



RISKS ASSOCIATED WITH LEFTOVER MEDICATION AND IMPROPER SCHEDULING OF PREGNANCY TESTING

Analysis of iPLEDGE data has identified patients using leftover medication and the improper scheduling of pregnancy testing as major risk factors for females using isotretinoin.

Taking leftover isotretinoin contributed to 33 fetal exposures over the past 6 years.

Since the beginning of iPLEDGE 33 female patients took leftover medication without their physician's knowledge and became pregnant. **It is important for prescribers and pharmacists to remind their patients not to use leftover medication and to dispose of the medication to avoid unintended exposed pregnancies.** Please see the FDA website for more information on disposal of leftover medication: <http://www.fda.gov/ForConsumers/ConsumerUpdates/ucm101653.htm>. It is also important to remind patients not to share isotretinoin with anyone.

Testing at the beginning of the menstrual cycle has the greatest likelihood of producing accurate pregnancy test results.

Virtually all of the iPLEDGE patients who were pregnant at the start of isotretinoin therapy had their pregnancy testing performed during the interval between conception and implantation. Testing during this interval, which can be up to 12 days in length, can often yield a false negative pregnancy test result. The first pregnancy test (a screening test) is verified to be negative by the prescriber when the decision is made to pursue qualification of the patient for isotretinoin therapy. The second pregnancy test (a confirmation test) must be done in a CLIA-certified laboratory and verified negative by the prescriber before prescribing isotretinoin therapy. For patients with regular menstrual cycles, **the second pregnancy test should be done during the first five days of the menstrual period (tell the patient to call the office the first day of her period to schedule the pregnancy test ASAP)** and after the patient has used two forms of iPLEDGE accepted contraception for one month.

HERE'S HOW YOU CAN HELP TO PREVENT EXPOSED PREGNANCIES:

- **Remind your patients at each visit not to use leftover medication and not to share isotretinoin with anyone**
- **Review the birth control methods the patient has agreed to use on a monthly basis to ensure the patient is complying with her chosen birth control prior to confirming the patient in iPLEDGE**
- **Educate yourself and your office staff on the importance of performing the confirmatory lab pregnancy test within the **FIRST FIVE DAYS** of your patient's menstrual cycle**
- **Instruct your patient to call on Day 1 (traditionally first day of bleeding) of her menstrual cycle and schedule her pregnancy test appointment within the NEXT FOUR DAYS**

For patients with amenorrhea, irregular cycles, or using a contraceptive method that precludes withdrawal bleeding, the second pregnancy test must be done immediately preceding the beginning of isotretinoin therapy and after the patient has used two forms of iPLEDGE accepted contraception for one month.

Please contact us if you have any questions at 866-495-0654.
The iPLEDGE Risk Management Team



SAFETY NOTICE

Isotretinoin must not be used by female patients who are or may become pregnant. There is an extremely high risk that severe birth defects will result if pregnancy occurs while taking isotretinoin in any amount, even for a short period of time. Potentially any fetus exposed during pregnancy can be affected. There are no accurate means of determining whether an exposed fetus has been affected. Because of this toxicity, isotretinoin can only be marketed under a special restricted distribution program. This program is called iPLEDGE™. Under this program, prescribers must be registered and activated with the iPLEDGE program and can prescribe isotretinoin only to registered patients who meet all the requirements of iPLEDGE. Isotretinoin can be dispensed only by a pharmacy registered and activated with iPLEDGE. Registered and activated pharmacies can only receive isotretinoin from wholesalers registered with iPLEDGE.

Patients on isotretinoin have been known to become depressed or to develop other serious mental health problems. Some people have had thoughts of hurting themselves or putting an end to their own lives. Some people tried to end their own lives and some have ended their own lives. There have been reports that people on isotretinoin were aggressive or violent. No one knows if isotretinoin caused these problems or behaviors or if they would have happened even if the person did not take isotretinoin.

Isotretinoin use has been associated with pseudotumor cerebri, a condition caused by increased pressure on the brain. This condition may occur more often in patients also taking tetracycline. Patients should be aware of other serious side effects, including problems with the skin, pancreas, liver, stomach, bones, muscles, hearing, vision, lipids, allergic reactions, blood sugar, or red and white blood cells. The most common, less serious adverse events include dry skin, chapped lips, dry eyes, and dry nose that may lead to nosebleeds. Patients should be advised about these adverse events and routinely monitored by a doctor during treatment with isotretinoin.

Please refer to the isotretinoin package inserts for full prescribing and dispensing instructions at:

Amnesteem: <http://dailymed.nlm.nih.gov/dailymed/lookup.cfm?setid=b2cb63c9-f825-4991-9a2c-6260f1bbcc2c>

Claravis: <http://dailymed.nlm.nih.gov/dailymed/lookup.cfm?setid=a31fd109-d0fd-4ab9-ba98-a3d64333c18d>

Myorisan: <http://dailymed.nlm.nih.gov/dailymed/lookup.cfm?setid=51ff6346-9256-4c01-9f52-417d13f2df05>

Sotret: <http://dailymed.nlm.nih.gov/dailymed/lookup.cfm?setid=d5a26c5e-9c3e-4781-8c08-62b91d21a68d>