



Information for the patient

Obetan5mg/10mg film-coated tablets

obeticholic Acid

Read all of this instruction carefully before you start taking this medicine because it contains important information for you.

- Keep this leaflet. You may need to read it again.
- If you have any further questions, ask your doctor or pharmacist.
- This medicine has been prescribed for you only. Do not pass it to others. It may harm them, even if their signs of illness are the same as yours.
- If you get any side effects, talk to your doctor or pharmacist. This includes any possible side effects not listed in this leaflet. See section 4.

What is in this instruction

- 1.What OBETAN is and what it is used for
- 2.What you need to know before you take OBETAN
- 3.How to take OBETAN
- 4.Possible side effects
- 5.How to store OBETAN

1.What OBETAN is and what it is used for

OBETAN is a drug for the treatment of primary biliary cholangitis (PBC) in adults. OBETAN is to be used

- with another drug called ursodeoxycholic acid in patients whose liver enzyme tests do not adequately improve after using ursodeoxycholic acid for an appropriate period of time or
- on its own when patients cannot take ursodeoxycholic acid because of side effects

How OBETAN works

Obeticholic acid is an agonist for FXR, a nuclear receptor expressed in the liver and intestine. FXR is a key regulator of bile acid, inflammatory, fibrotic, and metabolic pathways. FXR activation decreases the intracellular hepatocyte concentrations of bile acids by suppressing de novo synthesis from cholesterol as well as by increased transport of bile acids out of the hepatocytes. These mechanisms limit the overall size of the circulating bile acid pool while promoting choleresis, thus reducing hepatic exposure to bile acids.

2.What you need to know before you take OBETAN

Do not take OBETAN, if you are allergic to obeticholic acid or any of the other ingredients of this medicine (listed in section 6 under 'What OBETAN contains').

Warning and precautions

Liver-Related Adverse Reactions

Monitor for elevations in liver biochemical tests and development of liver-related adverse reactions; weigh the potential risk against the benefits of continuing treatment. Do not exceed 10 mg once daily. Adjust the dosage for patients with moderate or severe hepatic impairment. Discontinue in patients who develop complete biliary obstruction.

Severe Pruritus

Management strategies include the addition of bile acid binding resins or antihistamines; OBETAN dosage reduction and/or temporary dosing interruption.

Reduction in HDL-C

Monitor for changes in serum lipid levels during treatment.

Use in specific populations

Pregnancy

The limited available human data on the use of obeticholic acid during pregnancy are not sufficient to inform a drug-associated risk.

Lactation

There is no information on the presence of obeticholic acid in human milk, the effects on the breast-fed infant or the effects on milk production. The developmental and health benefits of breastfeeding should be considered along with the mother's clinical need for OBETAN and any potential adverse effects on the breastfed infant from OBETAN or from the underlying maternal condition.

Pediatric Use

The safety and effectiveness of OBETAN in pediatric patients have not been established.

Hepatic Impairment

Plasma exposure to obeticholic acid and its active conjugates, increases significantly in patients with moderate to severe hepatic impairment (Child-Pugh Classes B and C).

Monitor patients during treatment with OBETAN for elevations in liver biochemical tests and for the development of liver-related adverse reactions. Dosage adjustment of OBETAN is recommended for patients with moderate and severe hepatic impairment. No dosage adjustment is needed in patients with mild hepatic impairment (Child-Pugh Class A).

Drug abuse and dependence

No studies on the potential for OBETAN to cause dependence have been performed. However, there is no evidence from the available data that OBETAN treatment can result in dependence.

Contraindication

OBETAN is contraindicated in patients with complete biliary obstruction.

3.How to take OBETAN

Always take this medicine exactly as your doctor has told you. Check with your doctor or pharmacist if you are not sure.

OBETAN is a tablet taken once a day. The daily dose may be increased after 3 months in order to achieve a greater improvement in liver enzyme tests, as long as the side effects are tolerated.

Recommended Dose

The recommended starting dosage of OBETAN is 5 mg orally once daily in adults who have not achieved an adequate response to an appropriate dosage of UDCA for at least 1 year or are intolerant to UDCA.

OBETAN tablets should be swallowed whole with a glass of water.

OBETAN tablets should not be chewed or crushed.

Duration of treatment

It is recommended that patients are treated with OBETAN until disease progression or unacceptable toxicity occurs.

Dosage Titration

If adequate reduction in ALP and/or total bilirubin has not been achieved after 3 months of OBETAN 5 mg once daily and the patient is tolerating OBETAN, increase dosage to 10 mg once daily.

If you take more OBETAN than you should

If you take more OBETAN than you should, talk to a doctor or go to a hospital straight away. Take the medicine pack and this leaflet with you.

