

#### **Selection Criteria:**

Product Name: ;;ACTHAR GEL-SYNTHETIC

Product Active Ingredient:

Active Ingredient .;CORTICOTROPIN

Active Moiety:

FDA Received Date: From: 01-JAN-2001 To: 05-MAY-2014

MedDRA® Version\*: 17.0
Total Cases\*\*: 243
Number of Pages: 121

Disclaimer: Submission of a safety report does not constitute an admission that medical personnel, user facility, importer, distributor, manufacturer or product caused or contributed to the event. The information in these reports has not been scientifically or otherwise verified as to a cause and effect relationship and cannot be used to estimate the incidence of these events.

\*. "MedDRA® Version" refers to the name and version of the dictionary in use at the time the cases were retrieved from the FDA Adverse Event Reporting System (FAERS). MedDRA Medical Dictionary for Regulatory Activities (MedDRA®) is a medical terminology developed under the support of the International Conference on Harmonization (ICH) and is a registered trademark of the International Federation of Pharmaceutical Manufacturers and Associations (IFPMA). MedDRA is used by FDA, other regulatory agencies, and pharmaceutical manufacturers to code adverse events, medication errors and other information associated with the use of medical products. A MedDRA® Preferred Term (PT) is used to standardize a "medical concept" in a report. For example, a report of "heart attack" or "myocardial infarct" are standardized to the same Preferred Term, "Myocardial Infarction". MedDRA is updated twice a year.

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<sup>\*\*. &</sup>quot;Total Cases" reflects the number of individual patient case reports associated with the product of interest that were submitted to FDA within the specified time period. A case consists of an initial report and any follow-up reports submitted to FDA. Because FDA may receive reports on the same patient from more than one source, some of these cases may be duplicate patient reports.



The information in this report is generated from the FDA Adverse Event Reporting System (FAERS) by using a report query where suspect product(s) or active ingredients are selected from a standardized dictionary and a date range is specified as search criteria. The table below provides the definitions for field headings that are listed on the report.

FAERS data have limitations, including the following. There is no certainty that the reported event was actually due to the product. Reports are often incomplete - a blank field means that no data were provided. FDA does not receive reports on all adverse events that occur with a product. Many factors can influence whether or not an event will be reported, therefore, FAERS data cannot be used to compare products or calculate how frequently an event occurs in the U.S. population.

Field Heading	Definition
FDA Received Date	The date that FDA received the most recent information regarding a case, either as an initial report or follow-up report. The FDA Received Date may not be the same as the date that the event occurred. The event may have occurred days or even months (or years) before the report was sent to (and received by) FDA. Note the displayed date on the report may be later than the query date range if FDA received follow-up information for a case. FDA provides the most current case information available.
Case #	A unique number assigned by FDA that identifies a FAERS case. A case includes the information received in the initial report plus any additional information received in follow-up reports.
Case Type	There are three case types in FAERS:  Expedited (15-Day): submitted to FDA by manufacturers; these are reports containing serious, unexpected adverse events  Nonexpedited: submitted periodically to FDA by manufacturers; these are reports containing adverse events other than those qualifying for expedited (15-day) reporting  Direct: submitted "directly" to FDA by healthcare professionals, patients and other consumers
Health Professional	Indicates whether the initial source who provided information about the event is a health professional (HP). Possible values are; Y - Yes, N – No or the field is blank if it was not reported
Outcomes	Based on FDA regulations, the reported outcome(s) determines whether a case is serious. The outcome categories include congenital anomaly/birth defect (CA), death (DE), disability (DS), hospitalization (HO), life-threatening (LT), other serious important medical event (OT), and required intervention to prevent permanent impairment/damage (RI). A case can have more than one outcome.
Manufacturer Control #	The Manufacturer Control Number is the manufacturer's unique identifier associated with the case. Also referred to as the Company Report Number.
Age	The patient's age, with age unit, based on information provided in the report.
Sex	Patient sex (Male, Female, Unknown).
Country	The country where the event occurred. If not reported, then the country of the reporter. The International Organization for Standardization (ISO) 3166-1 alpha-3 country code is used as an abbreviation for the country.

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Field Heading	Definition
Preferred Term	A Medical Dictionary for Regulatory Activities (MedDRA®) Preferred Term (PT) is used to standardize a "medical concept" in a report. For example, a report of "heart attack" or "myocardial infarct" are standardized to the same Preferred Term, "Myocardial Infarction". MedDRA is a medical terminology developed under the support of the International Conference on Harmonization (ICH) and is a registered trademark of the International Federation of Pharmaceutical Manufacturers and Associations (IFPMA). MedDRA is used by FDA, other regulatory agencies, and pharmaceutical manufacturers to "code" adverse events, medication errors and other information associated with the use of medical products
Product	Name of a drug or therapeutic biologic in the case report. A product name can appear as either a brand name (trade name) or an active ingredient name, depending on what was reported.
Role	There are two roles for products listed on the cases. Suspect (S) identifies the product(s) that the initial reporter deemed most likely to be associated with the event. Concomitant (C) identifies products taken at the same time as the suspect product, but not deemed by the initial reporter as being associated with the event.
Route	Reported route of product administration (e.g., oral, topical, injection, sublingual, inhalation).
Dosage Text	Refers to the amount of the product that was taken or given to a patient, and the frequency of administration. For example, 20 mg twice daily.
Duration	The length of time the product was used. For example, if someone reported taking Drug A from January 1 to January 30, the duration would be 30 days.
Manufacturer	The manufacturer of the product, as indicated in the report.

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Note: If the field is blank, there is no data

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FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
28-Jun-2001	3685007	NON-EXPEDITED		НО	200111642US		Female	USA
Preferred Term		Product		Role Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	<u>facturer</u>
Nausea		H.P. ACT	HAR	S	QW		AVEN	ITIS
Flushing		CORTICO	TROPIN	S	1 CC QW	30 YR		
Conjunctival hyperaemi	ia		EDIENT DEFINED VASCULAR SYSTEM) UM	С				
Erythema Diarrhoea		POTASS	UM	С				
Electrolyte imbalance								
Eye irritation								
Eyelid oedema								
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
10-Jan-2002	3751110	EXPEDITED (15-DAY)	Υ		M0832-2001	57 YR	Female	ITA
Preferred Term		Product		Role Route	Dosage Text	Duratio	<u>n Manu</u>	<u>facturer</u>
Injection site erythema Injection site nodule Injection site pain		CORTICO	DTROPIN	S				
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
01-Jul-2002	3858319	NON-EXPEDITED	N	HO,RI	ACT-S0001	1 YR	Female	USA
Preferred Term		Product		Role Route	Dosage Text	Duratio	<u>n Manu</u>	<u>facturer</u>
Cardiomyopathy Hypertension		H.P. ACT	HAR	S INTRAMUSCULAR	30 IU QOD IM			



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
23-Dec-2002	3871217	EXPEDITED (15-DAY)	Υ	HO,OT	ZONI000947	5 YR	Male	JPN
Preferred Term		Produc	<u>t</u>	Role Route	Dosage Text	Duratio	on <u>Man</u>	<u>ufacturer</u>
Decreased appetite		ZONEG	RAN	S ORAL	150 MG DAILY ORAL			
Calculus urinary		ACTH		S	.025 MG/KG DAILY			
Convulsion		PROPR	ANOLOL	С				
Electroencephalogram	abnormal	VALPRO	DATE SODIUM	С				
Flat affect		CLONA	ZEPAM	С				
Haematuria								
Laboratory test abnorm	nal							
Pyelocaliectasis								
Vomiting								
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
29-Apr-2003	3942399	DIRECT	Υ	DE		319 DA	Y Male	USA
Preferred Term		Produc	<u>t</u>	Role Route	Dosage Text	Duratio	on <u>Man</u>	<u>ufacturer</u>
Respiratory arrest		ACTH		S	40 DOSE UNITS/ DAY INJECTION			
Vomiting			THOPRIM/ METHOXAXZOLE	С				
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
29-Apr-2003	3942472	DIRECT	Υ	DE		1 YR	Female	USA
Preferred Term		Produc	<u>t</u>	Role Route	Dosage Text	Duratio	on <u>Man</u>	<u>ufacturer</u>
Convulsion		ACTH		S	60 DOSE UNITS/DAY INJECTIONS		QUE	STCOR
Hypertension		PYRIDO	XINE HYDROCHLORIDE	С				
Respiratory arrest			METHOXAZOLE AND THOPRIM	С				
		DIURIL		С				



FDA Received Date	Case #	Case Type		<b>Health Professional</b>	Outcom	<u>ies</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
22-May-2003	3951730	DIRECT		Υ	HO,RI			91 DAY	Female	USA
Preferred Term Blood pressure increas	Preferred Term Blood pressure increased		Product CORTICOTROPIN		<b>Role</b> S	Route INTRAMUSCULAR	Dosage Text 20 IU QOD INTRAMUSCULAR	<u>Duratio</u>	<u>n Manu</u>	<u>ıfacturer</u>
Cardiac disorder										
Cardiac murmur										
Hypertrophic cardiomy	opathy									
Ventricular hypertrophy	у									
FDA Received Date	Case #	Case Type		Health Professional	Outcom	<u>ies</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
26-Jun-2003	3955320	EXPEDITED (	15-DAY)	Υ	DE		03-ADE-SU-0002-ACT	304 DA	Y Male	USA
Preferred Term			<u>Product</u>		Role	Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	<u>ıfacturer</u>
Coma			H.P. ACTHA	AR .	S	INTRAMUSCULAR	40 UNITS QOD IM		QUES	STCOR
Congenital central nerv	vous system and	omaly	BACTRIM		С					
Congenital cardiovasci	ular anomaly									
Respiratory arrest										
Vomiting										
FDA Received Date	Case #	Case Type		Health Professional	Outcom	<u>ies</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	<b>Country</b>
14-Aug-2003	3955318	EXPEDITED (	15-DAY)	Υ	DE		03-ADE-SU-0001-ACT	1 YR	Female	USA
Preferred Term			<u>Product</u>		Role	Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	<u>ıfacturer</u>
Convulsion			ACTHAR		S	INTRAMUSCULAR	32 U/ML QOD IM		QUES	STCOR
Respiratory arrest			BACTRIM		С					
Sudden death			DIURIL		С					
			PYRIDOXIN	E HYDROCHLORIDE	С					



Injection site pain

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FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	Sex	Country
15-Aug-2003	3965651	EXPEDITED (15-DAY)	Υ	НО	03-ADE-SU-0003-ACT	52 YR	Female	USA
Preferred Term		<u>Product</u>			Dosage Text	Duratio	on <u>Manu</u>	<u>ıfacturer</u>
Blood pressure increas	lood pressure increased ACTHAR		S INTRAMUSCULAR	40 UNNITS QD IM		QUES	STCOR	
Cerebral haemorrhage		SUDAFED	RINE, NEURONTIN	С				
Delirium tremens		DURGESI	C PATCHES	С				
Tremor	emor KLONOPIN		N	С				
		PROVIGIL	-	С				
		PROZAC		С				
		NEURONTIN		С				
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
09-Sep-2004	4212236	EXPEDITED (15-DAY)		OT	234313K04USA	43 YR	Female	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	Duratio	on <u>Manu</u>	<u>ıfacturer</u>
Injection site cellulitis		REBIF		S	44 MCG, 3 IN 1 WEEKS			
Injection site necrosis		ACTH		S INTRAMUSCULAR	INTRA-MUSCULAR			



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	Outcon	nes	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
21-Dec-2004	5662140	EXPEDITED (15-DAY)	Υ	HO,LT		PHBS2004JP14919	60 YR	Male	JPN
Preferred Term		Product		Role	Route	Dosage Text	<u>Duratio</u>	<u>n</u> .	<u>Manufacturer</u>
Pulmonary oedema		NEORAL	-	S	ORAL	50 mg/d	1144 DA	ΑY	NOVARTIS
Lung disorder		PREDNI	SOLONE	S	UNKNOWN	5 mg/d	1144 DA	<b>Υ</b>	
Systemic inflammatory re	sponse syndrome	CORTIC	OTROPIN	S	INTRAVENOUS	10 mg/d			
Pneumonia		MIZORIE	BINE	С	ORAL	100 mg/d	1144 DA	ΑY	
Нурохіа		MIZORIE	BINE	С	ORAL	100 mg/d			
Blood creatinine increase	ed								
Blood urea increased									
Breath sounds abnormal									
Cardiomegaly									
C-reactive protein increas	sed								
Dyspnoea									
Haemodialysis									
Life support									
Nasopharyngitis									
Orthopnoea									
Pyrexia									
Renal impairment									
Jrine output decreased									
White blood cell count inc	creased								



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	<b>Country</b>
14-Apr-2005	5781499	EXPEDITED (15-DAY)	Υ	НО	05P-163-0296286-00	4 YR	Male	USA
Preferred Term		Product		Role Route	Dosage Text	Duratio	on <u>Manu</u>	<u>ufacturer</u>
Sepsis		DEPAKEN	IE	S				
Hypertension		CORTICO	TROPIN	S				
Blood pressure immea	surable							
Candida infection								
Pancreas infection								
Pancreatitis haemorrha	agic							
Pseudocyst								
Pulmonary oedema								
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
25-Apr-2005	5774971	EXPEDITED (15-DAY)		НО	PHBS2005JP04886	50 YR	Female	JPN
Preferred Term		Product		Role Route	Dosage Text	Duratio	<u>n Manu</u>	<u>ufacturer</u>
Pneumonia cryptococc	al	CICLOSPO	ORIN	S UNKNOWN			NOV	ARTIS
Pyrexia		CORTICO	TROPIN	S UNKNOWN				
Blood beta-D-glucan in	creased							
Fungal test positive								
Inflammation								
Lung infiltration								
Lung infiltration Pneumomediastinum								



				Otano	ricport				
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcor</u>	<u>nes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
14-Jun-2005	5826381	EXPEDITED (15-DAY)	N	НО		138768USA	42 YR	Female	USA
Preferred Term		Product		Role	Route	<u>Dosage Text</u>	Duratio	<u>n Manu</u>	<u>ıfacturer</u>
Insomnia		COPAXON	<b>IE</b>	S					
Nervousness		ACTHAR (	GEL-SYNTHETIC	S					
Irritability		WELLBUT	LBUTRIN						
Depression		TRILEPTA	L	С					
Suicidal ideation		ZANAFLEX		С					
Steroid withdrawal synd	oid withdrawal syndrome PROVIGIL			С					
Multiple sclerosis	•		OID	С					
Condition aggravated		ATENOLO	С						
		REMERON	N	С					
		TRAZODO	NE HYDROCHLORIDE	С					
FDA Received Date	Case #	Case Type	Health Professional	Outcor	nes	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
18-Jan-2006	5966070	DIRECT	Υ	DS			152 DA	Y Male	USA
Preferred Term		<u>Product</u>		Role	Route	Dosage Text	Duratio	<u>n Manu</u>	<u>ıfacturer</u>
Hypertrophic cardiomy	opathy	CORTICO	TROPIN	S	INTRAMUSCULAR	50 UNITS DAILY IM			
Hypertension									
FDA Received Date	Case #	Case Type	Health Professional	Outcor	nes	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
19-Jul-2006	6097761	DIRECT	Υ	НО			2 YR	Female	USA
Preferred Term		<u>Product</u>		Role	Route	Dosage Text	<u>Duratio</u>	n <u>Manu</u>	<u>ıfacturer</u>
Pyrexia		RITUXIMA	В	S	INTRAVENOUS	375 MG/M2 IV X 4			
Vomiting		CORTICO	TROPIN	S	INTRAMUSCULAR	0.12 CC IM QOD			
Drug intolerance									
Escherichia urinary trad	ct infection								
Hypophagia									



				ctanca report				
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
11-Aug-2006	6116280	EXPEDITED (15-DAY)	Υ	НО	ADE-SU-0013-ACT	32 YR	Female	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Manufa</u>	acturer
Headache		H.P. ACTH	AR	S	80 IU IM QD WITH TAPER			
Hypertension		AVONEX		С				
		LEXAPRO		С				
		ATIVAN		С				
		ZANAFLE	(	С				
		LYRICA		С				
		LABETALO	DL HCL	С				
		VESICARE		С				
		METHOTR	EXATE	С				



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u> <u>Sex</u>	<b>Country</b>
18-Aug-2006	6090243	EXPEDITED (15-DAY)	Υ	DE,HO,OT	PHBS2006JP10464	20 YR Male	JPN
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duration</u> <u>Mar</u>	nufacturer
Staphylococcal infection	on	NEORAL		S ORAL	150 mg/d	NO	/ARTIS
Multi-organ failure		CORTICO	TROPIN	S ORAL	20 mg/d		
Sepsis		PENTASA		С	20 mg/d		
Anaemia							
Back pain							
Blood pressure decrea	sed						
Chest pain							
Coagulation time prolo	nged						
Depressed level of cor	sciousness						
Epistaxis							
Haematochezia							
Hepatic enzyme increa	ased						
Hepatic failure							
Hepatic function abnor	mal						
Hepatocellular injury							
Herpes zoster							
Melaena							
Oliguria							
Platelet count decrease	ed						
Shock							
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	Age Sex	Country
14-Sep-2006	6139409	EXPEDITED (15-DAY)	Υ	НО	06-ADE-SU-0017-ACT	213 DAY Female	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duration</u> <u>Mar</u>	nufacturer
Herpes simplex mening	goencephalitis	CORTICO	TROPIN	S INTRAMUSCULAR	150 U/M2 PER DAY IM	10 DAY	
Disease recurrence		COPAXON	IE	С			



Drug interaction
Drug level decreased

Epilepsy

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Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
6152650	DIRECT	Υ	OT		1 YR	Male	USA
	Product		Role Route	Dosage Text	<u>Duratio</u>	<u>n Man</u>	<u>ufacturer</u>
	ACTH		S	80 UNITS/ML DAILY			
Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
6233490	EXPEDITED (15-DAY)	N	НО	06-ADE-SU-0029-ACT	41 YR	Female	USA
	<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	n <u>Man</u>	<u>ufacturer</u>
	H.P. ACTH	IAR	S INTRAMUSCULAR	80 U IM QD			
	AVONEX		С				
ased							
nance imaging a	bnormal						
ncreased							
Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
6324100	EXPEDITED (15-DAY)	Υ	OT	PHBS2007IT08693	19 YR	Male	ITA
	Product		Role Route	Dosage Text	<u>Duratio</u>	n <u>Man</u>	<u>ufacturer</u>
	OXCARBA	ZEPINE	S			NOV	'ARTIS
	ACTH		S	0.01 mg/kg/day			
	PRIMIDON	IE	S				
	VALPROA	TE SODIUM	S				
1	Case # 6233490  ased  ance imaging ancreased  Case #	6152650 DIRECT  Product ACTH  Case # Case Type 6233490 EXPEDITED (15-DAY)  Product H.P. ACTH AVONEX  assed  Case # Case Type 6324100 EXPEDITED (15-DAY)  Product OXCARBA ACTH PRIMIDON	Case # Case Type Health Professional 6152650 DIRECT Y  Product ACTH  Case # Case Type Health Professional 6233490 EXPEDITED (15-DAY) N  Product H.P. ACTHAR AVONEX  ance imaging abnormal forceased  Case # Case Type Health Professional 6324100 EXPEDITED (15-DAY) Y  Product OXCARBAZEPINE	Case # Case Type Health Professional Outcomes 6152650 DIRECT Y OT    Product ACTH   Role   Route	Case #         Case Type         Health Professional         Outcomes         Manufacturer Control #           6152650         DIRECT         Y         OT         OT           Product ACTH         Role Route SOUNITS/ML DAILY         B0 UNITS/ML DAILY           6238 #         Case Type         Health Professional H.P. ACTHAR AVONEX         Manufacturer Control #         Manufacturer Control #           6233490         EXPEDITED (15-DAY)         N         HO         06-ADE-SU-0029-ACT           Product H.P. ACTHAR AVONEX         S INTRAMUSCULAR SO UIM QD         80 U IM QD           ance imaging abnormal acreased         C         S         Manufacturer Control #           6324100         EXPEDITED (15-DAY)         Y         OT         PHBS2007IT08693           Product OXCARBAZEPINE ACTH ACTH ACTH PRIMIDONE         S         0.01 mg/kg/day	Case #         Case Type         Health Professional         Outcomes         Manufacturer Control #         Age           6152650         DIRECT         Y         OT         1 YR           Product ACTH         Role Route S         Dosage Text 80 UNITS/ML DAILY         Duration           6233490         EXPEDITED (15-DAY)         N         HO         06-ADE-SU-0029-ACT         41 YR           Product H.P. ACTHAR AVONEX         Role Route C         Dosage Text Duration         Duration           AVONEX         C         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N         N <td>Case #         Case Type         Health Professional         Out omes         Manufacturer Control #         Age live         Sex south         1 YR         Male           6152650         DIRECT         Y         OT         Dosage Text 80 UNITS/ML DAILY         Duration         Manufacturer Control #         Manufacturer Control #         Manufacturer Control #         Manufacturer Control #         Age Sex Sex Sex Sex Sex Sex Sex Sex Sex Se</td>	Case #         Case Type         Health Professional         Out omes         Manufacturer Control #         Age live         Sex south         1 YR         Male           6152650         DIRECT         Y         OT         Dosage Text 80 UNITS/ML DAILY         Duration         Manufacturer Control #         Manufacturer Control #         Manufacturer Control #         Manufacturer Control #         Age Sex Sex Sex Sex Sex Sex Sex Sex Sex Se



