## PATIENT CARD

This Document has been approved by the Saudi Food and Drug Authority (SFDA).

## Important Safety Information for Patients taking EPYSQLI (Eculizumab)



Eculizumab can lower the ability of your immune system to fight infections, especially meningococcal infection, which requires immediate medical attention. If you experience any of the following symptoms, you should immediately call your doctor or seek emergency medical care, preferably in a major emergency medical care center:

- headache with nausea or vomiting
- headache with a stiff neck or stiff back
- fever
- rash
- confusion
- muscle aches with flu-like symptoms
- eyes sensitive to light

Get emergency medical care right away if you have any of these signs or symptoms and <a href="mailto:show"><u>show</u></a> this card.



Keep this card with you at all times during treatment and for 3 months after your last eculizumab dose. Your risk of meningococcal infection may continue for several months after your last dose of eculizumab.

## Information for the Treating Physician



This patient has been prescribed eculizumab therapy, which increases the patient's susceptibility to meningococcal infection (Neisseria meningitidis) or other general infections.



- Meningococcal infections may become rapidly lifethreatening or fatal if not recognized and treated early
- Evaluate immediately if infection is suspected and treat with appropriate antibiotics if necessary
- Contact prescribing physician (below) as soon as possible

## **PATIENT CARD**

For more information about eculizumab please refer to Patient Information Leaflet.

To report any side effect(s), please contact:

The National Pharmacovigilance Centre (NPC) - Saudi Food and Drug Authority (SFDA):

SFDA Call Center: 19999 E-mail: npc.drug@sfda.gov.sa Website: https://ade.sfda.gov.sa/



Or

PharmaKnowl Consulting

Email: <a href="mailto:qppv-saudi@pharmaknowl.com">qppv-saudi@pharmaknowl.com</a> Phone: +966112777729 / +966112404409

Patients receiving eculizumab should carry this card at all times. Show this card to any doctor involved in your health care.

Patient Name	
Hospital where treated	
Physician name	
Tel. number	