Take OBETAN with or without food.

For patients taking a bile acid binding resin, take OBETAN at least 4 hours before or 4 hours after taking the bile acid binding resin, or at as great an interval as possible

4.Possible side effects

The most common side effects are itching of the skin, fatigue, abdominal pain and discomfort, joint pain, throat pain, dizziness, and constipation.

Liver-Related Adverse Reactions:

Monitor patients during treatment with OBETAN for elevations in liver biochemical tests and for the development of liver-related adverse reactions. Weigh the potential risks against the benefits of continuing treatment with OBETAN in patients who have experienced clinically

significant liver-related adverse reactions. The maximum recommended dosage of OBETAN is 10 mg once daily. Adjust the dosage for patients with moderate or severe hepatic impairment.

Discontinue OBETAN in patients who develop complete biliary obstruction

Severe Pruritus:

Severe pruritus was reported in the OBETAN titration Trial. Severe pruritus was defined as intense or widespread itching, interfering with activities of daily living, or causing severe sleep disturbance, or intolerable discomfort, and typically requiring medical interventions. In the subgroup of patients in the OBETAN titration arm who increased their dosage from 5 mg once daily to 10 mg once daily after 6 months of treatment (n=33), the incidence of severe pruritus was 0% from Months 0 to 6 and 15% from Months 6 to 12.

Management strategies include the addition of bile acid resins or antihistamines, OBETAN dosage reduction, and/or temporary interruption of OBETAN dosing.

Reduction in HDL-C:

Patients with PBC generally exhibit hyperlipidemia characterized by a significant elevation in total cholesterol primarily due to increased levels of high density lipoprotein-cholesterol (HDL-C). Monitor patients for changes in serum lipid levels during treatment. For patients who do not respond to OBETAN after 1 year at the highest recommended dosage that can be tolerated (maximum of 10 mg once daily), and who experience a reduction in HDL-C, weigh the potential risks against the benefits of continuing treatment.

Other Common side effects

Fatigue
Abdominal pain and discomfort
Rash
Arthralgia
Oropharyngeal pain
Dizziness
Constipation
Peripheral Edema
Palpitations
Pyrexia
Thyroid function abnormality
Eczema

Reporting of side effects

If you get any side effects, talk to your doctor, pharmacist or nurse. This includes any possible side effects not listed in this leaflet. By reporting side effects you can help provide more information on the safety of this medicine.

5.How to store OBETAN

Store at room temperature 20 C - 25 C (68 F - 77 F); Excursions permitted between 15 C and 30 C (59 F and 86 F), Store in the original container with the lid tightly closed.

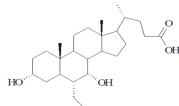
Do not use this medicine after the expiry date which is stated on the bottle and carton after "EXP".

Do not throw away any medicines via wastewater or household waste. Ask your pharmacist how to throw away medicines you no longer use. These measures will help protect the environment.

6. Contents of the pack and other information

What OBETAN contains

OBETAN is a farnesoid X receptor (FXR) agonist. The active substance is obeticholic acid. Chemically, obeticholic acid is 3 α ,7 α -dihydroxy-6 α -ethyl-5 β -cholan-24-oic acid. It is a white to off-white powder. Its chemical formula is C₂₆H₄₄O₄, the molecular weight is 420.63 g/mol and the chemical structure is:



Each film-coated tablet contains 5 mg of obeticholic acid.

Each film-coated tablet contains 10 mg of obeticholic acid.

The other ingredients are:

- Table core: microcrystalline cellulose, sodium starch glycolate, and magnesium stearate.

- Film-coating: polyvinyl alcohol-part hydrolyzed, titanium dioxide, macrogol (polyethylene glycol 3350), talc, and iron oxide yellow.

What OBETAN looks like and contents of the pack

OBETAN 5mg film-coated tablets are yellow and round, debossed with 'TLPH' on one side.

OBETAN 10 mg film-coated tablets are yellow and oval, debossed with 'TLPH' on one side.

Each pack contains 30 tablets.

Not all pack sizes may be marketed.

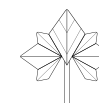
Marketing Authorisation Holder

Tongmeng(Lao) Pharmaceutical and Food Co., Ltd
Rd13 South,31km,Ban Naphasuk,Saithany District
Vientiane
Lao PDR

Manufacturer

Tongmeng(Lao) Pharmaceutical and Food Co., Ltd
Rd13 South,31km,Ban Naphasuk,Saithany District
Vientiane
Lao PDR

For any information about this medicine, please contact the local representative of the Marketing.



TLPH