



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Public Health Service

Center for Drug Evaluation and Research
Office of Regulatory Policy
Division of Information Disclosure Policy
5600 Fishers Lane, HFD-13
Rockville, Maryland 20857

August 24, 2005

In Response Refer to File: F05-8459

ProCon.Org
ATTN: Jeffrey Yablan
100 Wilshire Blvd., 3rd Floor
Santa Monica, CA 90401

Dear Mr. Yablan,

This is in response to your letter of 6/24/05, in which you requested adverse events associated with the use of Kytril. Your request was received in the Center for Drug Evaluation and Research on 6/28/05.

Please find the enclosed data which summarizes reports of events to the above mentioned drug(s). This data contains only reports of adverse events which have been entered into the computerized filing system maintained by the Office of Drug Safety. This AERS report may include duplicate reports (e.g., more than one report for the same adverse event).

Charges of \$74.00 (Search \$19.00, Review \$, Reproduction \$, Computer time \$55.00) will be included in a monthly invoice. **DO NOT SEND ANY PAYMENT UNTIL YOU RECEIVE AN INVOICE.**

If there are any problems with this response, please notify us in writing of your specific problem(s). Please reference the above file number.

This concludes the response from the Center for Drug Evaluation and Research.

Sincerely,

Harold D. Stepper

Paralegal Specialist
Office of Regulatory Policy
Division of Information Disclosure Policy, HFD-13

Adverse Event Reporting System (AERS)

**Freedom Of Information (FOI) Report
Selections for: GRANISETRON
KYTRIL**

From: 01-NOV-1997 To: Present

Disclaimer: The information contained 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 adverse drug reactions.



**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 11/03/97	ISR Number: 3005490-7	Report Type: Direct	Company Report#:			Age: 64 YR	Gender: Female	I/FU: 1
Outcome	PT Confusional State Hallucination Muscle Twitching	Report Source	Product Amifostine	Role PS	Manufacturer	Route INTRAVENOUS	Dose 2220.4 MG X 1 IV	Duration
			Paclitaxel Dexamethasone Kytril Carboplatin G-Csf	SS SS SS SS SS		INTRAVENOUS	20 MG IV	
Date: 11/04/97	ISR Number: 1000001489	Report Type: Expedited (15-Day)	Company Report#: 97022699-1			Age: 67 YR	Gender: Male	I/FU: F
Outcome	PT Constipation Headache Osteoarthritis Pharyngitis Urinary Retention	Report Source Health Professional	Product Kytril (Granisetron) Cisplatin	Role PS C	Manufacturer Smithkline Beecham	Route INTRAVENOUS	Dose 3 MILLIGRAMS	Duration 8 DAY
			Digestive Enzyme Preparations Doxazone Mesilate Etoposide Pirenzepine Hydrochloride Trimebutine Trimaleate	C C C C C C				
Date: 11/05/97	ISR Number: 1000001626	Report Type: Expedited (15-Day)	Company Report#: 97024889-1			Age: 68 YR	Gender: Female	I/FU: 1
Outcome	Hospitalization - Initial or Prolonged	Report Source Health Professional	Product Kytril Cisplatin Fluorouracil	Role PS C C	Manufacturer Smithkline Beecham	Route ORAL	Dose	Duration 1 DAY
Date: 11/19/97	ISR Number: 3001877-7	Report Type: Expedited (15-Day)	Company Report#: 2715/11856			Age: 63 YR	Gender: Male	I/FU: F
Outcome	Hospitalization - Initial or Prolonged Other	Report Source Foreign Consumer Company Representative	Product Solu-Medrol Fluorouracil	Role PS SS	Manufacturer Roche	Route INTRAVENOUS INTRAVENOUS	Dose 60MG/DAY;IV 1770 MG/DAY;IV	Duration
			Cisplatin Granisetron	SS SS		INTRAVENOUS INTRAVENOUS	177 MG/DAY;IV 3MG/DAY;IV	
Date: 11/26/97	ISR Number: 3002921-3	Report Type: Expedited (15-Day)	Company Report#: 97026862-1			Age: 49 YR	Gender: Female	I/FU: 1
Outcome	Life-Threatening	Report Source	Product Kytril	Role PS	Manufacturer Smithkline Beecham	Route INTRAVENOUS	Dose 3MG	Duration 1 DAY
	Laryngospasm Paraesthesia		Divina (Estradiol, Medroxyprogesterone) Eloxatin (Oxaliplatin) Lexomil (Bromazepam)	C C C				

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Solunedrol
(Prednisolone) C
Soprol (Bisoprolol) C

Date: 11/26/97 ISR Number: 3002922-5 Report Type: Expedited (15-Day) Company Report#: 97026863-1 Age: 65 YR Gender: Female I/FU: I

Outcome
Hospitalization - Initial or Prolonged

PT
Chills
Disorientation
Hypertension
Pyrexia
Sedation

Product
Kytril
Ametycine (Mitomycin)
Holoxan (Ifosfamide)
Uromitexan (Mesna)

Report Source

Role
PS
C
C
C

Manufacturer
Smithkline Beecham

Route
INTRAVENOUS

Dose
3MG

Duration

Date: 11/26/97 ISR Number: 3003413-8 Report Type: Expedited (15-Day) Company Report#: 97014114-1 Age: 74 YR Gender: Female I/FU: F

Outcome
Death
Hospitalization - Initial or Prolonged

PT
Anaphylactic Shock
Brain Hypoxia
Cardio-Respiratory Arrest
Cough
Encephalopathy
Fall
Myocardial Infarction
Rash Erythematous
Respiratory Arrest

Product
Kytril
Kytril
Kytril
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Fosamax
Zyloprim
Potassium
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Report Source
Health Professional

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Duration
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2 DAY
2 DAY

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

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Aredia
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Prednisone

Date: 12/01/97 **ISR Number:** 3003437-0 **Report Type:** Expedited (15-Day) **Company Report#:** M067075

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Gender:</u> Female	<u>I/FU:</u> F
Death	Anaphylactic Reaction	Health Professional	Cytosan	PS		INTRAVENOUS	Q3W IV		
Life-Threatening Hospitalization - Initial or Prolonged	Cardiac Arrest	Professional	Kytril	SS		INTRAVENOUS	1 MG IV		
	Choking		Oncovin	C					
	Cough		Fosamax	C					
	Dyspnoea		Zyloprim	C					
	Encephalopathy		Potassium	C					
	Fall		Vitamins	C					
	Hypersensitivity								
	Respiratory Arrest								

Date: 12/05/97 **ISR Number:** 3007230-4 **Report Type:** Direct **Company Report#:**

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Gender:</u> Female	<u>I/FU:</u> I
Other	Hallucination		Kytril	PS		INTRAVENOUS	1 MG IV; NDC# 0029-4149-01		
	Muscle Spasms		Adriamycin	C					
			Taxol	C					
			Benadryl	C					
			Zantac	C					
			Decadron	C					

Date: 12/09/97 **ISR Number:** 3004694-7 **Report Type:** Expedited (15-Day) **Company Report#:** M067075

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Gender:</u> Female	<u>I/FU:</u> F
Death	Anaphylactic Shock	Health Professional	Cytosan	PS		INTRAVENOUS	Q3W IV		
Life-Threatening Hospitalization - Initial or Prolonged	Cardiac Arrest	Professional	Kytril	SS		INTRAVENOUS	1 MG IV		6 MON
	Choking		Oncovin	C					
	Cough		Fosamax	C					
	Dyspnoea		Zyloprim	C					
	Encephalopathy		Potassium	C					
	Respiratory Arrest		Vitamins	C					

Date: 12/09/97 **ISR Number:** 3004934-4 **Report Type:** Expedited (15-Day) **Company Report#:** 2756/11856

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Gender:</u> Female	<u>I/FU:</u> I
Life-Threatening Hospitalization - Initial or Prolonged	Drug Interaction	Foreign Consumer Company Representative	Solu-Medrol	PS		INTRAVENOUS	120 MG/DAY; IV		
Other	Potentiality		Oxaliplatin	SS		INTRAVENOUS	130MG/DAY IV		
	Laryngospasm		Granisetron	SS		INTRAVENOUS	3MG/DAY IV		
	Paraesthesia		Bisoprolol	C					
			Bromoxepam	C					
			Estradiol	C					
			Methylprogesterone	C					

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 12/15/97 ISR Number: 3008719-4 Report Type: Expedited (15-Day) Company Report#: 2756/11856

Age: 49 YR Gender: Female I/FU: F

<u>Outcome</u> Life-Threatening Other	<u>PT</u> Laryngospasm Paraesthesia	<u>Report Source</u> Foreign Consumer Company Representative	<u>Product</u> Solu-Medrol	<u>Role</u> PS	<u>Manufacturer</u>	<u>Route</u> INTRAVENOUS INTRAVENOUS INTRAVENOUS	<u>Dose</u> 130 MG/SQ.M/DAY;I V 130 MG/DAY;IV 3 MG/DAY;IV	<u>Duration</u>
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Date: 12/22/97 ISR Number: 3013005-2 Report Type: Expedited (15-Day) Company Report#: 97028840-1

Age: 58 YR Gender: Female I/FU: I

<u>Outcome</u> Hospitalization - Initial or Prolonged	<u>PT</u> Shock	<u>Report Source</u>	<u>Product</u> Kytril	<u>Role</u> PS	<u>Manufacturer</u> Smithkline Beecham	<u>Route</u> INTRAVENOUS	<u>Dose</u>	<u>Duration</u> 1 DAY
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Date: 12/22/97 ISR Number: 3013023-4 Report Type: Expedited (15-Day) Company Report#: 97027914-1

Age: 58 YR Gender: Female I/FU: I

<u>Outcome</u> Hospitalization - Initial or Prolonged	<u>PT</u> Atelectasis Drug Interaction Hypercapnia Hyperhidrosis Hypotension Lung Disorder Sedation Vomiting	<u>Report Source</u> Foreign Health Professional	<u>Product</u> Kytril Corancyl Skenan Sporanox	<u>Role</u> PS C C C	<u>Manufacturer</u>	<u>Route</u> INTRAVENOUS	<u>Dose</u>	<u>Duration</u>
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Date: 12/22/97 ISR Number: 3013027-1 Report Type: Expedited (15-Day) Company Report#: 97024749-1

Age: 72 YR Gender: Male I/FU: F

<u>Outcome</u> Hospitalization - Initial or Prolonged	<u>PT</u> Blood Pressure Decreased Bradycardia Chills Feeling Hot Hyperhidrosis Hypotension Pallor Shock Vomiting	<u>Report Source</u> Health Professional	<u>Product</u> Kytril Metoclopramide Pirenzepine Hydrochloride Ringer-Lactate Solution	<u>Role</u> PS C C C	<u>Manufacturer</u> Smithkline Beecham	<u>Route</u> INTRAVENOUS	<u>Dose</u> 2 MG IV	<u>Duration</u> 1 DAY
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Date: 01/13/98 ISR Number: 3016679-5 Report Type: Expedited (15-Day) Company Report#: B035617

Age: Gender: Male I/FU: F

<u>Outcome</u> Death Life-Threatening Hospitalization - Initial or Prolonged	<u>PT</u> Acidosis Cholelithiasis Condition Aggravated Hepatic Failure Hepatitis C Hepatitis Fulminant							
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**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Hepatomegaly	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Hypotension	Foreign Health Professional	Carboplatin	PS		INTRAVENOUS	450 MG IV	1 DAY
Hypovolaemia		Uft	SS		ORAL	200 MG PO	8 WK
Lymphadenopathy		Granisetron	SS		INTRAVENOUS	3-6 MG IV	3 DAY
Renal Atrophy		Ondansetron	SS		INTRAVENOUS	4 MG IV	1 DAY
Renal Impairment		Carbocysteine	C				
Thrombocytopenia		Bromhexine	C				
		Roxithromycin	C				
		Levothyroxine Sodium	C				
		Triazolam	C				

Date: 01/13/98 **ISR Number:** 3095828-7 **Report Type:** Direct **Company Report#:** **Age:** 66 YR **Gender:** Female **I/FU:** 1

Outcome: Life-Threatening Hospitalization - Initial or Prolonged

<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Anaphylactic Shock	Health Professional	Methotrexate	PS			65MG (40MG/M2)	
		Granisetron	SS				

Date: 01/14/98 **ISR Number:** 3016722-3 **Report Type:** Expedited (15-Day) **Company Report#:** 97029486-1 **Age:** 70 YR **Gender:** Male **I/FU:** 1

Outcome: Hospitalization - Initial or Prolonged

<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Leukopenia	Health Professional	Kytril	PS	Smithkline Beecham	ORAL	ORAL	5 DAY
Thrombocytopenia		Cisplatin	C				
		Fluouracil	C				
		Furosemide	C				
		Mitomycin C	C				

Date: 01/14/98 **ISR Number:** 3016731-4 **Report Type:** Expedited (15-Day) **Company Report#:** 97028840-1 **Age:** 58 YR **Gender:** Female **I/FU:** F

Outcome: Hospitalization - Initial or Prolonged

<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Anaphylactic Shock	Health Professional	Kytril	PS	Smithkline Beecham	INTRAVENOUS		1 DAY
Dermatitis							
Hypotension							
Injection Site Erythema							
Malaise							
Nausea							
Syncope							

Date: 01/21/98 **ISR Number:** 3017659-6 **Report Type:** Expedited (15-Day) **Company Report#:** 97024749-1 **Age:** 72 YR **Gender:** Male **I/FU:** F

Outcome: Hospitalization - Initial or Prolonged

<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Blood Pressure Decreased	Health Professional	Kytril	PS	Smithkline Beecham	INTRAVENOUS	2 MILLIGRAMS	1 DAY
Chills		Metrocloramide	C				
Feeling Hot		Pirenzepine	C				
Heart Rate Decreased		Hydrochloride	C				
Hyperhidrosis		Ringer-Lactate Solution	C				
Pallor							
Shock							
Vomiting							

FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

Date: 02/09/98 ISR Number: 3026811-5 Report Type: Expedited (15-Day) Company Report#: 98002689-1

Outcome Hospitalization - Initial or Prolonged	PT Blood Lactate Dehydrogenase Decreased Cough Neutrophilia Pharyngolaryngeal Pain	Report Source Health Professional	Product Kytril Carboplatin Tegatur-Uracil	Role PS C C	Manufacturer Smithkline Beecham	Route ORAL	Dose 1 MILLIGRAMS	Gender : Male	Duration 23 DAY	I/FU : 1
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Date: 02/09/98 ISR Number: 3026815-2 Report Type: Expedited (15-Day) Company Report#: 98003244-1

Outcome Hospitalization - Initial or Prolonged	PT Ear Disorder Leukopenia	Report Source Health Professional	Product Kytril Carboplatin	Role PS C	Manufacturer Smithkline Beecham	Route ORAL	Dose	Gender : Female	Duration	I/FU : 1
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Date: 02/11/98 ISR Number: 3027411-3 Report Type: Expedited (15-Day) Company Report#: 98002309-1

Outcome Hospitalization - Initial or Prolonged	PT Renal Impairment	Report Source Foreign Health Professional	Product Kytril N/A Cisplatin Fluorouracil	Role PS SS C C	Manufacturer Smithkline Beecham	Route ORAL	Dose 2 MG	Gender : Male	Duration 4 DAY	I/FU : 1
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Date: 02/11/98 ISR Number: 3057206-6 Report Type: Expedited (15-Day) Company Report#: 98002309-1

Outcome Hospitalization - Initial or Prolonged	PT Renal Failure Acute	Report Source Foreign Health Professional	Product Kytril Cisplatin Fluorouracil	Role PS C C	Manufacturer Smithkline Beecham	Route ORAL	Dose 2 MILLIGRAMS ORAL	Gender : Male	Duration 4 DAY	I/FU : 1
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Date: 02/12/98 ISR Number: 3028193-1 Report Type: Expedited (15-Day) Company Report#: 98003676-1

Outcome Hospitalization - Initial or Prolonged	PT Orthostatic Hypotension Syncope	Report Source Health Professional	Product Kytril Hytrin Compazine Stool Softener Cisplatin 5 Fu	Role PS C C C C C	Manufacturer	Route ORAL	Dose 2 MILLIGRAMS DAILY ORAL	Gender : Male	Duration 5 DAY	I/FU : 1
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Date: 02/12/98 ISR Number: 3029343-3 Report Type: Expedited (15-Day) Company Report#: 98002689-1

Outcome Hospitalization - Initial or Prolonged	PT Blood Lactate Dehydrogenase Decreased Cough Neutrophilia Pharyngolaryngeal Pain	Report Source Health Professional	Product Kytril Carboplatin Tegatur-Uracil	Role PS C C	Manufacturer Smithkline Beecham	Route ORAL	Dose 1 MILLIGRAMS	Gender : Male	Duration 23 DAY	I/FU : F
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**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 02/20/98	ISR Number: 3032608-2	Report Type: Expedited (15-Day)	Company Report#: 98003980-1	Age: 65 YR	Gender: Male	I/FU: 1
Outcome: Hospitalization - Initial or Prolonged	PT: Bone Marrow Depression Electrolyte Imbalance Hypoproteinaemia	Report Source: Health Professional	Product: Kytril Calcium Folate Cisplatin Fluorouracil	Role: PS C C C	Manufacturer: Smithkline Beecham	Dose: ORAL 2 DAY
Date: 02/26/98	ISR Number: 3037077-4	Report Type: Expedited (15-Day)	Company Report#: 1997003295-1	Age: 75 YR	Gender: Female	I/FU: 1
Outcome: Other	PT: Shock	Report Source: Foreign Health Professional	Product: Kytril	Role: PS	Manufacturer: Smithkline Beecham	Dose: 3 MILLIGRAMS 1 DAY
Date: 03/04/98	ISR Number: 3040494-X	Report Type: Expedited (15-Day)	Company Report#: 1998005038-1	Age: 66 YR	Gender: Female	I/FU: 1
Outcome: Hospitalization - Initial or Prolonged	PT: Leukopenia Thrombocytopenia	Report Source: Health Professional	Product: Kytril Calcium Polystyrene Sulfonate Caarboptatin Frusemide Pirarubicin Hydrochloride	Role: PS C C C C	Manufacturer: Smithkline Beecham	Dose: 2 MG ORAL 6 DAY
Date: 03/05/98	ISR Number: 3047507-X	Report Type: Expedited (15-Day)	Company Report#: 1998000334-1	Age: 65 YR	Gender: Male	I/FU: 1
Outcome: Death	PT: Myelopathy Neutropenia Pneumonia Staphylococcal Infection	Report Source: Health Professional	Product: Kytril Cisplatin Epirubicin Hydrochloride Methotrexate Vinblastine Sulphate	Role: PS C C C C	Manufacturer: Smithkline Beecham	Dose: ORAL, INTRAVENOUS 5 DAY
Date: 03/19/98	ISR Number: 3057806-3	Report Type: Expedited (15-Day)	Company Report#: 1998005895-1	Age: 85 YR	Gender: Female	I/FU: 1
Outcome: Death Life-Threatening Hospitalization - Initial or Prolonged	PT: Bradypnoea Coma Hypocapnia Hypoventilation Loss Of Consciousness	Report Source:	Product: Kytril Alpress (Prazosine) Endoxan (Cyclophosphamide) Isobar (Methylclothiazide, Triamterene) Isoptine (Verapamil)	Role: PS C C C C	Manufacturer: Smithkline Beecham	Dose: 6 MILLIGRAMS 1 DAY

FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

Date: 03/19/98		ISR Number: 3057808-7	Report Type: Expedited (15-Day)	Company Report#: 1998006374-1	Age: 72 YR	Gender: Male	IFU: I
Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose
Hospitalization - Initial or Prolonged	Leukopenia Thrombocytopenia	Health Professional	Kytril	PS		INTRAVENOUS	3 MILLIGRAMS, INTRAVENOUS 1 DAY
			Cisplatin	C			
			Dexamethasone	C			
			Dexamethasone Sodium Phosphate	C			
			Mitomycin	C			
			Vindesine Sulfate	C			
Date: 03/24/98		ISR Number: 3067529-2	Report Type: Expedited (15-Day)	Company Report#: 1998006525-1	Age: 75 YR	Gender: Male	IFU: I
Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose
Hospitalization - Initial or Prolonged	Hyperkalaemia Leukopenia Renal Impairment Thrombocytopenia	Health Professional	Kytril	PS	Smithkline Beecham	ORAL	2 MILLIGRAMS 6 DAY
			Carboplatin	C			
			Dexamethasone	C			
			Dexamethasone Sodium Phosphate	C			
			Mitomycin	C			
			Vindesine Sulfate	C			
Date: 03/27/98		ISR Number: 3062119-X	Report Type: Direct	Company Report#:	Age: 71 YR	Gender: Male	IFU: I
Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose
Hospitalization - Initial or Prolonged	Dyspnoea Emotional Distress Hyperhidrosis Pallor Respiratory Distress	Foreign Health Professional	Kytril	PS	Smithkline Beecham	INTRAVENOUS	IV PUSH X / DOSE
Date: 03/30/98		ISR Number: 3058178-0	Report Type: Expedited (15-Day)	Company Report#: B036693	Age:	Gender: Male	IFU: I
Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose
Life-Threatening Disability	Fibrosis Haemoglobin Decreased Pneumonia Red Blood Cell Count Decreased Thrombocytopenia	Foreign Health Professional	Cisplatin	PS		INTRAVENOUS	125 MG IV; 3 CYCLES
			Granisetron	SS		INTRAVENOUS	3-6 MG IV; 4 CYCLES
			Metoclopramide (Metoclopramide Hcl)	SS		INTRAVENOUS	30-10-30 MG IV; 4 CYCLES
			Betamethasone (Bethamethasone)	SS		INTRAVENOUS	8 MG IV; 3 CYCLES
			Uft (Tegafur Uracil)	SS		ORAL	600 MG PO; 3 CYCLES

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 04/07/98	ISR Number: 3062380-1	Report Type: Expedited (15-Day)	Company Report#: 1998007895-1	Age: 76 YR	Gender: Male	I/FU: 1
Outcome Hospitalization - Initial or Prolonged	PT Arthralgia Chest Pain Dyspnoea Pain Sensory Disturbance	Report Source	Product Kytril Cisplatine Fluorouracile Solu Medrol	Role PS C C C	Manufacturer Smithkline Beecham	Route ORAL
				Dose	Duration	
Date: 04/09/98	ISR Number: 3062253-4	Report Type: Expedited (15-Day)	Company Report#: 1998007861-1	Age: 61 YR	Gender: Male	I/FU: 1
Outcome Other	PT Hyperhidrosis Hypotension Tachycardia	Report Source	Product Granisetron	Role PS	Manufacturer Smithkline Beecham	Route INTRAVENOUS
				Dose 1 MILLIGRAM	Duration	
Date: 04/14/98	ISR Number: 3072767-9	Report Type: Direct	Company Report#:	Age: 40 YR	Gender: Female	I/FU: 1
Outcome Hospitalization - Initial or Prolonged	PT Coma Convulsion Cyanosis Nausea Vomiting	Report Source	Product Kytril Tigan Ceftizoxime Netromio Prozac Benadryl	Role PS SS C C C C	Manufacturer	Route INTRAVENOUS INTRAMUSCULAR
				Dose 500MG X 1 IV 200MG IM Q 6H PRN	Duration	
Date: 04/27/98	ISR Number: 3070693-2	Report Type: Expedited (15-Day)	Company Report#: 1998009669-1	Age: 50 YR	Gender: Male	I/FU: 1
Outcome Hospitalization - Initial or Prolonged	PT Hiccups	Report Source Health Professional	Product Kytril Endoxan Vebesine	Role PS C C	Manufacturer Smithkline Beecham	Route INTRAVENOUS
				Dose 3 MILLIGRAMS	Duration	
Date: 05/05/98	ISR Number: 3073708-0	Report Type: Expedited (15-Day)	Company Report#: 1998010945-1	Age: 62 YR	Gender: Male	I/FU: 1
Outcome Hospitalization - Initial or Prolonged	PT Anorexia Eczema Leukopenia Stomatitis	Report Source Health Professional	Product Kytril Calcium Foimate Fluorouracil	Role PS C C	Manufacturer Smithkline Beecham	Route ORAL
				Dose 2 MG ORAL; 3MG IV	Duration 5 DAY	
Date: 05/05/98	ISR Number: 3073722-5	Report Type: Expedited (15-Day)	Company Report#: 1998010951-1	Age: 59 YR	Gender: Female	I/FU: 1
Outcome Hospitalization - Initial or Prolonged	PT Leukopenia Stomatitis Thrombocytopenia	Report Source Health Professional	Product Kytril Carboplatin Etoposide	Role PS C C	Manufacturer Smithkline Beecham	Route ORAL
				Dose SEE TEXT**	Duration	

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 05/11/98 **ISRN Number:** 3075193-1 **Report Type:** Expedited (15-Day) **Company Report#:** 1998011996-1 **Age:** 46 YR **Gender:** Male **I/FU:** 1

Outcome: Hospitalization - Initial or Prolonged

PT: Confusional State
Metabolic Encephalopathy
Sedation

Report Source: Foreign

Product: Kytril
Azantac
Debridat
Eldisine
Holoxan
Lasifix
Potassium Chlorure
Sectral
Solupred
Ulcet
Uromitexan

Role: PS
C
C
C
C
C
C
C
C
C

Manufacturer: Smithkline Beecham

Route: INTRAVENOUS

Dose: 3 MILLIGRAMS

Duration: 2 DAY

Date: 05/11/98 **ISRN Number:** 3075200-6 **Report Type:** Expedited (15-Day) **Company Report#:** 199801174-1 **Age:** 67 YR **Gender:** Male **I/FU:** 1