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	<b>Country</b>
05-Jul-2007	6378493	NON-EXPEDITED	Υ	НО	QST_00027_2007	51 YR	Female	USA
Preferred Term Cardiac failure congestive		Product H.P. ACTHAR		Role Route S INTRAMUSCULAR	<u>Dosage Text</u> (1 DF QD INTRAMUSCULAR)	<u>Duratio</u>	on <u>Manu</u>	<u>ifacturer</u>
		LISINOPF	RIL	С				
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
05-Jul-2007	6378494	NON-EXPEDITED	N	ОТ	QST_00014_2007	38 YR	Female	USA
Preferred Term Oral candidiasis		Product H.P. ACTI	HAR	Role Route S SUBCUTANEOUS	Dosage Text (80 IU QD X1 WEEK, FOLLOWED BY TAPER SUBCUTANEOUS)	<u>Duratio</u>	<u>on Manu</u>	<u>ifacturer</u>
		AVONEX		С				
		BACLOFE	EN	С				
		NEURON'	TIN	С				
		VESICAR	E	С				
		ZANAFLE	X	С				
		KLONOPI	N	С				
			IAL CONTRACEPTIVES TEMIC USE	С				
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
13-Sep-2007	6426551	EXPEDITED (15-DAY)		НО	07-ADE-SU-0012-ACT	109 DA	Y Female	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	Duratio	<u>Manu</u>	<u>ıfacturer</u>
Irritability		H.P. ACTI	HAR	S INTRAMUSCULAR	40U IM QD			
Cold sweat		VIGABAT	RIN	С				
Complex partial seizure	es							
Condition aggravated								
Convulsion								



FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
						Age		-
27-Feb-2008	6579397	EXPEDITED (15-DAY)	Υ	НО	CIP08000267		Female	JPN
Preferred Term		<u>Product</u>		Role Route	Dosage Text	Duratio	<u>n Manu</u>	<u>facturer</u>
Purulence		RISEDRO	NATE SODIUM	S ORAL	17.5 MG, 1/WEEK, ORAL			
Pulpitis dental		CORTICO	TROPIN	S				
		ELCITONI	N (ELCATONIN)	С				
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
07-Apr-2008	6617712	EXPEDITED (15-DAY)	N	НО	08-ADE-SU-0003-ACT	334 DA	Y Male	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	<u>facturer</u>
Acne		ACTHAR		S	40 IU IM QD WITH TAPER			
Fluid retention		CLONAZE	PAM 0.2 MG	С				
Weight increased		VITAMIN E	3	С				
Chromaturia								
Decreased appetite								
Dehydration								
Diet refusal								
Hypophagia								



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FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
18-Apr-2008	6618820	EXPEDITED (15-D/	AY)	ОТ	US-PFIZER INC-2008032792	39 YR	Male	USA
Preferred Term		<u>Pro</u>	<u>oduct</u>	Role Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	<u>facturer</u>
Phaeochromocytoma			DROCORTISONE SODIUM CCINATE	S PARENTERAL				
Myocardial ischaemia		PRE	EDNISONE	S ORAL				
Cardiac failure congest	tive	ACT	ТН	S				
Aspartate aminotransfe Hypertension Hyperthermia	erase increased							
Pulmonary oedema								
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
16-Jun-2008	6729230	NON-EXPEDITED	N	НО	08-ADE-SE-0002-ACT	65 YR	Male	USA
Preferred Term		<u>Pro</u>	<u>oduct</u>	Role Route Dosage Text		<u>Duration</u> <u>Manufacturer</u>		
Wheezing		H.P	P. ACTHAR	S	40 U TWICE WEEKLY			
Multiple sclerosis relap Pneumonia	ose							
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
11-Jul-2008	6697029	EXPEDITED (15-D/	AY) Y	LT	US- WATSON-2008-03941	39 YR	Male	USA
Preferred Term		<u>Pro</u>	<u>oduct</u>	Role Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	<u>facturer</u>
Phaeochromocytoma		НҮІ	DROCORTISONE ACETATE	S PARENTERAL	UNK		WATS	SON
		PRE	EDNISONE	S ORAL	UNK		WATS	SON



				otanot	1 IXOPOIL				
FDA Received Date	Case #	Case Type	Health Professional	Outcon	nes	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
05-Aug-2008	6719085	EXPEDITED (15-DAY)	Y	ОТ		US-BOEHRINGER INGELHEIM GMBH, GERMANY-2008- BP-12011RO	334 DA`	/ Unknown	USA
Preferred Term		<u>Product</u>		Role	Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	<u>facturer</u>
Hypercalcaemia		PREDNIS	ONE	S				BOEH	IRINGER INGELHEIM
		ACTH		S					
		CALCIUM		S					
		REHYDRA	TION	С					
FDA Received Date	Case #	Case Type	Health Professional	Outcon	nes	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
27-Aug-2008	6738271	EXPEDITED (15-DAY)	Υ	НО		US- WATSON-2008-05026	334 DA`	/ Unknown	USA
Preferred Term		<u>Product</u>		Role	Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	<u>facturer</u>
Hypercalcaemia		PREDNIS	ONE	S	UNKNOWN	12 mg, bid with 4 week taper		WATS	SON
Withdrawal syndrome		PREDNIS	ONE	S	UNKNOWN	3 mg, bid		WATS	SON
		ACTH		S	UNKNOWN	UNK			
FDA Received Date	Case #	Case Type	Health Professional	Outcon	nes	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
29-Aug-2008	6753599	EXPEDITED (15-DAY)	Υ	НО		2007-01039FE		Unknown	JPN
Preferred Term		<u>Product</u>		Role	Route	Dosage Text	<u>Duratio</u>	<u>n</u> <u>Manu</u>	<u>facturer</u>
Pituitary haemorrhage		CORTICO	TROPIN	S	INTRAVENOUS	20 MCG ONCE			
Headache		GONADO	RELIN	S	INTRAVENOUS	20 MCG ONCE			
Nausea		GONADO	RELIN	S	INTRAVENOUS	20 MCG ONCE			
Chest discomfort		THYROTR	OPIN	S	INTRAVENOUS	100 MCG ONCE			



Detailed	Re	port
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FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
29-Aug-2008	6754753	EXPEDITED (15-DAY)	Υ	НО	2007-01098FE	67 YR	Female	JPN
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	on <u>Manu</u>	<u>facturer</u>
Pituitary haemorrhage		GONADOR	RELIN	S		1 DAY		
Headache		CORTICO ACETATE	TROPIN\SERACTIDE	S		1 DAY		
Haematoma								
Neoplasm progression								
Nerve compression								
Nuclear magnetic resor	nance imaging al	onormal						
Visual impairment								
Vomiting								
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	<u>Country</u>
29-Aug-2008	6758690	EXPEDITED (15-DAY)	Υ	HO,OT	2007-01070FE	49 YR	Male	DEU
Preferred Term		<u>Product</u>		Role Route	Dosage Text	Duratio	<u>n Manu</u>	<u>facturer</u>
Blindness		PROTIREL	_IN	S INTRAVENOUS	0.2 MG ONCE IV			
Headache		GONADOR	RELIN	S INTRAVENOUS	0.1 MG ONCE IV			
Nausea		ACTH		S INTRAVENOUS	0.25 MG ONCE IV			
Vision blurred								
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
03-Oct-2008	6745808	EXPEDITED (15-DAY)	Υ	ОТ	JP-GENENTECH-267008	72 YR	Female	JPN
Preferred Term		Product		Role Route	Dosage Text	Duratio	on <u>Manu</u>	facturer
VIIth nerve paralysis		RITUXAN		S			GENE	ENTECH
		CYCLOPH	IOSPHAMIDE	S				
		ADRIAMY	CIN	S				
		PREDNISC	OLONE	S				
		CORTICO	TROPIN	S				



**Detailed Report** 

FDA Received Date	A Received Date Case # Case Type Health Professional Outcomes !	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country			
07-May-2009	6994519	EXPEDITED (15-DAY)	Υ	DE	09-ADE-SU-0013-ACT	136 DA	Y Male	USA
Preferred Term		Product		Role Route	Dosage Text	<u>Duration</u> <u>Manufacture</u>		<u>ıfacturer</u>
Bronchiolitis		ACTH		S INTRAMUSCULAR	ACTH 20-40 U IM QD			
Acute respiratory distre	ess syndrome	PHENOBA	ARBITAL	С				
Tonic convulsion	-	CEFACLO	R	С				
Diarrhoea								
Infantile spasms								
Irritability								
Oral candidiasis								
Pneumonia								
Pulmonary oedema								
Respiratory failure								
Respiratory syncytial v	irus test positive							
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
15-May-2009	8584439	EXPEDITED (15-DAY)	Υ	ОТ	09-ADE-SU-0011-ACT	7 YR	Female	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	<u>ıfacturer</u>
Leukaemia		H.P. ACTI	HAR	S				
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
26-Oct-2009	7171596	EXPEDITED (15-DAY)		DE	09-ADE-SU-0027-ACT	136 DA	Y Male	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	<u>ıfacturer</u>
Pneumonia aspiration		H.P. ACTI	HAR	S	40 IU/DAY WITH TAPER			
Somnolence		PHENOBA	ARBITAL	С				
Irritability		LANSOPR	AZOLE	С				
irriability								
azınıy		METOCLO	PRAMIDE	С				

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FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	<b>Country</b>
04-Dec-2009	7225795	EXPEDITED (15-DAY)	Υ	НО	09-ADE-SU-0032-ACT	70 YR	Male	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Man</u>	<u>ufacturer</u>
Urine output decreased	d	H.P. ACTH	HAR	S	80 U SC X 5 D THEN TAPER	10 DAY		
Cardiac failure conges	tive							
Dyspnoea								
Oedema peripheral								
Urinary tract infection								
FDA Received Date	Case #	Case Type	Health Professional	Outcomes	Manufacturer Control #	Age	<u>Sex</u>	Country
07-Dec-2009	7228400	EXPEDITED (15-DAY)	N	НО	09-ADE-SU-0034-ACT	243 DA	/ Male	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Man</u>	<u>ufacturer</u>
Respiratory tract infect	ion	H.P. ACTH	HAR	S SUBCUTANEOUS	80 U SC BID - 6 WK TAPER			
Hypertension		PHENOBA	ARBITAL	С				
Decreased appetite								
Diet refusal								
Weight increased								
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
07-Dec-2009	7229292	EXPEDITED (15-DAY)	N	НО	09-ADE-SU-0033-ACT	243 DA	/ Male	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Man</u>	ufacturer
Weight increased		H.P. ACTH	IAR	S	80 U SC BIS - 6 WK TAPER			
Decreased appetite		PHENOBA	ARBITAL	С				
Diet refusal								



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	Outcom	<u>ies</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	<b>Country</b>
21-Dec-2009	7229057	DIRECT	Υ	DE,HO,	LT,OT		2 YR	Male	USA
Preferred Term		Proc	<u>luct</u>	Role Route		Dosage Text	<u>Duration</u> <u>Manufactu</u>		<u>nufacturer</u>
Septic shock		RITU	IXIMAB	S	INTRAVENOUS DRIP	750 MG/M2 2X, 2 WKS APART IV DRIP		GENENTECH	
Multi-organ failure		ACT	HAR GEL-SYNTHETIC	S	INTRAMUSCULAR	25 IU/M2 QOD IM		QUI	ESTCOR
Aplastic anaemia		CLO	NIDINE	С					
Hydrocephalus		AML	ODIPINE	С					
Cerebral haemorrhage	bral haemorrhage CALCIUM CARBONATE		С						
Convulsion		CAPTOPRIL		С					
Renal failure acute	Renal failure acute NIFEDIPINE		С						
Acute respiratory distre	ess syndrome	HUM	IAN IMMUNOGLOBULIN G	С					
Hypertension	Hypertension BACTRIM		TRIM	С					
Sepsis	epsis PENTAMIDINE		С						
FDA Received Date	Case #	Case Type	Health Professional	Outcom	<u>ies</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
29-Mar-2010	8584444	EXPEDITED (15-DA	Y) N	НО		09-ADE-NU-0006-ACT	4 YR	Male	USA
Preferred Term		Proc	<u>luct</u>	Role Route Dosage Text			Duratio	on <u>Mar</u>	<u>nufacturer</u>
Cushing's syndrome		H.P.	ACTHAR	S	INTRAMUSCULAR	0.28 ML QOD IM			
Adrenomegaly		HUM	ian immunoglobulin g	С					
		BAC	TRIM	С					
		PRE	VACID	С					
		RITU	JXIMAB	С					
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	Outcom	<u>ies</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
05-Apr-2010	7344588	EXPEDITED (15-DA	Y) Y	ОТ		JP-PFIZER INC-2010042681		Male	JPN
Preferred Term		Proc	<u>luct</u>	Role	Route	Dosage Text	<u>Duratio</u>	on <u>Mar</u>	<u>nufacturer</u>
Stereotypy		MET	HYLPREDNISOLONE	S				PFI	ZER
		005	TICOTROPIN	S					



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
07-Apr-2010	7361103	EXPEDITED (15-DAY)	N	НО	233212J10USA	55 YR	Female	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duration</u>	<u>Manuf</u>	<u>acturer</u>
Blood glucose increase	ed	REBIF		S				
Blood potassium abnor	rmal	CORTICO	TROPIN	S				
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
27-May-2010	7407829	EXPEDITED (15-DAY)	Υ	НО	10-ADE-SU-0020-ACT	70 YR	Female	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	Duration	<u>Manuf</u>	<u>acturer</u>
Dizziness		H.P. ACTI	HAR	S SUBCUTANEOUS	80 IU SC QD X 5 DAYS			
Nausea		REBIF		С				
Fall		ASA		С				
Treatment noncomplia	nce							
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
11-Jun-2010	7423952	EXPEDITED (15-DAY)	Υ	DE	10-ADE-SU-0024-ACT		Unknown	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	Duration	<u>Manuf</u>	acturer
Neonatal infection		H.P. ACTI	HAR	S		6 YR		
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	<b>Country</b>
11-Jun-2010	7424176	EXPEDITED (15-DAY)	Υ	DE	10-ADE-SU-0025-ACT		Unknown	USA
Preferred Term Infection		Product H.P. ACTI	HAR	<u>Role</u> <u>Route</u> S	<u>Dosage Text</u> 10 YEARS AGO	Duration	<u>Manuf</u>	<u>acturer</u>
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
01-Jul-2010	7537469	NON-EXPEDITED	Υ	НО	09-ADE-SE-0040-ACT	75 YR	Male	USA
- · · -		<u>Product</u>		Role Route	Dosage Text	Duration	n Manuf	acturer
Preferred Term		<u> </u>		Itoio Itouto	Bookgo Toxe	<u> Daration</u>	<u></u>	



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
01-Jul-2010	7537521	NON-EXPEDITED	Υ	НО	09-ADE-SE-0019-ACT		Female	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	facturer
Herpes zoster		H.P. AC	THAR	S				
		KLONOF	PIN	С				
		ZONISA	MIDE	С				
		PREDNI	SONE	С				
		VITAMIN	I B6	С				
		MELATO	ONIN	С				
		VIGABA	TRIN	С				
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
01-Jul-2010	7537524	NON-EXPEDITED	N	НО	09-ADE-SE-0017-ACT	213 DA	Y Male	USA
Preferred Term		Product		Role Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	<u>facturer</u>
Hypertension		H.P. AC	THAR	S	.53 ML IM BID WITH TAPER			
Glaucoma		SEPTRA	A - TIW	С				
Oedema peripheral		VIGABA	TRIN	С				
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
01-Jul-2010	7537534	NON-EXPEDITED	N	НО	09-ADE-SE-0015-ACT	3 YR	Male	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	<u>facturer</u>
Hypertension		H.P. AC	THAR	S	40 IU IM BID WITH TAPER			
Kyphosis								
Muscular weakness								
Osteoporosis								
Spinal compression fra	cture							



FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
22-Jul-2010	7503051	DIRECT	Υ	HO,OT		255 DA	Y Male	USA
Preferred Term Hypertension		Product CORTICO	TROPIN	Role Route S INTRAMUSCULAR	<u>Dosage Text</u> 32 UNITS IM	Duratio	on <u>Manu</u>	<u>ıfacturer</u>
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
19-Aug-2010	7547161	EXPEDITED (15-DAY)	Υ	ОТ	DE- JNJFOC-20100805590	3 YR	Female	DEU
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	<u>ifacturer</u>
Drug resistance		TOPAMA	K	S UNKNOWN				
		VALPROI	C ACID	S UNKNOWN				
		CLOBAZA	M	S UNKNOWN				
		PYRIDOX	INE HYDROCHLORIDE	S UNKNOWN				
		SULTHIAM	ME	S UNKNOWN				
		PHENOB <i>A</i>	ARBITAL	S UNKNOWN				
		CORTICO	TROPIN	S UNKNOWN				
		VIGABATI	RIN	S UNKNOWN				
		LEVETIRA	ACETAM	S UNKNOWN				



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	Outcon	<u>nes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	<b>Country</b>
03-Oct-2010	7369418	EXPEDITED (15-DAY)	Υ	НО		PHHY2010JP24881	13 YR	Female	JPN
Preferred Term		Product		Role	Route	Dosage Text	<u>Duratio</u>	<u>n Mar</u>	<u>nufacturer</u>
Tracheostomy malfund	ction	NEORAL	-	S	ORAL	80 mg daily	1 DAY	NO	VARTIS
Lung operation		NEORAL	-	S	ORAL	700 mg daily	16 DAY	NO	VARTIS
Bronchostenosis		NEORAL	-	S	ORAL	300 mg daily	17 DAY	NO	VARTIS
Laser therapy		NEORAL	-	S	ORAL	280 mg daily	39 DAY	NO/	VARTIS
Tracheostomy		NEORAL	-	S	ORAL	200 mg daily	28 DAY	NO/	VARTIS
Pulmonary artery thera	apeutic procedure	NEORAL	-	S	ORAL	300 mg daily		NO	VARTIS
		SANDIM	MUNE	S	INTRAVENOUS	12 mg daily	3 DAY		
		SANDIM	MUNE	S	INTRAVENOUS	24 mg daily	2 DAY		
		SANDIM	MUNE	S	INTRAVENOUS	60 mg daily	15 DAY		
		CORTIC	OTROPIN	S	INTRAVENOUS	1000 mg daily	1 DAY		
		CORTIC	OTROPIN	S	INTRAVENOUS	250 mg daily	1 DAY		
		CORTIC	OTROPIN	S	INTRAVENOUS	40 mg daily	2 DAY		
		CORTIC	OTROPIN	S	INTRAVENOUS	20 mg daily	18 DAY		
		CORTIC	OTROPIN	S	ORAL	12.5 mg daily	89 DAY		
		CORTIC	OTROPIN	S	ORAL	10 mg daily	22 DAY		
		CORTIC	OTROPIN	S	ORAL	7.5 mg daily	203 DA	Y	
		CORTIC	OTROPIN	S	ORAL	6.25 mg daily			
		MYCOPI	HENOLATE MOFETIL	S	ORAL	250 mg daily	1 DAY		
		MYCOPI	HENOLATE MOFETIL	S	ORAL	500 mg daily	250 DA	Y	
		MYCOPI	HENOLATE MOFETIL	S	ORAL	750 mg daily			
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	Outcon	<u>nes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
28-Oct-2010	7599471	EXPEDITED (15-DAY)	Υ	DE		10-ADE-SU-0045-ACT	1 YR	Male	USA
Preferred Term		<u>Product</u>		Role	Route	Dosage Text	<u>Duratio</u>	<u>n Mar</u>	<u>nufacturer</u>
Pneumonia		H.P. AC	ΓHAR	S	INTRAMUSCULAR	80 IU IM WITH TAPER			
Respiratory distress		CLOBAZ	AM	С					
		VIGABA <sup>*</sup>	TRIN	С					



**Detailed Report** 

			<u>U</u>	etalled Report				
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
06-Jan-2011	7778562	EXPEDITED (15-DAY)	Υ	НО	10-ADE-SU-0068-ACT	35 YR	Female	USA
Preferred Term		<u>Product</u>		Role Route	<u>Dosage Text</u>	<u>Duratio</u>	<u>n Manu</u>	<u>facturer</u>
Grand mal convulsion		H.P. ACTH	IAR	S	80 IU SC DAILY X 5 DAYS			
White blood cell count	decreased	REBIF		С				
Blood potassium decre	eased	KLONOPIN	N	С				
Blood sodium increase	ed	PROMETH	HAZINE	С				
Hypertension		PROZAC		С				
Adrenal disorder		ZOCOR		С				
		BACLOFE	N	С				
		ZANAFLEX	X	С				
		COUMADI	N	С				
		AGRYLIN		С				
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
06-Jan-2011	8584445	DIRECT	Υ	ОТ		237 DAY	/ Male	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	Duration	<u>n Manu</u>	<u>facturer</u>
No therapeutic respons	se	H.P. ACTH	IAR	S INTRAMUSCULAR	0.6ML QAM IM		QUES	STCOR
Developmental delay								
Product counterfeit								
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
02-Feb-2011	7795613	EXPEDITED (15-DAY)	Υ	HO,OT	US- BAYER-200810735NA	43 YR	Female	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	<u>facturer</u>
Multiple sclerosis relap	ose	INTERFER	RON BETA-1B	S SUBCUTANEOUS	8 miu, QOD	29 DAY	BAYE	R
Muscular weakness		INTERFER	RON BETA-1B	S	UNK	100 DAY	/ BAYE	R
Pain in extremity		INTERFER	RON BETA-1B	S	UNK	386 DAY	/ BAYE	R
I all III extremity					0 000	561 DAY	/ BAYE	Ъ
Dizziness		INTERFER	RON BETA-1B	S SUBCUTANEOUS	2 miu, QOD	30 I DA 1	DATE	
•			RON BETA-1B RON BETA-1B	S SUBCUTANEOUS S SUBCUTANEOUS	2 miu, QOD 8 miu, QOD	9 DAY	BAYE	

