

Merck Human Health Division

For use by user-facilities,
distributors and manufacturers for
MANDATORY reporting

Merck Facsimile of FDA Form 3500A
Approved by FDA (10/21/1993)

MedWatch

The FDA Medical Products Reporting Program

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Mfr report #	WAES 0802USA04821
UF/Dist report #	
FDA Use On	

A. Patient information			
1. Patient identifier Confidential AN 63507 in confidence	2. Age at time of event: or 64 years Date of Birth: 11/23/1943	3. Sex <input checked="" type="checkbox"/> Female <input type="checkbox"/> Male	4. Weight 132 lbs

B. Adverse event or product problem	
1. <input checked="" type="checkbox"/> Adverse event and/or <input type="checkbox"/> Product problem (e.g., defects/malfunctions)	
2. Outcomes attributed to adverse event (check all that apply)	
<input type="checkbox"/> Death (mm/dd/yyyy)	<input type="checkbox"/> Disability or Permanent Damage
<input type="checkbox"/> Life-threatening	<input type="checkbox"/> Congenital Anomaly/Birth Defect
<input checked="" type="checkbox"/> Hospitalization-initial or prolonged	<input type="checkbox"/> Other Serious(Important Medical Events)
<input type="checkbox"/> Required Intervention to Prevent Permanent Impairment/Damage (Devices)	

3. Date of event (mm/dd/yyyy)	02/17/2008	4. Date of this report (mm/dd/yyyy)	03/05/2009
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5. Describe event or problem
This is in follow-up to report(s) previously submitted on 2/29/2008; 3/20/2008; 3/26/2008; 4/15/2008; 5/5/2008; 8/29/2008; 11/7/2008; 11/12/2008; 12/5/2008; 12/15/2008; 12/22/2008; 12/26/2008; 1/5/2009; 1/13/2009; 2/20/2009; 2/23/2009

A Phase II/III Randomized, Double-Blind Study of Paclitaxel plus Carboplatin in Combination with Vorinostat (MK-0683) or Placebo in Patients with Stage IIIB (with pleural effusion) or Stage IV Non-Small-Cell Lung Cancer (NSCLC)

Initial and follow up information has been received from an investigator concerning a 64 year old Asian female with a history of hemoptysis and toothache who entered a study, title as stated above who was randomized on 07-FEB-2008. On 07-FEB-2008, the patient was placed on blinded study therapy with either vorinostat, capsule, 400 mg or placebo administered on days -4 through 10 of cycle 1 (cycle equivalent to 25 days) for the treatment of non-small cell lung cancer (diagnosed on 11-NOV-2007,

(Continued on Additional Page)

6. Relevant tests/laboratory data, including dates Refer to Additional Page
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7. Other relevant history, including preexisting medical conditions (e.g., allergies, race, pregnancy, smoking and alcohol use, hepatic/renal dysfunction, etc.) MEDICAL HISTORY: Haemoptysis; Toothache

C. Suspect medication(s)	
1. Name (Give labeled strength & mfr/labeler)	
# 1 CAP 0683-blinded therapy Unk	
# 2 INJ carboplatin Unk	
(Continued on Additional Page)	

2. Dose, frequency & route used	3. Therapy dates (if unknown, give duration from/to (or best estimate)
# 1 400 mg/DAILY/PO	# 1 02/07/2008 - 02/20/2008
# 2 684 mg/1X/IV	# 2 02/13/2008 - 02/13/2008

4. Diagnosis for use (indication)	5. Event abated after use stopped or dose reduced.
# 1 Non-small cell lung cancer	yes no N/A unk
# 2 Non-small cell lung cancer	# 1 <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>
	# 2 <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

6. Lot #	7. Exp. Date
# 1	# 1
# 2	# 2

9. NDC # or Unique ID	8. Event reappeared after reintroduction.
Unknown	yes no N/A unk
	# 1 <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>
	# 2 <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>

10. Concomitant medical products and therapy dates (excluded treatment of event)
BENADRYL 02/13/2008-02/13/2008
STEMETIL 02/13/2008-02/17/2008

(Continued on Additional Page)

