



NCCTG

NORTH CENTRAL CANCER TREATMENT GROUP

Date: March 27, 2009

To: NCCTG Primary Clinical Research Associates

From: Alicia Elsing
Protocol Development Coordinator

Re: N0821, A Phase II First-Line Study of a Combination of Pemetrexed, Carboplatin and Bevacizumab in Advanced Nonsquamous NSCLC Evaluating Efficacy and Tolerability in Elderly Patients (Age \geq 70 yrs) with Good Performance Status (PS $<$ 2)

The purpose of this memorandum is to provide investigators with a recent industry report of an adverse event that has occurred in association with Bevacizumab at a non-NCCTG institution. You may have also received this communication directly from the drug manufacturer.

AE_272175

Please note that all risks currently cited in the NCCTG consent form cannot be omitted; it is at the discretion of your local IRB as to whether they wish to add risks based on the enclosed information. If a determination has been made by the NCCTG Research Base that a protocol amendment is necessary, you will receive the NCI-approved protocol addendum at a later date; for purposes of cross-reference, this communication will cite the adverse event noted above.

Please submit this adverse event to your Institutional Review Board.

If you have any questions concerning this communication, please contact Alicia Elsing at Elsing.alicia@mayo.edu or 507-538-3893.

AE/kjm
enclosure

Mfr Report #	272175
UF/Importer Report #	
FDA Use Only	

MEDWATCH
3500A Facsimile

A. PATIENT INFORMATION			
1. Patient Identifier	2. Age at Time of Event: 59 Years or Date of Birth:	3. Sex <input checked="" type="checkbox"/> Female <input type="checkbox"/> Male	4. Weight 178.6 lbs or 81.0 kgs
In confidence			
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) 11/19/2008		4. Date of This Report (mm/dd/yyyy) 11/26/2008	
5. Describe Event or Problem Event Verbatim [PREFERRED TERM] (Related symptoms if any separated by commas) initis [INFLAMMATION]			
Case Description: IND SAFETY REPORT			
This case, manufacturer control number 272175, is a study report from Canada referring to a 59 Year-old Female subject (Study ID # _____). An Investigator reported this case from study AVF3693G a phase III, multicenter, randomized, placebo-controlled trial evaluating the efficacy and safety of bevacizumab in combination with chemotherapy regimens in subjects with previously treated metastatic breast cancer sponsored by Genentech, Inc.			
On 20-JUN-2008, the subject initiated treatment with continued in additional info section...			
6. Relevant Tests/Laboratory Data, Including Dates #1 11/20/2008 COLONOSCOPY (continued) #2 11/21/2008 CULTURE STOOL (continued) #3 11/19/2008 HAEMOGLOBIN 106 g/L			
7. Other Relevant History, Including Preexisting Medical Conditions (e.g. allergies, race, pregnancy, smoking and alcohol use, hepatic/renal dysfunction, etc.) Race: Caucasian			

C. SUSPECT PRODUCT(S)			
1. Name (Give labeled strength & mfr/labeler)			
#1. BEVACIZUMAB OR PLACEBO (Bevacizumab) (Continued)			
#2.			
2. Dose, Frequency & Route Used		3. Therapy Dates (if unknown, give duration) from/to (or best estimate)	
#1. 811 mg, Q2W, Intravenous		#1. 06/20/2008 to UNK	
#2.		#2.	
4. Diagnosis for Use (Indication)		5. Event Abated After Use Stopped or Dose Reduced?	
#1. metastatic breast (Continued)		#1. <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Doesn't Apply	
#2.		#2. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Doesn't Apply	
6. Lot #	7. Exp. Date	8. Event Reappeared After Reintroduction?	
#1. 9(Continued)	#1.	#1. <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Doesn't Apply	
#2.	#2.	#2. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Doesn't Apply	
9. NDC# or Unique ID			
10. Concomitant Medical Products and Therapy Dates (Exclude treatment of event)			
#1. TAXOL (PACLITAXEL) 06/20/2008 to UNK			
G. ALL MANUFACTURERS			
1. Contact Office - Name/Address (and Manufacturing Site for Devices)		2. Phone Number	
Genentech, Inc. James Nickas Pharm.D. 1 DNA Way South San Francisco, CA 94080 UNITED STATES		6502255591	
4. Date Received by Manufacturer (mm/dd/yyyy) 11/20/2008		5. (A)NDA # IND # BB 7023 STN # PMA/ 510(k) # Combination Product <input type="checkbox"/> Yes Pre-1938 <input type="checkbox"/> Yes OTC Product <input type="checkbox"/> Yes	
6. If IND, Give Protocol # AVF3693G		3. Report Source (Check all that apply) <input checked="" type="checkbox"/> Foreign CAN <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: _____ _____ _____	
7. Type of Report (Check all that apply) <input type="checkbox"/> 5-day <input type="checkbox"/> 30-day <input type="checkbox"/> 7-day <input type="checkbox"/> Periodic <input type="checkbox"/> 10-day <input checked="" type="checkbox"/> Initial <input checked="" type="checkbox"/> 15-day <input type="checkbox"/> Follow-up # _____		9. Manufacturer Report Number 272175	
8. Adverse Event Term(s) INFLAMMATION			

