FDA Drug Safety Communication: FDA investigating reports of possible increased risk of pancreatitis and pre-cancerous findings of the pancreas from incretin mimetic drugs for type 2 diabetes (14 Mar 2013)

Pharmacy, Patient Safety, Gastroenterology, Internal Medicine, Endocrinology, and Oncology communities: Please share with pharmacists and providers at your MTFs and regions.

ISSUE: FDA is evaluating unpublished new findings by a group of academic researchers that suggest an increased risk of pancreatitis and pre-cancerous cellular changes called pancreatic duct metaplasia in patients with type 2 diabetes treated with a class of drugs called incretin mimetics. These findings were based on examination of a small number of pancreatic tissue specimens taken from patients after they died from unspecified causes. FDA has asked the researchers to provide the methodology used to collect and study these specimens and to provide the tissue samples so the Agency can further investigate potential pancreatic toxicity associated with the incretin mimetics.

BACKGROUND: Drugs in the incretin mimetic class include exenatide (Byetta®, Bydureon®), liraglutide (Victoza®), sitagliptin (Januvia®, Janumet®, Janumet XR®, Juvisync®), saxagliptin (Onglyza®, Kombiglyze XR®), alogliptin (Nesina®, Kazano®, Oseni®), and linagliptin (Tradjenta®, Jentadueto®). These drugs work by mimicking the incretin hormones that the body usually produces naturally to stimulate the release of insulin in response to a meal. They are used along with diet and exercise to lower blood sugar in adults with type 2 diabetes.

INCRETIN MIMETIC USE IN THE DoD: A Pharmacovigilance Center (PVC) analysis conducted in response to this FDA communication identified approximately 156,000 individuals who had filled at least one prescription for an incretin mimetic medication in FY2011. These were broken out as follows:

- Exenatide: 18,302 patients
- Liraglutide: 13,505 patients
- Sitagliptin: 112,011 patients
- Saxagliptin: 11,719 patients
- Linagliptin: 648 patients (approved during FY2011)
- Alogliptin: none (the drug was not approved until January, 2013)

RECOMMENDATIONS: FDA has not reached any new conclusions about safety risks with incretin mimetic drugs. This early communication is intended only to inform the public and health care professionals that the Agency intends to obtain and evaluate this new information. FDA will participate in the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) and National Cancer Institute’s (NCI) Workshop on Pancreatitis-Diabetes-Pancreatic Cancer in June 2013 to gather and share additional information. FDA will communicate its final conclusions and recommendations when its review is complete or when the Agency has additional information to report.

FDA has not concluded these drugs may cause or contribute to the development of pancreatic cancer.

*At this time, patients should continue to take their medicine as directed until they talk to their health care professional, and health care professionals should continue to follow the prescribing recommendations in the drug labels.*
The Warnings and Precautions section of drug labels and patient Medication Guides for incretin mimetics contain warnings about the risk of acute pancreatitis. FDA has not previously communicated about the potential risk of pre-cancerous findings of the pancreas with incretin mimetics.

The entire FDA Drug Safety Communication and MedWatch notice are available at:
http://www.fda.gov/Drugs/DrugSafety/ucm343187.htm

Healthcare professionals and patients are encouraged to report adverse events or side effects related to the use of these products to the FDA's MedWatch Safety Information and Adverse Event Reporting Program at:  www.fda.gov/MedWatch/report.htm

QUESTIONS OR ADDITIONAL INFORMATION: Send requests for additional information regarding this alert or the analysis conducted by the Pharmacovigilance Center (PVC) to: mark.s.maneval2.mil@mail.mil