clearance < 30 ml/min) was removed.**
  - For patients with creatinine clearance [15-30] ml/min dose adjustment is recommended (see table below)



- Use in patients with end stage kidney disease (creatinine clearance <15 ml/min) is not recommended outside the prevention of thrombus formation in dialysis patients.

**Background on the safety concern**

Expressing strength both in IU and mg provides healthcare professionals clarity about enoxaparin doses regardless of which style they are familiar with, and will avoid medication error leading to risk of thrombosis or major bleeding.

A once daily 150 IU/kg (1.5 mg/kg) or a twice daily 100 IU/kg (1 mg/kg) regimen or both regimens were approved in the member states for the treatment of DVT/PE. Whilst keeping mention of the two dose regimens, these have been harmonized by strengthening recommendations about the populations in which the possible regimens should be used

given the lack of safety and efficacy data in patients with end stage kidney disease (**CrCl < 15 ml/min**), use of Clexane is **not** recommended in these patients outside the prevention of thrombus formation in haemodialysis patients during haemodialysis.

For patients with severe renal impairment (creatinine clearance [15-30] ml/min) the following dose adjustment is recommended.

| <b><u>Indication</u></b>  | <b><u>Dosing regimen</u></b>   |
|---|--|
| Prophylaxis of venous thromboembolic disease                                      | 2,000 IU (20 mg) SC once daily   |
| Treatment of DVT and PE   | 100 IU/kg (1 mg/kg) body weight SC once daily  |
| Treatment of unstable angina and Non ST-segment elevation myocardial infarction   | 100 IU/kg (1 mg/kg) body weight SC once daily  |
| Treatment of acute ST-segment elevation myocardial infarction (patients under 75) | 1 x 3,000 IU (30 mg) IV bolus plus 100 IU/kg (1 mg/kg) body weight SC and then 100 IU/kg (1 mg/kg) body weight SC every 24 hours |
| Treatment of acute ST-segment elevation myocardial infarction (patients over 75)  | No IV initial bolus, 100 IU/kg (1 mg/kg) body weight SC and then 100 IU/kg (1 mg/kg) body weight SC every 24 hours               |



### **Further Information**

Enoxaparin is a low molecular weight heparin.

For full information on the updated product information & package leaflet, please contact Sanofi at:

#### **Company Medical Information contact point:**

E-mail: [ksa.medicalinformation@sanofi.com](mailto:ksa.medicalinformation@sanofi.com)

Web: <https://www.sanofi.com.sa/> - Landline : +966 12 669 3318

### **Call for reporting**

Any suspected adverse events or adverse drug reactions should be reported to:

#### **The National Pharmacovigilance Centre (NPC):**

SFDA call center: 19999

E-mail: [npc.drug@sfda.gov.sa](mailto:npc.drug@sfda.gov.sa)

Website: <https://ade.sfda.gov.sa/>

#### **SANNOFI PV 24/7 contact number: +966 544284797**

Email: [KSA\\_pharmacovigilance@sanofi.com](mailto:KSA_pharmacovigilance@sanofi.com)

Address: Sanofi, KSA | Tahlia St., Nojoud Center, Gate B, 2nd Floor.

P.O.Box 9874, Jeddah 21423, KSA

Kind regards,

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