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#### **Detailed Report**

Preferred Term	<u>Product</u>	Role Route	<u>Dosage Text</u>	<u>Duration</u>	<u>Manufacturer</u>
Nervous system disorder	INTERFERON BETA-1B	S	6 miu, QOD		BAYER
Contusion	ACTHAR	S			
ntervertebral disc degeneration	ACTHAR	S			
Neck pain	FAMOTIDINE	С			
Blindness unilateral	PREDNISONE	С	TAPERING TO 40 MG		
Central nervous system inflammation	UNCODEABLE "UNCLASSIFIABLE"	С			
Photophobia	PERCOCET	С			
Abdominal discomfort					
Abdominal pain upper					
Abnormal sensation in eye					
Aphagia					
Back pain					
Balance disorder					
Blood pressure decreased					
Central nervous system lesion					
Cerebrovascular arteriovenous malformation					
Dyspepsia					
Erythema					
∃ye pain					
Eye swelling					
<sup>=</sup> all					
Flushing					
Gastrooesophageal reflux disease					
Haematemesis					
Headache					
Head discomfort					
Heart rate decreased					
Malaise					
Nausea					
Optic nerve injury					

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Preferred Term	<u>Product</u>	Role Route	Dosage Text	<u>Duration</u>	<u>Manufacturer</u>
Oropharyngeal pain					
Oxygen saturation decreased					
Pharyngeal oedema					
Pupils unequal					
Skin injury					
Stress					
Visual acuity reduced					
Vomiting					



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
24-Feb-2011	7794864	EXPEDITED (15-DAY)	Υ	DE,HO,OT	PHHY2011JP06959	70 YR	Female	JPN
Preferred Term		<u>Product</u>		Role Route	<u>Dosage Text</u>	<u>Duratio</u>	n <u>Manu</u>	<u>ıfacturer</u>
Hepatitis E		SANDIMM	UNE	S INTRAVENOUS	UNK		NOV	ARTIS
Hepatitis fulminant		CORTICO	TROPIN	S INTRAVENOUS				
Hepatic atrophy		STEROIDS	SNOS	С				
Adrenalitis								
Alanine aminotransfera	se increased							
Aspartate aminotransfe	erase increased							
Blood bilirubin increase	ed							
Cholestasis								
Condition aggravated								
Cytomegalovirus infect	ion							
Eosinophilic pneumoni	a							
Haemorrhage								
Hepatic fibrosis								
Hepatic function abnor	mal							
Hepatic necrosis								
Jaundice								
Pancreatitis necrotising	)							
Pneumonia								
Prothrombin time prolo	nged							
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
15-Mar-2011	7890138	EXPEDITED (15-DAY)	Υ	НО	11-ADE-SU-0020-ACT	1 YR	Male	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	<u>ıfacturer</u>
Hyperthermia malignar	nt	H.P. ACTH	HAR	S	30 IU IM BID WITH TAPER			
		ALBUTER	OL	С				
		VALPROIC	CACID	С				
		ZANTAC		С				



FDA Received Date	Case #	Case Type		Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
25-Apr-2011	7932776	DIRECT		Υ	ОТ		32 DAY	Female	USA
Preferred Term			Product		Role Route	Dosage Text	Duratio	<u>n Manu</u>	<u>facturer</u>
Mobility decreased			ACTHAR		S SUBCUTANEOUS	80 U DAILY SC		QUES	TCOR
Abasia									
Diplopia									
Dysgeusia									
Impaired driving ability									
Thinking abnormal									
Vision blurred									

FDA Received Date	Case #	Case Type	He	ealth Professional	Outcon	<u>ies</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
26-Apr-2011	7575889	EXPEDITED (15-I	DAY) Y		HO,LT,	тот	PHHY2010JP56543	22 YR	Female	JPN
Preferred Term		<u>Pi</u>	oduct		Role	Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	<u>facturer</u>
Lymphoma		C	CLOSPORIN		S		80 mg, BID	33 DAY	NOVA	RTIS
Tongue neoplasm mali	ignant stage uns	pecified C	CLOSPORIN		S		80 mg	35 DAY	NOVA	RTIS
Malnutrition		C	CLOSPORIN		S		50 mg	413 DA	Y NOVA	RTIS
Urine ketone body pres	sent	C	CLOSPORIN		S		UNK		NOVA	RTIS
Respiratory failure		N	EORAL		S	ORAL	UNK	17 DAY		
Dyspnoea		SA	ANDIMMUNE		S	INTRAVENOUS DRIP	UNK	12 DAY		
Vital capacity decrease	ed	М	YCOPHENOL	ATE MOFETIL	S	ORAL	250 mg, UNK	1 DAY		
Hypophagia		М	YCOPHENOL	ATE MOFETIL	S	ORAL	500 mg, UNK	8 DAY		
Tachycardia		М	YCOPHENOL	ATE MOFETIL	S	ORAL	750 mg, UNK	40 DAY		
Blood pressure decrea	sed	М	YCOPHENOL	ATE MOFETIL	S	ORAL	500 mg, UNK	125 DA	1	
Blood creatinine increa	ased	М	YCOPHENOL	ATE MOFETIL	S	ORAL	750 mg, UNK			
Hypoglycaemia		М	ETHYLPREDI	NISOLONE	S	INTRAVENOUS	100 mg, UNK	9 DAY		
Gastroenteritis		М	ETHYLPREDI	NISOLONE	S	INTRAVENOUS	50 mg, UNK	6 DAY		
Diarrhoea		PI	REDNISOLON	E	S	ORAL	15 mg, UNK			
White blood cell count	increased	PI	REDNISOLON	E	S	ORAL	12.5 mg, UNK			
Metabolic acidosis		PI	REDNISOLON	E	S	ORAL	10 mg, UNK			
Dehydration		PI	REDNISOLON	E	S	ORAL	7.5 mg, UNK			

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Preferred Term			<u>Product</u>		<u>Role</u>	<u>Route</u>	Dosage Text	<u>Duratio</u>	<u>n Manı</u>	<u>ufacturer</u>
Enterocolitis			PREDNISOLONE		S	ORAL	6.75 mg, UNK			
Nausea			PREDNISOLONE		S	ORAL	5 mg, UNK			
			PREDNISOLONE		S	ORAL	3.75 mg, UNK			
			PREDNISOLONE		S	ORAL	5 mg, UNK			
			CORTICOTROPIN	١	S	INTRAVENOUS	1500 mg, UNK			
			HYDROCORTISO SUCCINATE	NE SODIUM	С	INTRAVENOUS	100 mg			
			METILDIGOXIN		С		0.1 mg/day			
			ETIZOLAM		С		1 mg/day			
			SULFAMETHOXA TRIMETHOPRIM	ZOLE AND	С		1 g/day			
			AMPHOTERICIN	В	С		1.2 g/day			
			ACYCLOVIR		С		200 mg/day			
			LANSOPRAZOLE		С		60 mg/day			
			ATROPINE SULF	ATE	С		0.3 mg			
			PETHIDINE HYDR	ROCHLORIDE	С	INTRAMUSCULAR	30 mg			
			MIDAZOLAM		С		2 mg			
			PROPOFOL		С		40 mg			
			REMIFENTANIL		С		0.25 ug/kg/min			
			SEVOFLURANE		С		03 percent			
			ROCURONIUM B	ROMIDE	С		20 mg			
			CEFAZOLIN SOD	IUM	С	INTRAVENOUS	600 mg			
			VALGANCICLOVI	R	С	ORAL	450 mg, UNK	29 DAY		
FDA Received Date	Case #	Case Type	Hea	Ith Professional	Outcom	<u>ies</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
29-Jun-2011	8034315	NON-EXPEDIT	TED Y		НО		10-ADE-SE-0056-ACT	55 YR	Female	USA
Preferred Term			<u>Product</u>		Role	Route	Dosage Text	<u>Duratio</u>	<u>n Manı</u>	<u>ufacturer</u>
Oedema			H.P. ACTHAR		S					
Fluid retention										



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
29-Jun-2011	8034320	NON-EXPEDITED	Υ	НО	10-ADE-SE-0027-ACT	45 YR	Female	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	Duratio	on <u>Manu</u>	<u>ıfacturer</u>
Multiple sclerosis relap	ose	H.P. ACTI	HAR	S SUBCUTANEOUS	80 IU SC DAILY X 5 DAYS			
Hypokalaemia		PROVIGIL	<u>-</u>	С				
Oedema peripheral		SYNTHRO	DID	С				
		LASIX		С				
		HYOSCYA	AMINE	С				
		PROTONI	X	С				
		SIMVAST	ATIN	С				
		PRISTIQ EXTENDED RELEASE		С				
		XANAX		С				
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
30-Jun-2011	7399061	EXPEDITED (15-DAY)	Υ	НО	10-ADE-SU-0016-ACT	213 DA	Y Female	USA
Preferred Term		Product		Role Route	Dosage Text	Duratio	on <u>Manu</u>	<u>ifacturer</u>
Cardiomyopathy		H.P. ACTI	HAR	S	30IU IM Q12H			
Pneumothorax		TOPAMAX	<	С				
Pneumocystis jirovecii	pneumonia	ZONEGRA	AN	С				
Pneumonia streptococo	cal	VIGABATI	RIN	С				



Detailed	Re	port
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FDA Received Date	Case #	Case Type	Health Professional	Outcom	<u>es</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
30-Jun-2011	7743925	EXPEDITED (15-DAY)	Υ	DE		10-ADE-SU-0065-ACT	2 YR	Male	USA
Preferred Term		<u>Product</u>		Role	<u>Route</u>	Dosage Text	Duratio	on <u>Ma</u>	<u>nufacturer</u>
Sepsis		H.P. ACTH	HAR	S		34 IU IM BID TO QOD			
Pancytopenia		RITUXAN		С					
Hypotension		HYDROCO	ORTISONE	С					
Bone marrow failure									
Cardiac output decreas	sed								
Drug ineffective									
Haemorrhage intracrar	nial								
FDA Received Date	Case #	Case Type	Health Professional	Outcom	<u>es</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
04-Jul-2011	8019627	EXPEDITED (15-DAY)	Υ	ОТ		PHHY2009JP45379	20 YR	Female	JPN
Preferred Term		<u>Product</u>		Role	Route	Dosage Text	Duratio	on <u>Ma</u>	<u>nufacturer</u>
Cytomegalovirus infect	tion	SIMULEC	Т	S		20 mg, UNK		NO	VARTIS
Transplant rejection		TACROLIN	MUS	S	ORAL	UNK			
Pneumocystis jirovecii	pneumonia	CORTICO	TROPIN	S	ORAL	UNK			
		METHYLP	REDNISOLONE	S		UNK			
		MYCOPHE	ENOLATE MOFETIL	S	ORAL	UNK			
		WITCOLLI	LINOL/ (TE MIOTETIE	•	OT VIL	OITIT			



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	Outcom	<u>ies</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	<b>Country</b>
03-Aug-2011	8085942	EXPEDITED (15-DAY)	Υ	HO,LT		2011MA009088	1 YR	Male	JPN
Preferred Term		Product		<u>Role</u>	Route	Dosage Text	<u>Duratio</u>	<u>n Man</u>	<u>ufacturer</u>
Toxicity to various age	nts	PHENOB	ARBITAL	S	RECTAL	30 MG/KG;QD;RTL			
Drug ineffective		VITAMIN	B6	S					
Salivary hypersecretion	n	HUMAN II	MMUNOGLOBULIN G	S					
Obstructive airways dis	sorder	ADRENO HORMON	CORTICOTROPIC IE	S					
		UNSPECI	FIED INGREDIENT	S					
		CLOBAZA	AM	С					
		VALPROI	C ACID	С					
		ZONISAN	IIDE	С					
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	Outcom	<u>ies</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
24-Aug-2011	8744220	DIRECT	Υ	НО			168 DA	Y Female	USA
Preferred Term		<u>Product</u>		Role	Route	<u>Dosage Text</u>	<u>Duratio</u>	<u>n</u> <u>Man</u>	<u>ufacturer</u>
Dyskinesia		CORTICO	TROPIN	S	INTRAMUSCULAR	45 UNITS DAILY			
Bacterial translocation									
Diarrhoea									
Enteritis									
Hypertension									
Hypokalaemia									
Infantile spasms									
Occult blood positive	I! _								
Pneumatosis intestinal	IIS								
Pyrexia Respiratory tract infect	liana viinal								
RESUITATORY TRACT INTECT	iion virai								
Sleep disorder Viral infection									



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
14-Sep-2011	8108297	EXPEDITED (15-DAY)	Υ	НО	11-ADE-SU-0076-ACT	66 YR	Female	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Manı</u>	<u>ufacturer</u>
Hypoaesthesia		H.P. ACTH	IAR	S	80 IU SC DAILY X 5 DAYS			
Vertigo		COPAXON	<b>IE</b>	С				
Asthenia		AMPYRA		С				
Thrombocytopenia		CADUET		С				
		PROTONI	X	С				
		MYSOLINI	≣	С				
		NUVIGIL		С				
		MICARDIS	3	С				
		NEXIUM		С				
		CALCIUM	CARBONATE	С				
		CENTRUM	1 SILVER	С				
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
20-Sep-2011	8165403	EXPEDITED (15-DAY)	N	НО	11-ADE-SU-0092-ACT	63 YR	Male	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Manı</u>	<u>ufacturer</u>
Tremor		H.P. ACTH	IAR	S	80 IU IM DAILY X 5 DAYS			
Dizziness		TYSABRI		С				
Altered state of conscio	ousness	KEPPRA		С				
oss of consciousness		BACLOFE	N	С				
Staphylococcal infectio	n	PROVIGIL		С				
		ZOLOFT		С				



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FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	Age Sex Country
21-Nov-2011	8256767	EXPEDITED (15-DAY)	N	ОТ	US-US-EMD SERONO, INC233212J10USA	55 YR Female USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duration</u> <u>Manufacturer</u>
Blood glucose increase	ed	REBIF		S		
Blood potassium abno	ormal	ACTHAR (	GEL-SYNTHETIC	S		
Multiple sclerosis relap	ose					
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	Age Sex Country
02-Dec-2011	8584446	DIRECT	Υ	НО		53 YR Female USA
Preferred Term Eyelid oedema		<u>Product</u> H.P. ACTH	IAR	Role Route S	Dosage Text 1 CC @ PER DAY FOR 5 DAYS	<u>Duration</u> <u>Manufacturer</u> 1 DAY
Body temperature dec	reased					
Face oedema						
Oedema peripheral						
Oropharyngeal pain						
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	Age Sex Country
05-Jan-2012	8329443	DIRECT	Υ			48 YR Female USA
Preferred Term  Dyspnoea		<u>Product</u> ACTHAR		Role Route S SUBCUTANEOUS	<u>Dosage Text</u> 80UNITS DAILY X 5 DAYS SQ	<u>Duration</u> <u>Manufacturer</u> QUESTCOR
Generalised oedema						
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	Age Sex Country
13-Jan-2012	8355570	EXPEDITED (15-DAY)	N	НО	DKLU1075795	213 DAY Male USA
		Duraturat		Role Route	Dosage Text	<u>Duration</u> <u>Manufacturer</u>
Preferred Term		<u>Product</u>		itole itoute	Dobuge Text	<u> Manadator</u>
Preferred Term Gastrooesophageal re	flux disease	SABRIL		S ORAL	1000 MG MILLIGRAM (S), 2 IN 1 D, ORAL	<u> </u>

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FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
23-Jan-2012	8391075	EXPEDITED (15-DAY)	N	НО	12-ADE-SU-0004-ACT	213 DA	Y Male	USA
Preferred Term		Product		Role Route	Dosage Text	<u>Duratio</u>	<u>n Manı</u>	<u>ufacturer</u>
Drug ineffective		H.P. ACTHAR		S	60-70 IU IM QD - TAPER			
Vomiting		VIGABATI	VIGABATRIN					
Dehydration								
Gastrooesophageal re	flux disease							
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
10-Feb-2012	8401643	EXPEDITED (15-DAY)	Υ	DE	FR- ASTRAZENECA-2012SE 08099	61 YR	Female	FRA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Manı</u>	<u>ufacturer</u>
Intestinal infarction		ARIMIDE	<	S ORAL			ZENE	ECA
Hypertension		INEXIUM		S ORAL				
		AVASTIN		S INTRAVENOUS				
		RIVOTRIL	-	S ORAL				
		ZOMETA		S INTRAVENOUS				
		NICARDIF	PINE HYDROCHLORIDE	S UNKNOWN				
		PRIMPER	AN	S ORAL				
		LYRICA		S ORAL				
		CORTICO	TROPIN	S UNKNOWN				
		DURAGES		С				
		ACETAMI		С				
		LOVENO		С				
		ORAMOR RELEASE	PH SR SUSTAINED	С				



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FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
15-Feb-2012	8429154	EXPEDITED (15-DAY)	Υ	НО	12-ADE-SU-0016-ACT	80 YR	Male	USA
Preferred Term		Product		Role Route	Dosage Text	Duratio	<u>n Man</u>	<u>ufacturer</u>
Acute myocardial infare	ction	H.P. ACTI	HAR	S INTRAMUSCULAR	80 IU IM TWICE A WEEK			
		HYDRALA	ZINE	С				
		NIACIN		С				
		LIPITOR		С				
		AMLODIP	INE	С				
		FUROSEM	MIDE	С				
		LOSARTA	N POTASSIUM	С				
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
16-Feb-2012	8661765	EXPEDITED (15-DAY)	N	НО	DKLU1076498	1 YR	Female	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Man</u>	<u>ufacturer</u>
Dyspnoea		SABRIL		S ORAL	SEE IMAGE			
Viral infection		ONFI		S ORAL	5 MG MILLIGRAM(S), 1 IN 1 D, ORAL			
Decreased appetite		ACTH		S	0.43 ML MILLILITRE(S), 2 IN 1 D			
Heart rate increased		AMPICILL	IN	С				
Dehydration		ZANTAC		С				
Irritability								
Vomiting								



Detailed	Re	port
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FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
17-Feb-2012	8434121	EXPEDITED (15-DAY)	Υ	НО	12-ADE-SU-0019-ACT	64 YR	Male	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	<u>facturer</u>
Acute abdomen		H.P. ACTH	AR	S	80 IU IM TWICE A WEEK			
Diarrhoea ROCALTROL		OL	С					
Diverticular perforation	Diverticular perforation METOLAZONE		ONE	С				
Renal failure acute		LASIX		С				
Refusal of treatment by	patient	MINOXIDIL	-	С				
		ZOCOR		С				
		LISINOPRI	L	С				
		TUMS		С				
		CITALOPR	AM	С				



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
05-Mar-2012	8455437	EXPEDITED (15-DAY)	Υ	НО	QSC-2012-0006	39 YR	Male	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Mar</u>	<u>ufacturer</u>
Tremor		H.P. ACTH	AR	S SUBCUTANEOUS	1 ML QD, SUBCUTANEOUS			
Tongue biting			PH (INSULIN E PORCINE)	С				
Faecal incontinence		NEXIUM (E MAGNESII	ESOMEPRAZOLE JM)	С				
Postictal state			L (LISINOPRIL)	С				
Sinus tachycardia		SIMVASTA	TIN	С				
Cardiac failure congestive	е							
Confusional state								
Diabetic nephropathy								
Fall								
Feeling abnormal								
Grand mal convulsion								
Hyperglycaemia								
Hypertensive emergency								
Mitral valve incompetence	е							
Proteinuria								
Pulmonary valve incompe	etence							
Renal failure acute								
Tricuspid valve incompete	ence							
Urinary incontinence								



Detailed	Re	port
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FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
14-Mar-2012	8468093	EXPEDITED (15-DAY)	N	НО	QSC-2012-0011	58 YR	Female	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	Duratio	<u>n Manufa</u>	acturer
Dysarthria		H.P. ACTH	AR	S	UNK			
Condition aggravated								
Fall								
Gait disturbance								
Multiple sclerosis								
Paralysis								



Detailed	Re	port
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FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
28-Mar-2012	8495162	EXPEDITED (15-DAY)	Υ	НО	QSC-2012-0018	334 DAY	' Male	ITA
Preferred Term Diabetes mellitus		Product H.P. ACTH	HAR	Role Route S INTRAMUSCULAR	Dosage Text 20 IU/DIE, QD, INTRAMUSCULAR; 20, QOD, INTRAMUSCULAR; 20 IU, BIW, INTRAMUSCULAR	<b>Duratio</b> 7 DAY	<u>n Manu</u>	<u>facturer</u>
Enteritis Adrenal disorder Alkalosis hypokalaemic Blood cortisol increased Bronchopneumonia Convulsion Cushingoid Dehydration Electrolyte imbalance Hirsutism Hyperadrenocorticism Hypernatraemia Lymphopenia Thrombocytopenia Weight increased		VALPROA	TE SODIUM	C				
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
31-Mar-2012	8486002	EXPEDITED (15-DAY)	N	ОТ	PHEH2012US006819		Unknown	USA
Preferred Term Fluid retention		<u>Product</u> GILENYA H.P. ACTH	IAR	Role Route S S	<u>Dosage Text</u> UNK	<u>Duratio</u>		<u>ifacturer</u> ARTIS