E. INITIAL REPORTER			
1. Name and 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	

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

MEDWATCH

3500A Facsimile (Back) (Continued)

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Mfr Report #	272175
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ADDITIONAL INFORMATION**B5. EVENT DESCRIPTION (Continued)**

Bevacizumab or Placebo (811mg, Q2W, Intravenous). The lot numbers of the Bevacizumab or placebo were 9112630 and 910630. Concomitant chemotherapy included Paclitaxel, (90mg/m², Route and Frequency not reported). The last dose of Bevacizumab or Placebo was administered on 14-NOV-2008.

Since 17-OCT-2008, the subject was reported to have had occasional diarrhea which was grade I at its worst with a maximum of 3 stools per day.

On 19-NOV-2008 the diarrhea increased to grade II with blood in the stool and the subject was admitted to the emergency room. On 19-NOV-2008, the subject had a hemoglobin of 106 g/L. On 20-NOV-2008, the subject had a colonoscopy that showed no active bleeding, but showed proctitis (inflammation of the anus). Treatment for the event included Metronidazole. No action was taken with Bevacizumab or Placebo.

On 20-NOV-2008, the subject was discharged from the hospital.

On 21-NOV-2008, the subject had a stool culture, the results of which were pending.

At the time of this report, the event remained ongoing.

On 25-NOV-2008, the subject's treatment strategy was unblinded and the subject was found to be on Bevacizumab.

The Investigator assessed the event of inflammation of the anus as related to Bevacizumab. No other possible etiological factors were reported.

This report contains case details known at the time of the submission.

Additional information has been requested, if received the case will be updated accordingly.

PREVIOUSLY FILED IND SAFETY REPORTS OF SIMILAR EVENTS

Genentech has not filed previous IND safety reports of inflammation of the anus or IND safety reports of similar events for subjects receiving Bevacizumab.

SPONSOR ASSESSMENT: Based on review of available data, no compelling evidence of a cause-and-effect relationship between administration of Bevacizumab and the occurrence of inflammation of the anus can be identified. At this time, the sponsor does not believe changes to the conduct of the trial are warranted.

B6. LABORATORY DATA

#	Date	Test / Assessment / Notes	Results	Normal High / Low
1	11/20/2008	COLONOSCOPY	see notes	
		Shown no active bleeding.		
2	11/21/2008	CULTURE STOOL	see notes	
		Results pending.		

C1. NAME (Continued)

Suspect Medication #1: BEVACIZUMAB OR PLACEBO(Bevacizumab) Powder and solvent for solution for infusion, 100mg

C4. DIAGNOSIS FOR USE (Continued)

#1:metastatic breast cancer (METASTATIC BREAST CANCER)

C6. LOT# (Continued)

