

## SFDA SAFETY SIGNAL

*“A signal is defined by the SFDA as reported information on a possible causal relationship between an adverse event and a drug, the relationship being unknown or incompletely documented previously. Usually more than a single report is required to generate a signal, depending upon the seriousness of the event and the quality of the information. A signal is a hypothesis together with data and arguments and it is important to note that a signal is not only uncertain but also preliminary in nature”*

17-05-2022

### Saudi Food and Drug Authority (SFDA) – Safety Signal of Secukinumab and the Risk of Facial Paralysis

*The Saudi Food and Drug Authority (SFDA) recommends all health care professionals to be aware of the safety signal of **Facial Paralysis** associated with the use of **Secukinumab**. The signal has been originated as a result of routine pharmacovigilance monitoring activities.*

#### Introduction

Secukinumab is a recombinant, high-affinity, fully human immunoglobulin G1 $\kappa$  monoclonal antibody that selectively binds and neutralizes interleukin-17A<sup>[1]</sup>. Interleukin-17A is postulated to play a role in the pathogenesis of musculoskeletal autoimmune diseases. The drug is approved to treat Plaque psoriasis and shows efficacy in treatment of psoriatic arthritis and ankylosing spondylitis<sup>[1-2]</sup>. Facial Paralysis can impact the facial nerve function, leading to hearing loss and other symptoms that range from mild to severe. Causes of partial facial paralysis can be linked to nerve damage due to congenital conditions, trauma, or disease<sup>[3]</sup>. The aim of this review is to evaluate the risk of Facial Paralysis associated with the use of Secukinumab and to suggest regulatory recommendations if required.

#### Methodology

Signal Detection team at the National Pharmacovigilance Center (NPC) of Saudi Food and Drug Authority (SFDA) performed a comprehensive signal review using its national database as well as the World Health Organization (WHO) database (VigiBase), to retrieve related information for assessing the causality between Secukinumab and the risk of Facial Paralysis<sup>[4]</sup>. We used the WHO- Uppsala Monitoring Centre (UMC) criteria as standard for assessing the causality of the reported cases<sup>[5]</sup>.

#### Results

**Case Review:** As of September, 2021, there were 53 global Individual case safety reports (ICSRs) for the combined drug/adverse drug reaction<sup>[4]</sup>. The author selected the top-quality cases with completeness score of 0.7 and above (n=13). Seven of the assessable ICSR were supportive of

association, with two being probable and five being possible. Positive dechallenge was reported in two cases [5].

**Data Mining:** Information component (IC), a tool developed by WHO-UMC to measure the reporting ratio, was used to estimate the disproportionality of the observed and expected reporting rates for drug/adverse drug reaction pairs. Positive IC reflects higher statistical association while negative values indicates less statistical association. The results of (IC= - 0.5) revealed a negative statistical association for the drug/ADR combination [4].

**Literature:** Investigators from Japan conducted multicenter, uncontrolled, single arm, prospective, observational cohort study to assess safety and efficacy of Secukinumab in patients with plaque psoriasis or psoriatic arthritis who received the drug for the first time. 312 patients were enrolled and given 300 mg at week 0, 1, 2, 3 and 4, and at 4-week intervals afterwards. Serious adverse events were reported in 22 patients (7.2%). Facial Paralysis was reported in one patient [6].

## Conclusion

The weighted cumulative evidence identified from the reported cases and literature are sufficient to support a causal association between Secukinumab and the risk of Facial Paralysis. Health regulators and health care professionals must be aware of this potential risk and it is advisable to monitor any signs or symptoms in treated patients.

## Report Adverse Drug Events (ADRs) to the SFDA

The SFDA urges both healthcare professionals and patients to continue reporting adverse drug reactions (ADRs) resulted from using any medications to the SFDA either online, by regular mail or by fax, using the following contact information:

National Pharmacovigilance Center (NPC)  
Saudi Food and Drug Authority-Drug sector  
4904 northern ring branch rd  
Hittin District  
Riyadh 13513 – 7148  
Kingdom of Saudi Arabia  
Toll free number: 19999  
Email: [NPC.Drug@sfda.gov.sa](mailto:NPC.Drug@sfda.gov.sa)

## References:

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4. Vigilyze.who-umc.org. 2021. [online] Available at: <<https://vigilyze.who-umc.org/>>
5. Uppsala Monitoring Center (UMC) (2021), The use of the WHO-UMC system for standardized case causality assessment; Available at [https://who-umc.org/media/164200/who-umc-causality-assessment\\_new-logo.pdf](https://who-umc.org/media/164200/who-umc-causality-assessment_new-logo.pdf)
6. Fujita, H., Ohtsuki, M., Morita, A., Nagao, R., Seko, N., Matsumoto, K., Tani, Y., & Terui, T. (2021). Safety and effectiveness of secukinumab in psoriasis vulgaris and psoriatic arthritis: Real-world evidence in Japan. *The Journal of dermatology*, 48(2), 175–183. <https://doi.org/10.1111/1346-8138.15655>