

IND SAFETY REPORT: INITIAL WRITTEN REPORT**TO: Division of Drug Oncology Products, Center for Drug Evaluation and Research, FDA****FAX: 301-796-9845**1. IND NUMBER
610102. AGENT NAME
CCI-779 (temsirolimus, Torisel™)3. DATE
March 19, 20104. SPONSOR
Division of Cancer Treatment and Diagnosis, National Cancer Institute5. REPORTER'S NAME, TITLE, AND INSTITUTION
L. Austin Doyle, MD-Senior Investigator for Investigational Therapeutics 2, Investigational Drug Branch, CTEP, DCTD, NCI6. PHONE NUMBER
301-496-11967. FAX NUMBER
301-402-04288. PROTOCOL NUMBER (AE #)
GOG-0248 (AE# 1289062)9. PATIENT IDENTIFICATION
083-0248-00210. AGE
6811. SEX
Female

12. DESCRIPTION OF ADVERSE EVENT

The patient is a 68-year-old female with endometrioid endometrial adenocarcinoma who developed grade 3 dehydration while on a phase 2 trial utilizing the investigational agent temsirolimus. She began the first course of the investigational therapy on April 23, 2009, and received her last dose of temsirolimus on March 12, 2010 (Cycle 8, Day 30). On March 10, 2010 (Cycle 8, Day 28), the patient who had experienced complications including enteritis, diarrhea, malnutrition which necessitated PEG tube placement in February 2010, was admitted to the hospital with severe nausea and vomiting. She had suffered a syncopal 1 day prior to admission. The laboratory tests revealed a potassium of 3.1 mEq/L (reference range: 3.5-5.1 mEq/L), a BUN of 43 mg/dL (reference range: 8-21 mg/dL), and a creatinine of 1.47 mg/dL (reference range: 0.70-1.20 mg/dL). The acute abdominal series showed distended loops of small and large bowel with scattered air-fluid levels suspicious of enteritis. There was no evidence of obstruction. It was felt that her syncopal episode was likely due to dehydration. She was made NPO and started on IV fluids with potassium replacement. A repeat abdominal series on March 11, 2010 (Cycle 8, Day 29), was not concerning. Her tube feeding was reinstated at 5cc per hour, which was increased later that day to 30 cc per hour without any residuals. By March 12, 2010 (Cycle 8, Day 30), the patient's condition had improved, and she was discharged home on the same day after receiving the scheduled dose of temsirolimus. Additional information has been requested from the investigational site. There is a reasonable possibility that the experience may have been caused by the drug.

13. DOSE, ROUTE, AND SCHEDULE

Cycle = 6 weeks**Temsirolimus 25 mg IV over 30 minutes weekly**

14. DATES OF TREATMENT

The patient began the investigational therapy on April 23, 2009, and received the last dose of temsirolimus on March 12, 2010 (Cycle 8, Day 30).

15. ACCRUAL AND IND EXPERIENCE

Number of patients enrolled in NCI-sponsored clinical trials using temsirolimus = 1935.**There have been 60 other cases of dehydration reported to the NCI through AdEERS as serious adverse events for temsirolimus.**

16. COMMENTS

AT THIS TIME, NO OTHER INFORMATION IS AVAILABLE. IF UPON FURTHER INVESTIGATION RELEVANT INFORMATION BECOMES AVAILABLE, THEN A FOLLOW-UP REPORT WILL BE SUBMITTED IN ACCORDANCE WITH 21CFR312.32(d)(2).**DISCLAIMER per 21 CFR 312.32(e): THIS SAFETY REPORT DOES NOT NECESSARILY REFLECT A CONCLUSION OR ADMISSION BY THE CTEP IDB SENIOR INVESTIGATOR/SPONSOR THAT THE INVESTIGATIONAL AGENT/THERAPY CAUSED OR CONTRIBUTED TO THE ADVERSE EXPERIENCE BEING REPORTED.**

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