FDA Received Date	Case #	Case Type		<b>Health Professional</b>	Outcor	nes	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
03-Apr-2012	8491940	EXPEDITED (	15-DAY)	Υ	ОТ		PHHY2012IT027874		Male	ITA
Preferred Term			<u>Product</u>		Role	e Route	Dosage Text	<u>Duratio</u>	on <u>Ma</u>	nufacturer
Growth retardation			CICLOSPORIN		S		4-5 mg/kg, UNK		NO	VARTIS
Cushingoid			CICLOSPORIN		S		2 mg/kg, UNK		NO	VARTIS
Posterior reversible en	cephalopathy sy	ndrome	PREDNIS	ONE	S					
Hypertension			METHYLP	REDNISOLONE	S	INTRAVENOUS	20 mg/kg, for three to five times			
			TACROLIN	MUS	S		0.1 mg/kg, UNK			
			TACROLIN	MUS	S		0.018 mg/kg, UNK			
			RITUXIMA	В	S		375 mg/m2, UNK			
			CORTICO	TROPIN	S	INTRAMUSCULAR	1 mg/week			
FDA Received Date	Case #	Case Type		<b>Health Professional</b>	Outcor	<u>nes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
03-Apr-2012	8491941	EXPEDITED (	15-DAY)	Υ	ОТ		PHHY2012IT027892		Male	ITA
Preferred Term			Product		Role	e Route	Dosage Text	Duratio	on <u>Ma</u>	<u>nufacturer</u>
Cushingoid			CICLOSPO	ORIN	S		4-5 mg/kg, UNK		NO	VARTIS
Glomerular filtration ra	te decreased		CICLOSPO	ORIN	S		2 mg/kg, UNK		NO	VARTIS
			PREDNIS	ONE	S					
			METHYLP	REDNISOLONE	S	INTRAVENOUS	20 mg/kg, for three to five times			
			MYCOPHE	ENOLATE MOFETIL	S		20-30 mg/kg, UNK			
			CYCLOPH	OSPHAMIDE	s		2.5 mg/kg, for 8 weeks			
			CORTICO	TROPIN	s	INTRAMUSCULAR	1 mg/week			
			PLASMAP UNIT	HERESIS BLOOD PACK	С		-			



				•					
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	Sex	Country	
16-Apr-2012	8532242	DIRECT	Υ	ОТ		40 YR	Male	USA	
Preferred Term			<u>Product</u>	Role Route	Dosage Text	<u>Duratio</u>	n <u>Mar</u>	<u>Manufacturer</u>	
Dysarthria			ACTHAR	S SUBCUTANEOUS	80UN BIW SQ		QUI	ESTCOR	
Muscle spasms			MICARDIS	S					
			RENVELA	S					
			PRILOSEC	С					
			AMLODIPINE	С					
			CITALOPRAM	С					
			SIMVASTATIN	С					
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country	
11-May-2012	8584524	DIRECT	Υ				Female	USA	
Preferred Term			<u>Product</u>	Role Route	Dosage Text	<u>Duratio</u>	<u>n Mar</u>	<u>nufacturer</u>	
Drug hypersensitivity			H.P. ACTHAR	S			QUI	ESTCOR	
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country	
14-May-2012	8568167	DIRECT		ОТ		42 YR	Female	USA	
Preferred Term			<u>Product</u>	Role Route	Dosage Text	<u>Duratio</u>	<u>n Mar</u>	<u>nufacturer</u>	
Oedema peripheral			H.P. ACTHAR	S	INJECTABLE QD				



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	<b>Country</b>
18-May-2012	7233393	EXPEDITED (15-DAY)	Υ	DE,HO,OT	US-ROCHE-676835		Male	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	Duratio	on <u>Man</u>	<u>nufacturer</u>
Aplastic anaemia		MABTHEF	RA	S INTRAVENOUS DRIP	750 MG/M2, Q2W			
Sepsis		ACTH		S INTRAMUSCULAR	25 IU/M2, QOD			
		HUMAN IN	MMUNOGLOBULIN G	С	UNK			
		CLONIDIN	CLONIDINE		0.5 MG, TID			
		AMLODIP	INE	С	3 MG, BID			
		CALCIUM	CARBONATE	С	750 MG, BID			
		CAPTOPRIL		С	6.5 MG, BID			
		CAPTOPF	CAPTOPRIL NIFEDIPINE		10 MG, QHS			
		NIFEDIPIN			3.5 MG, PRN			
		BACTRIM		С				
		PENTAMI	DINE	С	UNK			
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
29-May-2012	8582605	EXPEDITED (15-DAY)	Υ	ОТ	PHHY2012JP045341	80 YR	Male	JPN
Preferred Term		<u>Product</u>		Role Route	Dosage Text	Duratio	on <u>Man</u>	nufacturer
Vein disorder		EXJADE		S ORAL	125 mg, daily		NO\	/ARTIS
Oedema peripheral		CORTICO	TROPIN	S				
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
29-May-2012	8600032	DIRECT	Υ	НО		65 YR	Male	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	on <u>Man</u>	<u>ufacturer</u>
Blood pressure decrea	sed	ACTHAR		S SUBCUTANEOUS	80 UNITS DAILY SUBCUTANOUS		QUE	ESTCOR
Heart rate decreased								



FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	Age Se	<u>Country</u>
22-Jun-2012	9182131	NON-EXPEDITED	Υ	HO,LT,RI	QSC-2011-0093	3 YR Ma	ale USA
Preferred Term Bacterial sepsis		<u>Product</u> H.P. ACTI	HAR	Role Route S INTRAMUSCULAR	<u>Dosage Text</u>	<u>Duration</u>	<u>Manufacturer</u> QUESTCOR
FDA Received Date	Case #	Case Type	Health Professional	Outcomes	Manufacturer Control #	Age Se	x Country
22-Jun-2012	9182139	NON-EXPEDITED	Υ	HO,LT,RI	QSC-2011-0094	213 DAY Fe	male USA
Preferred Term Bacterial sepsis		_	HAR GEL CORTICOTROPIC E) GEL FOR INJECTION,	Role Route S INTRAMUSCULAR	Dosage Text	<u>Duration</u>	Manufacturer QUESTCOR
FDA Received Date	Case #	Case Type	Health Professional	Outcomes	Manufacturer Control #	Age Se	<u>Country</u>
22-Jun-2012	9182147	NON-EXPEDITED	Υ	HO,RI	QSC-2011-0095	182 DAY Ma	ale USA
Preferred Term Pneumocystis jirovecii	pneumonia	<u>Product</u> ACTHAR		Role Route S INTRAMUSCULAR	<u>Dosage Text</u> 75 iu/m2	<b>Duration</b> 42 DAY	<u>Manufacturer</u> QUESTCOR
FDA Received Date	Case #	Case Type	Health Professional	Outcomes	Manufacturer Control #	Age Se	<u>Country</u>
22-Jun-2012	9182156	NON-EXPEDITED	Υ	НО	QSC-2011-0111	1 YR Fe	male USA
Preferred Term Infection		•	HAR GEL CORTICOTROPIC E) GEL FOR INJECTION,	Role Route S INTRAMUSCULAR	Dosage Text BID with taper	<u>Duration</u>	Manufacturer QUESTCOR



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
22-Jun-2012	9182170	NON-EXPEDITED	Υ	ОТ	QSC-2011-0142	44 YR	Male	USA
Preferred Term		Proc	duct	Role Route	Dosage Text	<u>Duratio</u>	n <u>Ma</u>	<u>nufacturer</u>
Blood glucose increase	ed	H.P.	ACTHAR GEL	S	2x		QU	JESTCOR
Polyuria		TOF	MAX (TOPIRAMATE)	С				
Feeling abnormal		AMI	TRIPTYLINE (AMITRIPTYLINE)	С				
		AME	BIEN (ZOLPIDEM TARTRATE)	С				
		GAE	BAPENTIN (GABAPENTIN)	С				
			RETOL (CARBAMAZEPINE) (NOWN	С				
Dehydration								
Thirst								
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
22-Jun-2012	9182181	NON-EXPEDITED		НО	QSC-2012-0028	304 DAY Female USA		USA
Preferred Term		Pro	duct	Role Route	Dosage Text	Duratio	n <u>Ma</u>	<u>nufacturer</u>
Diarrhoea		(AD	ACTHAR GEL RENOCORTICOTROPIC RMONE) GEL FOR INJECTION, /ML	S INTRAMUSCULAF	3		QU	JESTCOR
Convulsion								
Cushingoid								
Flatulence								
Oral candidiasis Retching								



FDA Received Date	Case #	Case Type	Health Professional	Outcomes	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
22-Jun-2012	9182188	NON-EXPEDITED	Y	HO	QSC-2012-0069	60 YR	Female	USA
22-Juli-2012	9102100	NON-EXPEDITED	ĭ	пО	QSC-2012-0009	60 TR	remale	USA
Preferred Term		<u>Pro</u>	<u>oduct</u>	Role Route	Dosage Text	<u>Duratio</u>	on <u>Manu</u>	<u>ıfacturer</u>
Blood potassium decre	eased	H.F	P. ACTHAR GEL	S SUBCUTANEOUS			QUES	STCOR
			ONAZEPAM (CLONAZEPAM) ONAZEPAM)	С				
			KAPRO (ESCITALOPRAM RMONE)	С				
		VIT	AMIN D (ERGOCALCIFEROL)	С				
			VOTHYROXINE VOTHYROXINE)	С				
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
22-Jun-2012	9182193	NON-EXPEDITED		HO,LT	QSC-2012-0078	304 DA	Y Female	USA
Preferred Term		Pro	<u>oduct</u>	Role Route	Dosage Text	Duratio	on <u>Manu</u>	ıfacturer
Pneumonia		JA) HO	P. ACTHAR GEL DRENOCORTICOTROPIC RMONE) GEL FOR INJECTION, J/ML	S SUBCUTANEOUS	•		QUES	STCOR
FDA Received Date	Case #	Case Type	<u>Health Professional</u>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
29-Jun-2012	8665706	EXPEDITED (15-D	AY) Y	НО	QSC-2012-0102	48 YR	Female	USA
Preferred Term		<u>Pro</u>	<u>oduct</u>	Role Route	Dosage Text	Duratio	on <u>Manu</u>	<u>ıfacturer</u>
Leukocytosis		H.F	P. ACTHAR	S	UNK			



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	Outcom	<u>nes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
03-Jul-2012	8648320	EXPEDITED (15-DAY)	Y	OT		NL-ROXANE LABORATORIES, INC2012-RO-01501RO	1 YR	Male	NLD
Preferred Term		<u>Product</u>		Role	Route	Dosage Text	<u>Duratio</u>	<u>n M</u>	<u>anufacturer</u>
Dehydration		FUROSE	MIDE	S				R	OXANE
Renal failure chronic		FUROSE	MIDE	S	INTRAVENOUS			R	OXANE
Renin decreased		AMLODIF	PINE	S				R	OXANE
Drug ineffective		SODIUM SULFON	POLYSTYRENE ATE	S	ORAL			R	OXANE
		HYDROC	HLOROTHIAZIDE	S					
		HYDROC	HLOROTHIAZIDE	S	ORAL				
		ATENOLO	OL	S					
		ACTH		S					
		MISOPRO	OSTOL	S	ORAL	400 mg			
FDA Received Date	Case #	Case Type	Health Professional	Outcom	<u>1es</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
11-Jul-2012	8675279	DIRECT	Υ	НО			73 YR	Female	USA
Preferred Term		Product		Role	Route	Dosage Text	<u>Duratio</u>	<u>n M</u>	<u>anufacturer</u>
Headache		ACTHAR		S		ACTHAR 80 UNITS TWICE A WEEK X 6MO 057 SUB Q		Q	UESTCOR
Hypertension		AMLODIF	PINE	С					
		ATENOLO	OL	С					
		CALCIUM	1	С					
		FUROSE	MIDE	С					
		LOVAZA		С					
		POTASSI	UM	С					
		PRILOSE	C	С					
		SPIRONO	DLACTONE	С					
		TRAMAD	OL HYDROCHLORIDE	С					
		VITAMIN	D	С					



FDA Received Date	Case #	Case Type		<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	<b>Country</b>
12-Jul-2012	8677966	DIRECT		Υ	OT		59 YR	Male	USA
Preferred Term			<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Manut</u>	acturer
Feeling cold			ACTHAR		S SUBCUTANEOUS	<b>40U TWICE WEEKLY</b>			
Dizziness									
Joint swelling									
Nausea									
Oedema peripheral									
Pruritus generalised									
Vomiting									



FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	Age	Sex	Country
17-Jul-2012	8672432		Υ	OT	QSC-2012-0116	43 YR	Female	USA
17-Jul-2012	00/2432	EXPEDITED (15-DAY)	Ť	O1	QSC-2012-0116	43 TR	remale	USA
Preferred Term		<u>Product</u>		Role Route	<b>Dosage Text</b>	<u>Duratio</u>	<u>n Manı</u>	<u>ufacturer</u>
Stevens-Johnson synd	Irome	H.P. ACTI	IAR	S SUBCUTANE	OUS 80 UNITS, QD, SUBCUTANEOUS			
Erythema multiforme		AMOXICIL	LIN	С				
Drug hypersensitivity		VIT D (ER	GOCALCIFEROL)	С				
		FOLIC AC	ID	С				
		HYDROCH	HLOROTHIAZIDE	С				
		LORATIDI	NE	С				
		VIT C (AS	CORBIC ACID)	С				
		LEXAPRO		С				
		CRANBER MACROCA	RRY (VACCINIUM ARPON)	С				
		BISACOD'	YL (BISACODYL)	С				
		PROVIGIL		С				
		BACLOFE	N	С				
		GABAPEN	ITIN (GABAPENTIN)	С				
		COUMADI	N	С				
		DONEPEZ	IL HYDROCHLORIDE	С				
		TEMAZEP	AM	С				
		LOPERAM	IIDE HYDROCHLORIDE	С				
		NYSTOP (	NYSTATIN)	С				
		HYDROCO ACETAMII	DDONE BITARTRATE & NOPHEN	С				
		PROMETH	HAZINE	С				



FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
17-Jul-2012	8698231	EXPEDITED (15-DAY)	Υ	DS,OT	QSC-2012-0128	63 YR	Male	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Man</u>	<u>ufacturer</u>
Obliterative bronchiolitis	s	ACTHAR		S	0/8 ML THREE TIMES PER WEEK ; 0.8 ML, IW			
	CELLCEPT		S					
		ASPIRIN (CHILDREN (ACETYLSALICYLIC ACID)		С				
		BENICAR		С				
		FUROSEM	IDE (FUROSEMIDE)	С				
		METOLAZ	ONE	С				
		POTASSIL	IM CHLORIDE	С				
			2000 (CALCIUM TE, COLECALCIFEROL)	С				



Detailed	Report
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FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
25-Jul-2012	8715173	EXPEDITED (15-DAY)	Υ	DE	FK201201939	213 DA	/ Female	JPN
Preferred Term Herpes zoster		Product ACYCLO	VIR SODIUM	Role Route S	Dosage Text INTRAVENOUS (NOT OTHERWISE SPECIFIED)	<u>Duratio</u>	n <u>Man</u>	ufacturer
Multi-organ failure	CORTICOTROPIN		S	0.005 MG/KG, ONCE EVERY MORNING				
Disseminated intravaso	cular coagulation	HUMAN	MMUNOGLOBULIN G	S	INTRAVENOUS (NOT OTHERWISE SPECIFIED)			
General physical health	deterioration	VALPRO.	ATE SODIUM	С				
Shock haemorrhagic Ascites Brain oedema Capillary leak syndrom Cardiovascular insuffic Haemorrhage intracran Hepatic failure Pleural effusion Rash Respiratory distress Respiratory failure	ency	ZONISAN	Health Professional	C Outcomes	Manufacturer Control #	Age	<u>Sex</u>	Country
			<u> </u>		<u>manufacturer Control #</u>			<u> </u>
27-Jul-2012	8710547	DIRECT	Υ	ОТ		65 YR	Male	USA
Preferred Term Skin irritation Abdominal distension	n irritation ACTHAR		Role Route S INTRAMUSCULAR	<u>Dosage Text</u> 1 ML (80 UNITS DAILY) IM	<u>Duratio</u>		u <u>ufacturer</u> ESTCOR	
Drug ineffective								
Hallucination								
Palpitations								

Date - Time: 05-05-2014 8:35:59 AM EST

Note: If the field is blank, there is no data

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FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
14-Aug-2012	8734893	EXPEDITED (15-DAY)	Υ	DE	QSC-2012-0141	71 YR	Male	USA
Preferred TermProductAcute coronary syndromeADRENOCORTICOTROPIC HORMONE			Role Route S SUBCUTANEOUS	<u>Dosage Text</u> 80 UNITS, BIW, SUBCUTANEOUS	<u>Duratio</u>	on <u>Manu</u>	facturer	
Sudden death	th CELLCEPT UNSPECIFIED INGREDIENTS		C C					
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
14-Aug-2012	8758199	EXPEDITED (15-DAY)	Υ	ОТ	QSC-2012-0162		Unknown	USA
Preferred Term Anaemia		<u>Product</u> ADRENOO HORMON	CORTICOTROPIC E	Role Route S INTRAMUSCULAR	<u>Dosage Text</u>	<u>Duratio</u> 7 DAY	o <u>n</u> <u>Manu</u>	facture <u>r</u>



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
15-Aug-2012	8725672	EXPEDITED (15-DAY)	Y	ОТ	US- ABBOTT-12P-163-09625 30-00	30 YR	Female	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	Duratio	<u>m Manu</u>	<u>facturer</u>
Thrombocytopenia		VALPROA	ATE SODIUM	S				
Status epilepticus		PHENOBA	ARBITAL	S				
Drug effect decreased		PENTOBA	ARBITAL SODIUM	S	4-5 mg/kg/hr			
Rash		FOSPHEN	NYTOIN	S				
		MIDAZOL	AM	S	Continuous drip			
		PROPOFO	OL	S	Drip			
		TOPIRAM	TOPIRAMATE		Max dose 400 mg daily			
		LEVETIRA	ACETAM	S	Max 2500 mg twice daily			
		OXCARBA	AZEPINE	S	Max 1200 mg twice daily			
		NEURON <sup>-</sup>	TIN	S	Max 1200 mg three times daily			
		HUMAN IN	MMUNOGLOBULIN G	S	0.4 mg/kg/day	5 DAY		
		ACETAZO	DLAMIDE	S	Max 500 mg twice daily			
		CORTICO	TROPIN	S		2 WEE	<	
		ACYCLOV	/IR	С				
		VANCOM'	YCIN	С				
		CEFTRIA)	XONE	С				
		BENZODI. DRUGS	AZEPINE RELATED	С				
		MAGNESI	IUM	С				
		KETAMIN	E HYDROCHLORIDE	С				



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	<b>Country</b>
17-Aug-2012	8742728	EXPEDITED (15-DAY)	Υ	ОТ	DKLU1083632		Male	JPN
Preferred Term		Product		Role Route	Dosage Text	Duratio	<u>n Man</u>	<u>ufacturer</u>
Convulsion		ONFI		S				
Drug ineffective		VALPROI	C ACID	S				
Drop attacks		TOPIRAN	MATE	S				
Fall		CLONAZE	EPAM	S				
Head injury		PHENYTO	NIC	S				
Developmental delay		LAMOTR	IGINE (LAMOTRIGINE)	S				
		GABAPEI	NTIN (GABAPENTIN)	S				
		CARBAM	AZEPINE	S				
		PHENOB	ARBITAL	S				
		CORTICO (CORTIC	OTROPIN OTROPIN)	S				
		ZONISAN	1IDE	С				
		SULTIAM	E (SULTIAME)	С				
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
03-Oct-2012	8817060	DIRECT	Υ	ОТ		45 YR	Female	USA
Preferred Term Swelling		<u>Product</u> ACTHAR		Role Route S SUBCUTANEOUS	Dosage Text 80 units, subq	<u>Duratio</u>	on <u>Man</u>	<u>ufacturer</u>
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
12-Oct-2012	8758203	EXPEDITED (15-DAY)	Υ	DE,HO	QSC-2012-0164	8 YR	Female	USA
Preferred Term		Product		Role Route	Dosage Text	<u>Duratio</u>	<u>n Man</u>	<u>ufacturer</u>
Syncope		ADRENO HORMON	CORTICOTROPIC IE	S INTRAMUSCULAR		7 DAY		
Sudden death		KLONOP (TABLET:	IN (CLONAZEPAM) S)	S				
Anger		TOPAMA	X (TOPIRAMATE)	S				
		GEODON	1	S				