G. All manufacturers	
1. Contact office - name/address	2. Phone Number
Merck Human Health Division Merck & Co., Inc. P.O. Box 4 West Point, Pa. 19486-0004 Attn: World Wide Product Safety	(215) 652-8071
4. Date received by manufacturer (mm/dd/yyyy)	5. (A)NDA #
02/26/2009	IND # 58915
6. If IND, protocol #	STN #
0560096	PMA/510(k) #
7. Type of report	Combination Product Pre-1938
<input type="checkbox"/> 5-day <input type="checkbox"/> 30-day	<input type="checkbox"/> Yes
<input type="checkbox"/> 7-day <input type="checkbox"/> Periodic	<input type="checkbox"/> Yes
<input type="checkbox"/> 10-day <input type="checkbox"/> Initial	OTC product
<input checked="" type="checkbox"/> 15-day <input checked="" type="checkbox"/> Follow-up# 16	<input type="checkbox"/> Yes
	9. Mfr. report number
	WAES 0802USA04821

3. Report source. (check all that apply)
<input checked="" type="checkbox"/> foreign
<input checked="" type="checkbox"/> study
<input type="checkbox"/> literature
<input type="checkbox"/> consumer
<input checked="" type="checkbox"/> health professional
<input type="checkbox"/> user facility
<input type="checkbox"/> company representative
<input type="checkbox"/> distributor
<input type="checkbox"/> other

E. Initial reporter	
1. Name, address & phone #	

2. Health professional?	3. Occupation	4. Initial reporter also sent report to FDA.
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> unk

FDA

Submission of a report does not constitute an admission that medical personnel, user facility, distributor, manufacturer or product caused or contributed to the event.

B. Adverse event or product problem

5. Describe event or problem

T2 N2 M1, stage 4 Adenocarcinoma).

Concomitant suspect study therapy carboplatin AUC equivalent to 6 (684 mg), and paclitaxel 200 mg/m² (320), administered IV on day 1 of each treatment cycle. Other concomitant therapy included ondansetron HCL (ZOFTRAN), diphenhydramine (BENADRYL), dexamethasone (manufacturer unknown), ranitidine, tramadol hydrochloride (TRAMAL) and prochlorperazine maleate (STEMETIL).

On 17-FEB-2008 (cycle 1, day 10) at 10:05 the patient experienced hyponatremia (grade 4) (sodium was 105 mmol/L). On 18-FEB-2008, (Cycle 1, day 11) the patient experienced fatigue and vomiting. Laboratory evaluation on 18-FEB-2008 revealed serum sodium was 115 mmol/L (also reported as 110 mmol/L), absolute neutrophil count (ANC) was 3687/mm³, and white blood count (WBC) was 4400/ul. Serum osmolality was not checked. On 18-FEB-2008 patient was admitted to the hospital. She was treated with 3 percent sodium chloride intravenously. On 18-FEB-2008 chest x-ray showed patient's lungs were clear and no evidence of pleural effusion. On 18-FEB-2008, the patient recovered from hyponatremia (grade 4) with sequelae. On 19-FEB-2008 at 00:36 patient experienced hyponatremia sodium was 123 (grade 3) (NSAE). She was treated with 5% dextrose in normal saline IV 80cc/hr (19-FEB-2008 to 27-FEB-2008). She had fever of 38.5 C. No EKG test done and patient had normal blood pressure. No hypotension and no tachycardia. No other diagnosis was made. On 20-FEB-2008, the patient completed cycle 1 of study therapy. On 20-FEB-2008 she recovered from hyponatremia with sequelae (grade 3) (NSAE). On 21-FEB-2008 patient experienced severe febrile neutropenia (grade 3) (Cycle 1, day 15) and hyponatremia (grade 1) (NSAE). On 21-FEB-2008 patient's serum sodium was 131 mmol/L, white blood count was 1000/ul and neutrophil was 54% and absolute neutrophil count (ANC) was 660/mm³ (also reported 594). No electrocardiogram was done and her blood pressure was normal (value not reported). The event of severe febrile neutropenia (grade 3) prolonged hospitalization for the earlier reported hyponatremia. On 22-FEB-2008 patient recovered from hyponatremia with sequelae (grade 1) (NSAE). No other diagnosis was made. No culture was done. The patient was treated with cefepime for severe neutropenia (22-FEB-2008 to 28-FEB-2008). On 23-FEB-2008 the patient experienced hyponatremia (sodium was 127) (grade 3) (NSAE), ANC was 594/mm³ and WBC was 1100/ul. On 27-FEB-2008, the patient's serum sodium level was 136 mmol/L. On 27-FEB-2008 she recovered from hyponatremia (grade 3) (NSAE) and had no fever. Her WBC was 5400/ul and ANC was 3709/mm³. On 28-FEB-2008 the patient recovered from severe febrile neutropenia (grade 3) with sequelae.