Outcome: Life-Threatening
Other

PT: Anaphylactoid Reaction
Dyspnoea

Report Source: Health
Professional

Product: Kytril
Blood Transfusion
Cytarabine
Daunorubicin
Etoposide

Role: PS
C
C
C
C

Manufacturer:

Route: ORAL

Dose: 3 MILLIGRAMS

Duration: 4 DAY

Date: 05/15/98 **ISRN Number:** 3079312-2 **Report Type:** Expedited (15-Day) **Company Report#:** 1988006654-1 **Age:** 46 YR **Gender:** Female **I/FU:** 1

Outcome: Other

PT: Anxiety
Depression
Suicidal Ideation

Report Source: Health
Professional

Product: Kytril
Beclazone
Corsodly
Cyclophosphamide
Fluorouracil
Maxolon
Methotrexate
Xanax

Role: PS
C
C
C
C
C
C

Manufacturer: Smithkline Beecham

Route: ORAL

Dose: 2 MILLIGRAMS
ORAL

Duration:

Date: 05/28/98 **ISRN Number:** 3083732-X **Report Type:** Expedited (15-Day) **Company Report#:** 1998012842-1 **Age:** 63 YR **Gender:** Male **I/FU:** 1

Outcome: Death
Hospitalization - Initial or Prolonged

PT: Back Pain
Blood Amylase Increased
Nausea
Pancreatitis Acute
Sepsis

Report Source:

Product: Kytril
Cisplaty1
Holoxan
Vepeside

Role: PS
C
C
C

Manufacturer: Smithkline Beecham

Route: INTRAVENOUS

Dose: 3 MG
INTRAVENOUS

Duration: 3 DAY

Date: 05/28/98 **ISRN Number:** 3084850-2 **Report Type:** Expedited (15-Day) **Company Report#:** 1998012706-1 **Age:** 60 YR **Gender:** Female **I/FU:** 1

Outcome: Other

PT: Blood Potassium Decreased
Cardio-Respiratory Arrest
Grand Mal Convulsion

Report Source: Foreign

Product: Granisetron
Calcichew
Domperidone

Role: PS
C
C

Manufacturer: Smithkline Beecham

Route: INTRAVENOUS

Dose: 1 MILLIGRAM
INTRAVENOUS

Duration: 1 DAY

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Enalapril C
 Ferrogard C
 Furosemide C
 Gastrocote C

Date: 06/15/98 **ISR Number:** 3094569-X **Report Type:** Expedited (15-Day) **Company Report#:** 1998003295-1 **Age:** 75 YR **Gender:** Female **I/FU:** F

Outcome: Other
PT: Blood Pressure Decreased
 Chest Pain
 Dermatitis
 Flushing
 Shock
Report Source: Health Professional
Product: Kytril
 Cisplatin
 Cyclophosphamide
Role: PS
 C
 C
Manufacturer: Smithkline Beecham
Route: INTRAVENOUS
Dose: 3 MILLIGRAMS
Duration: 1 DAY

Date: 06/15/98 **ISR Number:** 3094613-X **Report Type:** Expedited (15-Day) **Company Report#:** 1998013722-1 **Age:** 50 YR **Gender:** Female **I/FU:** I

Outcome: Other
PT: Anaphylactic Reaction
 Dyspnoea
 Hypotension
 Loss Of Consciousness
 Pruritus
Report Source: Literature
Product: Granisetron
 Carboplatin
 Glucosaline
 Methylprednisolone
 Paclitaxel
Role: PS
 C
 C
 C
 C
Manufacturer: Smithkline Beecham
Route: INTRAVENOUS
Dose: INTRAVENOUS
Duration:

Date: 06/15/98 **ISR Number:** 3094620-7 **Report Type:** Expedited (15-Day) **Company Report#:** 1998011174-1 **Age:** 67 YR **Gender:** Male **I/FU:** F

Outcome: Life-Threatening
 Hospitalization - Initial or Prolonged
 Other
PT: Anaphylactoid Reaction
 Cyanosis
 Dyspnoea
Report Source: Health Professional
Product: Kytril
 Blood Transfusion
 Cefoperazone
 Sodium-Sulbactam
 Sodium
 Daunorubicin
 Hydrochloride
 Endocitabine
 Etoposide
Role: PS
 C
 C
 C
 C
Manufacturer: Smithkline Beecham
Route: INTRAVENOUS
Dose: 3 MILLIGRAMS
 INTRAVENOUS
Duration: 4 DAY

Date: 06/15/98 **ISR Number:** 3094992-3 **Report Type:** Expedited (15-Day) **Company Report#:** 1998014443-1 **Age:** 60 YR **Gender:** Female **I/FU:** I

Outcome: Hospitalization - Initial or Prolonged
PT: Hepatic Enzyme Increased
 Hepatic Trauma
 Prothrombin Time Ratio Decreased
Report Source: Health Professional
Product: Kytril
 Raniplex
 Temegic
 Flagyl
 Forene
 Ofloccet
 Primperan
 Pro-Dafalgan
Role: PS
 C
 C
 C
 C
 C
 C
Manufacturer:
Route: INTRAVENOUS
Dose: 12 MILLIGRAMS
 INTRAVENOUS
Duration:

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 06/15/98	ISR Number: 3094996-0	Report Type: Expedited (15-Day)	Company Report#: 1998006525-1	Age: 75 YR	Gender: Male	I/FU: F
Outcome: Hospitalization - Initial or Prolonged	PT: Hyperkalaemia Leukopenia Renal Impairment Thrombocytopenia	Report Source: Health Professional	Product: Kytril Carboplatin Dexamethason Dexamethason Sodium Phosphate Vindesine Sulfate	Role: PS C C C C	Manufacturer: Smithkline Beecham	Route: ORAL
					Dose: 2 MILLIGRAMS ORAL	Duration:
Date: 06/16/98	ISR Number: 3094572-X	Report Type: Expedited (15-Day)	Company Report#: 1998002689-1	Age: 62 YR	Gender: Male	I/FU: F
Outcome: Hospitalization - Initial or Prolonged	PT: Blood Lactate Dehydrogenase Decreased Cough Neutrophilia Pharyngolaryngeal Pain	Report Source: Health Professional	Product: Kytril Carboplatin Hot Water Extracts Of Mycobacterium Tuberculosis Tegafur-Uracil Vitamin A	Role: PS C C C C	Manufacturer: Smithkline Beecham	Route: ORAL
					Dose: 1 MILLIGRAMS ORAL	Duration: 23 DAY
Date: 06/16/98	ISR Number: 3094574-3	Report Type: Expedited (15-Day)	Company Report#: 1998013719-1	Age: 40 YR	Gender: Female	I/FU: I
Outcome: Other	PT: Leukopenia	Report Source: Health Professional	Product: Kytril Cyclophosphamide Epirubicin Hydrochloride Fluorouracil Medroxyprogesterone Acetate Ondansetron Hydrochloride	Role: PS C C C C C	Manufacturer: Smithkline Beecham	Route: ORAL
					Dose: 2 MILLIGRAMS ORAL	Duration: 2 DAY
Date: 06/17/98	ISR Number: 3094566-4	Report Type: Expedited (15-Day)	Company Report#: 1998014647-1	Age: 42 YR	Gender: Female	I/FU: I
Outcome: Hospitalization - Initial or Prolonged	PT: Liver Function Test Abnormal	Report Source:	Product: Kytril Gemzar	Role: PS C	Manufacturer: Smithkline Beecham	Route: INTRAVENOUS
					Dose: 3 MILLIGRAMS	Duration:
Date: 06/19/98	ISR Number: 3096808-8	Report Type: Expedited (15-Day)	Company Report#: 199811081RHF	Age: 63 YR	Gender: Male	I/FU: I
Outcome: Hospitalization - Initial or Prolonged	PT: Neuropathy Peripheral	Report Source: Foreign Other	Product: Furosemide Ifosfamide Cisplatin Vinorelbine Diatrate Granisetron	Role: PS SS SS SS SS	Manufacturer:	Route: INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS
					Dose: 40 MG QD IV 5250 MG IV 140 MG IV 43.7 MG IV 3 MG IV	Duration: 1 DAY 1 DAY 1 DAY 1 DAY 1 DAY

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

<u>Date</u>	<u>ISIR Number</u>	<u>Report Type</u>	<u>Company Report#</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Age</u>	<u>Gender</u>	<u>I/FU</u>
06/23/98	3097335-4	Direct		Health Professional	Kytril	PS		ORAL		Female	I
<u>Outcome</u>	<u>PT</u>	<u>Intervention to</u>	<u>Prevent Permanent</u>	<u>Impairment/Damage</u>						<u>Dose</u>	<u>Duration</u>
Required	Bradycardia	Hypotension								2 MG PO D1-3	
										CHEMO	
06/25/98	3098538-5	Expedited (15-Day)	100867	Foreign Health Professional Other	Bactrim Forte	PS		ORAL	74 YR	Female	I
<u>Outcome</u>	<u>PT</u>	<u>Condition Aggravated</u>	<u>Hypokalaemia</u>	<u>Hyponatraemia</u>						<u>Dose</u>	<u>Duration</u>
Other	Condition Aggravated	Hypokalaemia	Hyponatraemia		Bactrim	SS		INTRAVENOUS		2 DOSE FORM 1 X PER DAY	
					Atacand	SS		ORAL		16 MG 1 X PER DAY ORAL	
					Anafranil	SS		ORAL		25 MG 1 X PER DAY	
					Haldol	SS		ORAL		2 DROP 3 X PER DAY ORAL	
					Paspertin	SS		INTRAVENOUS		30 MG DAILY 1 X PER DAY	
					Minalgin	SS		INTRAVENOUS		CONTINUOUS INTRAVENOUS	
					Kytril	SS		INTRAVENOUS		10 MG DAILY 1 X PER DAY	
					Pethidin	SS		INTRAVENOUS		CONTINUOUS INTRAVENOUS	
					Antra	C				1 MG 2 X PER DAY	
					Marcoumar	C				INTRAVENOUS	
					Tramadolor	C				100 MG DAILY	
					Treuphadol	C				1 X PER DAY	
					Halcion	C				CONTINUOUS	
					Collunosol-N	C				INTRAVENOUS	
06/26/98	3099891-9	Expedited (15-Day)	1998015330-1	Health Professional	Kytril	PS	Smithkline Beecham	INTRAVENOUS	63 YR	Male	I
<u>Outcome</u>	<u>PT</u>	<u>Neuropathy Peripheral</u>	<u>Initial or Prolonged</u>							<u>Dose</u>	<u>Duration</u>
Hospitalization - Initial or Prolonged	Neuropathy Peripheral				Cisplatine	C				3 MILLIGRAMS	1 DAY
					Holoxan	C				INTRAVENOUS	
					Lasilix	C					
					Navelbine	C					

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 06/30/98 **ISR Number:** 3100246-9 **Report Type:** Expedited (15-Day) **Company Report#:** 1998014443-1 **Age:** 50 YR **Gender:** Female **IFU:** F

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Life-Threatening Hospitalization - Initial or Prolonged	Depressed Level Of Consciousness	Health Professional	Kytril (Granisetron)	PS	Smithkline Beecham	INTRAVENOUS	12 MILLIGRAMS INTRAVENOUS	9 DAY
Other	Hepatic Enzyme Increased		Ciflox (Ciprofloxacin)	C				
	Hepatitis		Flagyl (Metronidazole)	C				
	Prothrombin Level Decreased		Forene	C				
			Primperan (Metoclopramide)	C				
			Pro-Dafalgan (Propacetamol)	C				
			Raniplex (Ranitidine)	C				
			Tengestic (Buprenorphine)	C				

Date: 07/02/98 **ISR Number:** 3101644-X **Report Type:** Expedited (15-Day) **Company Report#:** B039474 **Age:** 66 YR **Gender:** Male **IFU:** I

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Hospitalization - Initial or Prolonged	Diarrhoea	Foreign Health Professional	Glucophage	PS		ORAL	1700 MG QD ORAL	
			Primperan (Metoclopramide Hcl)	SS		OTHER ORAL	INJECTION 1.25 MG QD ORAL	
			Daonil (Glyburide)	SS		ORAL INTRAVENOUS	ORAL IV	
			Renitec (Enalapril Maleate)	SS		ORAL INTRAVENOUS	ORAL IV	
			Granisetron	SS		UNKNOWN	UNKNOWN	
			Elvorine (Calcium Levofolinate)	SS		UNKNOWN	UNKNOWN	
			5-Ft (Fluorouracil)	SS		UNKNOWN	UNKNOWN	

Date: 07/08/98 **ISR Number:** 3103177-3 **Report Type:** Expedited (15-Day) **Company Report#:** 1998015937-1 **Age:** 23 YR **Gender:** Female **IFU:** I

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Hospitalization - Initial or Prolonged	Arthralgia	Foreign Health Professional	Kytril	PS	Smithkline Beecham	INTRAMUSCULAR	5 MILLIGRAMS INTRAMUSCULAR	288 DAY
			Cortancyl	C				
			Endoxan	C				
			Mesna	C				
			Mopral	C				

Date: 07/10/98 **ISR Number:** 3103830-1 **Report Type:** Expedited (15-Day) **Company Report#:** 1997027914-1 **Age:** 58 YR **Gender:** Female **IFU:** F

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Death	Atelectasis		Kytril	PS	Smithkline Beecham	INTRAMUSCULAR	5 MILLIGRAMS INTRAMUSCULAR	288 DAY
Hospitalization - Initial or Prolonged	Hypercapnia		Cortancyl	C				
	Hyperhidrosis		Endoxan	C				
	Hypotension		Mesna	C				
	Lung Disorder		Mopral	C				
	Mucous Membrane Disorder							
	Respiratory Failure							
	Sedation							

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Vomiting

<u>Report Source</u> Health Professional	<u>Product</u> Kytril Coriancyi Skenan Sporanox	<u>Role</u> PS C C C	<u>Manufacturer</u>	<u>Route</u> INTRAVENOUS	<u>Dose</u> 3 MILLIGRAMS	<u>Duration</u>
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Date: 07/17/98 **ISR Number:** 3106264-9 **Report Type:** Expedited (15-Day) **Company Report#:** FR02-09188 **Age:** 55 YR **Gender:** Female **I/FU:** 1

<u>Outcome</u> Hospitalization - Initial or Prolonged	<u>PT</u> Dermatitis Eczema Mouth Ulceration	<u>Report Source</u> Foreign Health Professional	<u>Product</u> Taxotere Dexamethasone Kytril	<u>Role</u> PS SS SS	<u>Manufacturer</u>	<u>Route</u> INTRAVENOUS ORAL INTRAVENOUS	<u>Dose</u> MONTHLY IV MONTHLY PO MONTHLY IV	<u>Duration</u>
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Date: 07/24/98 **ISR Number:** 3108921-7 **Report Type:** Expedited (15-Day) **Company Report#:** 19980159371 **Age:** 23 YR **Gender:** Female **I/FU:** F

<u>Outcome</u> Hospitalization - Initial or Prolonged	<u>PT</u> Arthralgia Arthropathy Bone Infection Infarction Mixed Connective Tissue Disease Myalgia Necrosis Pain Sacroiliitis	<u>Report Source</u>	<u>Product</u> Kytril Cortancyl Endoxan Mesna Mopral	<u>Role</u> PS C C C C	<u>Manufacturer</u> Smithkline Beecham	<u>Route</u> INTRAMUSCULAR	<u>Dose</u> 5 MILLIGRAMS	<u>Duration</u> 1 DAY
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Date: 07/30/98 **ISR Number:** 3112765-X **Report Type:** Expedited (15-Day) **Company Report#:** 1998018696-1 **Age:** 61 YR **Gender:** Female **I/FU:** 1

<u>Outcome</u> Hospitalization - Initial or Prolonged	<u>PT</u> Blood Alkaline Phosphatase Increased Rhabdomyolysis	<u>Report Source</u>	<u>Product</u> Kytril Dogmatil Endoxan Famrubicine Fluorouracil Mopral	<u>Role</u> PS C C C C C	<u>Manufacturer</u>	<u>Route</u> INTRAVENOUS	<u>Dose</u> INTRAVENOUS	<u>Duration</u> 3 DAY
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Date: 07/30/98 **ISR Number:** 3112766-1 **Report Type:** Expedited (15-Day) **Company Report#:** 1998018721-1 **Age:** 55 YR **Gender:** Female **I/FU:** 1

<u>Outcome</u> Hospitalization - Initial or Prolonged	<u>PT</u> Dermatitis Dermatitis Bullous Eczema Mouth Ulceration Rash Pustular	<u>Report Source</u>	<u>Product</u> Kytril Dexamethasone Taxotere	<u>Role</u> PS C C	<u>Manufacturer</u>	<u>Route</u> INTRAVENOUS	<u>Dose</u> 3 MILLIGRAM INTRAVENOUS	<u>Duration</u>
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FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

Date: 08/03/98		ISR Number: 3112283-9	Report Type: Expedited (15-Day)	Company Report#: 199807299-2	Age: 63 YR	Gender: Female	IFU: I
<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u> <u>Duration</u>
Death	Bone Marrow Depression	Health Professional	Kytril	PS	Smithkline Beecham	ORAL	3 MILLIGRAMS
Hospitalization - Initial or Prolonged	Haemoglobin Decreased		Actrapid	C			
	Leukopenia		Hycamtin	C			
	Pyrexia		Solumedrol	C			
	Sepsis						
	Thrombocytopenia						
Date: 08/10/98		ISR Number: 3114853-0	Report Type: Expedited (15-Day)	Company Report#: 1998019249-1	Age: 54 YR	Gender: Female	IFU: I
<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u> <u>Duration</u>
Other	Aspartate	Health Professional	Kytril	PS	Smithkline Beecham	ORAL	ORAL 5 DAY
	Aminotransferase Increased		Docetaxel Hydrate	C			
	Blood Lactate		Fadrozole				
	Dehydrogenase Increased		Hydrochloride	C			
	Leukopenia		Hydrate				
			Medroxyprogesterone	C			
			Acetate	C			
			Ramosetron	C			
			Hydrochloride	C			
			Toremifene Citrate	C			
Date: 08/10/98		ISR Number: 3116713-8	Report Type: Expedited (15-Day)	Company Report#: 1998019570-1	Age: 48 YR	Gender: Female	IFU: I
<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u> <u>Duration</u>
Other	Haemoglobin Decreased	Health Professional	Kytril	PS		INTRAVENOUS	3 MILLIGRAMS
	Leukopenia		Docetaxal Hydrate	C			INTRAVENOUS 1 DAY
	Neutropenia		Teprenone	C			
Date: 08/11/98		ISR Number: 3115401-1	Report Type: Expedited (15-Day)	Company Report#: 1998019252-1	Age: 75 YR	Gender: Female	IFU: I
<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u> <u>Duration</u>
Hospitalization - Initial or Prolonged	Anaemia	Health Professional	Kytril	PS	Smithkline Beecham	ORAL	ORAL 5 DAY
	Leukopenia		Azasetron	C			
	Thrombocytopenia		Hydrochloride	C			
			Cyclophosphamide	C			
			Fluorouracil	C			
			Pirarubicin	C			
			Hydrochloride	C			
			Toremifene Citrate	C			
Date: 08/13/98		ISR Number: 3116706-0	Report Type: Expedited (15-Day)	Company Report#: 1998019365-1	Age: 64 YR	Gender: Female	IFU: I
<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u> <u>Duration</u>
Other	Leukopenia	Health Professional	Kytril	PS			INTRAVENOUS ORAL
			Docetaxal Hydrate	C			
			Hydrocortisone	C			
			Sodium Succinate	C			

FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

Date: 08/13/98										ISR Number: 3116710-2										Report Type: Expedited (15-Day)										Company Report#: 1998019366-1										Age: 46 YR										Gender: Female										I/FU: 1																																																	
Outcome										PT										Report Source										Product										Role										Manufacturer										Route										Dose										Duration																													
Other										Alopecia										Health Professional										Kytril										PS																																																																					
										Neutropenia																				Docetaxel Hydrate										C																																																																					
										Neutropenia																				Goserelin Acetate										C																																																																					
Date: 08/25/98										ISR Number: 3121759-X										Report Type: Expedited (15-Day)										Company Report#: 1998019283-1										Age: 65 YR										Gender: Male										I/FU: 1																																																	
Outcome										PT										Report Source										Product										Role										Manufacturer										Route										Dose										Duration																													
Death										Condition Aggravated										Health Professional										Kytril										PS										Smithkline Beecham										INTRAVENOUS										9 MILLIGRAMS										DAY																													
										Drug Ineffective																																																																																																			
										Dyskinesia																				Laroxyl										C																																																																					
										Nausea																				(Amitriptyline)																																																																															
										Vipoma																				Pro-Dafalgan										C																																																																					
										Vomiting																				(Paracetamol)										C																																																																					
																														Sandostatin										C																																																																					
																														(Octreotide)										C																																																																					
																														Zophren										C																																																																					
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Date: 09/01/98										ISR Number: 3124864-7										Report Type: Expedited (15-Day)										Company Report#: 1998021278-1										Age: 74 YR										Gender: Female										I/FU: 1																																																	
Outcome										PT										Report Source										Product										Role										Manufacturer										Route										Dose										Duration																													
Hospitalization - Initial or Prolonged										Cystitis Haemorrhagic										Health Professional										Kytril										PS										Smithkline Beecham										INTRAVENOUS										3 MILLIGRAMS																																							
																														Paraplatin										C																																																																					
																														(Carboplatin)										C																																																																					
																														Vepeside (Etoposide)										C																																																																					
Date: 09/15/98										ISR Number: 3130223-3										Report Type: Expedited (15-Day)										Company Report#: 1998019570-1										Age: 48 YR										Gender: Female										I/FU: F																																																	
Outcome										PT										Report Source										Product										Role										Manufacturer										Route										Dose										Duration																													
Other										Haemoglobin Decreased										Health Professional										Kytril										PS										Smithkline Beecham										INTRAVENOUS										3 MILLIGRAMS										DAY																													
										Leukopenia																																																																																																			
										Neutropenia																				Docetaxal Hydrate										C																																																																					
																														Teptenone										C																																																																					
Date: 09/23/98										ISR Number: 3134338-5										Report Type: Expedited (15-Day)										Company Report#: 199801443-1										Age: 50 YR										Gender: Female										I/FU: F																																																	
Outcome										PT										Report Source										Product										Role										Manufacturer										Route										Dose										Duration																													
Life-Threatening Hospitalization - Initial or Prolonged										Hepatitis										Health Professional										Kytril										PS										Smithkline Beecham										INTRAVENOUS										12 MILLIGRAMS										DAY																													
										Liver Function Test Abnormal																																																																																																			
										Prothrombin Level Abnormal																				Ciflox										C																																																																					
																														Flagyl										C																																																																					
																														Forene										C																																																																					
																														Primperan										C																																																																					
																														Pro-Dafalgan										C																																																																					
																														Raniplex										C																																																																					
																														Temgesic										C																																																																					

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 09/30/98	ISR Number: 3136497-7	Report Type: Expedited (15-Day)	Company Report#: 1998023379-1	Age:	Gender: Female	I/FU: 1
Outcome	PT	Report Source	Product	Role	Manufacturer	Route
Other	Convulsion	Health Professional	Kytril	PS	Smithkline Beecham	ORAL
			Calcium Folinat	C		<u>Duration</u>
			Cisplatin	C		3 DAY
			Fluorouracil	C		
			Metoclopramide	C		
Date: 10/09/98	ISR Number: 3141211-5	Report Type: Expedited (15-Day)	Company Report#: 1998023939-1	Age: 61 YR	Gender: Male	I/FU: 1
Outcome	PT	Report Source	Product	Role	Manufacturer	Route
Hospitalization - Initial or Prolonged	Abdominal Pain Hepatic Function Abnormal Jaundice	Health Professional	Kytril	PS	Smithkline Beecham	ORAL
			Azasetron	C		<u>Duration</u>
			Hydrochloride			4 DAY
			Doxorubicin	C		
			Hydrochloride	C		
			Fluorouracil	C		
			Heparin	C		
Date: 10/14/98	ISR Number: 3141280-2	Report Type: Expedited (15-Day)	Company Report#: 1998024401-1	Age: 57 YR	Gender: Female	I/FU: 1
Outcome	PT	Report Source	Product	Role	Manufacturer	Route
Life-Threatening Hospitalization - Initial or Prolonged	Depressed Level Of Consciousness Dyskinesia	Health Professional	Kytril	PS	Smithkline Beecham	INTRAVENOUS
			Cyclophosphamide	C		<u>Duration</u>
						3 MILLIGRAMS INTRAVENOUS
Date: 10/14/98	ISR Number: 3141282-6	Report Type: Expedited (15-Day)	Company Report#: 1998023379-1	Age: 53 YR	Gender: Female	I/FU: F
Outcome	PT	Report Source	Product	Role	Manufacturer	Route
Other	Convulsion Hyperacusis	Health Professional	Kytril	PS	Smithkline Beecham	ORAL
			Calcium Folinat	C		<u>Duration</u>
			Cisplatin	C		3 DAY
			Fluorouracil	C		
			Metoclopramide	C		
Date: 10/14/98	ISR Number: 3141288-7	Report Type: Expedited (15-Day)	Company Report#: 1998024217-1	Age: 62 YR	Gender: Female	I/FU: 1
Outcome	PT	Report Source	Product	Role	Manufacturer	Route
Hospitalization - Initial or Prolonged	Anaemia Leukopenia Thrombocytopenia	Health Professional	Kytril	PS	Smithkline Beecham	ORAL
			Cyclophosphamide	C		<u>Duration</u>
			Doxorubicin	C		4 MILLIGRAMS ORAL
			Hydrochloride	C		4 DAY
			Loxoprofen Sodium	C		
			Roxatidine Acetate	C		
			Hydrochloride	C		
			Tepranone	C		
			Vincristine Sulfate	C		