Detailed	Rei	port
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FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
12-Oct-2012	8844620	EXPEDITED (15-DAY)	Υ	HO,OT	QSC-2012-0160	4 YR	Female	USA
Preferred Term Neutropenia		HORMON BACTRIM	RANITIDINE	RoleRouteSINTRAMUSCULARCC	<u>Dosage Text</u> 14 IU, qod, Intramuscular	<u>Duratio</u>	on Manu	<u>ıfacturer</u>
FDA Received Date	Case #	Case Type	Health Professional	Outcomes	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
22-Oct-2012	8855903	DIRECT	Υ				Female	USA
Preferred Term Exostosis Arthritis Hyperglycaemia		Product ACTHAR		Role Route S SUBCUTANEOUS	<u>Dosage Text</u>	<b>Duratio</b> 5 DAY	on Manu	<u>ıfacturer</u>
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
09-Nov-2012	8909726	EXPEDITED (15-DAY)	Υ	DE	QSC-2012-0288	57 YR	Male	USA
Preferred Term Myocardial infarction Cardiac arrest		Product H.P. ACTH	HAR	Role Route S SUBCUTANEOUS	Dosage Text UNK, biw, Subcutaneous	<u>Duration</u> <u>Manufacturer</u>		
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
09-Nov-2012	8909731	EXPEDITED (15-DAY)	Υ	НО	QSC-2012-0285		Male	USA
Preferred Term Adrenal disorder Blood electrolytes decr	enal disorder H.P. ACTHAR		Role Route S	<u>Dosage Text</u> UNK	Duratio	on <u>Manu</u>	n <u>Manufacturer</u>	
FDA Received Date	Case #	Case Type	Health Professional	Outcomes	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
14-Nov-2012	8816526	EXPEDITED (15-DAY)	Υ	DE,HO,OT	QSC-2012-0203	70 YR	Female	USA

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#### FDA Adverse Event Reporting System (FAERS)

#### Freedom of Information Act (FOIA)

Preferred Term	<u>Product</u>	Role	Route	Dosage Text	<u>Duration</u>	<u>Manufacturer</u>
Respiratory failure	ADRENOCORTICOTROPHIC HORMONE	S	INTRAMUSCULAR			
Inappropriate antidiuretic hormone secretion	LOSARTAN (LOSARTAN)	С				
Oesophagitis	SPIRONOLACTONE (SPIRONOLACTONE)	С				
Gastrointestinal haemorrhage	LASIX (FUROSEMIDE)	С				
	KEPPRA (LEVETIRACETAM)	С				
	PLAVIX (CLOPIDOGREL BISULFATE)	С				
Oxygen saturation decreased	AMLODIPINE (AMLODIPINE)	С				
Hypophagia	LABETALOL (LABTALOL)	С				
Pneumonia aspiration	ALPRAZOLAM (ALPRAZOLAM)	С				
	LEVOTHYROXINE (LEVOTHYROXINE)	С				
	CRSETOR (ROSUVASTATIN CALCIUM)	С				
	OMEPRAZOLE (OMEPRAZOLE)	С				
	ACETAMINOPHEN (PARACETAMOL)	С				
	OXYCODONE (OXYCODONE)	С				
	ASPIRIN (ACETYLSALICYCLIC AICD)	С				
	SALT (SODIUM CHLORIDE)	С				
	MAGNESIUM OXIDE (MAGNESIUM OXIDE)	С				
	VITAMIN D NOS (VITAMIN D NOS)	С				
	CALCIUM CITRATE (CALCIUM CITRATE)	С				
Abscess intestinal						
Diverticular perforation						
General physical health deterioration						
Hyponatraemia						
Hypotension						



Preferred Term Pallor Pneumonia aspiration Pulmonary embolism		<u>Product</u>		Role Route	Dosage Text	<u>Duration</u> <u>Manufacturer</u>		
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
14-Nov-2012	8913498	EXPEDITED (15-DAY)		ОТ	QSC-2012-0281	75 YR	Male	USA
Preferred Term Pneumothorax		<u>Product</u> ACTHAR		Role Route	Dosage Text	<u>Duratio</u>	n <u>Manuf</u>	acturer

Anxiety

Asthenia

Cough

Dyspepsia

Faecal incontinence

Fall

Fatigue

Fluid retention

Gait disturbance

Gastrointestinal motility disorder

Hypophagia

Joint stiffness

Joint swelling

Local swelling

Nausea

Rib fracture

Sleep disorder

Syncope

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Note: If the field is blank, there is no data

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FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
12-Dec-2012	8984049	EXPEDITED (15-DAY)	Υ	DE,HO	OSC-2012-0336	64 YR	Female	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	<u>ifacturer</u>
Cerebrovascular accident		,	HAR GEL CORTICOTROPIC E) GEL FOR INJECTION,	S				
		TYSABRI		С				
		ASPARTA SULFATE,	L (AMFETAMINE TE, AMFETAMINE , DEXAMFETAMINE RATE, DEXAMFETAMINE )	С				
		AMBIEN (2	ZOLPIDEM TARTRATE)	С				
			(BUTALBITAL, E, PARACETAMOL)	С				
		FLEXERIL HYDROCH	(CYCLOBENZAPRINE HLORIDE)	С				
		LANTUS (	INSULIN GLARGINE)	С				
		LASIX (FU	ROSEMIDE)	С				
		CYMBALT HYDROCH	A (DULOXETINE HLORIDE)	С				
		DETROL L TARTRAT	.A (TOLTERODINE L- E)	С				
		PEPCID (F	FAMOTIDINE)	С				
		LIPITOR (A CALCIUM)	ATORVASTATIN )	С				
		LISINOPR	IL (LISINOPRIL)	С				
Malaise								



						Тероп				
FDA Received Date	Case #	Case Type		Health Professional	Outcom	<u>ies</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
18-Dec-2012	8974776	DIRECT		Υ	OT			32 YR	Female	USA
Preferred Term		<u>Product</u>			Role	Route	Dosage Text	<u>Duration</u> <u>Manufacturer</u>		
Acne		A	ACTHAR		S	SUBCUTANEOUS	40 units Monday and Friday SQ		QUE	STCOR
Weight increased		\	VIT D		С					
		E	ENALAPRII	-	С					
Headache										
FDA Received Date	Case #	Case Type		<b>Health Professional</b>	Outcom	<u>ies</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
18-Dec-2012	8978901	DIRECT			НО			63 YR	Male	USA
Preferred Term	Preferred Term Product			Role	Route	Dosage Text	<u>Duratio</u>	<u>n Man</u>	<u>ufacturer</u>	
Blood pressure increas	sed	A	ACTHAR		S		80 unites injection			
		A	ACTHAR		С					
FDA Received Date	Case #	Case Type		Health Professional	Outcom	<u>ies</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
26-Dec-2012	9006160	EXPEDITED (15	5-DAY)	Υ	DE		QSC-2012-0361	59 YR	Male	USA
Preferred Term		<u> </u>	<u>Product</u>		<u>Role</u>	Route	Dosage Text	<u>Duratio</u>	<u>n Man</u>	<u>ufacturer</u>
Proteinuria		( H	`	AR GEL CORTICOTROPIC ) GEL FOR INJECTION,	S		80 units, unk, unknown			
		H	HYDRALAZ	INE	С					
		l	LANTUS (IN	ISULIN GLARGINE)	С					
		F	PREDNISO	NE	С					
			ALDACTON (SPIRONOI		С					
		-	FUROSEMI	DE	С					



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
16-Jan-2013	9034030	DIRECT	Υ	НО		30 YR	Female	USA
Preferred Term Palpitations Arrhythmia		<b>Product</b> H.P. ACT	HAR	Role Route S INTRAMUSCULAR	Dosage Text 80 U IM QD	<u>Duratio</u>		facturer STCOR
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
18-Jan-2013	9006156	EXPEDITED (15-DAY)	Υ	НО	QSC-2012-0299	34 YR	Female	USA
Preferred Term		Product		Role Route	Dosage Text	Duratio	on <u>Manu</u>	<u>facturer</u>
Cardiomyopathy		ACTHAR	GEL-SYNTHETIC	S SUBCUTANEOUS	40 units			
Influenza like illness		PREDNIS	ONE (PREDNISONE)	С				
		AZITHRO	MYCIN (AZITHROMYCIN)	С				
			(CITALOPRAM ROMIDE)	С				
		FUROSE	MIDE (FUROSEMIDE)	С				
		LABETAL	OL (LAETALOL)	С				
		LOSARTA	AN (LOSARTAN)	С				
		VITAMIN	D (COLECALCIFEROL)	С				
Hypersensitivity								



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
31-Jan-2013	8960572	EXPEDITED (15-DAY)	Υ	ОТ	DKLU1086655	213 DAY	Female	USA
Preferred Term		Produc		Role Route	Dosage Text	Duration	<u>Manı</u>	<u>ufacturer</u>
Haematochezia		SABRIL		S ORAL				
			ZEPAM (CLONAZEPAM) ZEPAM)	С				
		ZONEG	RAN (ZONISAMIDE)	С				
		PEPCID	(FAMOTIDINE)	С				
		POLYE <sup>-</sup> (MACRO	HYLENE GLYCOL OGOL)	С				
Constipation								
Eye movement disorde	er							
Hemiparesis								
Movement disorder								
Seizure cluster								
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
04-Feb-2013	8967662	EXPEDITED (15-DAY)	Υ	НО	QSC-2012-0326	2 YR	Male	USA
Preferred Term		Product	THAR GEL	Role Route S INTRAMUSCULA	Dosage Text  AR 40 units, bid,	<u>Duration</u>	<u>Manı</u>	<u>ufacturer</u>
		(ADREN	OCORTICOTROPIC NE) GEL FOR INJECTION,		Intramuscular			
Dilatation intrahepatic	duct congenital		OGLOBULIN OGLOBULINS NOS)	С				
Anaemia								
Hypoalbuminaemia								
• •								
Hyponatraemia	naemorrhage							
Hypoalbuminaemia Hyponatraemia Oesophageal varices h Pleural effusion	naemorrhage							
Hyponatraemia Oesophageal varices h	naemorrhage							



FDA Received Date	Case #	Case Type	Health Professional	Outcomes	Manufacturer Control #	Age	<u>Sex</u>	Country
04-Feb-2013	9094388	DIRECT	Υ	<u></u>		9-	Female	USA
Preferred Term Influenza		1	<u>Product</u> ACTHAR	Role Route	Dosage Text	Duratio		<u>ufacturer</u>
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
07-Feb-2013	9146647	EXPEDITED (15	5-DAY) Y	DE,HO	QSC-2013-0021		Male	USA
Preferred Term		] (	Product H.P. ACTHAR GEL (ADRENOCORTICOTROPIC HORMONE) GEL FOR INJECTION 80U/ML	Role Route S SUBCUTANEOUS	Dosage Text 80 units, biw, Subcutaneous 01//2013 to UNK	<u>Duratio</u>	on <u>Manu</u>	<u>ufacturer</u>
Lung infection Pneumonia								
FDA Received Date	Case #	Case Type	<u>Health Professional</u>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
13-Feb-2013	9093460	DIRECT	Υ				Female	USA
Preferred Term Flushing Local swelling		·	<u>Product</u> ACTHAR	Role Route S SUBCUTANEOUS	<u>Dosage Text</u>	Duratio		<u>ufacturer</u> STCOR



				etailed Neport				
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
13-Feb-2013	9146182	EXPEDITED (15-DAY)	Υ	НО	QSC-2013-0029	70 YR	Male	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	n <u>Ma</u>	<u>nufacturer</u>
Pulmonary oedema		`	HAR GEL CORTICOTROPIC IE) GEL FOR INJECTION,	S SUBCUTANEOUS	80 units, biw, Subcutaneous			
		ALLOPUF	RINOL	С				
		ASPIRIN ACID)	(ACETYLSALICYLIC	С				
		ATORVAS (ATORVA		С				
		AVAPRO	(IRBESARTAN)	С				
		COLCHIC	INE (COLCHICINE)	С				
			TE (VALPROATE	С				
		LABETAL	OL (LABETALOL)	С				
		MINOXID	IL (MINOXIDIL)	С				
		NORVAS BESILATI	C (AMLODIPINE E)	С				
		HYDROC	RENE AND HLOROTHIAZIDE CHLOROTHIAZIDE, RENE)	С				
		VITAMIN	D3 (COLECALCIFEROL)	С				
		CENTRUI VITAMINS	M (MINERAL NOS, S NOS)	С				

Hypertension



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
13-Feb-2013	9154692	EXPEDITED (15-DAY)		НО	QSC-2013-0015	46 YR	Male	USA
Preferred Term		Produc	<u>:t</u>	Role Route	Dosage Text	<u>Duratio</u>	<u>n Mar</u>	nufacturer
Pneumothorax		(ADRE	CTHAR GEL NOCORTICOTROPIC ONE) GEL FOR INJECTION, L	S SUBCUTANEOUS				
Pneumothorax		LASIX	(FUROSEMDIE)	С				
Bacterial infection			NOLACTONE DNOLACTONE)	С				
Urinary retention		BACTF	RIM	С				
		OXYC	DDONE (OXYCODONE)	С				
		WARF	ARIN (WARFARIN)	С				
		TAMSU	JLOSIN (TAMSULOSIN)	С				
			AR (LOSARTAN SSIUM)	С				
Atrial fibrillation								
Empyema								
Infection								
Nephrotic syndrome								



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	<b>Country</b>
01-Mar-2013	9149444	DIRECT		ОТ			Male	USA
Preferred Term		Product		Role Route	Dosage Text	<u>Duratio</u>	<u>n Man</u>	nufacturer
Injection site discolour	ation	ACTHAR		S SUBCUTANEOUS	1 ML 2 injections week1 sq	6 MTH		
Asthenia								
Blood creatinine increa	ased							
Blood pressure fluctua	ition							
Capillary fragility								
Injection site reaction								
Mood swings								
Pulse abnormal								
Sleep disorder								
Tremor								
Weight decreased								
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
08-Mar-2013	9146168	EXPEDITED (15-DAY)	Υ	DE	QSC-2013-0036	64 YR	Male	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Man</u>	<u>ufacturer</u>
Acute pulmonary oede	ema	,	HAR GEL CORTICOTROPIC E) GEL FOR INJECTION,	S INTRAMUSCULAR				
Cardiac failure								
Respiratory failure								
Sudden death								



Detailed	Rei	port
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FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	<b>Country</b>
08-Mar-2013	9169062	EXPEDITED (15-DAY)	Υ	НО	QSC-2013-0054	10 YR	Male	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duration</u> <u>Manufacturer</u>		
Subclavian vein thromb	oosis	,	HAR GEL CORTICOTROPIC E) GEL FOR INJECTION,	S	80 units			
Coagulation time prolonged			RIL (LISINOPRIL TE) (UNKNOWN	С				
		LOSARTA POTASSII	N (LOSARTAN UM)	С				
		SYMBICO	RT	С				
		CETIRIZIN	NE (CETIRIZINE)	С				
			ERGOCALCIFEROL (ERGOCALCIFEROL)					
		LASIX (FU	JROSEMIDE)	С				
Jugular vein thrombosi	s							
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
11-Mar-2013	9167978	EXPEDITED (15-DAY)	Υ	DS,OT	2013034874	25 YR	Female	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	Duration	<u>n Manu</u>	<u>ıfacturer</u>
Asthenia INTRAVENOUS IMMUNOGLOBULIN (IMMUNE GLOBULIN		GLOBULIN (IVIG)	S					
		MYCOPH	ENOLATE MOFETIL IENOLATE MOFETIL)	S				
			PREDNISOLONE PREDNISOLONE)	S				



**Detailed Report** 

FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	<b>Country</b>
11-Mar-2013	9168007	EXPEDITED (15-DA	Y) Y	DS,OT	2013034804	25 YR	Female	USA
Preferred Term		Pro	duct	Role Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	<u>facturer</u>
Walking aid user			HYLPREDNISOLONE THYLPREDNISOLONE)	S		8 WEE	(	
No therapeutic respons	se	TAC	ROLIMUS (TACROLIMUS)	S				
Condition aggravated								
Dermatomyositis								
Muscle atrophy								
Muscular weakness								
Off label use								
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
12-Mar-2013	9168038	EXPEDITED (15-DA	Y) Y	ОТ	2013034867	45 YR	Female	USA
Preferred Term		Proc	duct	Role Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	<u>facturer</u>
Muscular weakness		*****	RAVENOUS UNOGLOBULIN	S				
Rash		AZA	THIOPRINE	S				
Nail disorder		RITI	JXIMAB (RITUXIMAB)	S				
Drug ineffective for una	approved indication	CYC	CLOSPORINE (CICLOSPORIN)	S				
Headache			HOTREXATE THOTREXATE)	S				
Chills		PRE	DNISONE (PREDNISONE)	S				
Nausea		HP /	ACTHAR (CORTICOTROPIN)	S				
Condition aggravated								
Dermatomyositis								
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
13-Mar-2013	9167448	DIRECT	Y	НО		21 YR	Female	USA
Preferred Term		Pro	duct	Role Route	Dosage Text	<u>Duratio</u>	<u>n</u> <u>Manu</u>	<u>facturer</u>
Proteinuria		ACT	HAR HP	S	80u/1ml 5 ml vial		QUES	STCOR
No therapeutic respons								

Date - Time: 05-05-2014 8:35:59 AM EST

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FDA Received Date	Case #	Case Type	<u>Health Professional</u>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
14-Mar-2013	9168636	DIRECT	Υ	HO,LT		37 YR	Female	USA
Preferred Term			<u>Product</u>	Role Route	Dosage Text	Duratio	on <u>Manu</u>	<u>facturer</u>
Vision blurred			ACTHAR GEL-SYNTHETIC	S SUBCUTANEOUS			QUES	STCOR
Blood potassium decre	ased							
Heart rate decreased								
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
29-Apr-2013	9263568	DIRECT	Υ	ОТ		29 YR	Female	USA
Preferred Term			<u>Product</u>	Role Route	Dosage Text	Duratio	on <u>Manu</u>	<u>facturer</u>
Tremor			ACTHAR	S SUBCUTANEOUS	1 ml biw subcutaneous			
Feeling jittery			PREDNISONE	С				
Palpitations								
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
29-Apr-2013	9264760	DIRECT	Υ			36 YR	Female	USA
Preferred Term			<u>Product</u>	Role Route	Dosage Text	Duratio	on <u>Manu</u>	<u>facturer</u>
Alopecia			ACTHAR	S SUBCUTANEOUS	80 units		QUES	STCOR



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
02-May-2013	9217386	EXPEDITED (15-DAY)	Υ	НО	QSC-2013-0088	74 YR	Male	USA
Preferred Term		Product		Role Route	Dosage Text	<u>Duratio</u>	<u>n Mar</u>	<u>nufacturer</u>
Myopathy		H.P. AC	ΓHAR GEL	S SUBCUTANEOU	S 80 UNITS, BIW, SUBCUTANEOUS			
Asthenia		BUMEX	(BUMETANIDE)	С				
			SIUM CHLORIDE SIUM CHLORIDE)	С				
		VITAMIN	I D (ERGOCALCIFEROL)	С				
		ASPIRIN ACID)	LOW (ACETYLSALICYLIC	С				
		COREG	(CARVEDILOL)	С				
		CALCITE	RIOL (CALCITRIOL)	С				
		FISH OII	(FISH OIL)	С				
		ALDACT (SPIRON	ONE NOLACTONE)	С				
		DILTIAZ	EM	С				
		FLOMA	(MORNIFLUMATE)	С				
		HYDRAL	AZINE (HYDRALAZINE)	С				
		MAGNE SULFAT	SIUM (MAGNESIUM E)	С				
Blood glucose increase	ed							
Deep vein thrombosis								
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
03-May-2013	9277342	DIRECT	Υ	ОТ		1 YR	Male	USA
Preferred Term		Product		Role Route	Dosage Text	<u>Duratio</u>	<u>n Mar</u>	<u>nufacturer</u>
Muscle spasms		ACTHAF	₹	S	0.4 cc bid x 7 d, o 18 cc c 6 d			
Disease recurrence								
Drug ineffective								



Detailed	Re	port
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FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
17-May-2013	9302647	EXPEDITED (15-DAY)	Υ	НО	QSC-2013-0131	273 DA	Y Male	USA
Preferred Term  Ventricular extrasystoles  Hypertension		Product H.P. ACTHAR GEL (ADRENOCORTICOTROPIC HORMONE) GEL FOR INJECTION, 80U/ML		Role Route S	<b>Dosage Text</b> 75 units/m2, for 2 wks	<u>Duration</u> <u>Manut</u>		<u>nufacturer</u>
Ventricular tachycardia	l							

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FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
17-May-2013	9302656	EXPEDITED (15-DAY)	Υ	НО	QSC-2013-0128	59 YR	Female	USA
Preferred Term		Product		Role Route	Dosage Text	<u>Duration</u> <u>Manufa</u>		<u>ufacturer</u>
Atrial fibrillation	(ADRENOCORT HORMONE) GEI 80U/ML		IAR GEL CORTICOTROPIC E) GEL FOR INJECTION,	S SUBCUTANEOUS	80 units			
Coronary artery emboli				С				
Eye haemorrhage		DOXEPIN		С				
Snoring		OMEPRAZ	ZOLE	С				
Erythema		ESTROGE	N (ESTRADIOL)	С				
		LISINOPR	IL	С				
		METOPRO	DLOL	С				
		RANITIDI	IE (RANITIDINE)	С				
		SIMVAST	ATIN	С				
		WARFARI	N	С				
		PROGRAI	(TACROLIMUS)	С				
		PREDNIS	ONE	С				
Amaurosis fugax								
Dyspnoea exertional								
Infusion site infection								
Palpitations								
Sleep apnoea syndrom	ne							