On 29-FEB-2008 patient was discharged from the hospital. Discharge diagnosis was hyponatremia and severe febrile neutropenia. After discharge the patient had follow up on 05-MAR-2008 and she had no symptoms of febrile neutropenia. On 05-MAR-2008, the patient was discontinued from the study due to the adverse event. Action taken regarding blinded study therapy for hyponatremia (grade 4) was none and action taken for severe febrile neutropenia (grade 3) was discontinued. Action taken regarding study therapy for hyponatremia (grade 1, NSAE) and hyponatremia (grade 3, NSAE) was none.

The reporting investigator felt that the hyponatremia (grade 4), severe febrile neutropenia (grade 3) were related to study therapy and were related to suspect therapy carboplatin, Paclitaxel. Action taken for suspect therapy carboplatin, Paclitaxel were discontinued.

Additional information is not expected.

6. Relevant tests/laboratory data, including dates

DIAGNOSTIC TEST

Tests	Date	Value	Unit	Normal Range
chest X-ray	02/18/2008			
Comment: Lungs are clear and no evidence of pleural effusion				
blood pressure measurement	02/19/2008			
Comment: normal				

LABORATORY RESULTS

Tests	Date	Value	Unit	Normal Range
serum sodium	02/17/2008	105	mmol/L	135 - 145
WBC count	02/18/2008	4400	/ul	4500 - 11000
absolute neutrophil count	02/18/2008	3687	mm ³	1800 - 8200
serum sodium	02/18/2008	110	mmol/L	135 - 145
Comment: hyponatremia grade 3				
serum sodium	02/18/2008	105	mmol/L	135 - 145
Comment: hyponatremia grade 3				
serum sodium	02/18/2008	115	mmol/L	135 - 145
Comment: hyponatremia grade 3				
body temp	02/19/2008	38.5	C	
serum sodium	02/19/2008	123	mmol/L	135 - 145
WBC count	02/21/2008	1000	/ul	4500 - 11000
absolute neutrophil count	02/21/2008	660	mm ³	1800 - 8200

neutrophil count	02/21/2008	54 %	
serum sodium	02/21/2008	131 mmol/L	135 - 145
WBC count	02/23/2008	1100 /ul	4500 - 11000
absolute neutrophil count	02/23/2008	594 mm3	1800 - 8200
serum sodium	02/23/2008	127 mmol/L	135 - 145
WBC count	02/27/2008	5400 /ul	4500 - 11000
absolute neutrophil count	02/27/2008	3709 mm3	1800 - 8200
serum sodium	02/27/2008	136 mmol/L	135 - 145

C. Suspect medication(s)

1. Name (Give labeled strength & mfr/labeler)

#3 paclitaxel Unk

2. Dose, frequency & route used

#3 320 mg/1X/IV

3. Therapy dates (if unknown, give duration) from/to (or best estimate)

#3 02/13/2008 - 02/13/2008

4. Diagnosis for use (indication)

#3 Non-small cell lung cancer

5. Event abated after use stopped or dose reduced

YES NO N/A UNK

#3 X

6. Lot # (if known)

#3

7. Exp date (if known)

#3

8. Event reappeared after reintroduction

YES NO N/A UNK

#3 X

C. Suspect medication(s)

10. Concomitant medical products and therapy dates (exclude treatment of event)

TRAMAL	02/13/2008 - Cont
dexamethasone	02/13/2008 - 02/13/2008
ondansetron	02/13/2008 - 02/13/2008
ondansetron	02/13/2008 - 03/04/2008
ranitidine	02/13/2008 - 02/13/2008