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 10/14/98	ISR Number: 3141290-5	Report Type: Expedited (15-Day)	Company Report#: 1998020255-1	Age: 47 YR	Gender: Female	I/RU: I
Outcome: Life-Threatening Hospitalization - Initial or Prolonged	PT: Hypotension	Report Source: Health Professional	Product: Kytril	Route: INTRAVENOUS	Dose: 3 MILLIGRAMS INTRAVENOUS AND ORAL	Duration:
			Cyclophosphamide Fluorouracil Methotrexate	Role: PS C C C	Manufacturer:	
					Smithkline Beecham	
Date: 10/21/98	ISR Number: 3144496-4	Report Type: Expedited (15-Day)	Company Report#: 1998024401-1	Age: 57 YR	Gender: Female	I/RU: F
Outcome: Life-Threatening Hospitalization - Initial or Prolonged	PT: Anaphylactic Reaction Blood Pressure Decreased Coma Depressed Level Of Consciousness Dyskinesia	Report Source:	Product: Kytril	Route: INTRAVENOUS	Dose: 3MILLIGRAMS INTRAVENOUS	Duration:
			Cyclophosphamide	Role: PS C	Manufacturer: Smithkline Beecham	
Date: 10/29/98	ISR Number: 3149583-2	Report Type: Expedited (15-Day)	Company Report#: 1998025290-1	Age: 52 YR	Gender: Female	I/RU: I
Outcome: Hospitalization - Initial or Prolonged	PT: Headache Leukopenia Peritoneal Disorder	Report Source:	Product: Kytril (Granisetron) Carboplatin Dexamethasone Diphenhydramine Docetaxel Hydrate Ranitidine Hydrochloride	Route: ORAL	Dose: ORAL	Duration: 3 DAY
				Role: PS C C C C C	Manufacturer: Smithkline Beecham	
Date: 11/02/98	ISR Number: 3155937-0	Report Type: Expedited (15-Day)	Company Report#: 1998026016-1	Age: 68 YR	Gender: Female	I/RU: I
Outcome: Hospitalization - Initial or Prolonged	PT: Faecal Incontinence Fall Leukopenia Sepsis Thrombocytopenia	Report Source: Health Professional	Product: Kytril	Route: ORAL	Dose: 2 MILLIGRAMS ORAL	Duration: 4 DAY
			Carboplatin Dexamethasone Acetate Dephenhydramine Tannate Docetaxel Hydrate Ranitidine Hydrochloride	Role: PS C C C C C	Manufacturer:	
Date: 11/16/98	ISR Number: 3158351-7	Report Type: Expedited (15-Day)	Company Report#: 1998026763-1	Age: 73 YR	Gender: Female	I/RU: I
Outcome: Hospitalization - Initial or Prolonged	PT: Leukopenia	Report Source: Health Professional	Product: Kytril	Route: ORAL	Dose: 2 MILLIGRAMS, ORAL	Duration: 10 DAY
			Fluorouracil	Role: PS C	Manufacturer: Smithkline Beecham	

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 11/16/98	ISR Number: 3158353-0	Report Type: Expedited (15-Day)	Company Report#: 1998027068-1	Age: 81 YR	Gender: Female	IFU: 1
Outcome: Hospitalization - Initial or Prolonged	PT: Neutropenia Thrombocytopenia	Report Source: Health Professional	Product: Kytril Cisplatin Fluouracil	Role: PS C C	Manufacturer: Smithkline Beecham	Route: ORAL ORAL
Dose: 2 MILLIGRAMS ORAL	Duration: 5 DAY					
Date: 11/17/98	ISR Number: 3162312-1	Report Type: Expedited (15-Day)	Company Report#: 1998026814-1	Age: 52 YR	Gender: Female	IFU: 1
Outcome: Death Hospitalization - Initial or Prolonged	PT: Bowel Sounds Abnormal Fistula Ileus Paralytic Metastases To Bone	Report Source: Health Professional	Product: Kytril Cefotiam Hydrochloride Cisplatin Famotidine Irinotecan Hydrochloride (Irinotecan) Metoclopramide Ondanesetron Hydrochloride (Ondanesetron) Sodium Bicarbonate	Role: PS C C C C C C C C C	Manufacturer: Smithkline Beecham	Route: ORAL ORAL
Dose: 2 MILLIGRAMS	Duration: 5 DAY					
Date: 11/24/98	ISR Number: 3162313-3	Report Type: Expedited (15-Day)	Company Report#: 1998026883-1	Age: 65 YR	Gender: Female	IFU: 1
Outcome: Other	PT: Dysthymic Disorder Myocardial Infarction	Report Source: Health Professional	Product: Kytril Cisplatin Famotidine Furosemide Irinotecan Hydrochloride Sodium Bicarbonate	Role: PS C C C C C C	Manufacturer: Smithkline Beecham	Route: ORAL ORAL
Dose: 2 MILLIGRAMS	Duration: 1 DAY					
Date: 12/10/98	ISR Number: 3169074-2	Report Type: Expedited (15-Day)	Company Report#: 1998029008-1	Age: 70 YR	Gender: Female	IFU: 1
Outcome: Other	PT: Leukopenia Thrombocytopenia	Report Source: Health Professional	Product: Kytril (Granisetron) Smithkline Beecham Domperidone Furosemide Irinotecan Hydrochloride Nedaplatin Ramosetron Hydrochloride	Role: PS C C C C C C	Manufacturer: Smithkline Beecham	Route: ORAL ORAL
Dose: 2 MILLIGRAMS ORAL	Duration: 6 DAY					

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 12/10/98 ISR Number: 3169076-6 Report Type: Expedited (15-Day) Company Report#: 1998028717-1		Age: 75 YR Gender: Male	IFU: I
Outcome: Hospitalization - Initial or Prolonged	PT: Clostridium Colitis Diarrhoea	Report Source: Health Professional	Product: Kytril (Granisetron) Smithkline Beecham
		Role: PS C C C	Manufacturer: Smithkline Beecham
		Route: ORAL	Dose: 2 MILLIGRAMS ORAL
			Duration: 2 DAY
Date: 12/10/98 ISR Number: 3169120-6 Report Type: Expedited (15-Day) Company Report#: 1998026814-1			
Outcome: Death Hospitalization - Initial or Prolonged	PT: Breath Sounds Decreased Condition Aggravated Ileus Paralytic Metastases To Bone Metastatic Neoplasm Vesical Fistula	Report Source: Health Professional	Product: Kytril (Granisetron)
		Role: PS C C C C C C	Manufacturer: Smithkline Beecham
		Route: ORAL	Dose: 2 MILLIGRAMS ORAL
			Duration: 5 DAY
Date: 12/10/98 ISR Number: 3169148-6 Report Type: Expedited (15-Day) Company Report#: 1998028689-1			
Outcome: Other	PT: Bone Marrow Depression C-Reactive Protein Increased Hepatic Function Abnormal Pyrexia	Report Source: Health Professional	Product: Kytril
		Role: PS C C C	Manufacturer: Smithkline Beecham
		Route: ORAL	Dose: 2 MILLIGRAMS ORAL
			Duration: 3 DAY
Date: 12/10/98 ISR Number: 3169211-X Report Type: Expedited (15-Day) Company Report#: 1998025290-1			
Outcome: Death Hospitalization - Initial or Prolonged	PT: Ascites Headache Leukopenia	Report Source:	Product: Kytril (Granisetron) Carboplatin Dexamethasone Diphenhydramine Docetaxel Hydrate Ramitidine Hydrochloride
		Role: PS C C C C C	Manufacturer: Smithkline Beecham
		Route: ORAL	Dose: ORAL
			Duration: 3 DAY
Date: 12/10/98 ISR Number: 3169212-1 Report Type: Expedited (15-Day) Company Report#: 1998028707-1			
Outcome: Hospitalization - Initial or Prolonged	PT: Flushing	Report Source: Health Professional	Product: Kytril (Granisetron) Cisplatin Picibanil
		Role: PS C C	Manufacturer: Smithkline Beecham
		Route: INTRAVENOUS	Dose: INTRAVENOUS
			Duration: 12 DAY

FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

Tegafur C

Date: 12/14/98 **ISR Number:** 3171324-3 **Report Type:** Expedited (15-Day) **Company Report#:** 1998029976-1 **Age:** 64 YR **Gender:** Male **I/FU:** 1

Outcome: Hospitalization - Initial or Prolonged
PT: Gastric Ulcer Haemorrhage
Report Source: Health Professional
Product: Kytril
Manufacturer: Smithkline Beecham
Role: PS
Route: ORAL
Dose: 4 MG ORAL/CONTINUOUS INTRAVENOUS
Duration: 5 DAY

Date: 12/15/98 **ISR Number:** 3171295-X **Report Type:** Expedited (15-Day) **Company Report#:** 1998029816-1 **Age:** 73 YR **Gender:** Female **I/FU:** 1

Outcome: Other
PT: Alanine Aminotransferase Increased
Report Source: Health Professional
Product: Kytril
Manufacturer: Smithkline Beecham
Role: PS
Route: INTRAVENOUS
Dose: 3 MILLIGRAMS
Duration:

Date: 12/15/98 **ISR Number:** 3171337-1 **Report Type:** Expedited (15-Day) **Company Report#:** 1998029817-1 **Age:** 50 YR **Gender:** Female **I/FU:** 1

Outcome: Hospitalization - Initial or Prolonged
PT: Liver Function Test Abnormal
Report Source: Health Professional
Product: Kytril
Manufacturer: Smithkline Beecham
Role: PS
Route: INTRAVENOUS
Dose: CONTINUOUS INTRAVENOUS; 2 MILLIGRAMS; ORAL
Duration: 6 DAY

Date: 12/17/98 **ISR Number:** 3171566-7 **Report Type:** Expedited (15-Day) **Company Report#:** 1998029549-1 **Age:** 61 YR **Gender:** Male **I/FU:** 1

Outcome: Other
PT: Thrombocytopenia
Report Source: Health Professional
Product: Kytril
Manufacturer: Smithkline Beecham
Role: PS
Route: INTRAVENOUS
Dose: INTRAVENOUS
Duration: 6 DAY

FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

Date: 12/17/98		ISR Number: 3171570-9	Report Type: Expedited (15-Day)	Company Report#: 1998029542-1	Age: 50 YR	Gender: Female	I/FU: 1
Outcome Other	PT Neutropenia Thrombocytopenia	Report Source Health Professional	Product Kytril	Manufacturer Smithkline Beecham	Route INTRAVENOUS	Dose CONTINUOUS INTRAVENOUS	Duration
			Carboplatin	C			
			Dexamethasone	C			
			Diphenhydramine	C			
			Mirimostim	C			
			Paclitaxel	C			
			Ranitidine	C			
			Hydrochloride	C			
Date: 12/17/98		ISR Number: 3172351-2	Report Type: Expedited (15-Day)	Company Report#: 1998030065-1	Age: 50 YR	Gender: Female	I/FU: 1
Outcome Hospitalization - Initial or Prolonged	PT Hepatic Function Abnormal Liver Function Test Abnormal	Report Source Foreign Health Professional	Product Kytril	Manufacturer Smithkline Beecham	Route	Dose 2 MG ORAL	Duration 5 DAY
			Carboplatin	C			
			Dexamethasone	C			
			Paclitaxel	C			
			Phosphomycin	C			
Date: 12/17/98		ISR Number: 3172352-4	Report Type: Expedited (15-Day)	Company Report#: 1998030087-1	Age: 46 YR	Gender: Female	I/FU: 1
Outcome Hospitalization - Initial or Prolonged	PT Hepatic Function Abnormal	Report Source Health Professional	Product Kytril	Manufacturer	Route	Dose 2 MG ORAL	Duration 5 DAY
			Carboplatin	C			
			Dexamethasone	C			
			Paclitaxel	C			
Date: 12/21/98		ISR Number: 3172665-6	Report Type: Expedited (15-Day)	Company Report#: 1998030010-1	Age: 70 YR	Gender: Male	I/FU: 1
Outcome Hospitalization - Initial or Prolonged	PT Hepatic Function Abnormal Leukopenia Thrombocytopenia	Report Source Health Professional	Product Kytril	Manufacturer Smithkline Beecham	Route INTRAVENOUS ORAL	Dose INTRAVENOUS ORAL	Duration 5 DAY 2 DAY
			Kytril	PS			
			Cisplatin	SS			
			Diltiazem	C			
			Hydrochloride	C			
			Etoposide	C			
			Lansoprazole	C			
			Theophylline	C			
			Triazolam	C			
Date: 12/23/98		ISR Number: 3176382-8	Report Type: Expedited (15-Day)	Company Report#: 1998028707-1	Age: 75 YR	Gender: Male	I/FU: F
Outcome Hospitalization - Initial or Prolonged	PT Drug Hypersensitivity Pruritus Rash Erythematous	Report Source Health Professional	Product Kytril	Manufacturer Smithkline Beecham	Route INTRAVENOUS	Dose INTRAVENOUS	Duration 12 DAY
			Cisplatin	C			
			Picibanil	C			
			Tegafur	C			

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 01/05/99 ISR Number: 3178125-0 Report Type: Expedited (15-Day) Company Report#: 1998030855-1

Outcome Hospitalization - Initial or Prolonged	PT Arthralgia Blood Bilirubin Increased Hepatitis Pyrexia Sepsis Serum Sickness	Report Source	Product Kytril Amlor Antilymphocitic Serum Debridat Innovane Lasix Neoral Neupogen Polaramine Pro-Dafalgan Solu-Medrol Sorbitol	Role PS C C C C C C C C C C C	Manufacturer Smithkline Beecham	Route INTRAVENOUS	Dose INTRAVENOUS	Duration 8 DAY	Age: 50 YR	Gender: Male	I/FU: 1
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Date: 01/13/99 ISR Number: 3183650-2 Report Type: Expedited (15-Day) Company Report#: 1998028717-1

Outcome Hospitalization - Initial or Prolonged	PT Clostridium Colitis Diarrhoea	Report Source Health Professional	Product Kytril Cefazidime Nedaplatin Piperacillin Sodium	Role PS C C C	Manufacturer Smithkline Beecham	Route ORAL	Dose 2 MG, ORAL	Duration 2 DAY	Age: 75 YR	Gender: Male	I/FU: F
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Date: 01/19/99 ISR Number: 3181951-5 Report Type: Expedited (15-Day) Company Report#: 1999000154-1

Outcome Hospitalization - Initial or Prolonged	PT Attention Deficit/Hyperactivity Disorder Balance Disorder Coordination Abnormal Drug Effect Decreased Hyporeflexia Tremor	Report Source Health Professional	Product Granisetron Prochlorperazine	Role PS C	Manufacturer Smithkline Beecham	Route	Dose	Duration 1 DAY	Age: 65 YR	Gender: Female	I/FU: 1
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Date: 01/19/99 ISR Number: 3181952-7 Report Type: Expedited (15-Day) Company Report#: 1999000038-1

Outcome Hospitalization - Initial or Prolonged	PT Thrombocytopenia	Report Source Health Professional	Product Granisetron Ascorbic Acid Carboplatin Cisplatin	Role PS C C C	Manufacturer Smithkline Beecham	Route INTRAVENOUS	Dose 2 MILLIGRAMS	Duration 6 DAY	Age: 56 YR	Gender: Female	I/FU: 1
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Date: 01/19/99 ISR Number: 3182332-0 Report Type: Expedited (15-Day) Company Report#: 1999000049-1

Outcome Hospitalization - Initial or Prolonged	PT Blood Chloride Decreased Blood Potassium Decreased Blood Sodium Decreased Electrolyte Imbalance Leukopenia	Report Source Health Professional	Product Kytril Ascorbic Acid Cisplatin Eprubicin	Role PS C C C	Manufacturer Smithkline Beecham	Route ORAL	Dose ORAL	Duration 6 DAY	Age: 34 YR	Gender: Female	I/FU: 1
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**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 01/29/99 **ISR Number:** 3188597-3 **Report Type:** Expedited (15-Day) **Company Report#:** F99/00039/SIM03 **Age:** 50 YR **Gender:** Male **IFU:** I

Outcome: Hospitalization - Initial or Prolonged
PT: Hepatitis Cholestatic
 Liver Function Test Abnormal
 Required
 Intervention to Prevent Permanent Impairment/Damage

Report Source: Foreign Consumer Representative

Product: Neoral
 Pro Dofalgan
 Kytril
 Solu-Medrol
 Neupogen

Role: PS
 SS
 SS
 C
 C

Manufacturer:

Route: ORAL
 INTRAVENOUS
 INTRAVENOUS

Dose: ORAL
 6 G
 INTRAVENOUS

Duration:

Date: 02/09/99 **ISR Number:** 3194441-0 **Report Type:** Expedited (15-Day) **Company Report#:** 1268/11153 **Age:** 55 YR **Gender:** Female **IFU:** I

Outcome: Hospitalization - Initial or Prolonged
PT: Neutropenia
 Other

Report Source: Foreign Consumer Representative

Product: Medrol Tablets (4 Mg)
 Pamidronique Acid (Aredia) 30 Mg
 Docetaxel (Taxotere) (80 Mg)
 Granisetron (Kytril)
 Paroxetine
 Fluicason
 Levothyroxine
 Loflazepate Ethyl

Role: PS
 SS
 SS
 SS
 C
 C
 C
 C

Manufacturer:

Route: ORAL
 INTRAVENOUS
 INTRAVENOUS
 INTRAVENOUS

Dose: 16 MG-3Q1DY;
 ORAL
 30 MG-3Q1DY;IV
 80 MG-2Q1DY;
 IV
 IV

Duration:

Date: 02/12/99 **ISR Number:** 3198098-4 **Report Type:** Expedited (15-Day) **Company Report#:** 1999002898-1 **Age:** 38 YR **Gender:** Male **IFU:** I

Outcome: Hospitalization - Initial or Prolonged

PT: Delirium
 Depressed Level Of Consciousness
 Dizziness
 Mydriasis
 Visual Disturbance

Report Source: Health Professional

Product: Kytril (Granisetron)
 Smithkline Beecham
 Cisplatin
 Huscode
 (Dihydrocodeine Phosphate)
 Metoclopramide
 Morphine Sulphate

Role: PS
 C
 C
 C
 C

Manufacturer: Smithkline Beecham

Route: INTRAVENOUS

Dose:

Duration: 1 DAY

Date: 02/22/99 **ISR Number:** 3205267-3 **Report Type:** Expedited (15-Day) **Company Report#:** 1999003277-1 **Age:** 38 YR **Gender:** Male **IFU:** I

Outcome: Hospitalization - Initial or Prolonged
 Other

PT: Blood Creatinine Increased
 Blood Potassium Increased
 Blood Urea Increased
 Haemodialysis
 Oliguria
 Renal Failure Acute

Report Source: Health Professional

Product: Kytril (Granisetron)
 Smithkline Beecham

Role: PS

Manufacturer: Smithkline Beecham

Route: ORAL

Dose: ORAL

Duration: 3 DAY

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

<u>Date</u>	<u>ISRN</u>	<u>ISRN Number</u>	<u>Report Type</u>	<u>Periodic</u>	<u>Company Report#</u>	<u>Report#</u>	<u>Report Source</u>	<u>Health</u>	<u>Professional</u>	<u>Product</u>	<u>Taxol</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Age</u>	<u>Gender</u>	<u>Dose</u>	<u>Duration</u>	<u>I/FU</u>
03/01/99	3417473-3	3417473-3	Injection Site Reaction	Periodic	M080279		Health Professional			Taxol		PS	Bristol Myers Squibb Co Pharmaceutical Research Institute	INTRAVENOUS		Male	337 MG IV CONTINUING 1 CYCLES	1	I
										Benadryl		SS		INTRAVENOUS			50MG IV 1 CYCLES		
										Tagamet		SS		INTRAVENOUS			300MG IV 1 CYCLES		
										Kytril		SS		INTRAVENOUS			1 MG IV 1 CYCLES		
										Decadron		SS		INTRAVENOUS			20 MG IV 1 CYCLES		
03/01/99	3440159-6	3440159-6	Periodic	Periodic	1998007051-1		Health Professional			Kytril Smithkline Beecham		PS	Smithkline Beecham	INTRAVENOUS	9 MON	Male	200 MICROGRAMS 1.0 DAILY	1	I
										Kytril Smithkline Beecham		SS	Smithkline Beecham				1.0 DAILY	1	DAY
										Kytril Smithkline Beecham		SS	Smithkline Beecham				1.0 DAILY	1	DAY
										Etoposide		C					1.0 DAILY	1	DAY
										Normal Saline		C						1	DAY
03/01/99	3440161-4	3440161-4	Periodic	Periodic	1998007052-1		Health Professional			Kytril Smithkline Beecham		PS	Smithkline Beecham	INTRAVENOUS	14 YR	Male	1.0 DAILY	1	I
										Kytril Smithkline Beecham		SS	Smithkline Beecham						
										Kytril Smithkline Beecham		SS	Smithkline Beecham						
										Vincristine		C							
										Methotrexate		C							
03/01/99	3440164-X	3440164-X	Periodic	Periodic	1998007054-1		Health Professional			Kytril Smithkline Beecham		PS	Smithkline Beecham	INTRAVENOUS	10 YR	Female	1 MILLIGRAMS 1.0 DAILY	1	I
										Kytril Smithkline Beecham		SS	Smithkline Beecham						
										Kytril Smithkline Beecham		SS	Smithkline Beecham						
										Kytril Smithkline Beecham		SS	Smithkline Beecham						
										Kytril Smithkline Beecham		SS	Smithkline Beecham						

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Beecham
Methotrexate
Vincristine
SS Smithkline Beecham
C
C

1 DAY

Date: 03/01/99 ISR Number: 3440168-7 Report Type: Periodic Company Report#: 1998009318-1

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	Age:	Gender:	I/FU:
Migraine		Health Professional	Kytril Smithkline Beecham	PS	Smithkline Beecham	INTRAVENOUS	100 MICROGRAMS INTRAVENOUS	1 DAY		Female	1
			Kytril Smithkline Beecham	SS	Smithkline Beecham	INTRAVENOUS	100 MICROGRAMS INTRAVENOUS				
			Kytril Smithkline Beecham	C	Smithkline Beecham	INTRAVENOUS	100 MICROGRAMS 1.0 DAILY INTRAVENOUS				
			Cytosax (Cyclophosphamide)	C							
			Methotrexate	C							
			5fu (Fluorouracil)	C							

Date: 03/01/99 ISR Number: 3440170-5 Report Type: Periodic Company Report#: 1998010930-1

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	Age:	Gender:	I/FU:
Anxiety		Health Professional	Kytril Smithkline Beecham	PS	Smithkline Beecham	INTRAVENOUS	INTRAVENOUS	1 DAY		Female	1
Blood Pressure Increased			Kytril Smithkline Beecham	SS	Smithkline Beecham	INTRAVENOUS	INTRAVENOUS	1 DAY			
Dyspnoea			Doxorubicin	C							
Tremor			Cyclophosphamide	C							
			Coumadin (Warfarin)	C							
			Septira (Sulfamethoxazole/Trimetho)	C							
			Mexiletine	C							
			Pepticid (Famotidine)	C							

Date: 03/01/99 ISR Number: 3440181-X Report Type: Periodic Company Report#: 1998010964-1

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	Age:	Gender:	I/FU:
Drug Ineffective		Consumer	Kytril Smithkline Beecham	PS	Smithkline Beecham	INTRAVENOUS	1 MILLIGRAMS 1.0 DAILY INTRAVENOUS	7 DAY		Female	1
Nausea			Adriamycin (Doxorubicin)	C							

Date: 03/01/99 ISR Number: 3440184-5 Report Type: Periodic Company Report#: 1998022122-1

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	Age:	Gender:	I/FU:
Micturition Urgency											
Pain											

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Urinary Retention

<u>Report Source</u> Health Professional	<u>Product</u> Kytril Smithkline Beecham	<u>Role</u> PS	<u>Manufacturer</u> Smithkline Beecham	<u>Route</u> INTRAVENOUS	<u>Dose</u> 1 MILLIGRAMS INTRAVENOUS	<u>Duration</u> 3 DAY
	Kytril Smithkline Beecham	SS	Smithkline Beecham	ORAL	1 MILLIGRAMS 2.0 DAILY ORAL	
	Taxol	C				
	Carboplatin	C				
	Benadryl	C				
	(Diphenhydramine)	C				
	Tagamet (Cimetidine)	C				
	Compazine	C				
	(Prochlorperazine)	C				
	Ativan (Lorazepam)	C				
	Ms Contin (Morphine Sulfate)	C				
	Decadron	C				
	(Dexamethasone)	C				
	Gemzar (Gemcitabine Hydrochloride)	C				
	Zofran (Ondansetron Hydrochloride)	C				
	Duragesic Patch	C				
	(Fentanyl Citrate)	C				

Date: 03/01/99 ISR Number: 3440195-X Report Type: Periodic Company Report#: 1998022131-1

<u>Outcome</u> PT Dermatitis Urticaria	<u>Report Source</u> Health Professional	<u>Product</u> Kytril Smithkline Beecham	<u>Role</u> PS	<u>Manufacturer</u> Smithkline Beecham	<u>Route</u> INTRAVENOUS	<u>Dose</u> INTRAVENOUS	<u>Duration</u> 6 DAY
		Kytril Smithkline Beecham	SS	Smithkline Beecham	ORAL	ORAL	6 DAY
		Premarin (Estrogens Conjugated)	C				
		Taxol	C				
		Carboplatin	C				
		Senokot S (Ducosate Sodium And Senna)	C				

Date: 03/01/99 ISR Number: 3440197-3 Report Type: Periodic Company Report#: 1998023611-1