FDA Received Date	Case #	Case Type	Health Professional	Outcom	<u>es</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
21-May-2013	9302068	EXPEDITED (15-DAY)		ОТ		US- BAXTER-2013BAX01683 4	46 YR	Female	USA
Preferred Term		<u>Product</u>		Role	Route	Dosage Text	<u>Duratio</u>	n <u>Manuf</u>	acturer
Hyponatraemia		5% DEXTR	ROSE INJECTION USP	S	UNKNOWN			BAXTE	:R
		5% DEXTR	ROSE INJECTION USP	S				BAXTE	:R
		ACTH		S					
		DEXAMET	HASONE	S	UNKNOWN				



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>		Manufacturer Control #	<u>Age</u>	<u>Sex</u>	<b>Country</b>
03-Jun-2013	9331876	EXPEDITED (15-DAY)	Υ	НО		ACO_35816_2013	47 YR	Male	USA
Preferred Term		<u>Product</u>		Role Ro	<u>oute</u>	Dosage Text	<u>Duratio</u>	<u>n Ma</u>	nufacturer
Fall		AMPYRA		S OR	RAL				
Constipation		TESTOST (TESTOS	ERONE TERONE PROPIONATE)	С					
Drug dose omission		OXYCOD( HYDROCI	ONE HCL (OXYCODONE HLORIDE)	С					
Blood potassium decreased			TIN (OXYCODONE HLORIDE)	С					
		XANAX (A	LPRAZOLAM)	С					
		ASPARTA SULFATE	L (AMFETAMINE TE, AMFETAMINE , DEXAMFETAMINE RATE, DEXAMFETAMINE )	С					
		CLARITIN	(LORATADINE)	С					
		CALCIUM CYANOCO ERGOCAI NICOTINA HYDROCI PALMITA	AL (ASCORBIC ACID, PANTOTHENATE, DBALAMIN, LCIFEROL, AMIDE, PYRIDOXINE HLORIDE, RETINOL TE, RIBOFLAVIN, E MONONITRATE)	С					
		SULFATE	I (CHONDROITIN , GLUCOSAMINE HLORIDE, MANGANESE ATE)	С					
		ZOFRAN ( HYDROCI	(ONDANSETRON HLORIDE)	С					
		ABILIFY (A	ARIPIPRAZOLE)	С					
			MPD (ACETYLSALICYLIC RISOPRODOL)	С					
Balance disorder									
Insomnia									



FDA Received Date	Case #	Case Type	<u>Health Professional</u>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	<b>Country</b>
10-Jun-2013	9341353	DIRECT	Υ	ОТ		69 YR	Female	USA
Preferred Term  Dyspnoea			Product ACTHAR	Role Route S	Dosage Text 80u/ml Injectable 1 tiw	<u>Duration</u> <u>Manufacturer</u>		<u>ufacturer</u>
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
13-Jun-2013	9350575	DIRECT	Υ	НО		60 YR	Male	USA
<u>Preferred Term</u> Migraine	Product ACTHAR GEL-SYNTHETIC		RoleRouteSSUBCUTANEOUS	<b>Dosage Text</b> 40 U QD SUBCUTANEOUS	<u>Duration</u> <u>Manufacturer</u> QUESTCOR			
Muscular weakness			CLONAZEPAM	С				
			VALIUM	С				
			CYMBALTA	С				
			ZOFRAN	С				
			TORADOL	С				
			DHE	С				
			PHENERGAN	С				
			BENEDRYL	С				
Dyskinesia								
Psychogenic seizure								
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
28-Jun-2013	9375492	EXPEDITED	(15-DAY)		ES-EISAI INC- E2090-02715-SPO-ES	9 DAY	Male	ESP
Preferred Term			<u>Product</u>	Role Route	Dosage Text	Duratio	<u>n Manı</u>	<u>ufacturer</u>
Drug ineffective			ZONISAMIDE	S	UNKNOWN			
			PHENOBARBITAL	S	UNKNOWN			
			LEVETIRACETAM	S	UNKNOWN			
			CLONAZEPAM	S	UNKNOWN			
			VIGABATRIN	S	UNKNOWN			
			ACTH	S	UNKNOWN			



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
05-Jul-2013	9317308	EXPEDITED (15-DAY)	Υ	DE,HO	QSC-2013-0140	72 YR	Female	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	facturer
Pancytopenia		ADRENO( HORMON	CORTICOTROPIC E	S SUBCUTANEOUS	80 units, bid, Subcutaneous			
Acute respiratory failure	e	FUROSEM	MIDE (FUROSEMIDE)	С				
Oedema peripheral		CARVEDI	LOL (CARVEDILOL)	С				
Oedema			DE DINITRATE DE DINITRATE)	С				
Sepsis		VITAMIN I	NOS (VITAMIN D NOS)	С				
		(CAFFEIN	WITH CODEIN #3 E, CODEINE NTE, PARACETAMOL)	С				
		FISH OIL	(FISH OIL)	С				
		FENOFIBI	RATE 9FENOFIBRATE)	С				
		ALLOPUR	INOL	С				
		THYROID	(THYROID)	С				
Defaecation urgency								
Heart rate irregular								
Lower gastrointestinal h	naemorrhage							
Peritonitis								



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
09-Jul-2013	9278845	NON-EXPEDITED			US-PFIZER INC-2013141522	42 YR	Male	USA
Preferred Term		Product		Role Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	<u>ıfacturer</u>
Drug hypersensitivity		Neurontin		S	UNK		PFIZE	ΞR
Urticaria		AMOXICI	LLIN	S	UNK		PFIZE	ΞR
		ERYTHRO	OMYCIN	S	UNK			
		AMOXIL		S	UNK			
		MOTRIN		S	UNK			
		ATCH		S	UNK			
		KEFLEX		S	UNK			



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	<b>Country</b>
17-Jul-2013	9364414	EXPEDITED (15-DAY)	Υ	НО	QSC-2013-0116	41 YR	Female	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duration</u>	<u>n Manı</u>	<u>ufacturer</u>
Colitis ischaemic		H.P. ACTH	IAR GEL	S				
Enterocolitis infectious		LISINOPR	IL (LISINOPRIL)	С				
Rectal haemorrhage		AMLODIPI	NE (AMLODIPINE)	С				
Hypernatraemia		CALCIUM ACETATE	ACETATE (CALCIUM )	С				
Hypokalaemia		CLONIDIN	E (CLONIDINE)	С				
Hypoalbuminaemia		HYDRALA	ZINE (HYDRALAZINE)	С				
Anxiety		LACTULOS	SE (LACTULOSE)	С				
Blood pressure increas	sed	METOPRO	DLOL (METOPROLOL)	С				
Local swelling		FISH OIL (	FISH OIL)	С				
Asthenia		PANTOPR (PANTOPF		С				
Abdominal pain								
Anaemia								
Diverticulitis								
Hypomagnesaemia								
Iron deficiency anaemi	а							
Malaise								
Renal failure acute								



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcom</u>	<u>es</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
19-Jul-2013	9355528	EXPEDITED (15-DAY)		HO,OT		US-SANOFI- AVENTIS-2013SA06082 9	47 YR	Male	USA
Preferred Term		Product		Role	Route	Dosage Text	<u>Duratio</u>	<u>n Man</u>	<u>ufacturer</u>
Multiple sclerosis relap	se	AUBAGIO	)	S	ORAL				
Blood potassium abnor	rmal	CORTICO	TROPIN	S					
Fall		AMINOPY	'RIDINE, 2-	S	ORAL				
Insomnia		AMINOPY	'RIDINE, 2-	S	ORAL				
Asthenia		TESTOST	TERONE	С					
Balance disorder		OXYCOD	ONE HYDROCHLORIDE	С					
Constipation		OXYCON	TIN	С					
Transient ischaemic at	tack	XANAX		С					
		ADDERAI	LL	С					
		CLARITIN	I	С					
		PRENATA	AL .	С					
		COSAMIN	١	С					
		ZOFRAN		С					
		ABILIFY		С					
		ACETYLS CARISOF	SALICYLIC ACID/ PRODOL	С					
FDA Received Date	Case #	Case Type	Health Professional	Outcom	<u>es</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
22-Jul-2013	9416928	EXPEDITED (15-DAY)	Υ	НО		QSC-2013-0222	49 YR	Female	USA
Preferred Term		Product		<u>Role</u>	Route	Dosage Text	<u>Duratio</u>	<u>n Man</u>	<u>ufacturer</u>
Coronary artery diseas	e	H.P. ACT	HAR GEL	S					
Fatigue			ORTISONE CORTISONE)	С					
Hypertension									
Pain in extremity									
Pain in jaw									
Tachycardia									



Detailed	Re	port
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FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
22-Jul-2013	9416932	EXPEDITED (15-DAY)	Υ	НО	QSC-2013-0219	41 YR	Female	USA
Preferred Term		Product		Role Route	Dosage Text	Duratio	<u>n Manu</u>	<u>ıfacturer</u>
Cardiomyopathy		H.P. ACT	HAR GEL	S	80 units, biw			
Mitral valve incompete	nce	NORTRIF (NORTRI	PTYLINE PTYLINE)	С				
Pulmonary hypertension	on	OMEPRA	ZOLE (OMEPRAZOLE)	С				
Atelectasis		SINGULA	IR	С				
Dyspnoea		NASONE FUROATI	X (MOMETASONE E)	С				
Carditis		MOBIC (N	MELOXICAM)	С				
Headache		ALBUTEF	ROL (SALBUTAMOL)	С				
Leukocytosis		MULTIVIT	TAMIN (VITAMINS NOS)	С				
Anxiety								
Aortic valve incompete	ence							
Cardiac failure conges	tive							
Hypertension								
Off label use								
Pleural effusion								
Sinus tachycardia								
Systolic dysfunction								
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
25-Jul-2013	9422408	DIRECT	Υ	ОТ			Female	USA
Preferred Term		Product		Role Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	<u>ıfacturer</u>
Swelling face		ACTHAR		S SUBCUTANEOUS	daily for 5 days		QUES	STCOR



Hypoaesthesia oral Somnolence

## FDA Adverse Event Reporting System (FAERS) Freedom of Information Act (FOIA) Detailed Report

FDA Received Date	Case #	Case Type	<b>Health Professional</b>	Outcomes	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
06-Aug-2013	9447412	EXPEDITED (15-DAY)	Υ	HO,OT	QSC-2013-0235	70 YR	Female	USA

**Preferred Term Dosage Text Product** Role Route **Duration Manufacturer** SUBCUTANEOUS DOSAGE H. P. ACTHAR GEL Adenocarcinoma pancreas ADMINISTERED **EVERY TWO WEEKS** FOR SIX MONTHS. Dysgeusia Fatigue Hypoaesthesia



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
08-Aug-2013	9454717	EXPEDITED (15-DAY)	Υ	DE,HO	QSC-2013-0245	65 YR	Female	USA
Preferred Term		Product		Role Route	Dosage Text	Duratio	on <u>Manu</u>	<u>facturer</u>
Septic shock		H.P. ACTI	HAR GEL	S SUBCUTANEOUS	80 units			
Skin mass		ALLOPUR	INOL	С				
Haemoglobin decrease	ed	BYSTOLIC		С				
Immunosuppression		CALCITRI	OL	С				
Blood glucose increase	ed	CALCIUM VITAMIN I	CARBONATE W/ D NOS	С				
Blood potassium decre	ased	DOXAZOS	SIN	С				
		OMEPRAZ	ZOLE	С				
		PROCRIT		С				
		SPIRONO	LACTONE	С				
		SYNTHRO	DID	С				
Blood chloride decreas	ed							
Blood creatinine increa	sed							
Haematocrit decreased	Į							
Hypotension								
Impaired healing								
Local swelling								



				otanoa rtoport				
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
14-Aug-2013	9468659	EXPEDITED (15-D	OAY) Y	НО	QSC-2013-0257		Male	USA
Preferred Term		<u>Pr</u>	<u>oduct</u>	Role Route	Dosage Text	Duratio	on <u>Man</u>	ufacturer
Atrial fibrillation		H.	P. ACTHAL GEL	S SUBCUTANEOUS	80 UNITS, BID, SUBCUTANEOUS			
Heart rate increased		UL	TRAM	С				
		TU	JMS (CALCIUM CARBONATE)	С				
			DRVASC (AMLODIPINE ESILATE)	С				
		CF	RESTOR	С				
		CC	DLCRYS (COLCHICINE)	С				
		CA	ALCITROL (CALCITRIOL)	С				
		AL	LOPURINOL	С				
Chest pain								
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
04-Sep-2013	9496404	EXPEDITED (15-D	DAY)	ОТ	VE- JNJFOC-20130815817		Male	VEN
Preferred Term		<u>Pr</u>	<u>oduct</u>	Role Route	Dosage Text	Duratio	on <u>Man</u>	ufacturer
Encephalopathy		TC	PIRAMATE	S ORAL				
Multiple-drug resistance	е	VA	LPROIC ACID	S UNKNOWN				
Off label use		NI	TRAZEPAM	S UNKNOWN				
		LE	VETIRACETAM	S UNKNOWN				
		AC	CTH	S UNKNOWN				



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
04-Sep-2013	9499889	DIRECT	Υ	OT		55 YR	Female	USA
Preferred Term			<u>Product</u>	Role Route	Dosage Text	<u>Duration</u> <u>Manufacture</u>		<u>facturer</u>
Tremor			ACTHAR	S INTRAMUSCULAR	(1 ml)		QUES	STCOR
Feeling abnormal			ACIDOPHILUS	С				
Heart rate increased			FOLIC ACID	С				
			XANAX	С				
			AZMACORT	С				
			IBUPROFEN	С				
			NAPROSYN	С				
			SYNTHROID	С				
			RITUXAN	С				
			LANOXIN	С				
			VIT D 3	С				
			VIT B	С				
			VIT E	С				
			IMITREX	С				
			RESTASIS	С				
Asthenia								
Blood pressure increas	sed							
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
10-Sep-2013	9516520	DIRECT		DE		69 YR	Female	USA
Preferred Term			<u>Product</u>	Role Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	<u>facturer</u>
Sepsis			ACTHAR HP	S SUBCUTANEOUS			QUES	STCOR
Cellulitis								



Detailed	Report
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FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	<b>Country</b>
11-Sep-2013	9475464	EXPEDITED (15-DAY)	Υ	НО	QSC-2013-0274	60 YR	Male	USA
Preferred Term		Product		Role Route	<u>Dosage Text</u>	<u>Duratio</u>	n <u>Man</u>	<u>ufacturer</u>
Faeces discoloured		,	HAR GEL CORTICOTROPIC IE) GEL FOR INJECTION,	S SUBCUTANEOUS	80 units, biw, Subcutaneous			
		HUMALO	G (INSULIN LISPRO)	С				
		TRAMAD	OL (TRAMADOL)	С				
		CARDIAZ	EM (DILTIAZEM)	С				
		HYDROC MILLIGRA (COLESE	L (COLESEVELAM HLORIDE) (625 AM, TABLET) VELAM HLORIDE)	С				
		LISINOPF	RIL (LISINOPRIL)	С				
		DHEA (PR	RASTERONE)	С				
		(CALCIUN	I WITH VITAMIN D M CARBONATE, LCIFEROL)	С				
		PREDNIS	ONE (PREDNISONE)	С				
		NEXIUM ( MAGNES	(ESOMEPRAZOLE IUM)	С				
Abdominal pain								
Gastrointestinal haemo	orrhage							
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
12-Sep-2013	9523789	DIRECT	Υ	НО		82 YR	Female	USA
Preferred Term		Product		Role Route	Dosage Text	<u>Duratio</u>	<u>n Man</u>	<u>ufacturer</u>
Deep vein thrombosis		ACTHAR		S INTRAMUSCULAR			QUE	STCOR



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	Outcon	nes	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
16-Sep-2013	8337702	NON-EXPEDITED		ОТ		CN- JNJFOC-20120104193		Unknown	CHN
Preferred Term		<u>Prod</u>	<u>uct</u>	Role	Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	<u>facturer</u>
Infantile spasms		TOPI	RAMATE	S	ORAL				
Refusal of treatment by	patient	ACTI	1	S	INTRAVENOUS				
		ACTI	1	S	INTRAVENOUS				
		IVIG		S	INTRAVENOUS				
		VITA	MIN B6	S	INTRAVENOUS				
		PREI	ONISONE	S	ORAL				
FDA Received Date	Case #	Case Type	Health Professional	Outcor	nes	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
16-Sep-2013	9529176	NON-EXPEDITED		НО		US-LUNDBECK- DKLU1089070	4 YR	Female	USA
Preferred Term		Prod	<u>uct</u>	Role Route		Dosage Text	<u>Duration</u> <u>Manufacturer</u>		
Abdominal distension		Onfi		S				LUND	BECK
Lethargy		SABF	RIL (TABLET)	S				LUND	BECK
Constipation		HP A	CTHAR	S	OTHER				
		HP A	CTHAR	S	OTHER	30 UNITS DAILY			
		LEVE	TIRACETAM	S					
		RANI	TIDINE HYDROCHLORIDE	С					
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	Outcor	nes	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
16-Sep-2013	9530712	DIRECT		ОТ			24 YR	Female	USA
Preferred Term		<u>Prod</u>	<u>uct</u>	Role	Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	facturer
Abdominal pain upper		ACTI	HAR	S	SUBCUTANEOUS	80 units daily x5 days SQ	5 DAY	QUES	STCOR
Abdominal discomfort									



FDA Received Date	Case #	Case Type	<u>Health Professional</u>	Outco	<u>mes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
17-Sep-2013	9528060	EXPEDITED (	15-DAY)	ОТ		CN- JNJFOC-20130907083		Unknown	CHN
Preferred Term			Product	Rol	e Route	Dosage Text	<u>Duratio</u>	on <u>Manu</u>	<u>facturer</u>
Developmental delay			TOPIRAMATE	S	ORAL	25 to 200 mg per day (3.57 to 20 mg/kg/day			
Drug ineffective			TOPIRAMATE	S	ORAL	0.5 to 1 mg/kg/day			
Convulsion			VALPROIC ACID	S	UNKNOWN				
Off label use			CLONAZEPAM	S	UNKNOWN				
Decreased appetite			NITRAZEPAM	S	UNKNOWN				
Somnolence			PHENYTOIN	S	UNKNOWN				
Hypohidrosis			CARBAMAZEPINE	S	UNKNOWN				
Pyrexia			LEVETIRACETAM	S	UNKNOWN				
Fatigue			ACTH		UNKNOWN				
Insomnia			PREDNISONE		UNKNOWN				
Temperature intolerance	e								
Vomiting									
FDA Received Date	Case #	Case Type	Health Professional	Outco	<u>mes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
23-Sep-2013	9552144	DIRECT	Υ				63 YR	Female	USA
Preferred Term			Product	Rol	e Route	Dosage Text	Duratio	on <u>Manu</u>	<u>facturer</u>
Musculoskeletal stiffnes	ss		ACTHAR	S					
Pain									
FDA Received Date	Case #	Case Type	Health Professional	Outco	<u>mes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
26-Sep-2013	9562363	DIRECT	Υ				69 YR	Female	USA
Preferred Term			Product	Rol	e Route	Dosage Text	Duratio	o <u>n M</u> anu	facturer
Incorrect dose administ	tered		ACTHAR	s	INTRAMUSCULAR	1ml twice weekly, im.	1 MTH		<u></u>
Underdose	<del>-</del>			2		,,			



FDA Received Date	Case #	Case Type		<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
27-Sep-2013	9570828	EXPEDITED (	15-DAY)	Υ	DE,HO	QSC-2013-0327	42 YR	Female	USA
Preferred Term			<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n</u> <u>Manuf</u>	acturer_
Cerebrovascular accide	ent		H.P. ACTH	AR GEL	S SUBCUTANEOUS	80 UNITS, QW, SUBCUTANEOUS			
			CELLCEPT MOFETIL)	( MYCOPHENOLATE	С				
			PREDNISC	NE ( PREDNISONE)	С				
			SYNTHROI SODIUM)	D ( LEVOTHYROXINE	С				
			LASIX (FU	ROSEMIDE)	С				
FDA Received Date	Case #	Case Type		Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
02-Oct-2013	9586029	DIRECT		Υ			59 YR	Female	USA
Preferred Term			<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Manuf</u>	<u>acturer</u>
Oedema			ACTHAR		S	40 U	2 MTH		
FDA Received Date	Case #	Case Type		Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
03-Oct-2013	9592560	DIRECT		Υ	НО		72 YR	Male	USA
Preferred Term			<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n</u> <u>Manuf</u>	<u>acturer</u>
Blood glucose increase	ed		ACTHAR		S			QUES <sup>1</sup>	TCOR



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
04-Oct-2013	9596839	EXPEDITED (15-DAY)		ОТ	US-US-EMD SERONO, INC7227598		Female	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	n <u>Manı</u>	<u>ufacturer</u>
Blood glucose increase	ed	REBIF		S SUBCUTANEOUS				
Swelling face		REBIF		S SUBCUTANEOUS				
Tremor		ACTHAR		S				
Injection site bruising								
Injection site scar								
Multiple sclerosis relap	se							
FDA Received Date	Case #	Case Type	<u>Health Professional</u>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
07-Oct-2013	9607583	DIRECT		HO,DS,LT		66 YR	Female	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Manı</u>	<u>ufacturer</u>
Dyspnoea		ACTHAR		S INTRAMUSCULAR	1 mL two times a week inject,, Into the muscle		QUES	STCOR
Alopecia								
Blood calcium abnorma	al							
Blood cholesterol incre	ased							
Blood magnesium abno	ormal							
Blood potassium abnor	mal							
Blood pressure abnorm	nal							
Cataract								
Deafness								
Diabetes mellitus								
Immune system disorde	er							
Muscular weakness								
Nail disorder								
Rotator cuff syndrome								
Skin wrinkling								