Suspect Medication #1: 9112630, 910630

SUSPECT ADVERSE REACTION REPORT	

I. REACTION INFORMATION

1. PATIENT INITIALS (first, last)	1a. COUNTRY CANADA	2. DATE OF BIRTH			2a. AGE 59 Years	3. SEX Female	3a. WEIGHT 81.00 kg	4-6 REACTION ONSET			8-12 CHECK ALL APPROPRIATE TO ADVERSE REACTION
7 + 13 DESCRIBE REACTION(S) (including relevant tests/lab data) Event Verbatim [PREFERRED TERM] (Related symptoms if any separated by commas) initis [INFLAMMATION]											<input type="checkbox"/> PATIENT DIED <input checked="" type="checkbox"/> INVOLVED OR PROLONGED INPATIENT HOSPITALISATION <input type="checkbox"/> INVOLVED PERSISTENT OR SIGNIFICANT DISABILITY OR INCAPACITY <input type="checkbox"/> LIFE THREATENING
Case Description: IND SAFETY REPORT											
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(Continued on Additional Information Page)											

II. SUSPECT DRUG(S) INFORMATION

14. SUSPECT DRUG(S) (include generic name) #1) BEVACIZUMAB OR PLACEBO (Bevacizumab) Powder and solvent for solution for infusion, 100 mg (Lot # (Continued on Additional Information Page)		20. DID REACTION ABATE AFTER STOPPING DRUG? <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> NA
15. DAILY DOSE(S) #1) 811 mg, Q2W	16. ROUTE(S) OF ADMINISTRATION #1) Intravenous	
17. INDICATION(S) FOR USE #1) metastatic breast cancer (METASTATI (Continued on Additional Information Page)		21. DID REACTION REAPPEAR AFTER REINTRODUCTION? <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> NA
18. THERAPY DATES(from/to) #1) 20-JUN-2008 / Unknown	19. THERAPY DURATION #1) Unknown	

III. CONCOMITANT DRUG(S) AND HISTORY

22. CONCOMITANT DRUG(S) AND DATES OF ADMINISTRATION (exclude those used to treat reaction) #1) TAXOL (PACLITAXEL) ; 20-JUN-2008 / Unknown	
23. OTHER RELEVANT HISTORY. (e.g. diagnostics, allergies, pregnancy with last month of period, etc.) From/To Dates Type of History / Notes Description Unknown	

IV. MANUFACTURER INFORMATION

24a. NAME AND ADDRESS OF MANUFACTURER Genentech, Inc. James Nickas 1 DNA Way South San Francisco, CA 94080 UNITED STATES Phone: 6502255591		26. REMARKS
24b. MFR CONTROL NO. 272175		
24c. DATE RECEIVED BY MANUFACTURER 20-NOV-2008	24d. REPORT SOURCE <input checked="" type="checkbox"/> STUDY <input type="checkbox"/> LITERATURE <input checked="" type="checkbox"/> HEALTH PROFESSIONAL <input type="checkbox"/> OTHER:	25b. NAME AND ADDRESS OF REPORTER
DATE OF THIS REPORT 26-NOV-2008	25a. REPORT TYPE <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> FOLLOWUP:	

ADDITIONAL INFORMATION**7+13. DESCRIBE REACTION(S) continued**

On 20-JUN-2008, the subject initiated treatment with Bevacizumab or Placebo (811mg, Q2W, Intravenous). The lot numbers of the Bevacizumab or placebo were 9112630 and 910630. Concomitant chemotherapy included Paclitaxel, (90mg/m², Route and Frequency not reported). The last dose of Bevacizumab or Placebo was administered on 14-NOV-2008.

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13. Lab Data

#	Date	Test / Assessment / Notes	Results	Normal High / Low
1	20-NOV-2008	COLONOSCOPY Showed no active bleeding.	see notes	
2	21-NOV-2008	CULTURE STOOL Results pending.	see notes	
3	19-NOV-2008	HAEMOGLOBIN	106 g/L	

14-19. SUSPECT DRUG(S) continued

14. SUSPECT DRUG(S) (include generic name)	15. DAILY DOSE(S); 16. ROUTE(S) OF ADMIN	17. INDICATION(S) FOR USE	18. THERAPY DATES (from/to); 19. THERAPY DURATION
#1) BEVACIZUMAB OR PLACEBO (Bevacizumab) Powder and solvent for solution for infusion, 100 mg {Lot # 9112630, 910630}; Regimen #1	811 mg, Q2W; Intravenous	metastatic breast cancer (METASTATIC BREAST CANCER)	20-JUN-2008 / Unknown; Unknown