<u>Outcome</u> PT Palmar-Plantar Erythrodyssaesthesia Syndrome	<u>Report Source</u> Consumer	<u>Product</u> Kytril Smithkline Beecham	<u>Role</u> PS	<u>Manufacturer</u> Smithkline Beecham	<u>Route</u> INTRAVENOUS	<u>Dose</u> 1.0 DAILY INTRAVENOUS	<u>Duration</u> 5 DAY
		Carboplatin	C				

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

<u>Date</u>	<u>ISRN</u>	<u>ISRN Number</u>	<u>Report Type</u>	<u>Periodic</u>	<u>Company Report#</u>	<u>Product</u>	<u>Report Source</u>	<u>PT</u>	<u>International Normalised Ratio</u>	<u>Outcome</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>	<u>Gender</u>	<u>I/FU</u>
03/01/99	3440209-7	3440209-7	Report Type: Periodic		1998028466-1	Kytril Smithkline Beecham Beecham Coumadin (Warfarin Sodium) Decadron (Dexamethasone) Vincristine Bcnu (Carmustine) Cyclophosphamide	Health Professional			International Normalised Ratio Increased	PS C C C C	Smithkline Beecham					I
03/02/99	3210325-3	3210325-3	Report Type: Expedited (15-Day)		1998030065-1	Kytril (Granisetron) Smithkline Beecham Carboplatin Dexamethasone Paclitaxel Phosphomycin	Health Professional			Hepatic Function Abnormal Liver Function Test Abnormal	PS C C C	Beecham	INTRAVENOUS	2 MILLIGRAMS INTRAVENOUS	5 DAY	Female	F
03/02/99	3210329-0	3210329-0	Report Type: Expedited (15-Day)		1998030087-1	Kytril Carboplatin Dexamethasone Paclitaxel	Health Professional			Hepatic Function Abnormal Liver Function Test Abnormal	PS C C C		INTRAVENOUS	2 MILLIGRAMS CONTINUOUS INTRAVENOUS	5 DAY	Female	F
03/02/99	3218788-4	3218788-4	Report Type: Direct			Vincristine Doxorubicin (Iv) Actinomycin-D (Iv) Kytril (Iv) Bactrim (Po) Fluonazole (Iv) Zantac (Iv) Reglan (Iv) Morphine Sulfate (Iv) Fentanyl (Iv)			Condition Aggravated Decreased Appetite Deep Vein Thrombosis Feeling Cold Vomiting	PS SS SS SS SS SS SS SS SS SS			INTRAVENOUS INTRAVENOUS INTRAVENOUS ORAL INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS	IV		Male	I

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 03/16/99	ISR Number: 3223101-2	Report Type: Expedited (15-Day)	Company Report#: 1999003277-1	Age: 58 YR	Gender: Male	I/FU: 1
Outcome: Hospitalization - Initial or Prolonged Other	PT: Blood Creatinine Increased Blood Potassium Increased Blood Urea Increased Haemodialysis Oliguria Renal Failure Acute	Report Source: Health Professional	Product: Kytril	Role: PS	Manufacturer: Smithkline Beecham	Route: ORAL Dose: ORAL Duration: 3 DAY
Date: 03/16/99	ISR Number: 3223118-8	Report Type: Expedited (15-Day)	Company Report#: 1999000049-1	Age: 34 YR	Gender: Female	I/FU: F
Outcome: Hospitalization - Initial or Prolonged	PT: Electrolyte Imbalance Leukopenia	Report Source: Health Professional	Product: Kytril (Granisetron) Smithkline Beecham Ascorbic Acid Cisplatin Epirubicin	Role: PS C C C	Manufacturer: Smithkline Beecham	Route: INTRAVENOUS Dose: INTRAVENOUS Duration: 2 DAY
Date: 03/16/99	ISR Number: 3223124-3	Report Type: Expedited (15-Day)	Company Report#: 1999000038-1	Age: 56 YR	Gender: Female	I/FU: F
Outcome: Hospitalization - Initial or Prolonged	PT: Thrombocytopenia	Report Source: Health Professional	Product: Kytril (Granisetron) Smithkline Beecham Ascorbic Acid Carboplatin Cisplatin	Role: PS C C C	Manufacturer: Smithkline Beecham	Route: INTRAVENOUS Dose: INTRAVENOUS Duration: 2 DAY
Date: 03/19/99	ISR Number: 3223653-2	Report Type: Expedited (15-Day)	Company Report#: 1999000154-1	Age: 65 YR	Gender: Female	I/FU: F
Outcome: Hospitalization - Initial or Prolonged	PT: Asthma Condition Aggravated Coordination Abnormal Dizziness Gait Disturbance Hyperreflexia Hyporeflexia Nervousness Retching Tremor Vomiting	Report Source: Health Professional	Product: Granisetron CI-994 (Developmental) Cprochlorperazine	Role: PS C C	Manufacturer: Smithkline Beecham	Route: Dose: Duration: 1 DAY
Date: 03/19/99	ISR Number: 3223749-5	Report Type: Direct	Company Report#:	Age: 44 YR	Gender: Female	I/FU: 1
Outcome: Hospitalization - Initial or Prolonged	PT: Cystitis Nausea Pain Pancreatitis Vomiting	Report Source:	Product: Irinotecan (Cpt 11) Decadron Kytril Vicodin	Role: PS SS SS C	Manufacturer:	Route: INTRAVENOUS Dose: 232 MG IV XT1 ; CYCLE 1 PO 1ST TX) 10MG IV 1MG PO Duration:

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Durageaic
Morphine

C
C

Date: 04/16/99 **ISR Number:** 3241770-8 **Report Type:** Expedited (15-Day) **Company Report#:** 1998028689-1 **Age:** 66 YR **Gender:** Male **IFU:** F

Outcome Other	PT Bone Marrow Depression C-Reactive Protein Increased Hepatic Function Abnormal Pyrexia	Report Source Health Professional	Product Kytril (Granisetron)	Role PS	Manufacturer Smithkline Beecham	Route ORAL	Dose 2 MILLIGRAMS ORAL	Duration 3 DAY
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Date: 04/27/99 **ISR Number:** 3247403-9 **Report Type:** Expedited (15-Day) **Company Report#:** 99-01534 **Age:** 44 YR **Gender:** Female **IFU:** I

Outcome Hospitalization - Initial or Prolonged	PT Cystitis Nausea Pain Pancreatitis Vomiting	Report Source Study Health Professional	Product Camptosar	Role PS	Manufacturer	Route INTRAVENOUS	Dose 232 MILLIGRAMS; ONE DOSE ONLY; INTRAVENOUS	Duration
			Decadron	SS		INTRAVENOUS	10 MILLIGRAMS; ONE DOSE ONLY;	
			Kytril	SS		ORAL	INTRAVENOUS; 1 MILLIGRAMS; ONE DOSE ONLY; ORAL	
			Vicodin Duragesic Patch	C C				

Date: 04/29/99 **ISR Number:** 3249690-X **Report Type:** Expedited (15-Day) **Company Report#:** 1999008197-1 **Age:** 71 YR **Gender:** Female **IFU:** I

Outcome Death	PT Bone Marrow Depression Diarrhoea Dyspepsia Gastritis Hepatic Failure Infectious Mononucleosis Liver Function Test Abnormal Mucosal Inflammation Oesophageal Ulcer Sepsis Vomiting	Report Source	Product Kytril (Granisetron) Smithkline Beecham Cisplaty Dermoval Di Antalvic Doliprane Fluoro-Uracil Gaviscon	Role PS C C C C C C	Manufacturer Smithkline Beecham	Route INTRAVENOUS	Dose	Duration 5 DAY
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Date: 05/04/99 **ISR Number:** 3253287-5 **Report Type:** Expedited (15-Day) **Company Report#:** 1999009113-1 **Age:** 48 YR **Gender:** Female **IFU:** I

Outcome Life-Threatening	PT Hypertension Loss Of Consciousness Nervous System Disorder	Report Source Health Professional	Product Kytril (Granisetron) Smithkline Beecham	Role PS	Manufacturer Smithkline Beecham	Route INTRAVENOUS	Dose 3 MILLIGRAMS INTRAVENOUS	Duration 1 DAY
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**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Docetaxel Hydrate C

Date: 05/07/99 **ISR Number:** 3256568-4 **Report Type:** Expedited (15-Day) **Company Report#:** B045808

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>	<u>Gender:</u> Female	<u>I/FU:</u> I
Hospitalization - Initial or Prolonged	Aspartate Aminotransferase Increased	Foreign Study Health Professional	Ifomide (Ifosfamide)	PS		INTRAVENOUS	2 G/DAY IV	4 DAY		
	Blood Creatinine Increased	Other	Nedaplatin	SS		INTRAVENOUS	100 MG/DAY IV	1 DAY		
	Blood Lactate		Bleomycin Hcl	SS		INTRAVENOUS	5 MG/DAY IV	5 DAY		
	Dehydrogenase Increased		(Granisetron Hcl)	SS		INTRAVENOUS	3 MG/DAY IV	3 DAY		
	Bone Marrow Depression		Uromitexan	C						
	Endotoxic Shock		Lenograstim	C						
	Hypotension		Cefminox Sodium	C						
	Leukopenia									
	Nausea									
	Pyrexia									
	Renal Failure									
	Sepsis									
	Thrombocytopenia									

Date: 05/07/99 **ISR Number:** 3256705-1 **Report Type:** Expedited (15-Day) **Company Report#:** 1999008197-1

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>	<u>Gender:</u> Female	<u>I/FU:</u> F
Death	Bone Marrow Depression		Kytril (Granisetron)	PS	Smithkline Beecham	INTRAVENOUS		5 DAY		
	Condition Aggravated		Smithkline Beecham Cisplatin	C						
	Diarrhoea		(Cisplatine)							
	Dyspepsia		Dermoval	C						
	Gastritis		(Clobetazol)							
	Hepatic Failure		Di Antalvic	C						
	Hepatitis		(Paracetamol,	C						
	Infectious Mononucleosis		Dextropropoxyphene)							
	Liver Function Test		Doliprane	C						
	Abnormal		(Paracetamol)	C						
	Mucosal Inflammation		Fluoro-Uracil	C						
	Oesophageal Ulcer		Gaviscon	C						
	Sepsis		Imovane (Zopiclone)	C						
	Vomiting		Loxen (Nicardipine)	C						
			Pevaryl (Econazole)	C						
			Primperan	C						
			(Metoclopramide)	C						
			Smecta (Diosmectite)	C						
			...	C						

Date: 06/08/99 **ISR Number:** 3277930-X **Report Type:** Expedited (15-Day) **Company Report#:** 1999012005-1

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>	<u>Gender:</u> Male	<u>I/FU:</u> I
Life-Threatening Hospitalization - Initial or Prolonged	Anaemia	Health Professional	Kytril (Granisetron)	PS	Smithkline Beecham	ORAL		4 DAY		
	Pyrexia		Smithkline Beecham Cisplatin	C						
	Renal Impairment		Fluorouracil	C						

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 06/22/99 **ISR Number:** 3289114-X **Report Type:** Expedited (15-Day) **Company Report#:** 1999013301-1 **Age:** 40 YR **Gender:** Male **I/FU:** 1

Outcome: Hospitalization - Initial or Prolonged

PT: Chest Discomfort
Dyspnoea
Laryngeal Oedema
Oedema
Pyrexia
Urticaria

Report Source: Product
Kytril (Granisetron)
Smithkline Beecham
Eloxatin
Solumedrol

Role: PS
C
C

Manufacturer: Smithkline Beecham

Route: INTRAVENOUS

Dose: INTRAVENOUS

Duration: 1 DAY

Date: 07/06/99 **ISR Number:** 3297733-X **Report Type:** Expedited (15-Day) **Company Report#:** 1999014595-1 **Age:** 53 YR **Gender:** Female **I/FU:** 1

Outcome: Death
Life-Threatening

PT: Coma
Convulsion
Hyponatraemia
Inappropriate
Antidiuretic Hormone
Secretion

Report Source: Product
Kytril (Granisetron)
Smithkline Beecham
Adriablastine
Endoxan
Vincristine

Role: PS
C
C
C

Manufacturer: Smithkline Beecham

Route: INTRAVENOUS

Dose: 6 MILLIGRAMS
INTRAVENOUS

Duration: 4 DAY

Date: 07/06/99 **ISR Number:** 3298279-5 **Report Type:** Expedited (15-Day) **Company Report#:** 1999014712-1 **Age:** 40 YR **Gender:** Male **I/FU:** 1

Outcome: Hospitalization - Initial or Prolonged

PT: Dyspnoea
Hypersensitivity
Laryngeal Oedema
Pyrexia
Urticaria

Report Source: Health
Professional

Role: PS
C
C

Manufacturer: Smithkline Beecham

Route: INTRAVENOUS

Dose: INTRAVENOUS

Duration: 1 DAY

Date: 07/09/99 **ISR Number:** 3300593-1 **Report Type:** Expedited (15-Day) **Company Report#:** 1999012005-1 **Age:** 72 YR **Gender:** Male **I/FU:** F

Outcome: Life-Threatening
Hospitalization - Initial or Prolonged

PT: Anaemia
Condition Aggravated
Pyrexia
Renal Impairment

Report Source: Foreign
Health
Professional

Role: PS
C
C

Manufacturer: Smithkline Beecham

Route: ORAL

Dose: ORAL

Duration: 4 DAY

Date: 07/13/99 **ISR Number:** 3302474-6 **Report Type:** Expedited (15-Day) **Company Report#:** 278/50467 **Age:** 53 YR **Gender:** Female **I/FU:** 1

Outcome: Death
Life-Threatening

PT: Coma
Convulsion
Hyponatraemia
Inappropriate
Antidiuretic Hormone
Secretion

Report Source: Foreign
Health
Professional
Company
Representative

Role: PS
SS
SS
SS

Manufacturer: Adriamycin Rdf
Endoxan
Vincristine
Kytril

Route: INTRAVENOUS

Dose: 60 MG/DAY; IV
400 MG/DAY
1.4 MG/DAY
3 MG-2QIDY

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 07/16/99	ISR Number: 3305648-3	Report Type: Expedited (15-Day)	Company Report#: 1999015932-1	Age:	Gender: Male	I/FU: 1
Outcome	PT	Report Source	Product	Role	Manufacturer	Route
Other	Haemolytic Uraemic Syndrome		Granisetron Aciclovir Cyclophosphamide Dexamethasone Sodium Phosphate	PS C C C	Smithkline Beecham	
Date: 08/09/99	ISR Number: 3328648-6	Report Type: Expedited (15-Day)	Company Report#: 1999-07-1367	Age:	Gender: Male	I/FU: 1
Outcome	PT	Report Source	Product	Role	Manufacturer	Route
Hospitalization - Initial or Prolonged	Abdominal Pain Diarrhoea Haemorrhagic Enterocolitis Haemorrhagic	Health Professional Company Representative	Intron A (Interferon Alfa-2b Recombinant) Injectable Motrin Kytril Senokot	PS SS SS C		
Date: 08/26/99	ISR Number: 3336508-X	Report Type: Expedited (15-Day)	Company Report#: 1999-07-1367	Age: 44 YR	Gender: Male	I/FU: F
Outcome	PT	Report Source	Product	Role	Manufacturer	Route
Hospitalization - Initial or Prolonged Other	Abdominal Pain Constipation Diarrhoea Haemorrhagic Enterocolitis Haemorrhagic Fatigue Nausea Oral Intake Reduced Orthostatic Hypotension Platelet Count Decreased Vomiting	Health Professional Company Representative	Intron A (Interferon Alfa-2b Recombinant) Injectable Motrin Tablets Kytril Senokot Tylenol	PS SS SS C C		INTRA VENOUS ORAL 40 MU 5XWK* INTRA VENOUS 400 MG QID ORAL
Date: 09/01/99	ISR Number: 3339229-2	Report Type: Expedited (15-Day)	Company Report#: 1999020607-1	Age:	Gender: Male	I/FU: 1
Outcome	PT	Report Source	Product	Role	Manufacturer	Route
Hospitalization - Initial or Prolonged Other	Abdominal Pain Constipation Diarrhoea Haemorrhagic Enterocolitis Haemorrhagic Platelet Count Decreased	Health Professional	Kytril Smithkline Beecham Intron A Motrin	PS C C	Smithkline Beecham	
Date: 09/01/99	ISR Number: 3339315-7	Report Type: Expedited (15-Day)	Company Report#: 1999020846-1	Age: 78 YR	Gender: Male	I/FU: 1
Outcome	PT	Report Source	Product	Role	Manufacturer	Route
Life-Threatening Hospitalization - Initial or Prolonged	Bradycardia Chest Pain Depressed Level Of Consciousness Heart Rate Decreased Hypotension	Health Professional	Kytril Smithkline Beecham Intron A Motrin	PS C C	Smithkline Beecham	

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Nausea

<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Health Professional	Kytril (Granisetron)	PS	Smithkline Beecham	INTRAVENOUS		
	Smithkline Beecham	C				
	Azulene Sulfonate	C				
	Betamethasone					
	Ranitidine	C				
	Hydrochloride	C				
	Sodium / L-Glutamine	C				
	Sucraifate	C				

Date: 09/01/99 **ISR Number:** 3339337-6 **Report Type:** Expedited (15-Day) **Company Report#:** 1999021790-1 **Age:** 66 YR **Gender:** Female **I/FU:** 1

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Other	Neutropenia	Health Professional	Kytril (Granisetron)	PS	Smithkline Beecham	ORAL	ORAL	7 DAY
	Platelet Count Decreased		Smithkline Beecham	C				
	Red Blood Cell Count Decreased		Carboplatin	C				
			Herbal Medicine	C				
			Paclitaxel	C				

Date: 09/03/99 **ISR Number:** 3341175-5 **Report Type:** Expedited (15-Day) **Company Report#:** 1999021792-1 **Age:** 57 YR **Gender:** Female **I/FU:** 1

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Other	Neutropenia	Health Professional	Kytril (Granisetron)	PS	Smithkline Beecham	ORAL	ORAL	7 DAY
			Smithkline Beecham	C				
			Carboplatin	C				
			Herbal Medicine	C				
			(Nos)	C				
			Methylprednisolone	C				
			Sodium Succinate	C				
			Metoclopramide	C				
			Paclitaxel	C				

Date: 09/07/99 **ISR Number:** 3342274-4 **Report Type:** Expedited (15-Day) **Company Report#:** 76774166 **Age:** 61 YR **Gender:** Male **I/FU:** 1

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Hospitalization - Initial or Prolonged Other	Angina Pectoris	Foreign Literature	Etoposide Injection (Mfr Unk)	PS		INTRAVENOUS	100 MG/SQ.M DAY IV	
	Arryentricular Block Complete	Health Professional	Cisplatin	SS		INTRAVENOUS DAY IV	80 MG/SQ.M DAY IV	
	Blood Pressure Systolic Decreased	Company Representative	Granisetron	SS		INTRAVENOUS	3 MG/DAY IV	
	Chest Pain		Ondansetron	SS		ORAL	4 MG/DAY ORAL	
	Electrocardiogram St Segment Abnormal							
	Heart Rate Decreased							
	Hyperhidrosis							
	Syncope							

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 09/08/99	ISR Number: 3344377-7	Report Type: Expedited (15-Day)	Company Report#: 1999021539-1	Age: 58 YR	Gender: Female	I/FU: 1
Outcome: Hospitalization - Initial or Prolonged	PT: Hepatic Enzyme Increased Liver Disorder	Report Source:	Product: Kytril (Granisetron) Smithkline Beecham	Role: PS	Manufacturer: Smithkline Beecham	Route: INTRAVENOUS
			Cisplatine Largactil Plitican	C C C		3 MILLIGRAMS; INTRAVENOUS 1 DAY
Date: 09/14/99	ISR Number: 3347355-7	Report Type: Expedited (15-Day)	Company Report#: B0070487A	Age: 50 YR	Gender: Male	I/FU: 1
Outcome: Life-Threatening Hospitalization - Initial or Prolonged	PT: Anaphylactic Shock Heart Rate Decreased Loss Of Consciousness	Report Source: Foreign Health Professional Company Representative	Product: Zantac Injection (Ranitidine) Hydrochloride) Granisetron Infusion (Granisetron)	Role: PS SS	Manufacturer:	Route: INTRAVENOUS INTRAVENOUS
						INTRAVENOUS INTRAVENOUS INFUSION
Date: 09/20/99	ISR Number: 3352515-5	Report Type: Expedited (15-Day)	Company Report#: 1999020846-1	Age: 78 YR	Gender: Male	I/FU: F
Outcome: Death Life-Threatening Hospitalization - Initial or Prolonged	PT: Bradycardia Chest Pain Depressed Level Of Consciousness Hypotension Nausea	Report Source: Health Professional	Product: Kytril (Granisetron) Azulene Sulfonate Betamethasone Ranitidine Hydrochloride Sodium/L-Glutame Sucralfate	Role: PS C C C C C	Manufacturer: Smithkline Beecham	Route: INTRAVENOUS
						1 DAY
Date: 09/29/99	ISR Number: 3360942-5	Report Type: Expedited (15-Day)	Company Report#: B0070487A	Age: 50 YR	Gender: Male	I/FU: F
Outcome: Life-Threatening Hospitalization - Initial or Prolonged Disability	PT: Anaphylactic Shock Anaphylactoid Reaction Chest Pain Erythema Flushing Heart Rate Decreased Hyperhidrosis Loss Of Consciousness Nausea Vomiting	Report Source: Foreign Health Professional	Product: Zantac (Formulation Unknown) (Ranitidine Hydrochloride) Zantac Injection (Ranitidine Hydrochloride) Kytril (Formulation Unknown) (Kytril) Granisetron Infusion (Granisetron) Vitamin B Complex Cancer Chemotherapy Dexamethasone Diphenhydramine	Role: PS SS SS SS SS C C C	Manufacturer:	Route: INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INFUSION
						SEE TEXT SEE TEXT SEE TEXT INFUSION

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 10/14/99	ISR Number: 3372973-X	Report Type: Expedited (15-Day)	Company Report#: 1999026056-1	Age: 58 YR	Gender: Male	I/FU: 1
Outcome: Hospitalization - Initial or Prolonged	PT: Abdominal Pain Pyrexia	Report Source: Health Professional	Product: Kytril (Granisetron) Smithkline Beecham Zinostatin Stimulamer	Role: PS C	Manufacturer: Smithkline Beecham	Route: ORAL Dose: ORAL Duration: 7 DAY
Date: 10/18/99	ISR Number: 33749111-2	Report Type: Expedited (15-Day)	Company Report#: 1999026037-1	Age: 69 YR	Gender: Male	I/FU: 1
Outcome: Hospitalization - Initial or Prolonged	PT: Chills Hypotension Pyrexia	Report Source: Health Professional	Product: Kytril (Granisetron) Ceftinir Dialysis (Nos) Famotidine Furosemide Lactulose Zinostatin Stimulamer	Role: PS C C C C C C	Manufacturer: Smithkline Beecham	Route: ORAL Dose: Duration: 7 DAY
Date: 10/22/99	ISR Number: 3379419-6	Report Type: Expedited (15-Day)	Company Report#: B0070487A	Age: 50 YR	Gender: Male	I/FU: F
Outcome: Disability Other	PT: Anaphylactic Shock Anaphylactoid Reaction Anoxia Blood Pressure Decreased Chest Pain Encephalopathy Erythema Faecal Incontinence Heart Rate Decreased Hyperhidrosis Loss Of Consciousness Nervous System Disorder Urinary Incontinence Vomiting	Report Source: Foreign Health Professional	Product: Zantac (Formulation Unknown) (Ranitidine Hydrochloride) Zantac Injection (Ranitidine Hydrochloride) Kytril (Formulation Unknown) (Kytril) Granisetron Infusion (Granisetron) Cancer Chemotherapy Dexamethasone Diphenhydramine Vitamin B Complex	Role: PS SS SS SS C C C C	Manufacturer:	Route: Dose: SEE TEXT Duration: INTRA VENEUS INTRA VENEUS SEE TEXT INTRA VENEUS INFUSION
Date: 11/09/99	ISR Number: 3391871-9	Report Type: Expedited (15-Day)	Company Report#: 1999026055-1	Age: 70 YR	Gender: Male	I/FU: 1
Outcome: Life-Threatening Hospitalization - Initial or Prolonged	PT: Haemorrhage Haemorrhagic Diathesis Hepatic Function Abnormal Pyrexia	Report Source: Health Professional	Product: Kytril (Granisetron) Smithkline Beecham Furosemide Potassium Carenoate Spironolactone Zinostatin Stimulamer	Role: PS C C C C	Manufacturer: Smithkline Beecham	Route: ORAL Dose: ORAL Duration: 7 DAY

FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

Date: 11/16/99 ISR Number: 3399101-9 Report Type: Expedited (15-Day) Company Report#: 1999028582-1

Outcome Death	PT Anaemia Blood Pressure Decreased Chest Pain Dyspnoea Faeces Discoloured Gastrointestinal Haemorrhage	Report Source Health Professional	Product Kytril (Granisetron) Smithkline Beecham Cisplatin Fluorouracil	Role PS C C	Manufacturer Smithkline Beecham	Route ORAL	Dose 20 MILLIGRAMS ORAL	Duration 4 DAY	Age: 60 YR	Gender: Male	IFU: I
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Date: 11/18/99 ISR Number: 3402665-X Report Type: Expedited (15-Day) Company Report#: 1999029693-1

Outcome Death	PT Blood Creatinine Increased Blood Urea Increased Condition Aggravated Renal Impairment	Report Source Study Health Professional	Product Kytril (Granisetron) Smithkline Beecham Calcium Folate Cisplatin Fluorouracil	Role PS C C C	Manufacturer Smithkline Beecham	Route ORAL	Dose 2 MILLIGRAMS ORAL (SEE IMAGE)	Duration 5 DAY	Age: 69 YR	Gender: Male	IFU: I
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Date: 11/18/99 ISR Number: 3402672-7 Report Type: Expedited (15-Day) Company Report#: 1999026055-1