Detailed	Re	port
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FDA Received Date	Case #	Case Type	Health Professional	Outcome	<u>es</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
10-Oct-2013	9615343	DIRECT	Υ	ОТ			45 YR	Female	USA
Preferred Term Drug ineffective			Product ACTHAR GEL 80 UNITS/ML	Role S	<u>Route</u>	Dosage Text 80 units, twice a week, subcutaneous	Duratio		facturer STCOR
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	Outcome	<u>es</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
10-Oct-2013	9616604	DIRECT	Υ	НО			58 YR	Male	USA
Preferred Term Ulcer haemorrhage Helicobacter infection			Product ACTHAR	Role S	Route SUBCUTANEOUS	<u>Dosage Text</u>	Duratio	on <u>Manu</u>	<u>facturer</u>
FDA Received Date	Case #	Case Type	Health Professional	Outcome	<u>!S</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
14-Oct-2013	9109038	EXPEDITED (	15-DAY)	НО		US-UCBSA-078731	4 YR	Female	USA
Preferred Term Constipation			Product LEVETIRACETAM	Role S	Route	<u>Dosage Text</u>	<u>Duratio</u>	on <u>Manu</u>	<u>facturer</u>
Abdominal distension			H. P. ACTHAR GEL	-	SUBCUTANEOUS				
Lethargy			H. P. ACTHAR GEL	S	SUBCUTANEOUS	TAPERED DAILY DOSE : 30 UNITS			
			VIGABATRIN	S					
			CLOBAZAM	S					
			RANITIDINE HYDROCHLORIDE	С					



FDA Received Date	Case #	Case Type	Health Professional	Outcor	<u>nes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
15-Oct-2013	8473424	EXPEDITED (15-DAY)	Υ	DE,HO	,ОТ	QSC-2012-0015	56 YR	Male	USA
Preferred Term		<u>Product</u>		Role	Route	Dosage Text	<u>Duratio</u>	<u>n Manuf</u>	<u>acturer</u>
Asthenia		H.P. ACTH	AR	S	SUBCUTANEOUS	80 units, biw, Subcutaneous			
		PROGRAF		S	ORAL	500 mg, bid, oral			
Acute respiratory distre	ss syndrome	CELLCEPT		S	ORAL				
		SIMVASTA	TIN	С					
Pneumonia		LOVAZA		С					
Fungal infection									
Incorrect drug administ	ration duration								
Sensation of heaviness	•								
Skin lesion									
Weight decreased									



			ט	etailed Report				
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
15-Oct-2013	9630650	EXPEDITED (15-DAY)	Υ	НО	QSC-2013-0339	54 YR	Female	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	facturer
Malignant hypertension		H.P. ACTH	AR	S SUBCUTANEOUS	40 units, qw, Subcutaneous			
Cardiac failure congest	ive	LASIX (FU	ROSEMIDE)	С				
Anaemia of chronic dise	ease	POTASSIÙ	LOSARTAN IM) (50 MILLIGRAM, (LOSARTAN IM)	С				
Treatment noncompliar	nce	CARDURA MESILATE	(DOXAZOSIN	С				
Blood glucose increase	d	CARVEDIL	OL (CARVEDILOL)	С				
		LANTUS (I	NSULIN GLARGINE)	С				
		NOVOLOG	(INSULIN ASPART)	С				
		LIPITOR (A	ATORVASTIN CALCIUM)	С				
		NEXIUM I.	V.	С				
		VICTOZA (	LIRAGLUTIDE)	С				
Local swelling								
Pericardial effusion								
Renal failure acute								
FDA Received Date	Case #	Case Type	Health Professional	Outcomes	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
15-Oct-2013	9630656	EXPEDITED (15-DAY)	Υ	НО	QSC-2013-0362	18 YR	Male	USA

FDA Received Date	Case #	Case Type	Health Professional	Outcon	nes	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
15-Oct-2013	9630656	EXPEDITED (15-DAY)	Υ	НО		QSC-2013-0362	18 YR	Male	USA
Preferred Term		<u>Product</u>		Role	Route	Dosage Text	Duratio	on <u>Manu</u>	<u>facturer</u>
Pleural effusion		H.P. ACTI	HAR	S	SUBCUTANEOUS	80 units, biw, Subcutaneous			
Nephrotic syndrome		CYCLOSE	PORINE (CICLOSPORIN)	С					
Fluid overload									
Treatment failure									



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	<u>Country</u>
15-Oct-2013	9630665	EXPEDITED (15-DAY)	Υ	НО	QSC-2013-0363	60 YR	Female	USA
Preferred Term Ischaemic stroke		Product H.P. ACTI	HAR	Role Route S SUBCUTANEOUS	Dosage Text 40 units, biw, Subcutaneous	<u>Duratio</u>	<u>n Manu</u>	<u>ıfacturer</u>
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
21-Oct-2013	9640371	EXPEDITED (15-DAY)	Υ	НО	QSC-2013-0361	39 YR	Female	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n</u> <u>Manu</u>	<u>ifacturer</u>
Intracranial pressure in	ncreased	,	HAR GEL CORTICOTROPIC E) GEL FOR INJECTION,	S SUBCUTANEOUS				
Papilloedema		LISINOPR	RIL (LISINOPRIL)	С				
Paraesthesia		LISINOPR	RIL (LISINOPRIL)	С				
Headache		IBUPROF	EN (IBUPROFEN)	С				
Blood pressure increas	sed	AVONEX	(INTERFERON BETA-1A)	С				
Asthenopia								
Epistaxis								
Hyperacusis								
Musculoskeletal stiffne	ss							
Photopsia								
Visual impairment								
Weight increased								
FDA Received Date	Case #	Case Type	Health Professional	Outcomes	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
28-Oct-2013	9651025	DIRECT	Υ	НО		81 YR	Male	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n</u> <u>Manu</u>	<u>ifacturer</u>
Hypersensitivity		ACTHAR	HP	S SUBCUTANEOUS			QUES	STCOR



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	Age Sex	<u>Country</u>
05-Nov-2013	9671172	DIRECT		HO,LT		61 YR Mal	e USA
Preferred Term Lethargy Blood pressure decrea Body temperature incre Dyspnoea Feeling abnormal Hyperhidrosis		<b>Prod</b> ACTH		<u>Role Route</u> S	<u>Dosage Text</u>	<u>Duration</u>	Manufacturer QUESTCOR
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	Age Sex	Country
14-Nov-2013	9640359	EXPEDITED (15-DA)	() Y	НО	QSC-2013-0360	65 YR Mal	e USA
Preferred Term Renal failure chronic		(ADR	ACTHAR GEL ENOCORTICOTROPIC MONE) GEL FOR INJECTION,	Role Route S SUBCUTANEOUS	Dosage Text 80 units, biw, subcutaneous	<u>Duration</u>	<u>Manufacturer</u>
Fluid overload			AMUNE (SIROLIMUS)	С			
Postoperative ileus			CEPT (MYCOPHENOLATE ETIL) TABLET	С			
Dialysis		METI	HIMAZOLE (THIAMAZOLE)	С			
Weight increased			DDIPINE (AMLODIPINE)	С			
		ASPI ACID	RIN (ACETYLSALICYLIC )	С			
			RVASTATIN RVASTATIN)	С			
			CIUM CARBONATE (CALCIUM BONATE)	С			
		CAR	/EDILOL (CARVEDILOL)	С			
		DOC SODI	USATE SODIUM (DOCUSATE UM)	С			
		FLUT	ICASONE )FLUTICASONE)	С			
			TAB (HYDROCODONE RTRATE, PARACETAMOL)	С			



#### FDA Adverse Event Reporting System (FAERS)

#### Freedom of Information Act (FOIA)

Preferred Term			<u>Product</u>	Role Route	Dosage Text	<u>Duration</u>	<u>Manufacturer</u>
			LANTUS )INSULIN GLARGINE)	С			
			NEPHRON FA (ASCORBIC ACID, BIOTIN, CALCIUM PANTOTHENATE, CYANOCOBALAMIN, DOCUSATE SODIUM, FERROUS FUMARATE, FOLIC, NICOTINAMIDE, PYRIDOXINE, HYDROCHLORIDE, RIBOFLAVIN, THIAMINE HYDROCHLORIDE)	С			
			ESOMEPRAZOLE (ESOMEPRAZOLE)	С			
			TACROLIMUS (TACROLIMUS)	С			
			MIRALAX	С			
			FLOMAX (TAMSULOSIN HYDROCHLORIDE)	С			
Abdominal wall haemo Dyspnoea Fluid retention Oedema	rrhage						
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	Age Se	<u>Country</u>
14-Nov-2013	9690612	DIRECT	Υ	ОТ		53 YR Fe	emale USA
Preferred Term			<u>Product</u>	Role Route	Dosage Text	<u>Duration</u>	<u>Manufacturer</u>
Migraine			ACTHAR	S SUBCUTANEOUS	100 units QD SUBCUTANEOUS		
Palpitations			BACLOFEN	С			
			ASA	С			
			PERCOCET	С			
Flushing							



FDA Received Date	Case #	Case Type	<u>Health Professional</u>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
15-Nov-2013	9692621	DIRECT		ОТ		68 YR	Female	USA
Preferred Term Joint swelling		Product ACTHAR	HP	Role Route S	<u>Dosage Text</u> Injectable, Diagnosis: 340	Duratio	on <u>Manu</u> t	f <u>acturer</u>
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
25-Nov-2013	9718328	EXPEDITED (15-DAY)	Υ	НО	QSC-2013-0421		Female	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	Duratio	on <u>Manu</u>	<u>facturer</u>
Pulmonary embolism		H P ACTI	HAR	S				



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	<b>Country</b>
02-Dec-2013	9722567	EXPEDITED (15-DAY)		HO,OT	US-UCBSA-104409		Female	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	<u>facturer</u>
Abnormal behaviour		VIMPAT		S				
Convulsion		KEPPRA		S				
Psychotic disorder		PREDNIS	ONE	S				
Sepsis		VIGABATI	RIN	S				
Hypersomnia		CLONAZE	PAM	S				
Walking disability		TOPOMAX	X	S				
Muscle atrophy		ZONEGRA	AN	S				
Emotional disorder		LAMICTAI	_	S				
Cognitive disorder		BANZEL		S				
Sleep terror		ACTH		S				
Asthenia								
Crying								
Decreased appetite								
Drug ineffective								
Fall								
Psychomotor skills imp	aired							
Screaming								
Sleep disorder								
Status epilepticus								
Weight increased								
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
11-Dec-2013	9752315	DIRECT	Υ	ОТ		69 YR	Female	USA
Preferred Term  Dyspnoea		<u>Product</u> ACTHAR		Role Route S SUBCUTANEOUS	<u>Dosage Text</u>	Duratio		<u>ifacturer</u> STCOR
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country



#### FDA Adverse Event Reporting System (FAERS)

#### Freedom of Information Act (FOIA)

Preferred Term	Product	Role Route	Dosage Text	<u>Duration</u>	<u>Manufacturer</u>
Orthostatic hypotension	H.P. ACTHAR GEL (ADRENOCORTICOTROPIC HORMONE) GEL FOR INJECTION, 80U/ML	S	60 units, BIW	<u> Duration</u>	<u>manuactarer</u>
Vomiting	PREDNISONE	С			
Postural orthostatic tachycardia syndrome	MARINOL	С			
Gastrooesophageal reflux disease	LANTUS (INSULIN GLARGINE)	С			
Gastrointestinal disorder	ZOFRAN (ONDANSETRON)	С			
	PHENERGAN (PROMETHAZINE)	С			
	DIAMOX (ACETAZOLAMIDE)	С			
	CALCIUM & VITAMIN D (CALCIUM, COLECALCIFEROL)	С			
	FLEXERIL (CYCLOBENZAPRINE HYDROCHLORIDE)	С			
	BENTYL (DICYCLOVERINE HYDROCHLORIDE)	С			
	VITAMIN D2 (ERGOCALCIFEROL)	С			
	NOVOLOG (INSULIN ASPART)	С			
	ATIVAN (LORAZEPAM)	С			
	PROTONIX (PANTOPRAZOLE SODIUM SESQUIHYDRATE)	С			
	CARAFATE (SUCRALFATE) TABLET, 1G	С			
	IMITREX (SUMATRIPTAN)	С			
	VENTOLIN (SALBUTAMOL)	С			
	ALBUTEROL (SALBUTAMOL SULFATE)	С			
	DONNATAL (ATROPINE SULFATE, HYOSCINE HYDROBROMIDE, HYOSCYAMINE SULFATE, PHENOBARBITAL)	С			
	ZYRTEC (CETIRIZINE HYDROCHLORIDE)	С			
	EPIPEN (EPINEPHRINE)	С			



Preferred Term	<u>Product</u>	Role Route	<b>Dosage Text</b>	<u>Duration</u>	<u>Manufacturer</u>
	GLUCAGON (GLUCAGON)	С			
	PROAMATINE (MIDODRINE	С			

HYDROCHLORIDE)
LISINOPRIL (LISINOPRIL)
LASIX (FLUROSEMIDE)
C

Adrenal disorder

Autonomic nervous system imbalance

Diarrhoea

Nausea

FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
16-Dec-2013	9766353	DIRECT	Υ	ОТ			Female	USA
Preferred Term		Proc	luct	Role Route	Dosage Text	<u>Duration</u>	<u>Manufa</u>	acturer
Mood altered		ACT	HAR GEL	S	8 units twice weekly, IM		QUEST	COR

Weight increased

Insomnia



				ctanea report				
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
23-Dec-2013	9781031	DIRECT		HO,DS		49 YR	Female	USA
Preferred Term			<u>Product</u>	Role Route	<u>Dosage Text</u>	Duration		<u>ıfacturer</u>
			H.P. ACTHAR	S	Given into/inder the skin		QUES	STCOR
Amnesia								
Asthenia								
Blood glucose increase	ed							
Blood pressure increas	sed							
Dehydration								
Diarrhoea								
Disturbance in attention	n							
Dizziness								
Dry eye								
Dry mouth								
Eye irritation								
Fatigue								
Feeling abnormal								
Heart rate increased								
Hyperhidrosis								
Insomnia								
Mood swings								
Myositis								
Nausea								
Photosensitivity reaction								
Psychomotor hyperacti	ivity							
Thirst								
Tremor								
Vision blurred								

Weight fluctuation



FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
31-Dec-2013	9792144	DIRECT	Υ	ОТ		57 YR	Female	USA
Preferred Term  Drug ineffective  Kidney transplant rejection	ition		Product ACTHAR	Role Route S SUBCUTANEOUS	<u>Dosage Text</u>	<b>Duratio</b> 5 MTH		facturer TCOR
FDA Received Date	Case #	Case Type	<u>Health Professional</u>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
06-Jan-2014	9802918	DIRECT	Υ	ОТ		72 YR	Female	USA
Preferred Term  Abdominal distension Local swelling			Product ACTHAR GEL	Role Route S SUBCUTANEOUS	Dosage Text 80units 2 x weekly Subcutaneous	<u>Duratio</u>		facturer STCOR
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
13-Jan-2014	9818043	DIRECT	Υ			51 YR	Female	USA
Preferred Term Drug ineffective			Product H.P. ACTHAR	Role Route S SUBCUTANEOUS	Dosage Text 80 units qd x5ds sc	<u>Duratio</u> 5 DAY		facturer TCOR



Pyrexia

## FDA Adverse Event Reporting System (FAERS) Freedom of Information Act (FOIA) Detailed Report

# <u>Ca</u>	ase Type	<u>Health Professional</u>	Outcom	<u>nes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
314 EX	XPEDITED (1	5-DAY)	НО		US-LUNDBECK- DKLU1093316	281 DAY	/ Male	USA
		Product	Role	Route	Dosage Text	<u>Duratio</u>	<u>n</u>	<u>Manufacturer</u>
		Sabril (For Oral Solution)	S	ORAL				LUNDBECK
		Sabril (For Oral Solution)	S	ORAL				LUNDBECK
		Sabril (For Oral Solution)	S	ORAL				
naging abnorma	al	Sabril (For Oral Solution)	S	ORAL				
		Sabril (For Oral Solution)	S	ORAL				
		Sabril (For Oral Solution)	S	ORAL				
		Sabril (For Oral Solution)	S	ORAL				
		ACTH	S					
		ACTHAR HP	С					
		KEPPRA	С					
		PRILOSEC	С					
		TYLENOL	С	ORAL				
		D-VI-SOL	С	ORAL				
		MIRALAX	С		1 TSP			
<u>#</u> <u>Ca</u>	ase Type	Health Professional	Outcom	<u>nes</u>	Manufacturer Control #	<u>Age</u>	Sex	Country
593 DII	RECT		ОТ			40 YR	Fema	le USA
		Product	Role	Route	Dosage Text	Duration	<u>n</u>	<u>Manufacturer</u>
		ACTHAR	S			3 MTH		
	314 EX	# Case Type	Product Sabril (For Oral Solution) ACTH ACTHAR HP KEPPRA PRILOSEC TYLENOL D-VI-SOL MIRALAX  ## Case Type Health Professional 593 DIRECT  Product	Product Sabril (For Oral Solution) SCACTH ACTHAR HP CCKEPPRA CPRILOSEC TYLENOL CTYLENOL CD-VI-SOL MIRALAX C  # Case Type Health Professional Outcom SOLUTION Froduct Role	Product Sabril (For Oral Solution) SABRAL SABRIL (FOR ORAL SABRIL (FO	Barrian	B14 EXPEDITED (15-DAY)  HO  US-LUNDBECK-DKLU1093316  Product Sabril (For Oral Solution) Sabril (For Or	B14 EXPEDITED (15-DAY)  HO  US-LUNDBECK-DKLU1093316  Product Sabril (For Oral Solution) Sabril (For Or



FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	Age Sex	Country
27-Jan-2014	9643254	EXPEDITED (15-DAY)	Υ	HO,OT	QSC-2013-0373	182 DAY Female	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duration</u> <u>Manu</u>	<u>ufacturer</u>
Cardiomyopathy		H.P.ACT	HAR	S	unk		
		VIGABA <sup>*</sup>	TRIN (VIGABATRIN)	С			
		DIFLUCA	AN (FLUCONAZOLE)	С			
		OMNICE	F (CEFDINIR)	С			
			(RANITIDINE CHLORIDE)	С			
		KLONOF (TABLET	PIN (CLONAZEPAM) 'S)	С			
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	Age Sex	Country
27-Jan-2014	9852357	EXPEDITED (15-DAY)	Υ	ОТ	QSC-2014-0040	Unknown	USA
Preferred Term		Product		Role Route	Dosage Text	<u>Duration</u> <u>Manu</u>	<u>ufacturer</u>
Brain abscess		(ADREN	THAR GEL OCORTICOTROPIC NE) GEL FOR INJECTION,	S			
			PT (MYCOPHENOLATE L) TABLET	S ORAL			
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	Age Sex	Country
27-Jan-2014	9852377	EXPEDITED (15-DAY)	Υ	НО	QSC-2013-0142	152 DAY Female	USA
Preferred Term		Product		Role Route	Dosage Text	<u>Duration</u> <u>Manu</u>	<u>ufacturer</u>
Medication error		H.P. AC	ΓHAR	S INTRAMUSCULAR	80 units, qd for 2 weeks, Intramuscular		
		PRILOSI	EC (OMEPRAZOLE)	С			
Hypertension							



De	etai	led	Re	poi	t
	04				

FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	<b>Country</b>	
27-Jan-2014	9852386	EXPEDITED (15-DAY)	Υ	НО	QSC-2012-0314		Male	USA	
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duration</u> <u>Manufacturer</u>			
Dyspnoea		H.P. ACTI	HAR GEL	S	80 Units, BIW				
Dyspnoea		DIVOAN (	VALSARTAN)	С					
		(BISOLICE FUMARA)	H (BISOPROLOL FE)	С					
		GLIMEPIF	RIDE (GLIMEPIRIDE)	С					
		WELLBUT HYDROCI	RIN (BUPROPION HLORIDE)	С					
Hypertension									
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	<b>Country</b>	
27-Jan-2014	9854850	EXPEDITED (15-DAY)	Υ	DE	QSC-2014-0029		Unknown	USA	
Preferred Term		<u>Product</u>		Role Route	Dosage Text	Duratio	<u>n Manı</u>	<u>ufacturer</u>	
Sepsis		H.P. ACTI	HAR GEL	S	unk				
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country	
06-Feb-2014	9876248	NON-EXPEDITED			US-ACORDA- ACO_36619_2013	40 YR	Female	USA	
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Manı</u>	<u>ufacturer</u>	
Swelling face		Ampyra		S UNKNOWN	10 mg, Q 12 hrs		ACO	RDA	
Local swelling		ACTHAR	HP	S UNKNOWN	UNK,UNK				
Erythema		Cyprohept	adine HCI	C UNKNOWN	4 mg, UNK				
Hot flush		Prometha	zine	C UNKNOWN	25 mg, UNK				
		Imitrex		C UNKNOWN	50 mg, UNK				
		Doxepin h	cl	C UNKNOWN	50 mg, UNK				
		Skelaxin		C UNKNOWN	800 mg, UNK				
		Topamax		C UNKNOWN	25 mg, UNK				
		Ultram		C UNKNOWN	50 mg, UNK				
		Gilenya		C UNKNOWN	UNK,UNK				

