CEVENFACTA▼ (eptacog beta (activated)) 1mg/5mg Powder and 1.1mL/5.2mL solvent for solution for intravenous injection. This medicinal product is subject to additional monitoring to allow quick identification of new safety information.

Consult Summary of Product Characteristics (SmPC) before prescribing

Indications: Treatment of bleeding episodes and prevention of bleeding in adults and adolescents (≥12 years of age) undergoing surgery or invasive procedures:

• in patients with congenital haemophilia with high-responding inhibitors to coagulation factors VIII or IX (i.e. ≥5 Bethesda Units (BU));

• in patients with congenital haemophilia with low titre inhibitors (BU <5), but expected to have a high anamnestic response to factor VIII or factor IX administration or expected to be refractory to increased dosing of FVIII or FIX.

Treatment should be initiated/supervised by a physician experienced in haemophilia. Dose and duration of treatment depend on location/severity of bleeding or type of surgery/procedure, need for urgent haemostasis, frequency of administration, known responsiveness to FVIIa-containing bypassing agents during prior bleeding events. Results of laboratory assessments of coagulation (PT, INR, aPTT, FVII:C) do not necessarily correlate with/predict haemostatic effectiveness of this medicine. Maximum tolerated doses have not been determined and cumulative daily doses >1025 µg/kg have not been studied. Initiate treatment as soon as bleeding occurs. For mild/moderate bleeding episodes, home therapy should not exceed 24 hours. If severe bleeding occurs in home setting, immediate medical care should be sought. To avoid treatment delay, an initial dose can be administered at home. If an adequate haemostatic response is not achieved e.g. within 24 hours for mild/moderate bleeding episodes, alternative therapies should be considered.

Dosage and administration:
Bleeding Episodes

Type of bleeding	Dosing Recommendation
Mild and moderate	75 µg/kg repeated every 3 hours until haemostasis is achieved. or 225 µg/kg initially. If haemostasis is not achieved within 9 hours, additional 75 µg/kg doses may be administered every 3 hours as needed to achieve haemostasis. Continue therapy to support healing and prevent recurrent haemorrhage after haemostasis to maintain haemostatic plug. Site and severity of bleeding should determine therapy duration.
Severe	225 µg/kg initially, followed if necessary 6 hours later with 75 µg/kg every 2 hours until haemostasis is achieved. Continue therapy to support healing and prevent recurrent haemorrhage. Site and severity of bleeding and use of other procoagulant therapies should determine treatment duration.

Perioperative Management

Type of surgical procedure	Dosing Recommendation
Minor	75 µg/kg immediately before surgery or start of invasive procedure; then 75 µg/kg repeated every 2 hours for the first 48 hours following the initial dose.
Major	200 µg/kg immediately before the surgery, followed by 75 µg/kg every 2 hours for the duration of the surgery. The following post-operative doses may be administered: • First 48 hours: 75 µg/kg every 2 hours • Days 3-4: 75 µg/kg every 2 to 4 hours • Days 5-6: 75 µg/kg every 2 to 6 hours • Days 7-10: 75 µg/kg every 2 to 8 hours • Day 11 onwards: 75 µg/kg every 2 to 12 hours

Following surgery, 75 mcg/kg also recommended prior to drain/suture removal or physical therapy.

Dosing regimen in elderly and in those with renal/hepatic impairment not yet established.

Method of administration: For reconstitution instructions, see SmPC. Administer as intravenous bolus injection over 2 minutes or less.

Contra-indications: Hypersensitivity to the active substance or excipients. Hypersensitivity to rabbits or rabbit proteins.

Warnings and Precautions: *Traceability:* Record name and batch number. *Thrombosis:* May be an increased risk of thromboembolic events if history of congenital or acquired haemophilia receiving concomitant treatment with aPCC/PCC or other haemostatic agents or with history of atherosclerosis, coronary artery disease, cerebrovascular disease, crush injury, septicaemia or thromboembolism. Monitor closely for signs or symptoms of activation of the coagulation system or thrombosis. If laboratory confirmation of intravascular coagulation or presence of thrombosis, reduce or stop Cevenfacta, depending on patient's condition. *Hypersensitivity reactions*: Hypersensitivity reactions, including anaphylaxis, may occur – treatment should be discontinued and immediate medical attention sought. Patients with known IgE-based hypersensitivity to casein may be at a higher risk of hypersensitivity reactions. *Neutralising antibodies:* If treatment does not result in adequate haemostasis, test for neutralising antibodies.

Interactions: None known. Clinical experience with other FVIIa products indicates elevated risk of thrombotic events when used simultaneously with aPCC. It is not recommended to combine this product with aPCC or rFXIII.

Pregnancy and lactation: No data. Avoid use during pregnancy. Discontinue breastfeeding or discontinue/abstain from Cevenfacta during breastfeeding.

Effects on driving/using machinery: Minor influence - dizziness may occur after administration.

Undesirable effects: Consult SmPC for full details. Common (>1/100 to <1/10): Injection site discomfort, injection site haematoma, post-procedural haematoma, injection-related reaction, body temperature increased, dizziness and headache.

Legal Category: POM

Package Quantities and Basic NHS Price: 1mg vial £525.20, 5mg vial £2626

Marketing Authorisation Holder:
Laboratoire français du Fractionnement et des Biotechnologies, Tour W, 102 Terrasse Boieldieu 19ème Étage, 92800 Puteaux, France

Marketing Authorisation Number: PLGB 17469/0011 (1mg), PLGB 17469/0013 (5mg)
Further information is available from LFB Biopharmaceuticals Limited, Suite 104, Spirella Building, Bridge Road, Letchworth Garden City, SG6 4ET Tel: +44(0) 1462 558844

Date of preparation: September 2022

Adverse events should be reported. Reporting forms and information can be found at www.mhra.gov.uk/yellowcard

Adverse events should also be reported to Medical Information, Pharmalex, Tel: 01628 531171 medinfo.uk@pharmalex.com