Outcome Life-Threatening Hospitalization - Initial or Prolonged	PT Haemorrhage Hepatic Function Abnormal Pyrexia Red Blood Cell Count Increased Thrombocythaemia White Blood Cell Count Increased	Report Source	Product Kytril (Granisetron) Smithkline Beecham Furosemide Potassium Canrenoate Spironolactone Zinostatin Stimulamer	Role PS C C C C	Manufacturer Smithkline Beecham	Route ORAL	Dose ORAL	Duration 7 DAY	Age: 70 YR	Gender: Male	IFU: F
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Date: 11/29/99 ISR Number: 3409793-3 Report Type: Expedited (15-Day) Company Report#: 1999029375-1

Outcome Other	PT Leukopenia Thrombocytopenia	Report Source Study Health Professional	Product Kytril (Granisetron) Smithkline Beecham Carboplatin Etoposide	Role PS C C	Manufacturer Smithkline Beecham	Route INTRAMUSCULAR	Dose 2 MILLIGRAMS, INTRAMUSCULAR	Duration DAY	Age:	Gender: Female	IFU: I
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Date: 11/29/99 ISR Number: 3409798-2 Report Type: Expedited (15-Day) Company Report#: 1999029916-1

Outcome Hospitalization - Initial or Prolonged	PT Chills Hypertension Loss Of Consciousness Tachycardia	Report Source Foreign Health Professional Other	Product Kytril (Granisetron) 5-Fluoro Uracil Calcium Folate Diamicon (Gliclazide) Minipress	Role PS C C C	Manufacturer Smithkline Beecham	Route	Dose	Duration 1 DAY	Age: 74 YR	Gender: Male	IFU: I
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**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

(Prazosine)
Oxaliplatin

Date: 11/30/99 **ISR Number:** 3411366-3 **Report Type:** Expedited (15-Day) **Company Report#:** 1999030358-1 **Age:** 45 YR **Gender:** Female **IFU:** I

Outcome: Hospitalization - Initial or Prolonged
PT: Blood Pressure Decreased
Dizziness
Hypotension
Report Source: Health Professional
Product: Kytril
Decadron
(Dexamethasone)
Navelbine
(Vincorelbine Tartrate)
Role: PS
C
C
Manufacturer: Smithkline Beecham
Route: INTRAVENOUS
Dose: 1 MILLIGRAMS
1.0 DAILY
Duration: 1 DAY

Date: 12/02/99 **ISR Number:** 3415237-8 **Report Type:** Expedited (15-Day) **Company Report#:** 1999031000-1 **Age:** 55 YR **Gender:** Female **IFU:** I

Outcome: Other
PT: Pancytopenia
Report Source: Study Health Professional
Product: Kytril (Granisetron)
Smithkline Beecham
Carboplatin
Cyclophosphamide
Pirarubicin
Hydrochloride
Role: PS
C
C
C
Manufacturer: Smithkline Beecham
Route: ORAL
Dose: 2 MILLIGRAMS
4 MILLIGRAMS
2 MILLIGRAMS
Duration: 1 DAY

Date: 12/03/99 **ISR Number:** 3413382-4 **Report Type:** Expedited (15-Day) **Company Report#:** 1999029693-1 **Age:** 69 YR **Gender:** Male **IFU:** F

Outcome: Death
PT: Blood Creatine Increased
Blood Urea Increased
Renal Impairment
Report Source: Foreign Study Health Professional Other
Product: Kytril (Granisetron)
Smithkline Beecham
Kytril (Granisetron)
Smithkline Beecham
Calcium Folate
Cisplatin
Fluorouracil
Role: PS
SS
C
C
C
Manufacturer: Smithkline Beecham
Route: ORAL
INTRAVENOUS
Dose: 2 MILLIGRAMS ORAL
3 MILLIGRAMS INTRAVENOUS
Duration: 5 DAY
1 DAY

Date: 12/07/99 **ISR Number:** 3415566-8 **Report Type:** Expedited (15-Day) **Company Report#:** 1999031021-1 **Age:** 37 YR **Gender:** Female **IFU:** I

Outcome: Other
PT: Leukopenia
Report Source: Study Health Professional
Product: Kytril (Granisetron)
Smithkline Beecham
Cisplatin
Cyclophosphamide
Pirarubicin
Hydrochloride
Role: PS
C
C
C
Manufacturer: Smithkline Beecham
Route: ORAL
Dose: ORAL
Duration: 1 DAY

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 12/14/99		ISR Number: 3421373-2		Report Type: Expedited (15-Day)		Company Report#: 1999030989-1		Age: 57 YR		Gender: Female		IFU: I	
Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration					
Initial or Prolonged Hospitalization - Required Intervention to Prevent Permanent Impairment/Damage	Anaemia Haemoglobin Decreased Leukopenia Thrombocytopenia	Study Health Professional	43694a (Granisetron) Smithkline Beecham Carboplatin Cyclophosphamide Pirarubicin Hydrochloride	PS C C C	Smithkline Beecham	ORAL	ORAL	2 DAY					
Date: 12/21/99		ISR Number: 3427163-9		Report Type: Expedited (15-Day)		Company Report#: 1999030989-1		Age: 57 YR		Gender: Female		IFU: F	
Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration					
Initial or Prolonged Hospitalization - Required Intervention to Prevent Permanent Impairment/Damage	Pancytopenia	Study Health Professional	4369a (Granisetron) Smithkline Beecham Carboplatin Cyclophosphamide Pirarubicin Hydrochloride	PS C C C	Smithkline Beecham	ORAL	ORAL	2 DAY					
Date: 12/21/99		ISR Number: 3427165-2		Report Type: Expedited (15-Day)		Company Report#: 1999030358-1		Age: 45 YR		Gender: Female		IFU: F	
Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration					
Initial or Prolonged Hospitalization - Required Intervention to Prevent Permanent Impairment/Damage	Blood Pressure Decreased Dizziness Hypotension	Health Professional	Kytril Smithkline Beecham Decadron (Dexamethasone) Navelbine (Vinorelbine Tartrate)	PS C C	Smithkline Beecham	INTRAVENOUS	1 MILLIGRAMS 1.0 DAILY INTRAVENOUS	1 DAY					
Date: 12/21/99		ISR Number: 3427196-2		Report Type: Expedited (15-Day)		Company Report#: 1999031982-1		Age: 30 YR		Gender: Female		IFU: I	
Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration					
Initial or Prolonged Hospitalization - Required Intervention to Prevent Permanent Impairment/Damage	Supraventricular Tachycardia	Foreign Other	Kytril Diclofenac Fragmin (Dalteparin) Morphine Paracetamol	PS C C C C	Smithkline Beecham	INTRAVENOUS	1 MILLIGRAMS INTRAVENOUS	1 DAY					
Date: 12/21/99		ISR Number: 3434965-1		Report Type: Expedited (15-Day)		Company Report#: 1999032302-1		Age: 70 YR		Gender: Male		IFU: I	
Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration					
Other	Leukopenia Thrombocytopenia	Health Professional	Kytril (Granisetron) Smithkline Beecham 5fu Cisplatin Furosemide	PS C C C	Smithkline Beecham	ORAL	2 MILLIGRAMS ORAL	6 DAY					

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 12/29/99 ISR Number: 3435340-6 Report Type: Expedited (15-Day) Company Report#: 1999031000-1

<u>Outcome</u> Other	<u>PT</u> Anaemia Haemoglobin Decreased Leukopenia Thrombocytopenia	<u>Report Source</u> Study Health Professional	<u>Product</u> Kytril (Granisetron) Smithkline Beecham Carboplatin Cyclophosphamide Pirarubisin Hydrochloride	<u>Role</u> PS C C C	<u>Manufacturer</u> Smithkline Beecham	<u>Route</u> ORAL	<u>Dose</u> SEE IMAGE ORAL	<u>Duration</u> 2 DAY	<u>Gender:</u> Female	<u>IFU:</u> F
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Date: 12/29/99 ISR Number: 3439224-9 Report Type: Expedited (15-Day) Company Report#: 1999032686-1

<u>Outcome</u> Other	<u>PT</u> Anaphylactoid Reaction Erythema Pruritus	<u>Report Source</u> Health Professional	<u>Product</u> Kytril (Granisetron) Smithkline Beecham Cisplatin Tegafur Uracil	<u>Role</u> PS C C	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u> 3 MILLIGRAMS	<u>Duration</u> 510 DAY	<u>Gender:</u> Male	<u>IFU:</u> I
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Date: 01/05/00 ISR Number: 3441759-X Report Type: Expedited (15-Day) Company Report#: 1999020607-1

<u>Outcome</u> Hospitalization - Initial or Prolonged Other	<u>PT</u> Constipation Diarrhoea Haemorrhagic Enterocolitis Haemorrhagic Muscle Spasms Platelet Count Decreased	<u>Report Source</u> Health Professional	<u>Product</u> Kytril Smithkline Beecham Intron A (Interferon Alfa-2b Recombinant) Intron A (Interferon Alfa-2b Recombinant) Motrin (Ibuprofen) Acetaminophen	<u>Role</u> PS C C C C	<u>Manufacturer</u> Smithkline Beecham	<u>Route</u> ORAL	<u>Dose</u> 2 MILLIGRAMS; 1.0 DAILY ORAL	<u>Duration</u> 6 DAY	<u>Gender:</u> Male	<u>IFU:</u> F
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Date: 01/07/00 ISR Number: 3443480-0 Report Type: Expedited (15-Day) Company Report#: 1999033740-1

<u>Outcome</u> Hospitalization - Initial or Prolonged	<u>PT</u> Leukopenia	<u>Report Source</u> Study Health Professional	<u>Product</u> 43694a (Granisetron) Smithkline Beecham Carboplatin	<u>Role</u> PS C	<u>Manufacturer</u> Smithkline Beecham	<u>Route</u> ORAL	<u>Dose</u> 3 MILLIGRAM INTRAVENOUS/2 MILLIGRAMS ORAL	<u>Duration</u> 4 DAY	<u>Gender:</u> Female	<u>IFU:</u> I
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Date: 01/07/00 ISR Number: 3443490-3 Report Type: Expedited (15-Day) Company Report#: 1999033590-1

<u>Outcome</u> Hospitalization - Initial or Prolonged	<u>PT</u> Blood Bilirubin Increased Blood Lactate Dehydrogenase Increased Chest Pain Condition Aggravated Drug Hypersensitivity Dyspnoea								<u>Gender:</u> Female	<u>IFU:</u> I
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FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

Flushing
 Haematocrit Decreased
 Haemoglobin Decreased
 Haemolysis
 Hypoxia
 Muscle Spasms
 Pulmonary Embolism
 Sepsis

Report Source
 Health Professional

Product
 Kytril Smithkline Beecham
 Kytril Smithkline Beecham

Role
 PS
 SS

Manufacturer
 Smithkline Beecham
 Smithkline Beecham

Route
 INTRACAVERNOUS
 INTRAVENOUS

Dose
 INTRAVENOUS
 INTRAVENOUS

Duration
 1 DAY
 1 DAY

Date: 01/13/00 **ISR Number:** 3445431-1 **Report Type:** Expedited (15-Day) **Company Report#:** 1999033736-1 **Age:** 63 YR **Gender:** Male **I/FU:** 1

Outcome
 Hospitalization - Initial or Prolonged

PT
 Condition Aggravated
 Vomiting

Report Source
 Health Professional

Product
 Kytril (Granisetron) Smithkline Beecham
 Bifidobacterium
 Digestive Enzyme Preparations (Nos)
 Fluorouracil
 Ilinotecan
 Stomachis & Digestives (Nos)
 Urapidil

Role
 PS
 C
 C
 C
 C
 C

Manufacturer
 Smithkline Beecham
 Smithkline Beecham

Route
 INTRAVENOUS

Dose
 6 MILLIGRAMS
 ; 3
 MILLIGRAMS
 INTRAVENOUS

Duration
 2 DAY

Date: 01/18/00 **ISR Number:** 3444872-6 **Report Type:** Expedited (15-Day) **Company Report#:** WAES 99120258 **Age:** 45 YR **Gender:** Female **I/FU:** F

Outcome
 Life-Threatening Hospitalization - Initial or Prolonged

PT
 Dizziness
 Hypotension

Report Source
 Health Professional

Product
 Inj Decadron (Dexamethasone 21-Phosphate Disodium)
 Kytril 1 Mg
 Navelbine

Role
 PS
 SS
 C

Manufacturer
 Smithkline Beecham

Route
 UNKNOWN INTRAVENOUS

Dose
 UNKNOWN
 UNKNOWN IV

Duration
 UNKNOWN

Date: 02/08/00 **ISR Number:** 3454678-X **Report Type:** Expedited (15-Day) **Company Report#:** 1999033740-1 **Age:** 45 YR **Gender:** Female **I/FU:** F

Outcome
 Hospitalization - Initial or Prolonged

PT
 Leukopenia

Report Source
 Study Health Professional

Product
 43694a (Granisetron) Smithkline Beecham
 Carboplatin

Role
 PS
 C

Manufacturer
 Smithkline Beecham

Route
 INTRAVENOUS

Dose
 2MG/3MG
 INTRAVENOUS;
 ORAL

Duration
 4 DAY

Date: 02/08/00 **ISR Number:** 3456192-4 **Report Type:** Expedited (15-Day) **Company Report#:** 1999029916-1 **Age:** 74 YR **Gender:** Male **I/FU:** F

Outcome
 Hospitalization - Initial or Prolonged

PT
 Chills
 Hypertension
 Loss Of Consciousness
 Tachycardia

Report Source
 Health Professional

Product
 Kytril (Granisetron) Smithkline Beecham
 5-Fluoro Uracil
 Calcium Folate
 Diamiscon

Role
 PS
 C
 C

Manufacturer
 Smithkline Beecham

Route
 INTRAVENOUS

Dose
 INTRAVENOUS

Duration
 1 DAY

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

(Gliclazide)
Minipress
(Prazosine)
Oxaliplatin

Date: 02/11/00 ISR Number: 3456882-3 Report Type: Expedited (15-Day) Company Report#: 1999033590-1

Age: 57 YR Gender: Female I/FU: F

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Hospitalization - Initial or Prolonged	Anaemia	Health Professional	Kytril Smithkline Beecham	PS	Smithkline Beecham	INTRAVENOUS	INTRAVENOUS	1 DAY
	Blood Bilirubin Increased		Beecham	C				
	Blood Lactate		Dexamethasone	C				
	Dehydrogenase Increased		Ondansetron	C				
	Chest Pain							
	Drug Hypersensitivity							
	Dyspnoea							
	Flushing							
	Haemolysis							
	Hypoxia							
	Muscle Spasms							
	Pulmonary Embolism							
	Rectal Haemorrhage							

Date: 02/14/00 ISR Number: 3457961-7 Report Type: Expedited (15-Day) Company Report#: 10264430

Age: 78 YR Gender: Female I/FU: I

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Hospitalization - Initial or Prolonged	Agitation	Foreign Health Professional	Holoxan (Ifosfamide)	PS		INTRAVENOUS	2175 MILLIGRAM, 1/1 DAY IV	
	Confusional State							
	Diarrhoea		Vepeside-Sandoz (Etoposide)	SS		INTRAVENOUS	145 MILLIGRAM, 1/1 DAY IV	
	Electroencephalogram Abnormal							
	Epilepsy							
	Hypotension		Mesna	SS		INTRAVENOUS	2400 MILLIGRAM, 1/1 DAY IV	
	Pyrexia							
	Sedation							
	Skin Discolouration		Kytril (Granisetron Hcl)	SS		INTRAVENOUS	1/1 DAY IV	
	Speech Disorder		Imovane	C				
			Xanax	C				
			Diffu-K (Potassium Supplements)	C				

Date: 03/03/00 ISR Number: 3468941-X Report Type: Expedited (15-Day) Company Report#: 10287688

Age: Gender: Female I/FU: I

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Death - Life-Threatening Other	Convulsion	Foreign Literature Health Professional Other	Briplatin (Cisplatin)	PS		INTRAVENOUS	100 MILLIGRAM 1/1 DAY IV	
	Loss Of Consciousness		Taxotere (Docetaxel)	SS		INTRAVENOUS	100 MILLIGRAM, 1/1 DAY IV	
			Primperan (Metoclopramide Hcl)	SS		INTRAVENOUS	20 MILLIGRAMS, 1/1 DAY IV	
			Droptan (Droperidol)	SS		INTRAVENOUS	.5 MILLIGRAM	

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Outcome Hospitalization - Initial or Prolonged	PT Leukopenia	Report Source Study Health Professional	Product Kytril (Granisetron Hcl) Decadron (Dexamethasone) Polaramine (Chlorpheniramine Maleate)	Role SS SS SS	Manufacturer Beecham Beecham Beecham	Route INTRAVENOUS INTRAVENOUS INTRAVENOUS	Dose 6 MILLIGRAM ,1/1 DAY IV .2 MILLIGRAMS , 1/1 DAY IV 10 MILLIGRAM ,1/1 DAY IV	Duration 1 DAY 1 DAY 5 DAY	Age: 57 YR	Gender: Female	I/FU: 1
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Date: 03/08/00 ISR Number: 3472344-1 Report Type: Expedited (15-Day) Company Report#: 1999033732-1

Outcome Hospitalization - Initial or Prolonged	PT Leukopenia	Report Source Study Health Professional	Product 43694a (Granisetron) Smithkline Beecham 43694a (Granisetron) Smithkline Beecham Carboplatin Pacitaxel	Role PS SS C C	Manufacturer Smithkline Beecham Smithkline Beecham	Route INTRAVENOUS ORAL	Dose 3 MILLIGRAMS, INTRAVENOUS 2 MILLIGRAMS, ORAL	Duration 1 DAY 5 DAY	Age: 57 YR	Gender: Female	I/FU: 1
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Date: 03/13/00 ISR Number: 3474991-X Report Type: Expedited (15-Day) Company Report#: 1999033529-1

Outcome Other	PT Abortion Induced Condition Aggravated Drug Effect Decreased Nausea	Report Source Health Professional	Product Kytril Smithkline Beecham	Role PS	Manufacturer Smithkline Beecham	Route INTRAVENOUS	Dose 500 MICROGRAMS INTRAVENOUS	Duration 4 DAY	Age: 75 YR	Gender: Male	I/FU: 1
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Date: 03/20/00 ISR Number: 3478162-2 Report Type: Expedited (15-Day) Company Report#: 2000007398-1

Outcome Hospitalization - Initial or Prolonged	PT Abdominal Pain Blood Amylase Increased Lipase Increased Pancreatitis Acute	Report Source Health Professional	Product Kytril Lasix (Furosemide) Nitrates Insulin Avandia (Rosiglitazone) Carboplatinum Etoposide Dexamethasone Asa (Acetylsalicylic Acid) Gemfibrozil	Role PS C C C C C C C C	Manufacturer Smithkline Beecham	Route	Dose	Duration 1 DAY	Age: 75 YR	Gender: Male	I/FU: 1
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Date: 04/11/00 ISR Number: 3488133-8 Report Type: Expedited (15-Day) Company Report#: 2000009353-1

Outcome Hospitalization - Initial or Prolonged	PT Abdominal Pain Lower Flatulence Ileus Paralytic	Report Source Health Professional	Product	Role	Manufacturer	Route	Dose	Duration 1 DAY	Age: 75 YR	Gender: Female	I/FU: 1
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**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Rectal Tenesmus
Vomiting

Report Source
Health Professional

Product
Kytril (Granisetron)
Smithkline Beecham
Aclarubicin
Hydrochloride
Cytarabine
Filgrastim

Role
PS
C
C
C

Manufacturer
Smithkline Beecham

Route
INTRAVENOUS

Dose
INTRAVENOUS

Duration

Date: 04/11/00 ISR Number: 3488135-1 Report Type: Expedited (15-Day) Company Report#: 2000009144-1 Age: 1 YR Gender: Female I/F/U: 1

Outcome
Hospitalization - Initial or Prolonged

PT
Abdominal Distension
Cyst
Diarrhoea
Gastrointestinal Disorder
Ileus Paralytic
Metastases To Central Nervous System
Oral Intake Reduced
Vomiting

Report Source
Health Professional

Product
Kytril (Granisetron)
Smithkline Beecham
Cyclophosphamide
Mesna
Pirarubicin
Prednisolone Sodium Succinate
Vincristin

Role
PS
C
C
C
C

Manufacturer

Route
INTRAVENOUS

Dose
INTRAVENOUS

Duration

Date: 07/24/00 ISR Number: 3538489-4 Report Type: Expedited (15-Day) Company Report#: 2000020229-1 Age: 55 YR Gender: Female I/F/U: 1

Outcome
Death
Hospitalization - Initial or Prolonged

PT
Diarrhoea
Nausea
Oesophagitis
Pyrexia

Report Source
Foreign

Product
Kytril
Taxotere (Docetaxel)

Role
PS
C

Manufacturer
Smithkline Beecham Pharmaceuticals

Route

Dose

Duration

Date: 07/27/00 ISR Number: 3538400-4 Report Type: Expedited (15-Day) Company Report#: 2000021714-1 Age: 45 YR Gender: Female I/F/U: 1

Outcome
Hospitalization - Initial or Prolonged

PT
Drug Ineffective

Report Source

Product
Kytril
5-Fluorouracil
Eloxatine
Elvornine
Solu-Medrol

Role
PS
C
C
C
C

Manufacturer
Smithkline Beecham Pharmaceuticals

Route
INTRAVENOUS

Dose
3 MILLIGRAMS

Duration
INTRAVENOUS 3 DAY

Date: 08/14/00 ISR Number: 3550381-6 Report Type: Expedited (15-Day) Company Report#: 2000023333-1 Age: 63 YR Gender: Female I/F/U: 1

Outcome
Hospitalization - Initial or Prolonged

PT
Chest Discomfort
Malaise
Oedema

Report Source
Foreign
Other

Product
Kytril
Cisplatin
(Cisplatin)
Levohydrox
(Levohydroxine)
Tamofene
(Tamoxifene)

Role
PS
C
C
C

Manufacturer
Smithkline Beecham Pharmaceuticals

Route
INTRAVENOUS

Dose
IV

Duration

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Vepeside (Etoposide) C

Date: 08/21/00 ISR Number: 3554467-1 Report Type: Expedited (15-Day) Company Report#: 2000024292-1

Age: 31 YR Gender: Male I/FU: I

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Death	Ammonia Increased	Health	Kytril	PS	Smithkline Beecham Pharmaceuticals	INTRAVENOUS	1 MILLIGRAMS	INTRAVENOUS
Hospitalization - Initial or Prolonged	Cardiac Arrest	Professional						
	Dialysis							
	Hepatic Encephalopathy		Diprivan	C				
	Hepatic Enzyme Increased		Lidocaine	C				
	Hepatic Failure		N2o	C				
	Hepatic Necrosis		Sevoflurane	C				
	Renal Failure		Xefo	C				
	Reye'S Syndrome							

Date: 08/28/00 ISR Number: 3560276-X Report Type: Expedited (15-Day) Company Report#: 2000020229-1

Age: 55 YR Gender: Female I/FU: F

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Death	Diarrhoea	Health	Kytril	PS	Smithkline Beecham Pharmaceuticals			
Hospitalization - Initial or Prolonged	Nausea	Professional						
	Oesophagitis		Taxotere (Docetaxel)	C				
	Pyrexia							

Date: 08/28/00 ISR Number: 3560575-1 Report Type: Expedited (15-Day) Company Report#: 2000024292-1

Age: 31 YR Gender: Male I/FU: F

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Death	Ammonia Increased	Foreign Health	Kytril	PS	Smithkline Beecham Pharmaceuticals	INTRAVENOUS	1 MILLIGRAMS	1 DAY
Hospitalization - Initial or Prolonged	Cardiac Arrest	Professional						
	Dialysis	Other						
	Hepatic Enzyme Increased		Cortisone (Flexase)	C				
	Hepatic Failure		Diprivan (Propofol)	C				
	Hepatic Necrosis		Lidocaine	C				
	Renal Failure		Morphine	C				
	Reye'S Syndrome		N2o	C				
			Remefentamil	C				
			Sevoflurane	C				
			Xefo (Lornoxicam)	C				

Date: 09/11/00 ISR Number: 3570017-8 Report Type: Expedited (15-Day) Company Report#: 2000024292-1

Age: 31 YR Gender: Male I/FU: F

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Death	Ammonia Increased	Health	Kytril	PS	Smithkline Beecham Pharmaceuticals	INTRAVENOUS	1 MG IV	1 DAY
Hospitalization - Initial or Prolonged	Cardiac Arrest	Professional						
	Dialysis							
	Hepatic Encephalopathy							
	Hepatic Enzyme Increased							
	Hepatic Failure							
	Hepatic Necrosis							
	Renal Failure							
	Reye'S Syndrome							

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 10/02/00 **ISR Number:** 3585498-3 **Report Type:** Expedited (15-Day) **Company Report#:** 2000028020-1

Outcome Hospitalization - Initial or Prolonged	PT Angioneurotic Oedema Dyspnoea	Report Source Health Professional	Product Kytrel 5-Fluorouracil Endoxan (Epirubicin) Farmorubicin (Epirubicin) Xanax (Alprazolam) Zophren (Ondansetron)	Role PS C C C C C	Manufacturer Smithkline Beecham Pharmaceuticals	Route ORAL	Dose	Duration 2 DAY	Age: 48 YR	Gender: Female	I/FU: 1
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Date: 10/02/00 **ISR Number:** 3585499-5 **Report Type:** Expedited (15-Day) **Company Report#:** 2000027782-1