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FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
06-Feb-2014	9876467	NON-EXPEDITED			US-ACORDA- ACO_35266_2013		Female	USA
Preferred Term		Product		Role Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	<u>ıfacturer</u>
Dry mouth		Ampyra		S	10 mg, bid		ACOF	RDA
		ACTHAF	RHP	S SUBCUTANEOUS	80 ut/ml, qd			
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
07-Feb-2014	9885982	DIRECT	Υ			55 YR	Female	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	<u>ıfacturer</u>
Palpitations		ACTHAF	R GEL	S SUBCUTANEOUS	Inject 1ml under the skin every 2 weeks for 6 months, Expires in 28 days once opened;	6 MTH		
Dyspnoea								
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
07-Feb-2014	9886008	DIRECT	Υ			85 YR	Female	USA
Preferred Term		Product		Role Route	Dosage Text	Duratio	<u>n Manu</u>	<u>ıfacturer</u>
Local swelling		H.P. AC	THAR	S SUBCUTANEOUS	inject 80 units (1mL) under the skin twice weekly for 6 months.	6 MTH	QUES	STCOR
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
07-Feb-2014	9888860	EXPEDITED (15-DAY)	Υ	DE,HO	QSC-2014-0034	58 YR	Male	USA
Preferred Term		Product		Role Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	<u>ıfacturer</u>
Acute respiratory distre	ess syndrome	(ADREN HORMO	HAR GEL OCORITCOTROPIC NE) GETL FOR ON, 80 U/ML	S SUBCUTANEOUS	80 units, biw, Subcutaneous			
Respiratory failure		MEDRO (METHY	L 'LPREDNISOLONE)	С				
Shock		,	HFA (SALBUTAMOL	С				

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Preferred Term	Duadust	Dolo Doute	Deceme Toyt	Duration	Manufacturer
	Product	Role Route	<u>Dosage Text</u>	<u>Duration</u>	<u>Manufacturer</u>
Atrial fibrillation	PREDNISONE(PREDNISONE)	C			
	FUROSEMIDE(FUROSEMIDE)	C			
Anaemia	PROTONIX(PANTOPRAZOLE SODIUM SESQUIHYRATE)	С			
Bundle branch block left	ZYRTEC(CETIRIZINE HYDROCHLORIDE)	С			
	FERROUS SULFATE(FERROUS SULFATE)	С			
	ACETAMINOPHEN (PARACETEMAOL)	С			
	CULTURELLE(LACTOBACILLUS NOS)	С			
	FOLIC ACID (FOLIC ACID)	С			
	MULTIVITMAIN (VITAMINS NOS)	С			
	SUPER B COMPLEX (VITAMIN B COMPLEX)	С			
	VITAMIN D NOSE (VITAMIN D NOS)	С			
	ZITHROMAX(AZITHROMYCIN)	С			
	ADVAIR(FLUTICASONE PROPRIONATE, SALMETEROL XINAFOATE)	С			
	BENADRYL(DIPHENHYDRAMINE HYDROCHLORIDE)	С			
	PREVAGEN	С			
	ELOCON CREAM (MOMETASONE FUROATE CREAM)	С			
Extremity necrosis					
Lactic acidosis					
Pneumonia aspiration					
Respiratory arrest					
Skin necrosis					
Thrombocytopenia					



				• • • • • • • • • • • • • • • • • • • •					
FDA Received Date	Case #	Case Type	Health Professional	Outcor	nes	Manufacturer Control	<u>Age</u>	<u>Sex</u>	Country
13-Feb-2014	9667605	EXPEDITED (15-DAY)		НО		US-LUNDBECK- DKLU1094374	270 D	AY Female	USA
Preferred Term		<u>Product</u>		Role	Route	Dosage Text	<u>Durati</u>	on <u>Ma</u>	nufacturer
Gastroenteritis		Sabril (For	Oral Solution)	S	ORAL			LU	NDBECK
Hypertension		Sabril (For	Oral Solution)	S	ORAL			LU	NDBECK
Convulsion		Sabril (For	Oral Solution)	S	ORAL				
Haematuria		Sabril (For	Oral Solution)	S					
Tympanic membrane p	perforation	ACTH		S					
Irritability		TOPAMAX		С					
Somnolence		PRELONE		С					
Otitis media acute		NORVASC		С					
Upper respiratory tract	infection	PREDNISC	DLE	С					
		ZONEGRA	N	С					



			υ						
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	Outcor	<u>nes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
19-Feb-2014	9915629	DIRECT		DS			53 YR	Female	USA
Preferred Term			<u>Product</u>	Role	Route	<u>Dosage Text</u>	<u>Duratio</u>	<u>n Manı</u>	<u>ıfacturer</u>
Blood glucose increased	1		ACTHAR HP	S	SUBCUTANEOUS	400 usp units/5ml (80usp units/ml 1 shot daily for 5 days. 1mL once daily for 5 days subcutaneous injection	5 DAY	QUE	STCOR
			METOPROLOL SUCC ER	С					
Vision blurred			LOVAZA	С					
Weight increased			CITRACAL	С					
Confusional state			VIT D	С					
			CITOLPRAM	С					
			BACLFEN	С					
			VITAFUSION MULTI. VIT	С					
			VIT. C.	С					
			TECFIDER	С					
			FUROSEMIDE	С					
			FUROSEMIDE	С					
			VIT D3	С					
			BENEDRYL	С					
			VIPAFUSION MULTI-VITAMINS CHEWABLE 2 GUMMIES	С					
			RECLAST	С					
			NIACIN	С					
			VIT B COMPLETE WITH B12	С					
Back pain									
Muscle spasms									
Vaginal haemorrhage									

Visual impairment



**Detailed Report** 

FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
19-Feb-2014	9916030	EXPEDITED (15-DAY	') Y	НО	QSC-2014-0087	61 YR	Female	USA
Preferred Term		<u>Prod</u>	<u>ıct</u>	Role Route	Dosage Text	Duratio	<u>n Manı</u>	<u>ufacturer</u>
Acute myocardial infaro	ction	(ADR	ACTHAR GEL ENOCORTICOTROPIC MONE) GEL FOR INJECTION, ML	S	UNK			
Anaemia								
Asthenia								
Herpes zoster								
Pneumonia bacterial								
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
28-Feb-2014	9959411	DIRECT		НО		75 YR	Female	USA
Preferred Term		Produ	<u>ıct</u>	Role Route	Dosage Text	<u>Duratio</u>	n <u>Manı</u>	<u>ufacturer</u>
Local swelling			AR GEL HP80UNIT/ML 5ML JESTCOR	S SUBCUTANEOUS	inject 1 ml (80 units) subcutaneously twice a week for 12 weeks.	12 WEE	K QUES	STCOR
Blood pressure increas	sed							
Dizziness								
Headache								
Hypoaesthesia								
Paraesthesia oral								
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
28-Feb-2014	9959457	DIRECT				60 YR	Female	USA
Preferred Term		Produ	<u>ıct</u>	Role Route	Dosage Text	<u>Duratio</u>	<u>n Manı</u>	<u>ufacturer</u>
Speech disorder			AR GEL HP80UNIT/ML 5ML JESTCOR PHARM.	S SUBCUTANEOUS	subcutaneously twice a week for 6 chronic membranous month		QUES	STCOR
Arthralgia								
Pain in extremity								

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Preferred Term		<u>Product</u>		Role Route	Dosage Text	Duration	<u>n Manufa</u>	<u>acturer</u>
04-Mar-2014	9971333	EXPEDITED (15-DAY)	Υ	ОТ	QSC-2014-0112	49 YR	Female	USA
FDA Received Date	Case #	Case Type	<u>Health Professional</u>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country

04-Mar-2014	9971333	EXPEDITED	(15-DAY)	Υ	ОТ		QSC-2014-0112	49 YR	Female		USA
Preferred Term			<u>Product</u>		<u>B</u>	Role Route	Dosage Text	<u>Duratio</u>	<u>n</u> <u>M</u>	anufact	<u>turer</u>
			,	ORTICOTROPIC ), GEL FOR	S	SUBCUTANEOUS					
Atrial fibrillation			CANDESAF	RTAN (CANDESARTAN)	C	;					
			FISH OIL (F	FISH OIL)	C	;					
			NIACIN (NI	COTINIC ACID)	C	;					
			ALLEGRA		C	;					
Oedema											
FDA Received Date	Case #	Case Type		Health Professional	Out	<u>comes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>		Country
05-Mar-2014	9971472	DIRECT						422 YR	Female		USA
Preferred Term			<u>Product</u>		<u> </u>	Role Route	Dosage Text	Duration	<u>n M</u>	anufact	<u>turer</u>
Insomnia			H.P. ACTH/	AR	S	SUBCUTANEOUS	80 ML once daily Given into/Under the skin		Q	UESTC	OR
Abdominal distansion											

Abdominal distension Dyspnoea

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FDA Received Date	Case #	Case Type	Health Professional	Outcon	nes	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
07-Mar-2014	9983447	EXPEDITED (15-DAY)		HO,OT		US-LUNDBECK- DKLU1097930	1 YR	Male	USA
Preferred Term		<u>Product</u>		Role	Route	Dosage Text	<u>Duratio</u>	on <u>M</u>	lanufacturer
Hypertension		Sabril (For	Oral Solution)	S	ORAL			L	UNDBECK
Renal disorder		Sabril (For	Oral Solution)	S	ORAL			L	UNDBECK
Gastrointestinal infection	on	Sabril (For	Oral Solution)	S	ORAL				
Convulsion		Sabril (For	Oral Solution)	S	ORAL				
Clumsiness		Sabril (For	Oral Solution)	S	ORAL				
Dizziness		Sabril (For	Oral Solution)	S	ORAL				
		ACTHAR		S					



Detailed	Rei	port
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FDA Received Date	Case #	Case Type	<u>Health Professional</u>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
07-Mar-2014	9994734	DIRECT	Υ	ОТ			Female	USA
Preferred Term			<u>Product</u>	Role Route	Dosage Text	<u>Duratio</u>	<u>n Manı</u>	<u>ıfacturer</u>
Adverse drug reaction			ACTHAR	S	previous use unknown, unknown, unknown		QUE	STCOR
			ALPRAZOLAM	С				
			AZITHROMYCIN	С				
			CALCITRATE	С				
			CHLORDIAZEPOXIDE/AMIT	С				
			D-AMPHETAMINE SALTS	С				
			DICYCLOMINE	С				
			CIPROFLOXACIN	С				
			FLUCONAZOLE	С				
			LEVOFLOXACIN	С				
			LEVOTHYROXINE	С				
			METOCLOPRAMIDE	С				
			MONTELUKAST	С				
			MUPIROCIN 2% OINTIMENT	С				
			NITROFURANTOIN MON/MAC	С				
			OMEPRAZOLE	С				
			OMNARIS	С				
			ONDANSETRON ODT	С				
			PANTOPRAZOLE	С				
			PREDNISONE	С				
			PROMETHAZINE	С				
			PROPRANOLOL	С				
			SUPREP BOWEL PREP SOLUTION	С				
			TAMIFLU	С				
Product quality issue								



FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
10-Mar-2014	9999041	EXPEDITED (15-DAY)	Υ	НО	QSC-2014-0101	73 YR	Male	USA
Preferred Term Syncope Hiccups		Product H.P. ACTI	HAR GEL	Role Route S	<u>Dosage Text</u>	<u>Duratio</u>	n <u>Manı</u>	<u>ufacturer</u>
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
13-Mar-2014	10011636	DIRECT	Υ	ОТ		63 YR	Female	USA
Preferred Term Headache Abdominal pain Wheezing		<u>Product</u> ACTHAR I	H.P.	Role Route S SUBCUTANEOUS	Dosage Text 80units/ml Injectable Subcutaneous 057 twice weekly	<u>Duratio</u>	n Manu	<u>ıfacturer</u>
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
14-Mar-2014	10013004	NON-EXPEDITED		ОТ	US-PFIZER INC-2014071294	36 YR	Male	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Manı</u>	<u>ufacturer</u>
Fluid retention		Lyrica		S	UNK		PFIZI	ER
Dyspnoea		CYCLOSE	PORINE	S	UNK			
Muscle twitching		H.P ACTH	IAR GEL	S	UNK			
		H.P ACTH	IAR GEI	S				



**Detailed Report** 

FDA Received Date	Case #	Case Type		Health Professional	Outcom		Manufacturer Control #	Age	<u>Sex</u>	Country
14-Mar-2014	10025647	EXPEDITED (	15-DAY)	Υ	НО		QSC-2014-0133	55 YR	Male	USA
14 Mai 2014	10020047	LXI LBITLB (	10 5/11)	•	110		Q00 2014 0100	00 110	Walc	00/1
Preferred Term			<u>Product</u>		<u>Role</u>	Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	<u>facturer</u>
Renal failure acute				AR GEL ORTICOTROPIC ) GEL FOR INJECTION,	S	SUBCUTANEOUS				
Syncope			METOLAZO	NE (METOLAZONE)	С					
Hypokalaemia			LASIX (FUR	OSEMIDE)	С					
Dehydration			METFORMI	N (METFORMIN)	С					
Decreased appetite			LISINOPRIL	. (LISINOPRIL)	С					
Acute prerenal failure										
Dysgeusia										
Fatigue										
Renal failure acute										
FDA Received Date	Case #	Case Type		Health Professional	Outcom	<u>ies</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
18-Mar-2014	10022179	DIRECT			ОТ			34 YR	Female	USA
Preferred Term			<u>Product</u>		Role	Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	<u>facturer</u>
Underdose			ACTHAR H.	P.	S	ORAL	80u/ml oral 047 twice weekly			
No adverse event			PREDNISO	NE	С		·			
			ARAVA		С					
			TRILEPTAL		С					
Wrong technique in dru	ug usage process									
FDA Received Date	Case #	Case Type		Health Professional	Outcom	<u>ies</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
19-Mar-2014	10029784	EXPEDITED (	15-DAY)		НО		QSC-2014-0143		Female	USA
Preferred Term			Product		Role	Route	Dosage Text	<u>Duratio</u>	<u>n</u> <u>Manu</u>	facturer
Renal failure			H.P. ACTHA	AR GEL	S	SUBCUTANEOUS				
Dialysis										

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FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	<b>Country</b>
19-Mar-2014	9999039	EXPEDITED (15-DAY)	Υ	OT	QSC-2014-0124	26 YR	Female	USA
Preferred Term Central nervous system	n lesion	<u>Product</u> H.P. ACTH DIMETHYL	IAR GEL - FUMARATE	Role Route S SUBCUTANEOUS C	<u>Dosage Text</u> unk, 10 days	<u>Duratio</u>	<u>n Manu</u>	<u>ıfacturer</u>
Paraesthesia								
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
20-Mar-2014	10029837	EXPEDITED (15-DAY)	Υ	НО	QSC-2014-0142	23 YR	Male	USA
Preferred Term Dehydration		,	IAR GEL CORTICOTROPIC E) GEL FOR INJECTION,	<b>Role Route</b> S	<u>Dosage Text</u>	<u>Duratio</u>	<u>n Manu</u>	<u>ıfacturer</u>
Blood creatinine increa Nausea Vomiting	sed							
FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
21-Mar-2014	10027909	EXPEDITED (15-DAY)		ОТ	US-SA-2013SA103272	36 YR	Female	USA
Preferred Term Abasia Hot flush Alopecia Multiple sclerosis relap:	se	Product AUBAGIO ACTHAR		Role Route S ORAL S UNKNOWN	<u>Dosage Text</u>	<u>Duratio</u>	n <u>Manu</u>	<u>ifacturer</u>



			D	etailed Report				
FDA Received Date	Case #	Case Type	<u>Health Professional</u>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
26-Mar-2014	10039409	EXPEDITED (15-DAY)		ОТ	PHHY2014US036042		Female	USA
Preferred Term		Product	İ	Role Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	facturer
Neuromyelitis optica		MYCOP	HENOLATE	S			NOVA	RTIS
Drug ineffective		AZATHI	OPRINE	S				
		GLATIR	AMER ACETATE	S				
		INTERF	ERONS	S				
		ACTH		S				
		RITUXIN	MAB	S				
		MITOXA	NTRONE	С				
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
27-Mar-2014	10040894	NON-EXPEDITED		ОТ	US-PFIZER INC-2014085285	79 YR	Male	USA

			INC-2014003203				
Preferred Term	<u>Product</u>	Role Route	Dosage Text	<u>Duration</u>	<u>Manufacturer</u>		
Drug hypersensitivity	ERYTHROMYCIN	S	UNK		PFIZER		
	TRIMETHOPRIM	S	UNK		UNKNOWN		
	PHENOBARBITAL	S	UNK				
	ACTH	S	UNK				
	DRIXORAL	S	UNK				
	FLURAZEPAM HYDROCHLORIDE	S					
	DICYCLOVERINE HYDROCHLORIDE	S					
	CHLORPHENAMINE W/ PHENYI PROPANOI AMINE	S					



**Detailed Report** 

FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	<u>Country</u>
27-Mar-2014	10048409	EXPEDITED (15-DAY)	Υ	DE	QSC-2014-0141	67 YR	Male	USA
Preferred Term Sudden death		,	HAR GEL CORTICOTROPIC E) GEL FOR INJECTION,	Role Route S SUBCUTANEOUS	<u>Dosage Text</u>	<u>Duratio</u>	on <u>Man</u> ı	<u>ufacturer</u>
Abdominal pain Fluid retention								
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
01-Apr-2014	10056129	EXPEDITED (15-DAY)		НО	QSC-2014-0179	48 YR	Male	USA
Preferred Term Incorrect route of drug Anxiety Heart rate increased	administration	<u>Product</u> H.P. ACTH	HAR GEL	Role Route S	<u>Dosage Text</u>	Duratio	on <u>Man</u> ı	<u>ufacturer</u>
FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	<b>Country</b>
01-Apr-2014	10056142	EXPEDITED (15-DAY)	Υ	НО	QSC-2014-0187		Female	USA
Preferred Term Sepsis		IMMUNOG (IMMUNOG METHOTF (METHOT	(RITUXIMAB) SLOBULIN GLOBULINS NOS) REXATE	Role Route S C C C	<u>Dosage Text</u>	<u>Duratio</u>	on <u>Man</u> ı	<u>ufacturer</u>



Detailed	Re	port
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FDA Received Date	Case #	Case Type	Health Professional	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
09-Apr-2014	10072553	EXPEDITED (15-DAY)	Υ	НО	QSC-2014-0212		Male	USA
Preferred Term Diabetic ketoacidosis		,	IAR GEL CORTICOTROPIC E) GEL FOR INJECTION,	Role Route S	<u>Dosage Text</u>	<u>Duratio</u>	n <u>Man</u> ı	<u>ufacturer</u>
FDA Received Date	Case #	Case Type	Health Professional	Outcomes	Manufacturer Control #	<u>Age</u>	Sex	Country
09-Apr-2014	9845585	EXPEDITED (15-DAY)	Υ	НО	QSC-2014-0011	29 YR	Female	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Man</u>	<u>ufacturer</u>
Haemoglobin decrease	ed	H.P. ACTH	IAR GEL	S				
Heart rate increased		CYMBALT HYDROCH	A (DULOXETNE ILORIDE)	С				
Haematochezia		METHOTR (METHOTI		С				
Dyspnoea		FOLIC AC	ID (FOLIC ACID)	С				
Abdominal pain								
Anaemia								
Gastrointestinal haemo	orrhage							
Pain								



#### **Detailed Report**

FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
09-Apr-2014	9971318	EXPEDITED (15-DAY)	Υ	ОТ	QSC-2014-0106	12 YR	Female	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duratio</u>	<u>n Manu</u>	<u>ıfacturer</u>
Tachycardia		H.P. ACTI	HAR GEL	S SUBCUTANEOUS				
Toxicity to various ager	nts	MEDROL (METHYLI ACETATE	PREDNISOLONE )	С				
		SOLUMEI (METHYLI SODIUM)	PREDNISOLONE	С				
		VORICON (VORICON		С				
Drug interaction		VALCYTE HYDROCI (VALGANI HYDROCI	CICLOVIR	С				
FDA Received Date	Case #	Case Type	Health Professional	Outcomes	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
16-Apr-2014	10085726	EXPEDITED (15-DAY)	Υ	НО	QSC-2014-0232	54 YR	Male	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	Duratio	<u>n Manu</u>	<u>ıfacturer</u>
Renal failure		,	HAR GEL CORTICOTROPIC E) GEL FOR INJECTION,	S SUBCUTANEOUS				
Drug effect incomplete								
Fluid overload								
Fluid retention								



	FDA Received Date	Case #	Case Type	<b>Health Professional</b>	<u>Outcomes</u>	Manufacturer Control #	<u>Age</u>	<u>Sex</u>	Country
	16-Apr-2014	10086295	EXPEDITED (15-DAY)	Υ	DE,HO	QSC-2014-0233	54 YR	Male	USA
Preferred Term		<u>Product</u>		Role Route	Dosage Text	<u>Duration</u> <u>Manufacturer</u>		<u>ufacturer</u>	
	Cardiac failure H.P ACTHAR		AR GEL	S					
	Pneumonia								
	Weight increased								