Praxbind

(idarucizumab)

New Product Slideshow

MPR

Introduction

- **Brand name:** Praxbind
- **Generic name:** Idarucizumab
- **Pharmacological class:** Humanized monoclonal antibody fragment
- **Strength and Formulation:** 2.5g/50mL; solution for IV infusion; preservative-free; contains sorbitol
- **Manufacturer:** Boehringer Ingelheim
- **How supplied:** Single-use vials—2
- **Legal Classification:** Rx

Indications

- Reversal of dabigatran in emergency surgery/urgent procedures and in life-threatening or uncontrolled bleeding

Dosage & Administration

- For IV use only
- Administer 5g (2 vials) as 2 consecutive infusions or as bolus injection of both vials consecutively via syringe
- If reappearance of bleeding with elevated coagulation parameters after initial 5g dose or for those requiring a second emergency surgery/urgent procedure and have elevated coagulation parameters: may consider additional 5g dose

Considerations for Special Populations

- **Pregnancy:** Give only if clearly needed
- **Nursing mothers:** Exercise caution
- **Pediatric:** Not established
- **Geriatric:** No overall differences

Warnings/Precautions

- Risk of **thromboembolic events**; consider resuming anticoagulant therapy as soon as medically appropriate; can initiate dabigatran 24hrs after administration of Praxbind
- **Discontinue** immediately if an anaphylactic reaction or other serious allergic reaction occurs; treat appropriately
- Hereditary fructose intolerance

Adverse Reactions

- Headache
- Hypokalemia
- Delirium
- Constipation
- Pyrexia
- Pneumonia
- Elevated aPTT, ECT

Mechanism of Action

- Idarucizumab is a specific reversal agent for dabigatran
- It is a humanized monoclonal antibody fragment (Fab) that binds to dabigatran and its acylglucuronide metabolites with higher affinity than the binding affinity of dabigatran to thrombin, neutralizing their anticoagulant effect

Clinical Trials

- The safety and efficacy of Praxbind was investigated in pharmacokinetic/ pharmacodynamic trials with healthy volunteers and in an ongoing single cohort case series trial with dabigatran-treated patients who have life-threatening or uncontrolled bleeding, or who require emergency surgery or urgent procedure **(RE-VERSE AD)**

Clinical Trials

- Three randomized, placebo-controlled trials in a total of 283 subjects evaluated the safety, dose-response, and effect of idarucizumab on reducing unbound dabigatran and coagulation parameters
- Of the 283 subjects, 224 received at least one dose of idarucizumab

Clinical Trials

- Data from 14 dabigatran-exposed subjects treated with idarucizumab 5g in one of the healthy volunteer trials showed the following changes in coagulation parameters pre-infusion and at the end of infusion:
  - diluted thrombin time (**dTT**): 66.6s vs. 32.1s;
  - activated partial thromboplastin time (**aPTT**): 67.8s vs. 29.2s;
  - ecarin clotting time (**ECT**): 122s vs. 34.7s;
  - thrombin time (**TT**):127s vs. 12.5s;
  - activated clotting time (**ACT**):236s vs.116s, respectively

Clinical Trials

- Also, data from 14 dabigatran-exposed subjects treated with placebo showed the following changes in coagulation parameters pre-infusion and at the end of infusion:
  - **dTT**: 64.7s vs. 65.3s;
  - **aPTT**: 65.2s vs. 66.5s;
  - **ECT**: 117s vs. 122s;
  - **TT**: 132s vs. 147s;
  - **ACT**: 219s vs. 216s, respectively

Clinical Trials

- In the ongoing RE-VERSE AD case series trial, idarucizumab 5g was given to patients treated with dabigatran who presented with dabigatran-related life-threatening or uncontrolled bleeding (Group A) or who required emergency surgery or urgent procedures (Group B)
- The **primary endpoint** was maximum percentage reversal of the pharmacodynamic anticoagulant effect of dabigatran within 4 hours after the administration of idarucizumab, based on central laboratory determination of dTT or ECT

Clinical Trials

- Among a subset of 90 patients (n=51 [Group A], n=39 [Group B]) with available data, the median maximum reversal of the pharmacodynamic anticoagulant effect of dabigatran as measured by dTT or ECT in the first 4 hours after administration of idarucizumab 5g was 100%, with >89% of most patients achieving complete reversal
- Results for Groups A and B were similar
- For more clinical trial data, see full labeling

New Product Monograph

- For more information view the complete product monograph available at:

  http://www.empr.com/praxbind/drugproduct/413/