Outcome Hospitalization - Initial or Prolonged	PT Angioneurotic Oedema Dyspnoea	Report Source	Product Kytrel	Role PS	Manufacturer Smithkline Beecham Pharmaceuticals	Route INTRAVENOUS	Dose	Duration 1 DAY	Age: 26 YR	Gender: Female	I/FU: 1
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Date: 10/23/00 **ISR Number:** 3600499-4 **Report Type:** Expedited (15-Day) **Company Report#:** 2000029956-1

Outcome Disability Other	PT Stevens-Johnson Syndrome	Report Source	Product Kytrel Cetirizine Cyclizine Danthron/Docusate Diazepam Fluconazole Haloperidol Leucovorin Methotrimprazine Metolopramide Morphine Naproxen Oneprazole Phenytion Senna Temazepam	Role PS C C C C C C C C C C C C C C	Manufacturer Smithkline Beecham Pharmaceuticals	Route ORAL	Dose 4 MILLIGRAMS ORAL	Duration 5 DAY	Age: 49 YR	Gender: Female	I/FU: 1
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Date: 10/25/00 **ISR Number:** 3601417-5 **Report Type:** Expedited (15-Day) **Company Report#:** 10574119

Outcome Hospitalization - Initial or Prolonged	PT Haemolytic Uraemic Syndrome Renal Failure Acute Thrombocytopenia	Report Source Foreign Health Professional Other	Product Ifex Efferalgan Codeine Cisplati (Cisplatin) Kytrel (Granisetron Hcl)	Role PS SS SS SS	Manufacturer Bristol Myers Squibb Co Pharmaceutical Research Institute	Route INTRAVENOUS INTRAVENOUS INTRAVENOUS	Dose 5400MG, IV 5400 MILLIGRAM, IV 180 MILLIGRAM, IV	Duration	Age: 49 YR	Gender: Male	I/FU: 1
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FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

Ametycine (Mitomycin) SS INTRAVENOUS 10 MILLIGRAM, IV
 Solu-Medrol (Methylprednisolone) C INTRAVENOUS 120 MILLIGRAM, IV

Date: 11/09/00 ISR Number: 3608939-1 Report Type: Direct Company Report#: 2000028020-1 Age: 55 YR Gender: Female I/F/U: 1

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Other	Eyelid Function Disorder Facial Palsy Mastication Disorder	Health Professional	Adriamycin	PS		INTRAVENOUS	117 MG IV Q 21 DAYS	
			Cytosin	SS		INTRAVENOUS	1170 MG IV PB Q 21 DAYS 32 MG 10 MG	
			Zofran 32 Mg Decadron 10 Mg	SS			100 MG PO 10 MG PO	
			Anzemet 100 Mg Po Compazine 10 Mg Po	SS		ORAL	480 MCG SQ	
			Neupogen 480 Mcg Sq Effexor 75 Mg 1 Tab Daily	SS		ORAL ORAL SUBCUTANEOUS	75 MG 1 TAB DAILY	
			Zantac 150 Mg Bid Pm	SS			150 MG BID PRN	
			Kytril 1 Mg Decadron 5 Mg	SS SS			1 MG 5 MG	

Date: 11/14/00 ISR Number: 3611363-9 Report Type: Expedited (15-Day) Company Report#: 2000031417-1 Age: 48 YR Gender: Female I/F/U: F

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Hospitalization - Initial or Prolonged	Angioneurotic Oedema Dyspnoea Face Oedema Oropharyngeal Swelling Skin Test Positive	Health Professional	Kytril (Granisetron)	PS	Smithkline Beecham Pharmaceuticals	ORAL		2 DAY
			5-Fluorouracil Endoxan (Epirubicin) Farmorubicin (Epirubicin) Xanax (Alprazolam) Zophren (Ondansetron)	C C C C C				

Date: 11/14/00 ISR Number: 3611522-5 Report Type: Expedited (15-Day) Company Report#: 2000031417-1 Age: 24 YR Gender: Female I/F/U: 1

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Hospitalization - Initial or Prolonged	Bradycardia Hypotension Loss Of Consciousness Pyrexia Shock Tachycardia Urticaria Vomiting	Health Professional	Kytril Heparine Kidrolase (Asparaginase)	PS C C	Smithkline Beecham Pharmaceuticals	INTRAVENOUS		1 DAY

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 11/20/00 **ISR Number:** 3614871-X **Report Type:** Expedited (15-Day) **Company Report#:** 801#3#2000-04052 (000)

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Gender:</u>	<u>Age:</u>	<u>I/FU:</u>
Hospitalization - Initial or Prolonged	Dermatitis Bullous Henoch-Schonlein Purpura Pyrexia Skin Necrosis	Health Professional	Cyclophosphamide Solu-Medrol (Methylprednisolone Sodium Etoposide (Etoposide) Cisplatin (Cisplatin) Adriamycin (Doxorubicin) Kytril (Granisetron)	PS SS SS SS SS SS	Asta Medica Inc	INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS	I.V. I.V. I.V. I.V. I.V. I.V.	Male	72 YR	I

Date: 11/20/00 **ISR Number:** 3615206-9 **Report Type:** Expedited (15-Day) **Company Report#:** 10604056

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Gender:</u>	<u>Age:</u>	<u>I/FU:</u>
Hospitalization - Initial or Prolonged	Dermatitis Bullous Henoch-Schonlein Purpura Pyrexia Skin Necrosis	Foreign Health Professional Other	Cytoxan Cisplatin For Inj (Cisplatin) Vepesid Inj (Etoposide) Adriamycin (Doxorubicin Hcl) Solu-Medrol Kytril (Granisetron Hcl)	PS SS SS SS SS SS	Bristol Myers Squibb Co Pharmaceutical Research Institute	INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS	IV IV IV IV IV IV	Male	72 YR	I

Date: 11/21/00 **ISR Number:** 3615805-4 **Report Type:** Expedited (15-Day) **Company Report#:** 2000031417-1

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Gender:</u>	<u>Age:</u>	<u>I/FU:</u>
Hospitalization - Initial or Prolonged	Anaphylactic Shock Bradycardia Heart Rate Increased Hypotension Loss Of Consciousness Pyrexia Tachycardia Urticaria Vomiting		Kytril Heparine Kidrolase (Asparaginase)	PS C C	Smithkline Beecham Pharmaceuticals	INTRAVENOUS		Female	24 YR	F

Date: 11/21/00 **ISR Number:** 3616641-5 **Report Type:** Expedited (15-Day) **Company Report#:** 2000031417-1

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Gender:</u>	<u>Age:</u>	<u>I/FU:</u>
Hospitalization - Initial or Prolonged	Anaphylactic Shock Hypotension Loss Of Consciousness Pyrexia Tachycardia Urticaria Vomiting		Kytril Heparine Kidrolase	PS C C	Smithkline Beecham Pharmaceuticals	INTRAVENOUS		Female	24 YR	F

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOD) Report**

Date	ISRN	ISRN	Report Type	Expedited (15-Day)	Company Report#	Product	Role	Manufacturer	Route	Dose	Gender	Age	IFU
11/27/00	3617188-2	3617188-2	Report Type	Expedited (15-Day)	2000033445-1	Kytril	PS	Smithkline Beecham Pharmaceuticals	INTRAVENOUS		Male	72 YR	I
Outcome	Hospitalization - Initial or Prolonged	PT	Dermatitis Bullous Henoch-Schonlein Purpura Pyrexia Skin Necrosis	Report Source	Foreign Health Professional Other	Adriamycine Cisplatine Endoxan (Cyclophosphamide) ... Etoposide Solumedrol (Methylprednisolone)	C C C C C						
12/06/00	3624041-7	3624041-7	Report Type	Expedited (15-Day)	2000031417-1	Kytril	PS	Smithkline Beecham Pharmaceuticals	INTRAVENOUS	INTRAVENOUS	Female	24 YR	F
Outcome	Hospitalization - Initial or Prolonged	PT	Anaphylactic Shock Bradycardia Hypotension Loss Of Consciousness Pyrexia Tachycardia Urticaria Vomiting	Report Source	Foreign Health Professional Other	Heparine Kidrolase (Asparaginase)	C C						
12/18/00	3633659-7	3633659-7	Report Type	Expedited (15-Day)	2000034986-1	Kytril	PS	Smithkline Beecham Pharmaceuticals	INTRAVENOUS	3 MG, IV	Male	77 YR	I
Outcome	Hospitalization - Initial or Prolonged Other	PT	Blood Albumin Decreased Blood Pressure Systolic Increased Coma Heart Rate Increased Protein Total Decreased Ventricular Extrasystoles	Report Source	Health Professional	Cefozopran Hydrochloride (Firstcin) Theophylline (Theolong)	C C						
01/26/01	3656048-8	3656048-8	Report Type	Expedited (15-Day)	2000034570-1	Kytril	PS	Hoffmann La Roche Inc	INTRAVENOUS	3 MILLIGRAMS	Male	69 YR	I
Outcome	Other	PT	Alanine Aminotransferase Increased Aspartate Aminotransferase Increased Blood Lactate Dehydrogenase Increased Gamma-Glutamyltransferase Increased Hypersensitivity	Report Source	Health Professional	Cyclophosphamide (Endoxan) Doxorubicin Hydrochloride (Adriacin) Prednisone Vincristine Sulphate (Oncovin)	C C C C						

FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

Date: 02/06/01		ISNR Number: 3661198-6	Report Type: Expedited (15-Day)	Company Report#: 2001002219-1	Product	Role	Manufacturer	Route	Age: 39 YR	Gender: Female	I/FU: 1
Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Age	Dose	Duration		
Hospitalization - Initial or Prolonged	Abdominal Pain Shock	Foreign Other	Kytril	PS	Smithkline Beecham	INTRAVENOUS		INTRAVENOUS	1 DAY		
Disability	Vision Blurred Visual Field Defect	Foreign Health Professional Other	Cyclophosphamide Inj(Cyclophosphamide)	PS		INTRAVENOUS		INTRAVENOUS	2.2 GRAM, 1/1 CYCLE IV		
			Uromitexan(Mesna)	SS		INTRAVENOUS		INTRAVENOUS	1.6 GRAM, 1/1 CYCLE IV		
			Uromitexan(Mesna)	SS		ORAL		ORAL	1.6 GRAM, 1/1 CYCLE ORAL		
			Kevatri (Granisetron Hcl)	SS		INTRAVENOUS		INTRAVENOUS	1 MILLIGRAM, 4/2 CYCLE IV		
			Fortecortin(Dexamethasone)	SS		INTRAVENOUS		INTRAVENOUS	8 MILLIGRAM, IV		
			Natulan(Procarbazine Hcl)	SS		ORAL		ORAL	175 MILLIGRAMS, 4/2 CYCLE ORAL		
			Decortin (Prednisone)	SS		ORAL		ORAL	80 MILLIGRAMS, 14/1 CYCLE ORAL		
			Zantac(Ranitidine Hcl)	SS		ORAL		ORAL	300 MILLIGRAMS, ORAL		
			Kainor-Retard P(Potassium Chloride)	SS		ORAL		ORAL	4 DOSAGE FORM, ORAL		
			Doxorubicin(Doxorubicin Hcl)	SS		INTRAVENOUS		INTRAVENOUS	62 MILLIGRAM, 1/1 CYCLE IV		
			Etoposide	SS		INTRAVENOUS		INTRAVENOUS	350 MILLIGRAM, 3/1 CYCLE IV		
			Vincristine (Vincristine)	C							
			Bleomycin(Bleomycin)	C							
			Neupogen(Granulocyte Csf)	C							

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 02/15/01 **ISR Number:** 3666953-4 **Report Type:** Expedited (15-Day) **Company Report#:** 2001002219-1 **Age:** 39 YR **Gender:** Female **IFU:** F

Outcome: Hospitalization - Initial or Prolonged

PT: Abdominal Pain
Blood Pressure Decreased
Hyperhidrosis
Hypovolaemic Shock
Pallor

Report Source: Product: Kytril Smithkline Beecham
Role: PS
Manufacturer: Smithkline Beecham
Route: INTRAVENOUS
Dose: 1.0 DAILY INTRAVENOUS
Duration: 1 DAY

Date: 02/16/01 **ISR Number:** 3666725-0 **Report Type:** Expedited (15-Day) **Company Report#:** 005#3#2001-16618 (000) **Age:** 39 YR **Gender:** Female **IFU:** I

Outcome: Disability

PT: Vision Blurred
Visual Field Defect

Report Source: Product: Cyclophosphamide(Cyclophosphamide)
Role: PS
Manufacturer: Asia Medica Ag
Route: INTRAVENOUS
Dose: 2.2G
Duration: INTRAVENOUS
Uromitexan (Mesna)
Role: SS
Manufacturer: Kevaryl
Route: INTRAVENOUS
Dose: 1.6 G IV/PO
Duration: INTRAVENOUS
Granisetron
Role: SS
Manufacturer: 1 MG
Route: INTRAVENOUS
Duration: INTRAVENOUS
Fortecortin
Role: SS
Manufacturer: 8 MG
Route: INTRAVENOUS
Duration: INTRAVENOUS
Natalan
Role: SS
Manufacturer: 175 MG
Route: ORAL
Duration: ORAL
Decortin
Role: SS
Manufacturer: 80 MG
Route: ORAL
Duration: ORAL
Zantic (Ranitidine Hydrochloride)
Role: SS
Manufacturer: 300 MG
Route: ORAL
Duration: ORAL
Kalinor Retard
Role: SS
Manufacturer: 4 DOS F
Route: INTRAVENOUS
Duration: INTRAVENOUS
(Potassium Chloride)
Role: SS
Manufacturer: 62 MG
Route: INTRAVENOUS
Duration: INTRAVENOUS
Etoposide
Role: SS
Manufacturer: 350 MG
Route: INTRAVENOUS
Duration: INTRAVENOUS
Vincristine
Role: C
Manufacturer: Asia Medica Inc
Route: ORAL
Duration: ORAL
Cyclophosphamide
Role: C
Manufacturer: Asia Medica Inc
Route: ORAL
Duration: ORAL
Neupogen
Role: C
Manufacturer: Asia Medica Inc
Route: ORAL
Duration: ORAL
(Filgrastim)
Role: C
Manufacturer: Asia Medica Inc
Route: ORAL
Duration: ORAL

Date: 02/20/01 **ISR Number:** 3668369-3 **Report Type:** Expedited (15-Day) **Company Report#:** 2001003642-1 **Age:** 60 YR **Gender:** Female **IFU:** I

Outcome: Other

PT: Uveitis

Report Source: Product: Kytril
Role: PS
Manufacturer: Hoffmann La Roche Inc
Route: ORAL
Dose: 1.0 DAILY ORAL
Duration: 22 DAY

Report Source: Product: Taxotere (Docetaxel)
Role: C
Manufacturer: Adriamycin (Doxorubicin Hydrochloride)
Route: ORAL
Dose: 1.0 DAILY ORAL
Duration: 22 DAY

Date: 02/27/01 **ISR Number:** 3671250-7 **Report Type:** Expedited (15-Day) **Company Report#:** 2001045210FR **Age:** 47 YR **Gender:** Female **IFU:** I

Outcome: Hospitalization - Initial or Prolonged

PT: Abdominal Pain
Chills
Hypotension
Pyrexia
Suffocation Feeling

Report Source: Product: Taxotere (Docetaxel)
Role: C
Manufacturer: Hoffmann La Roche Inc
Route: ORAL
Dose: 1.0 DAILY ORAL
Duration: 22 DAY

FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

Vomiting

Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Foreign Health Professional	Solu-Medrol	PS	Pharmacia And Upjohn Co	INTRAVENOUS	IV	
Other	5-Fu (Fluorouracil)	SS		INTRAVENOUS	IV	
	5-Fu(Fluorouracil)	SS		INTRAVENOUS	IV	
	Elvorine (Calcium Levofolinate)	SS		INTRAVENOUS	IV	
	Campto (Irinotecan Hydrochloride)	SS		INTRAVENOUS	IV	
	Kytril (Ganisetrone)	SS		INTRAVENOUS	IV	

Date: 02/28/01 ISR Number: 3670714-X Report Type: Expedited (15-Day) Company Report#: WAES 01028121

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	Gender	I/FU
Hospitalization - Initial or Prolonged	Myocardial Infarction Pulmonary Oedema	Foreign Health Professional	Decadron Phosphate Irinotecan Hydrochloride	PS	Merck & Co., Inc	INTRAVENOUS		1 DAY	Male	1
		Other	Granisetron	SS		INTRAVENOUS DRIP		1 DAY		1
			Iron (Unspecified)	C		INTRAVENOUS DRIP		1 DAY		1

Date: 03/02/01 ISR Number: 3672919-0 Report Type: Expedited (15-Day) Company Report#: WAES 01028121

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	Gender	I/FU
Hospitalization - Initial or Prolonged	Myocardial Infarction Pulmonary Oedema	Foreign Health Professional	Decadron Inj Irinotecan Hydrochloride Inj Granisetron Iron (Unspecified)	PS	Merck And Co Inc	INTRAVENOUS	4 MG, IV	1 DAY	Male	1
				SS		INTRAVENOUS	140 MG, IV	1 DAY		1
				SS		INTRAVENOUS	1.5 MG, IV	1 DAY		1
				C						

Date: 03/07/01 ISR Number: 3675581-6 Report Type: Expedited (15-Day) Company Report#: 2001005172-1

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	Gender	I/FU
Other	Angina Pectoris Erythema Oedema Respiratory Distress Tachycardia White Blood Cell Count Decreased	Foreign Health Professional Other	Kytril Methylprednisolone Sodium Succinate (Sol-Medrol)	PS	Hoffmann La Roche Inc	INTRAVENOUS	3 MILLIGRAMS, INTRAVENOUS	1 DAY	Female	1
				C						

Date: 03/07/01 ISR Number: 3675602-0 Report Type: Expedited (15-Day) Company Report#: 2001004531-1

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	Gender	I/FU
Hospitalization - Initial or Prolonged	Myocardial Infarction Pulmonary Oedema Sinus Arrhythmia	Foreign Health Professional	Kytril Campto (Irinotecan) Decadron (Desametasone) Ferixit (Iron)	PS	Smithkline Beecham	INTRAVENOUS		1 DAY	Male	1
				C						
				C						
				C						

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 03/07/01 **ISR Number:** 3675628-7 **Report Type:** Expedited (15-Day) **Company Report#:** 2001005172-1 **Age:** **Gender:** Female **I/FU:** 1

Outcome: Other **PT:** Anaphylactic Shock **Report Source:** Foreign Health Professional Other **Product:** Kytril **Role:** PS **Manufacturer:** Smithkline Beecham **Route:** INTRAVENOUS **Dose:** INTRAVENOUS **Duration:** DAY

Date: 03/07/01 **ISR Number:** 3675633-0 **Report Type:** Expedited (15-Day) **Company Report#:** 2001004720-1 **Age:** 47 YR **Gender:** Female **I/FU:** 1

Outcome: Hospitalization - Initial or Prolonged **PT:** Abdominal Pain Chills Hypotension Pyrexia Suffocation Feeling Vomiting **Report Source:** Foreign **Product:** Kytril Kytril Solumedrol (Methylprednisolone) Solumedrol (Methylprednisolone) Campto (Irinotecan) Campto (Irinotecan) 5-Fluorouracile (Fluorouracil) 5-Fluorouracile (Fluorouracil) (Vlourouracil) 5-Fluorouracile (Fluorouracil) Elvorine (Calcium Levofolinate) Elvorine (Calcium Levofolinate) **Role:** PS SS C C C C C C C C C C **Manufacturer:** Smithkline Beecham Smithkline Beecham **Route:** INTRAVENOUS INTRAVENOUS **Dose:** INTRAVENOUS INTRAVENOUS **Duration:** 1 DAY DAY

Date: 03/12/01 **ISR Number:** 3680876-6 **Report Type:** Expedited (15-Day) **Company Report#:** 2001004720-1 **Age:** 47 YR **Gender:** Female **I/FU:** F

Outcome: Hospitalization - Initial or Prolonged **PT:** Abdominal Pain Hypotension Pyrexia Suffocation Feeling Vomiting **Report Source:** Foreign **Product:** Kytril Solumedrol (Methylprednisolone) Campto (Irinotecan) 5-Fluorouracile (Fluorouracil) Elvorine (Calcium Evofolinate) **Role:** PS C C C C **Manufacturer:** Hoffmann La Roche Inc **Route:** INTRAVENOUS **Dose:** INTRAVENOUS **Duration:** 1 DAY

Date: 03/13/01 **ISR Number:** 3682623-0 **Report Type:** Expedited (15-Day) **Company Report#:** 2001005906-1 **Age:** 50 YR **Gender:** Female **I/FU:** 1

Outcome: Hospitalization - Initial or Prolonged **PT:** Aplasia Haemoglobin Decreased Neutrophil Count Decreased Pancytopenia Platelet Count Decreased Pyrexia **Report Source:** Foreign Health Professional **Product:** Kytril Hycamin (Topotecan) **Role:** PS C **Manufacturer:** Smithkline Beecham **Route:** INTRAVENOUS **Dose:** INTRAVENOUS **Duration:** 1 DAY

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

<p>Date: 03/16/01 ISIR Number: 3683612-2 Report Type: Expedited (15-Day) Company Report#: 2001047410IT Age: 72 YR Gender: Male I/FU: 1</p>									
Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	
Hospitalization - Initial or Prolonged	Myocardial Infarction Pulmonary Oedema	Foreign Health Professional Other	Camptosar Granisetron(Granisetron) Dexamethasone (Dexamethasone) Ferlixit (Benzyl Alcohol, Saccharin Sodium, Ferrous Gluconate)	PS SS SS SS	Pharmacia And Upjohn Co		140 MG, DURATION 2 DAYS 0 HRS		
<p>Date: 03/21/01 ISIR Number: 3687279-9 Report Type: Expedited (15-Day) Company Report#: 1999013301-1 Age: 40 YR Gender: Male I/FU: F</p>									
Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	
Hospitalization - Initial or Prolonged	Chest Discomfort Dyspnoea Hypersensitivity Laryngeal Oedema Pyrexia Urticaria	Foreign Health Professional	Kytril Solumedrol(Methylprednisolone) Eloxatine(Oxaliplatin)	PS C C	Smithkline Beecham Pharmaceuticals	INTRAVENOUS INTRAVENOUS	INTRAVENOUS	1 DAY	
<p>Date: 03/21/01 ISIR Number: 3687355-0 Report Type: Expedited (15-Day) Company Report#: 1999014712-1 Age: 40 YR Gender: Male I/FU: F</p>									
Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	
Hospitalization - Initial or Prolonged	Dyspnoea Hypersensitivity Laryngeal Oedema Pyrexia Urticaria	Health Professional	Kytril Solu-Medrol (Methylprednisolone Sodium Succinate) Eloxatin (Oxaliplatin)	PS C C	Hoffmann La Roche Inc	INTRAVENOUS INTRAVENOUS	INTRAVENOUS	1 DAY	
<p>Date: 03/23/01 ISIR Number: 3689137-2 Report Type: Expedited (15-Day) Company Report#: ETHYOL-01524 Age: 72 YR Gender: Male I/FU: 1</p>									
Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	
Hospitalization - Initial or Prolonged	Atrial Fibrillation Cardiac Disorder Chronic Obstructive Airways Disease Exacerbated Dyspnoea Hypoxia Pneumonia Bacterial Productive Cough	Study Health Professional	Ethylol Kytril Radiation Taxol Carboplatin Decadron Compazine	PS SS C C C C C	Medimmune Oncology Inc	INTRAVENOUS ORAL	376 MG UNK IV 1 MG Q24HR PO		

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 04/10/01 **ISR Number:** 3702271-3 **Report Type:** Expedited (15-Day) **Company Report#:** 2001005172-1

Age: 69 YR **Gender:** Female **I/F/U:** F

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Other	Angina Pectoris Erythema Oedema Respiratory Distress Tachycardia White Blood Cell Count Increased	Foreign Health Professional Other	Kytril	PS	Hoffmann La Roche Inc	INTRAVENOUS	3 MILLIGRAMS INTRAVENOUS	1 DAY
			Methylprednisolone Sodium Succinate (Solu-Medrol) Epirubicin Hydrochloride (Farmorubicin) Cyclophosphamide (Endoxan)	C C C				

Date: 04/10/01 **ISR Number:** 3702275-0 **Report Type:** Expedited (15-Day) **Company Report#:** 2000034570-1

Age: 65 YR **Gender:** Male **I/F/U:** F

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Other	Alanine Aminotransferase Increased Aspartate Aminotransferase Increased Blood Lactate Dehydrogenase Increased Hepatic Function Abnormal Liver Disorder	Foreign Health Professional Other	Kytril	PS	Hoffmann La Roche Inc	INTRAVENOUS	INTRAVENOUS	5 DAY
			Cyclophosphamide (Endoxan) Doxorubicin Hydrochloride (Adriacin) Vincristine Sulphate (Oncovin) Prednisone (Prednisone)	C C C C				

Date: 04/16/01 **ISR Number:** 3705459-0 **Report Type:** Expedited (15-Day) **Company Report#:** 2001051817FR

Age: 80 YR **Gender:** Male **I/F/U:** I

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Death	Atrioventricular Block Complete Bone Marrow Depression Pyrexia	Foreign Health Professional Other	Xanax	PS	Pharmacia And Upjohn Co	ORAL	0.5 MG, QD, ORAL	
			Vogalene (Metopimazine) Taxol (Paclitaxel) Paraplatine (Carboplatin) Kytril (Granisetron) Ranitidine (Ranitidine)	SS SS SS SS SS		ORAL INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS	ORAL IV IV 3 MG, QD, IV 2ML, QD, IV	

Date: 04/18/01 **ISR Number:** 3707673-7 **Report Type:** Expedited (15-Day) **Company Report#:** 2001009121-1

Age: 49 YR **Gender:** Female **I/F/U:** I

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Hospitalization - Initial or Prolonged	Haematocrit Decreased Infection Pyrexia Rash Papular Rash Pustular Stevens-Johnson Syndrome	Health Professional	Kytril	PS	Hoffmann La Roche Inc	INTRAVENOUS	1 MILLIGRAM 1.0 DAILY INTRAVENOUS	1 DAY

FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

Date: 04/23/01 ISR Number: 3709194-4 Report Type: Expedited (15-Day) Company Report#: 10792885

Age: 80 YR Gender: Male I/FU: 1

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Death	Arrioventricular Block	Foreign Health Professional	Taxol	PS	Bristol Myers Squibb Co Pharmaceutical Research Institute	INTRAVENOUS	IV	
Hospitalization - Initial or Prolonged	Complete Bone Marrow Depression	Other	Paraplatin (Carboplatin)	SS				
Required	Pyrexia		Xanax (Alprazolam)	SS				
Intervention to Prevent Permanent Impairment/Damage			Vogalene (Metopimazine)	SS				
			Kytril (Granisetron Hcl)	SS				
			Ranitidine Hcl	SS				

Date: 04/23/01 ISR Number: 3709548-6 Report Type: Expedited (15-Day) Company Report#: 2001009121-1

Age: 49 YR Gender: Female I/FU: F

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Hospitalization - Initial or Prolonged	Haematocrit Decreased	Health Professional	Kytril	PS	Hoffmann La Roche Inc	INTRAVENOUS	1 MILLIGRAMS 1.0 DAILY	INTRAVENOUS 1 DAY
	Pyrexia							
	Rash Papular							
	Rash Pustular							

Date: 04/26/01 ISR Number: 3711398-1 Report Type: Expedited (15-Day) Company Report#: 10705879

Age: . Gender: Female I/FU: F

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Disability	Accommodation Disorder	Foreign Health Professional	Cytosan	PS	Bristol Myers Squibb Co Pharmaceutical Research Institute	INTRAVENOUS	2.2 GRAM 1/1 CYCLE IV	
	Visual Acuity Reduced			SS		INTRAVENOUS	1.6 GRAM 1/1 CYCLE IV	
	Visual Field Defect		Uromitexan (Mesna)	SS		ORAL	1.6 GRAM 1/1 CYCLE ORAL	
			Urometixan (Mesna)	SS		INTRAVENOUS	1 MILLIGRAM 4/2 CYCLE IV	
			Kevzril (Granisetron Hcl)	SS		INTRAVENOUS	8 MILLIGRAM IV	
			Fortecortin (Dexamethasone)	SS		ORAL	175 MILLIGRAM 4/2 CYCLE ORAL	
			Natulan (Procarbazine Hcl)	SS		ORAL	80 MILLIGRAM 14/1 CYCLE ORAL	
			Decortin (Prednisone)	SS		ORAL	300 MILLIGRAM ORAL	
			Zantic (Ranitidine Hcl)	SS		ORAL	4 DOSAGE FORM ORAL	
			Kalinor-Retard P (Potassium Chloride)	SS		ORAL	62 MILLIGRAM 1/1 CYCLE IV	
			Doxorubicin (Doxorubicin Hcl)	SS		INTRAVENOUS		

FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	Age: 80 YR	Gender: Male	I/FU: I
Death	Aplastic Anaemia Atrioventricular Block Complete Cholestasis Platelet Count Decreased Pyrexia Thrombocythaemia White Blood Cell Count Increased	Foreign Health Professional	Kytril Xanax (Alprazolam) Vogalene (Metopimazine) Taxol (Paclitaxel) Paraplatin (Carboplatin) Azantac (Ranitidine)	PS C C C C C	Hoffmann La Roche Inc	INTRAVENOUS	INTRAVENOUS	1 DAY			

Date: 05/07/01 ISR Number: 3718970-3 Report Type: Expedited (15-Day) Company Report#: 2001010573-1

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	Age: 65 YR	Gender: Male	I/FU: I
Hospitalization - Initial or Prolonged	Chills Chromaturia Haemolysis Thrombocytopenia	Foreign Health Professional Other	Kytril Irinotecan + Folinic Acid (Folfiri) Methylprednisolone (Solumedrol)	PS C C	Hoffmann La Roche Inc	INTRAVENOUS	INTRAVENOUS				

Date: 05/07/01 ISR Number: 3718972-7 Report Type: Expedited (15-Day) Company Report#: 2001010628-1

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	Age: 49 YR	Gender: Male	I/FU: F
Hospitalization - Initial or Prolonged	Haemolytic Uraemic Syndrome Renal Failure Acute Thrombocytopenia	Foreign Health Professional	Ifex Efferalgan Codeine (Acetaminophen + Codeine Phosphate) Solu-Medrol (Methylprednisolone) Cisplatin (Cisplatin) Ametycine (Mitomycin) Kytril (Granisetron Hcl)	PS SS SS SS SS SS	Bristol Myers Squibb Co Pharmaceutical Research Institute	INTRAVENOUS	ORAL INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS	5400 MILLIGRAM, IV ORAL 120 MILLIGRAM, IV 180 MILLIGRAM, IV 10 MILLIGRAM IV			

Date: 05/21/01 ISR Number: 3726766-1 Report Type: Expedited (15-Day) Company Report#: 10574119

FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

Date: 05/23/01 **ISR Number:** 3727316-6 **Report Type:** Expedited (15-Day) **Company Report#:** B0107833A

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Gender:</u> Male	<u>IFU:</u> F
Death	Atrioventricular Block Complete Bone Marrow Depression Haemoglobin Decreased Neutropenia Platelet Count Decreased Pyrexia White Blood Cell Count Decreased	Health Professional	Azantac Xanax Vogalene Taxol Kytril Paraplatine	PS SS SS SS SS	Glaxo Wellcome Glaxo Wellcome Vogalene Taxol Hoffmann La Roche Hoffmann La Roche	INTRAVENOUS ORAL ORAL INTRAVENOUS INTRAVENOUS INTRAVENOUS	50MG Per day .5MG Per day 3MG Per day	Male Male Male Male Male	1 DAY 3 DAY 1 DAY 3 DAY

Date: 05/25/01 **ISR Number:** 3729032-3 **Report Type:** Expedited (15-Day) **Company Report#:** 2001009121-1

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Gender:</u> Female	<u>IFU:</u> F
Hospitalization - Initial or Prolonged Other	Diarrhoea Drug Hypersensitivity Pyrexia Rash Generalised Rash Papular Rash Pustular	Health Professional	Kytril	PS	Hoffmann La Roche Inc	INTRAVENOUS	1 MILLIGRAMS 1.0 DAILY INTRAVENOUS	Female	1 DAY

Date: 05/25/01 **ISR Number:** 3729432-1 **Report Type:** Expedited (15-Day) **Company Report#:** B0107833A

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Gender:</u> Male	<u>IFU:</u> I
Death	Atrioventricular Block Complete Bone Marrow Depression Neutropenia Platelet Count Decreased Pyrexia	Foreign	Zantac Alprazolam (Alprazolam) Metopimazine (Metopimazine) Paclitaxel (Paclitaxel) Granisetron Hydrochloride (Granisetron Hydrochloride) Carboplatin (Carboplatin)	PS SS SS SS SS SS	Glaxo Wellcome Inc Glaxo Wellcome Inc Hoffmann La Roche Hoffmann La Roche Hoffmann La Roche Hoffmann La Roche	INTRAVENOUS ORAL ORAL INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS	50 MG PER DAY INTRAVENOUS .5 MG PER DAY ORAL ORAL INTRAVENOUS 3 MG PER DAY INTRAVENOUS INTRAVENOUS	Male Male Male Male Male Male	1 DAY 1 DAY 1 DAY 1 DAY 1 DAY 1 DAY

Date: 05/31/01 **ISR Number:** 3731297-9 **Report Type:** Expedited (15-Day) **Company Report#:** 2001013024-1

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Gender:</u> Male	<u>IFU:</u> I
Hospitalization - Initial or Prolonged Other	Hypersensitivity Hypotension Palpitations Subclavian Artery Embolism Transient Ischaemic Attack	Health Professional	Kytril	PS	Hoffmann La Roche Inc	INTRAVENOUS	1 MILLIGRAMS 1.0 DAILY INTRAVENOUS	Male	1 DAY
			Cisplatin Mannitol Anzemet (Dolasetron Mesylate) Zofran (Ondansetron)	C C C	Hoffmann La Roche Inc Hoffmann La Roche Inc Hoffmann La Roche Inc Hoffmann La Roche Inc	INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS	1 MILLIGRAMS 1.0 DAILY INTRAVENOUS INTRAVENOUS	Male Male Male Male	1 DAY 1 DAY 1 DAY 1 DAY

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Hydrochloride) C
 Florinef
 (Fludrocortisone
 Acetate) C
 Reglan C
 (Metoclopramide) C
 Baby Aspirin C
 Compazine C
 (Prochlorperazine) C
 Magnesium C
 Potassium C

Date: 06/05/01 **ISR Number:** 3733979-1 **Report Type:** Expedited (15-Day) **Company Report#:** 10853588

Age: 36 MON **Gender:** Male **I/FU:** 1

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Other	Anaphylactic Shock Arrhythmia	Foreign Health Professional Other	Vepesid Kytril (Granisetron Hcl)	PS SS	Bristol Myers Squibb Co	INTRAVENOUS	IV	

Date: 06/08/01 **ISR Number:** 3741660-8 **Report Type:** Expedited (15-Day) **Company Report#:** 2001010673-1

Age: 80 YR **Gender:** Male **I/FU:** F

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Death	Aplastic Anaemia Atrioventricular Block Blood Alkaline Phosphatase Increased Blood Lactate Dehydrogenase Increased Cholestasis Gamma-Glutamyltransferase Increased Neutrophil Count Decreased Pyrexia White Blood Cell Count Increased	Foreign Health Professional	Kytril Xanax (Alprazolam) Vogalene (Metopimazine) Taxol (Paclitaxel) Paraplatin (Carboplatin) Azantac (Ranitidine)	PS C C C C C	Hoffmann La Roche Inc	INTRAVENOUS	INTRAVENOUS	1 DAY

Date: 06/18/01 **ISR Number:** 3741660-8 **Report Type:** Expedited (15-Day) **Company Report#:** ATO-01-0004

Age: 70 YR **Gender:** Male **I/FU:** 1

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Hospitalization - Initial or Prolonged	Agitation Anxiety Bundle Branch Block Right	Health Professional	Trisenox Kytril (Granisetron Hydrochloride)	PS SS	Cell Therapeutics Inc	INTRAVENOUS	0.20 MG/KG, IV1 1 IN 1 D	

Date: 06/21/01 **ISR Number:** 3743992-6 **Report Type:** Expedited (15-Day) **Company Report#:** 2001010628-1

Age: 62 YR **Gender:** Male **I/FU:** F

<u>Outcome</u>	<u>PT</u>
Hospitalization - Initial or Prolonged	Chills Chromaturia Erythema Haemolysis

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Thrombocytopenia

<u>Report Source</u> Health Professional Other	<u>Product</u> Kytril Irinotecan + Folic Acid (Folfir) Methylprednisolone (Solumedrol)	<u>Role</u> PS C C	<u>Manufacturer</u> Hoffmann La Roche Inc	<u>Route</u> INTRAVENOUS INTRAVENOUS	<u>Dose</u> 1 VIALS INTRAVENOUS	<u>Duration</u> 1 DAY
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Date: 06/27/01 **ISR Number:** 3749907-9 **Report Type:** Expedited (15-Day) **Company Report#:** 10853588 **Age:** 36 MON **Gender:** Male **I/FU:** F

<u>Outcome</u> Life-Threatening Other	<u>PT</u> Anaphylactic Shock Arrhythmia	<u>Report Source</u> Foreign Health Professional Other	<u>Product</u> Vespid Kytril (Granisetron Hcl)	<u>Role</u> PS SS	<u>Manufacturer</u> Bristol Myers Squibb Co	<u>Route</u> INTRAVENOUS	<u>Dose</u> IV	<u>Duration</u>
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Date: 07/02/01 **ISR Number:** 3751360-6 **Report Type:** Expedited (15-Day) **Company Report#:** 2001014689-1 **Age:** 56 YR **Gender:** Male **I/FU:** I

<u>Outcome</u> Hospitalization - Initial or Prolonged Other	<u>PT</u> Blood Creatinine Increased Blood Sodium Decreased Circulatory Collapse Feeling Abnormal Hyperhidrosis Panic Attack Psychotic Disorder Renal Impairment Vision Blurred Vomiting	<u>Report Source</u> Foreign	<u>Product</u> Kytril Diclofenac Ranitidine Warfarin Dexamethasone Metoclopramide	<u>Role</u> PS C C C C C	<u>Manufacturer</u> Hoffmann La Roche Inc	<u>Route</u> ORAL	<u>Dose</u> 1 MILLIGRAMS 1.0 DAILY ORAL	<u>Duration</u> 2 DAY
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Date: 07/05/01 **ISR Number:** 3753699-7 **Report Type:** Expedited (15-Day) **Company Report#:** 2001010628-1 **Age:** 62 YR **Gender:** Male **I/FU:** F

<u>Outcome</u> Hospitalization - Initial or Prolonged	<u>PT</u> Autoimmune Disorder Back Pain Chills Dermatitis Exfoliative Haematuria Haemolysis Hepatic Function Abnormal Hypersensitivity Inflammation Nephritis Interstitial Platelet Count Decreased Pyrexia	<u>Report Source</u> Foreign Health Professional Other	<u>Product</u> Kytril Oxaliplatin Methylprednisolone (Solumedrol) Calcium Levofolinate 5 Fu	<u>Role</u> PS C C C C	<u>Manufacturer</u> Hoffmann La Roche Inc	<u>Route</u> INTRAVENOUS	<u>Dose</u> 1 VIALS INTRAVENOUS	<u>Duration</u> 1 DAY
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**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 07/10/01 **ISR Number:** 3756295-0 **Report Type:** Expedited (15-Day) **Company Report#:** 2001015644-1

Age: 11 YR **Gender:** Female **I/FU:** 1

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Death	Arterial Occlusive Disease	Literature Health Professional Other	Granisetron Fentanyl Antifungal Antiviral Hydromorphone	PS C C C C C C	Smithkline Beecham			
Other	Hepatic Failure Renal Failure Serotonin Syndrome Vein Disorder							

Date: 07/10/01 **ISR Number:** 3756296-2 **Report Type:** Expedited (15-Day) **Company Report#:** 2001015644-1

Age: 11 YR **Gender:** Female **I/FU:** 1

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Death	Angiopathy Anxiety Clonic Convulsion Confusional State Constricted Affect Coordination Abnormal Delirium Disturbance In Attention Dysphoria Eye Disorder Feeling Jittery Hallucination Hepatic Failure Irritability Renal Failure Serotonin Syndrome Venous Occlusion	Health Professional	Granisetron	PS	Smithkline Beecham			
Other								

Date: 08/08/01 **ISR Number:** 3773259-1 **Report Type:** Expedited (15-Day) **Company Report#:** ETHYOL-01524

Age: 72 YR **Gender:** Male **I/FU:** F

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Hospitalization - Initial or Prolonged	Atrial Fibrillation Chronic Obstructive Airways Disease Exacerbated Cough Dyspnoea Hypoxia Pneumonia Bacterial Ventricular Arrhythmia	Study Health Professional	Ethyol Kytril Radiation Taxol Carboplatin Decadron Compazine ..	PS SS C C C C C C	Medimmune Oncology Inc	INTRAVENOUS ORAL	376 MG UNK IV 1 MG Q24HR PO	

Date: 08/23/01 **ISR Number:** 3782364-5 **Report Type:** Expedited (15-Day) **Company Report#:** 2001013428-1

Age: 54 YR **Gender:** Female **I/FU:** 1

Outcome	PT
Other	Abdominal Pain Alopecia Blood Glucose Increased Blood Lactate Dehydrogenase Increased Blood Pressure Increased Blood Urea Increased

FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

Decreased Appetite	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Drug Ineffective	Consumer	Kytril Roche	PS		ORAL	1 MILLIGRAMS	9 DAY
Dry Mouth	Health					2.0 DAILY	
Dysphonia	Professional					ORAL	
Eating Disorder							
Fatigue							
Haematocrit Decreased		Monopril (Fosinopril Sodium)	C				
Haemoglobin Decreased		Cytoxan (Cyclophosphamide)	C				
Heart Rate Increased		Adriamycin (Doxorubicin Hydrochloride)	C				
Hepatomegaly		Vincristine	C				
Lymphadenopathy		Prednisone	C				
Lymphocyte Count Decreased		Benadryl					
Lymphocyte Count Increased		(Diphenhydramine Hydrochloride)	C				
Mean Cell Volume Decreased		Rituxan (Rituximab)	C				
Monocyte Count Decreased		Anzemet (Dolasetron Mesylate)	C				
Neutrophil Count Decreased		Tylenol (Acetaminophen)	C				
Neutrophil Count Increased							
Oral Candidiasis							
Oral Soft Tissue Disorder							
Swelling							
White Blood Cell Count Decreased							
White Blood Cell Count Increased							

Date: 08/29/01 **ISR Number:** 3785764-2 **Report Type:** Expedited (15-Day) **Company Report#:** 2001068403FR **Age:** 47 YR **Gender:** Female **I/FU:** 1

<u>Outcome</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Hospitalization - Initial or Prolonged	Foreign Health Professional Other	Camptosar (Trinitecan) Solution, Sterile Solu-Medrol (Methylprednisolone) Powder, Sterile Fluorouracil (Fluorouracil) Kytril(Granisetron) Elvorine (Calcium Levofolinate)	PS SS SS SS SS		INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS	IV IV 3 MG/3 ML, IV	
<u>PT</u>							
Abdominal Pain Chills Hypotension Pyrexia Suffocation Feeling Vomiting							

Date: 09/12/01 **ISR Number:** 3792951-6 **Report Type:** Expedited (15-Day) **Company Report#:** 10968162 **Age:** **Gender:** **I/FU:** 1

<u>Outcome</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Life-Threatening	Foreign Health Professional Company Representative Other	Vepestid Inj (Etoposide) Kytril (Granisetron Hcl)	PS SS		INTRAVENOUS INTRAVENOUS	500 MG/M2, IV 3 MILLIGRAM, IV	
<u>PT</u>							
Anaphylactic Shock							

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 09/21/01 ISR Number: 3797623-X Report Type: Expedited (15-Day) Company Report#: 10946747

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Gender:	IFU:
Other	Aplasia Pure Red Cell	Foreign Health Professional Company Representative Other	Vepesid Inj (Etoposide)	PS		INTRAVENOUS	150 MILLIGRAM, IV	Female	F
			Randa (Cisplatin)	SS		INTRAVENOUS	120 MILLIGRAM, IV		
			Fildesin (Vindesine Sulfate)	SS		INTRAVENOUS	3 MILLIGRAM, IV		
			Lasix (Furosemide)	SS		INTRAVENOUS	20 MILLIGRAM, IV		
			Kytril (Granisetron Hcl)	SS		INTRAVENOUS	3 MILLIGRAM, IV		
			Decadron (Dexamethasone)	SS		INTRAVENOUS	8 MILLIGRAM, IV		

Date: 09/25/01 ISR Number: 3797757-X Report Type: Expedited (15-Day) Company Report#: 268588

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Gender:	IFU:
Other	Intestinal Obstruction		Granisetron Hydrochloride	PS	Roche			Female	I
			Carboplatin	SS			CYCLICAL REGIME. START OF CYCLE FOUR 31 MAY 2001.		
			Paclitaxel	SS			CYCLICAL REGIME. START OF CYCLE FOUR 31 MAY 2001.		
			Dexamethason	C					
			Tavegil	C					
			Ronatic	C					

Date: 10/02/01 ISR Number: 3804017-7 Report Type: Expedited (15-Day) Company Report#: 268588

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Gender:	IFU:
Other	Intestinal Obstruction	Foreign Study Health Professional	Granisetron Hydrochloride (Granisetron Hydrochloride)	PS		INTRAVENOUS	1.5 MG DAILY INTRAVENOUS	Female	I
			Carboplatin (Carboplatin)	SS		INTRAVENOUS	508.55 MG DAILY INTRAVENOUS		
			Paclitaxel (Paclitaxel)	SS		INTRAVENOUS	288.75 MG DAILY INTRAVENOUS		
			Dexamethason (Dexamethasone)	C					

FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

Tavegil (Clemastine
Or Clemastine
Fumarate) C
Ronatic
(Chlorpheniramine
Maleate/Phenylephrin
e) C
Hydrochloride/Pyrida

Date: 10/23/01 ISR Number: 3812019-X Report Type: Expedited (15-Day) Company Report#: 300032

PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	Age: 77 YR	Gender: Female	IFU: I
Aplasia		Kytril	PS	Roche			142 DAY			
Cardiac Failure		Diffu-K	SS			THE PATIENT RECEIVED 6 COURSES.	146 DAY			
Cardiomegaly		Vindesine Sulfate	SS			THE PATIENT RECEIVED 6 COURSES.	115 DAY			
Cardiomyopathy		Solupred	SS			THE PATIENT RECEIVED 6 COURSES.	146 DAY			
Heart Rate Increased		Endoxan Asia	SS			THE PATIENT RECEIVED 6 COURSES.	142 DAY			
Lactic Acidosis		Adriblastine	SS			THE PATIENT RECEIVED 6 COURSES.				
Pyrexia		Previscan	C			DOSAGE=270 MG/M2.	142 DAY			
Shock										

Date: 10/23/01 ISR Number: 3812021-8 Report Type: Expedited (15-Day) Company Report#: 270050

PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	Age: 72 YR	Gender: Male	IFU: I
Circulatory Collapse		Granisetron	PS	Roche						
Facial Bones Fracture		Hydrochloride	SS							
Skull Fracture		Gencitabine	SS							
Syncope		Navelbine	C							
		L-Thyroxin	C							
		Timonil	C							
		Serevent	C							
		Atrovent	C							
		Itrop	C							
		Dulcolax	C							
		Fraxiparin	C							

Date: 10/25/01 ISR Number: 3814649-8 Report Type: Expedited (15-Day) Company Report#: 300032

PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	Age: 77 YR	Gender: Female	IFU: I
Aplasia	Foreign	Kytril (Granisetron)	PS		INTRAVENOUS	INTRAVENOUS				
Cardiac Failure	Other	Diffu-K (Potassium Chloride)	SS		ORAL	2 DOSE FORM DAILY ORAL				
Cardiomegaly		Vindesine Sulfate (Vindesine Sulfate)	SS		INTRAVENOUS	INTRAVENOUS				
Cardiomyopathy		Solupred	SS		ORAL	ORAL				
Haemodialysis		Metasulfobenzozate)	SS		ORAL	ORAL				
Lactic Acidosis										
Pyrexia										
Shock										

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Endoxan Asta (Cyclophosphamide)	SS	INTRAVENOUS	INTRAVENOUS
Adriablastine (Doxorubicin Hydrochloride)	SS	INTRAVENOUS	INTRAVENOUS
Previscan (Fluindione)	C		

Date: 10/25/01 **ISR Number:** 3815477-X **Report Type:** Expedited (15-Day) **Company Report#:** 270050 **Age:** 72 YR **Gender:** Male **I/FU:** 1

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Hospitalization - Initial or Prolonged	Circulatory Collapse Facial Bones Fracture Non-Small Cell Lung Cancer Skull Fracture Syncope	Foreign Study Health Professional	Granisetron Hydrochloride (Granisetron Hydrochloride)	PS			1 PER ONE DOSE	
			Gemcitabine (Gemcitabine) Navelbine (Vinorelbine Tartrate) L-Thyroxine (Levothyroxine Sodium) Timonil (Carbamazepine) Serevent (Salmeterol Xinafoate) Atrovent (Ipratropium Bromide) Itrop (Ipratropium Bromide) Dulcolax (Bisacodyl) Fraxiparin (Nadroparin Calcium)	SS SS SS C C C C C C C C C				

Date: 12/04/01 **ISR Number:** 3833476-9 **Report Type:** Expedited (15-Day) **Company Report#:** 302472 **Age:** 11 YR **Gender:** Female **I/FU:** 1

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Other	Hepatic Failure Renal Failure Serotonin Syndrome		Granisetron Hydrochloride Fentanyl Antibiotics Cyclosporine	PS SS C C	Roche Roche			

Date: 12/07/01 **ISR Number:** 3837736-7 **Report Type:** Expedited (15-Day) **Company Report#:** 302472 **Age:** 11 YR **Gender:** Female **I/FU:** 1

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>
Other	Anxiety Clonic Convulsion Confusional State Constricted Affect Coordination Abnormal Delirium	

FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

Disturbance In Attention
 Dysphoria
 Hallucination, Visual
 Hepatic Failure
 Irritability
 Renal Failure Chronic
 Serotonin Syndrome
 Tremor
 Venooclusive Liver
 Disease

Report Source
 Literature
 Health
 Professional

Product
 Granisetron
 Hydrochloride
 Fentanyl (Fentanyl
 Citrate)
 Antibiotics
 (Antibiotic Nos)
 Cyclosporine
 (Cyclosporine)

Role

PS
 SS
 C
 C

Route

INTRAVENOUS
 INTRAVENOUS

Dose

INTRAVENOUS

Duration

Date: 12/12/01 **ISR Number:** 3837328-X **Report Type:** Expedited (15-Day) **Company Report#:** 302472 **Age:** 11 YR **Gender:** Female **I/FU:** I

Outcome
 Other

PT
 Serotonin Syndrome

Report Source

Product
 Granisetron
 Hydrochloride
 Fentanyl
 Antibiotics
 Cyclosporine

Role
 PS
 SS
 C
 C

Route

Dose

Duration

Date: 12/12/01 **ISR Number:** 3839430-5 **Report Type:** Expedited (15-Day) **Company Report#:** 20010648403FR **Age:** 47 YR **Gender:** Female **I/FU:** F

Outcome

PT
 Abdominal Pain
 Hypotension
 Pyrexia
 Suffocation Feeling
 Vomiting

Report Source
 Foreign
 Health
 Professional
 Other

Product
 Camptosar
 (Irinotecan)
 Solution, Sterile
 Solu-Medrol
 (Methylprednisolone)
 Fluorouracil
 (Fluorouracil)
 Kytril (Granisetron)
 Eivorine (Calcium
 Levofolinate)

Role
 PS
 SS
 SS
 SS
 SS

Route

INTRAVENOUS
 INTRAVENOUS
 INTRAVENOUS
 INTRAVENOUS

Dose

SEE IMAGE
 IV
 SEE IMAGE
 3 MG/3 ML, IV

Duration

Date: 12/12/01 **ISR Number:** 3839438-X **Report Type:** Expedited (15-Day) **Company Report#:** 2001045210FR **Age:** 47 YR **Gender:** Female **I/FU:** F

Outcome
 Hospitalization -
 Initial or Prolonged

PT
 Abdominal Pain
 Chills
 Hypotension
 Pyrexia
 Suffocation Feeling
 Vomiting

Report Source
 Foreign
 Health
 Professional
 Other

Product
 Solu-Medrol
 (Methylprednisolone)
 Powder, Sterile
 5-Fu (Fluorouracil)
 Eivorine (Calcium
 Levofolinate)
 Camptosar
 (Irinotecan)
 Solution, Sterile
 Kytril (Granisetron)

Role
 PS
 SS
 SS
 SS
 SS

Route

INTRAVENOUS
 INTRAVENOUS
 INTRAVENOUS
 INTRAVENOUS

Dose

IV
 IV
 SEE IMAGE
 SEE IMAGE

Duration

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 12/14/01 **ISRN**: 3839164-7 **Report Type**: Expedited (15-Day) **Company Report#**: 303279

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>	<u>IFU</u>
Other	Full Blood Count Decreased		Kytril Adriacin Ifomide Solita-T3 Injection Meylon Uromitexan	PS SS SS C C C	Roche			5 3 5 6 6 5	Male

Date: 12/14/01 **ISRN**: 3839652-3 **Report Type**: Expedited (15-Day) **Company Report#**: 302472

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>	<u>IFU</u>
Other	Hepatic Failure Renal Failure Serotonin Syndrome Venooocclusive Disease	Literature Health Professional	Granisetron Hydrochloride (Hydrochloride) Fentanyl (Fentanyl Citrate) Antibiotics (Antibiotic Nos) Cyclosporine (Cyclosporine)	PS SS C C		INTRAVENOUS			Female

Date: 12/18/01 **ISRN**: 3841132-6 **Report Type**: Expedited (15-Day) **Company Report#**: 303279

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>	<u>IFU</u>
Other	Haemoglobin Increased Platelet Count Decreased White Blood Cell Count Decreased	Foreign Study Health Professional	Kytril (Granisetron) Adriacin (Doxorubicin Hydrochloride) Ifomide (Ifosfamide) Solita-T3 Injection (Potassium Chloride/Sodium Chloride/Sodium Lactate) Meylon (Sodium Bicarbonate) Uromitexan (Mesna)	PS SS SS C C C		INTRAVENOUS DRIP INTRAVENOUS INTRAVENOUS	0.4 MG DAILY INTRAVENOUS DRIP 10 MG DAILY INTRAVENOUS 1000 MG DAILY INTRAVENOUS		Male

Date: 12/21/01 **ISRN**: 3842651-3 **Report Type**: Expedited (15-Day) **Company Report#**: 303534

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>	<u>IFU</u>
Hospitalization - Initial or Prolonged	Dyspnoea Tremor		Kytril Tegeline Eldisine Endoxan Adriablastine	PS SS SS SS SS	Roche		3MG/3ML	1 1 1 1 1	Male

FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

Outcome	PT	ISRN Number	ISRN	Report Type	Expedited (15-Day)	Company Report#	Product	Role	Manufacturer	Route	Dose	Gender	Age	I/FU
Hospitalization - Initial or Prolonged	Dyspnoea Exacerbated Tremor	3842913-5	3842913-5	Expedited (15-Day)	US-BRISTOL-MYERS SQUIBB COMPANY-11635729	Endoxan	PS	Bristol-Myers Squibb Company	INTRAVENOUS	INTRAVENOUS	10g/200 ml	Male	74 YR	I
						Adriablastine	SS		INTRAVENOUS					
						Eldisine	SS		INTRAVENOUS					
						Kytril	SS		INTRAVENOUS					
						Tegeline	SS		INTRAVENOUS					
						Chloraminophene	C		INTRAVENOUS					
Hospitalization - Initial or Prolonged	Dyspnoea Tremor	3845864-5	3845864-5	Expedited (15-Day)	Company Report#: 303534	Kytril (Granisetron)	PS		INTRAVENOUS	INTRAVENOUS	1 MG/ML	Male	74 YR	I
						Tegeline (Globulin, Immune)	SS		INTRAVENOUS	INTRAVENOUS	1 DOSE FORM			
						Eldisine (Vindesine Sulfate)	SS		INTRAVENOUS	INTRAVENOUS	6 MG			
						Endoxan (Cyclophosphamide) Adriablastine (Doxorubicin Hydrochloride)	SS		INTRAVENOUS	INTRAVENOUS	INTRAVENOUS			
Hospitalization - Initial or Prolonged	Dyspnoea Tremor	3846187-0	3846187-0	Expedited (15-Day)	Company Report#: 801#3#2001-18688 (000)	Endoxan (Cyclophosphamide) Adriablastine (Doxorubicin Hydrochloride)	PS		INTRAVENOUS	INTRAVENOUS	47 MG	Male	74 YR	I
						Endoxan (Cyclophosphamide)	PS		INTRAVENOUS	INTRAVENOUS	INTRAVENOUS			
						Adriablastine (Doxorubicin Hydrochloride)	SS		INTRAVENOUS	INTRAVENOUS	47 MG I.V.			
						Eldisine (Vindesine Sulfate)	SS		INTRAVENOUS	INTRAVENOUS	6 MG I.V.			
						Tegeline (Human Immunoglobulin)	SS		INTRAVENOUS	INTRAVENOUS	10 G I.V.			
						Kytril (Granisetron)	SS		INTRAVENOUS	INTRAVENOUS	3 MG I.V.			
Hospitalization - Initial or Prolonged	Cough Dyspnoea Hypogammaglobulinaemia Lymphadenopathy Tremor	3849066-8	3849066-8	Expedited (15-Day)	Company Report#: 2001086667FR	Adriamycine (Doxorubicin Hydrochloride) Solution, Sterile Endoxan (Cyclophosphamide) Eldisine (Vindesine Sulfate) Normal Human Immunoglobulin	PS		INTRAVENOUS	INTRAVENOUS	47 MG, QD, IV	Male	74 YR	I
						Adriamycine (Doxorubicin Hydrochloride) Solution, Sterile	PS		INTRAVENOUS	INTRAVENOUS	47 MG, QD, IV			
						Endoxan (Cyclophosphamide) Eldisine (Vindesine Sulfate)	SS		INTRAVENOUS	INTRAVENOUS	IV			
						Normal Human Immunoglobulin	SS		INTRAVENOUS	INTRAVENOUS	6 MG, IV			
							SS		INTRAVENOUS	INTRAVENOUS	10 G/200 ML,			

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Outcome Hospitalization - Initial or Prolonged	PT Hepatitis	Report Source	Product Kytril Endoxan	Role PS SS	Manufacturer Roche	Route	Dose 500 MG/M2. FIRST COURSE. 29 DAY 5 DAY	Duration 1 DAY	I/RU: I
<p>Date: 01/22/02 ISR Number: 3855221-3 Report Type: Expedited (15-Day) Company Report#: 304844</p>									
Outcome Hospitalization - Initial or Prolonged	PT Hepatitis	Report Source	Product Endoxan Inj Farmorubicin 5-Fu Kytril Zophren Primperan Motilium	Role PS SS SS SS SS SS C	Manufacturer Bristol-Myers Squibb Company	Route	Dose 500 MG/M2. FIRST COURSE. 29 DAY 1 DAY	Duration 1 DAY	I/RU: I
<p>Date: 01/23/02 ISR Number: 3856134-3 Report Type: Expedited (15-Day) Company Report#: US-BRISTOL-MYERS SQUIBB COMPANY-11674629</p>									
Outcome Other	PT Intestinal Obstruction	Report Source	Product Granisetron Hydrochloride Oncovin Leunase	Role PS SS C	Manufacturer Roche	Route	Dose INTERVAL: 5 TIMES/ 5-14 NOVEMBER.	Duration 16 DAY 15 DAY	I/RU: F
<p>Date: 01/23/02 ISR Number: 3859633-3 Report Type: Expedited (15-Day) Company Report#: 2002088573FR</p>									
Outcome Hospitalization - Initial or Prolonged	PT Hepatic Lesion Hepatitis	Report Source Foreign Health Professional Other	Product Farmorubicin(Epirubi cin Hydrochloride)Powder , Sterile Endoxan(Cyclophospha mide) Fluorouracil(Fluorou racil)	Role PS SS SS	Manufacturer	Route	Dose 160 MG, CYCLIC, IV 800 MG, CYCLIC, IV 800 MG, CYCLIC, IV	Duration	I/RU: I

FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

Primperan(Metoclopra
 mide) SS INTRAVENOUS IV
 Zophren(Ondansetron
 Hydrochloride) SS ORAL
 Kytril (Granisetron) SS INTRAVENOUS IV
 Motilium
 (Domperidone) C

Date: 01/24/02 ISR Number: 3860256-0 Report Type: Expedited (15-Day) Company Report#: 304844

<u>Outcome</u> Hospitalization - Initial or Prolonged	<u>PT</u> Hepatitis	<u>Report Source</u> Foreign Other	<u>Product</u> Kytril (Granisetron) Endoxan (Cyclophosphamide) Famrubicine (Epirubicin Hydrochloride) Zophren (Ondansetron Hydrochloride) Fluorouracil (Fluorouracil) Primperan (Metoclopramide Hydrochloride) Motilium (Domperidone)	<u>Role</u> PS SS SS SS SS C	<u>Manufacturer</u>	<u>Route</u> INTRAVENOUS INTRAVENOUS INTRAVENOUS ORAL INTRAVENOUS INTRAVENOUS	<u>Dose</u> INTRAVENOUS 800 MG 1 PER ONE DOSE INTRAVENOUS 160 MG 1 PER ONE DOSE INTRAVENOUS ORAL 800 MG 1 PER ONE DOSE INTRAVENOUS	<u>Gender: Female</u>	<u>Age: 38 YR</u>	<u>I/FU: 1</u>
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Date: 01/25/02 ISR Number: 3860073-1 Report Type: Expedited (15-Day) Company Report#: 302678

<u>Outcome</u> Other	<u>PT</u> Abdominal Pain Upper Alanine Aminotransferase Increased Aspartate Aminotransferase Increased Blood Bilirubin Increased Haemoglobin Decreased Intestinal Obstruction Platelet Count Decreased Tenderness White Blood Cell Count Decreased	<u>Report Source</u> Foreign Study Health Professional	<u>Product</u> Granisetron Hydrochloride (Granisetron Hydrochloride) Oncovin (Vincristine) Leunase (Asparaginase) Daunomycin (Daunorubicin Hydrochloride) Endoxan (Cyclophosphamide)	<u>Role</u> PS SS C C C	<u>Manufacturer</u>	<u>Route</u> INTRAVENOUS DRIP INTRAVENOUS	<u>Dose</u> 3 MG DAILY INTRAVENOUS DRIP 2 MG DAILY INTRAVENOUS	<u>Gender: Male</u>	<u>Age: 14 YR</u>	<u>I/FU: 1</u>
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FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

Date: 01/28/02 ISR Number: 3861442-6 Report Type: Expedited (15-Day) Company Report#: 801#3#2002-18783 (000)

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	Gender:	Age:	IFU:
Hospitalization - Initial or Prolonged	Drug Toxicity Hepatitis	Health Professional	Endoxan (Cyclophosphamide)	PS		INTRAVENOUS	800 MILLIGRAM INTRAVENOUS	1 DAY	Female	38 YR	I
			Farmorubicin (Epirubicin)	SS		INTRAVENOUS	160 MG I.V.	1 DAY			
			Fluorouracil (Fluorouracil)	SS		INTRAVENOUS	800 MG I.V.	1 DAY			
			Kytril (Granisetron)	SS		INTRAVENOUS					
			Zopihren (Ondansetron)	SS		INTRAVENOUS					
			Hydrochloride)	SS		ORAL	P.O.				
			Primperan (Metoclopramide)	SS		INTRAVENOUS	I.V.				
			Motilium (Domperidone)	C							

Date: 01/29/02 ISR Number: 3860872-6 Report Type: Expedited (15-Day) Company Report#: B0133033A

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	Gender:	Age:	IFU:
Hospitalization - Initial or Prolonged	Alanine Aminotransferase Increased Aspartate Aminotransferase Increased Blood Alkaline Phosphatase Increased Gamma-Glutamyltransferase Increased Infectious Mononucleosis Liver Function Test Abnormal	Health Professional	Zopihren	PS	Glaxo Wellcome	INTRAVENOUS	24MG per day	1 DAY	Female	47 YR	F
			Solunedrol	SS		INTRAVENOUS					
			Cisplatin	SS		INTRAVENOUS	80MG/2 per day	1 DAY			
			Metoclopramide	SS		INTRAVENOUS	60MG per day	1 DAY			
			Kytril	SS	Glaxo Wellcome	ORAL	4MG per day	5 DAY			
			Cetoran	C		UNKNOWN					
			Di-Antalvic	C		UNKNOWN					
			Eprex	C		UNKNOWN	4285.7IU per day				
			Forlax	C		UNKNOWN					
			Gemzar	C		INTRAVENOUS	1250MG/2 per day	9 DAY			
			Iskedyl	C		UNKNOWN					
			Miniphase	C		UNKNOWN					
			Morphine	C		UNKNOWN	60MG per day				
			Taxotere	C		UNKNOWN	.5MG Twice per day				
			Xanax	C		ORAL					
			Sodium Fluoride	C	Glaxo Wellcome	UNKNOWN					

Date: 01/29/02 ISR Number: 3860875-1 Report Type: Expedited (15-Day) Company Report#: B0133246A

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	Gender:	Age:	IFU:
Hospitalization - Initial or Prolonged	Hepatitis	Health Professional	Zopihren	PS	Glaxo Wellcome	ORAL		5 DAY	Female	38 YR	F
			Primperan	SS	Glaxo Wellcome	INTRAVENOUS		1 DAY			
			Farmorubicin	SS	Glaxo Wellcome	INTRAVENOUS		1 DAY			
			Kytril	SS	Glaxo Wellcome	INTRAVENOUS		1 DAY			
			Endoxan	SS		INTRAVENOUS		1 DAY			
			Fluorouracil	SS		INTRAVENOUS		1 DAY			
			Domperidone	C		UNKNOWN					

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 01/31/02 **ISR Number:** 3860645-4 **Report Type:** Expedited (15-Day) **Company Report#:** 305343 **Age:** 69 YR **Gender:** Female **I/FU:** 1

Outcome Hospitalization - Initial or Prolonged	PT Constipation Dehydration Vomiting	Report Source	Product Kytril Capecitabine	Role PS SS	Manufacturer Roche Roche	Route	Dose 14 DAYS TREATMENT FOLLOWED BY ONE WEEKS REST	Duration 3 DAY
			Irinotecan Dexamethasone Metoclopramide	SS C C			5 5 DAY DAY	

Date: 01/31/02 **ISR Number:** 3860649-1 **Report Type:** Expedited (15-Day) **Company Report#:** 305343 **Age:** 69 YR **Gender:** Female **I/FU:** F

Outcome Hospitalization - Initial or Prolonged	PT Constipation Dehydration Vomiting	Report Source	Product Kytril Capecitabine	Role PS SS	Manufacturer Roche Roche	Route	Dose 14 DAYS TREATMENT FOLLOWED BY ONE WEEKS REST	Duration 3 DAY
			Irinotecan Dexamethasone Metoclopramide	SS C C			5 5 DAY DAY	

Date: 01/31/02 **ISR Number:** 3862949-8 **Report Type:** Expedited (15-Day) **Company Report#:** 305343 **Age:** 69 YR **Gender:** Female **I/FU:** I

Outcome Hospitalization - Initial or Prolonged	PT Constipation Dehydration Vomiting	Report Source Foreign Study Health Professional	Product Kytril (Granisetron) Capecitabine (Capecitabine)	Role PS SS	Manufacturer	Route ORAL	Dose 3300 MG DAILY ORAL	Duration
			Irinotecan (Irinotecan Hydrochloride)	SS		INTRAVENOUS	415MG 1 PER 3 WEEK INTRAVENOUS	
			Dexamethasone (Dexamethasone) Metoclopramide (Metoclopramide Hydrochloride)	C C				

Date: 01/31/02 **ISR Number:** 3862953-X **Report Type:** Expedited (15-Day) **Company Report#:** 305343 **Age:** 69 YR **Gender:** Female **I/FU:** F

Outcome Hospitalization - Initial or Prolonged	PT Constipation Dehydration Vomiting	Report Source Foreign Study Health Professional	Product Kytril (Granisetron) Capecitabine (Capecitabine)	Role PS SS	Manufacturer	Route ORAL	Dose 3300 MG DAILY ORAL	Duration
			Irinotecan (Irinotecan Hydrochloride)	SS		INTRAVENOUS	415 MG 1 PER 3 WEEK	

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

INTRAVENOUS

Dexamethasone
(Dexamethasone)
C
Metoclopramide
(Metoclopramide
Hydrochloride)
C

Date: 02/20/02 ISR Number: 3870847-9 Report Type: Expedited (15-Day) Company Report#: 303279

Age: 15 MON Gender: Male I/FU: F

Outcome Other	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Platelet Count Decreased			Granisetron Hydrochloride	PS	Roche			5 DAY
			Adriacin Ifomide	SS				3 DAY
			Solita-T3 Injection	SS				5 DAY
			Meylon	C				6 DAY
			Uromitexan	C				5 DAY

Date: 02/22/02 ISR Number: 3874650-5 Report Type: Expedited (15-Day) Company Report#: 303279

Age: 15 MON Gender: Male I/FU: F

Outcome Other	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Haemoglobin Decreased Platelet Count Decreased White Blood Cell Count Decreased		Foreign Study Health Professional	Granisetron Hydrochloride Hydrochloride	PS		INTRAVENOUS DRIP	0.4 MG DAILY INTRAVENOUS DRIP	
			Adriacin (Doxorubicin Hydrochloride)	SS		INTRAVENOUS	10 MG DAILY INTRAVENOUS	
			Ifomide (fosfamide)	SS		INTRAVENOUS	1000 MG DAILY INTRAVENOUS	
			Solita-T3 Injection (Potassium Chloride/Sodium Chloride/Sodium Lactate)	C				
			Meylon (Sodium Bicarbonate)	C				
			Uromitexan (Mesna)	C				

Date: 02/22/02 ISR Number: 3875278-3 Report Type: Expedited (15-Day) Company Report#: 3318

Age: 38 YR Gender: Female I/FU: I

Outcome Hospitalization - Initial or Prolonged	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Drug Toxicity Hepatitis			Cyclophosphamide Eprubicin	PS SS		INTRAVENOUS INTRAVENOUS	800 MG, IV 180 MG/90MG, IV	1 DAY
			Fluorouracil Granisetron Ondansetron	SS SS		INTRAVENOUS INTRAVENOUS	800 MG, IV IV	1 DAY 1 DAY
			Hydrochloride Metoclopramide	SS SS		ORAL INTRAVENOUS	PO IV	3 DAY 1 DAY

FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

<u>Date:</u>	<u>ISRN Number:</u>	<u>Report Type:</u>	<u>Company Report#:</u>	<u>Age:</u>	<u>YR</u>	<u>Gender:</u>	<u>Female</u>	<u>IFU:</u>
02/25/02	3873015-X	Expedited (15-Day)	US-BRISTOL-MYERS SQUIBB COMPANY-11727757	59		Female		I
<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Other	Anaphylactic Shock		Paraplatin	PS	Bristol-Myers Squibb Company	INTRAPERITONEAL INTRAVENOUS		
			Kytril	SS				
02/27/02	3874075-2	Expedited (15-Day)	306099	75		Female		F
<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Hospitalization - Initial or Prolonged	Body Temperature Increased Ileus Paralytic Metastases To Gastrointestinal Tract Peritonitis		Kytril Randa Taxol Leukoprol	PS SS SS C	Roche Roche			5 4 1 7 DAY DAY DAY DAY
02/28/02	3878191-0	Expedited (15-Day)	306099	75		Female		I
<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Hospitalization - Initial or Prolonged	Ileus Paralytic Intestinal Obstruction Metastases To Gastrointestinal Tract Peritonitis	Foreign Health Professional	Kytril (Granisetron) 3 Mg Randa (Cisplatin) Taxol (Paclitaxel) Leukoprol (Mirimostim)	PS SS SS C		INTRAVENOUS INTRAVENOUS DRIP INTRAVENOUS DRIP INTRAVENOUS DRIP	3 MG 20 MG INTRA VENOUS DRIP 210 MG INTRA VENOUS DRIP	
03/08/02	3879815-4	Expedited (15-Day)	US-BRISTOL-MYERS SQUIBB COMPANY-11746070	42		Female		I
<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Other	Coordination Abnormal Dizziness		Cisplatin Kytril	PS SS	Bristol-Myers Squibb Company	INTRAVENOUS		
04/17/02	3900587-9	Expedited (15-Day)	310629	61		Male		I
<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Hospitalization - Initial or Prolonged	Bronchospasm Hypertension Rash		Kytril Taxotere Solumedrol	PS SS SS	Roche			1 1 1 DAY DAY DAY

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 04/17/02 ISR Number: 3902331-8 Report Type: Expedited (15-Day) Company Report#: 310629		Age: 61 YR	Gender: Male	I/FU: 1
Outcome: Hospitalization - Initial or Prolonged	PT: Bronchospasm Hypertension Rash Rash Generalised	Report Source: Foreign Other	Product: Kytril (Granisetron) Taxotere (Docetaxel) Solumedrol (Methylprednisolone Sodium Succinate) 120 Mg/2ml	Role: PS SS SS
		Manufacturer:	Route: INTRAVENOUS INTRAVENOUS INTRAVENOUS	Dose: INTRAVENOUS 190 MG INTRAVENOUS 120 MG/ML INTRAVENOUS
			Duration: 1 DAY 29 DAY 29 DAY 5 DAY 29 DAY 1 DAY	
Date: 04/22/02 ISR Number: 3903749-X Report Type: Expedited (15-Day) Company Report#: 304844		Age: 38 YR	Gender: Female	I/FU: F
Outcome: Hospitalization - Initial or Prolonged	PT: Hepatitis	Report Source:	Product: Kytril Endoxan Farmorubicine Zophren Fluorouracil Primperan Motilium	Role: PS SS SS SS SS SS C
		Manufacturer: Roche	Route: INTRAVENOUS INTRAVENOUS INTRAVENOUS ORAL INTRAVENOUS INTRAVENOUS	Dose: INTRAVENOUS 500 MG/M2. FIRST COURSE. FIRST COURSE. 500 MG/M2. FIRST COURSE. 800 MG 1 PER ONE DOSE INTRAVENOUS 160 MG 1 PER ONE DOSE INTRAVENOUS ORAL 800 MG 1 PER ONE DOSE INTRAVENOUS INTRAVENOUS
			Duration: 1 DAY 29 DAY 29 DAY 5 DAY 29 DAY 1 DAY	
Date: 04/23/02 ISR Number: 3906154-5 Report Type: Expedited (15-Day) Company Report#: 304844		Age: 38 YR	Gender: Female	I/FU: F
Outcome: Hospitalization - Initial or Prolonged	PT: Hepatitis	Report Source: Foreign Other	Product: Kytril (Granisetron) Endoxan (Cyclophosphamide) Farmorubicine (Epirubicin Hydrochloride) Zophren (Ondansetron Hydrochloride) Fluorouracil (Fluorouracil) Primperan (Metoclopramide Hydrochloride) Motilium (Domperidone)	Role: PS SS SS SS SS SS C
		Manufacturer:	Route: INTRAVENOUS INTRAVENOUS INTRAVENOUS ORAL INTRAVENOUS INTRAVENOUS	Dose: INTRAVENOUS 800 MG 1 PER ONE DOSE INTRAVENOUS 160 MG 1 PER ONE DOSE INTRAVENOUS ORAL 800 MG 1 PER ONE DOSE INTRAVENOUS INTRAVENOUS
			Duration: 1 DAY 29 DAY 29 DAY 5 DAY 29 DAY 1 DAY	
Date: 05/01/02 ISR Number: 3909252-5 Report Type: Expedited (15-Day) Company Report#: US-BRISTOL-MYERS SQUIBB COMPANY-11674629		Age: 38 YR	Gender: Female	I/FU: F
Outcome: Hospitalization - Initial or Prolonged	PT: Hepatitis	Report Source:	Product: Endoxan Inj	Role: PS
		Manufacturer: Bristol-Myers Squibb Company	Route: INTRAVENOUS	Dose:
			Duration:	

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Farmortubicin
5-Fu
Kytril
Zophren
Primperan
Motilium

SS
SS
SS
SS
SS
C

INTRAVENOUS
INTRAVENOUS
INTRAVENOUS
ORAL
INTRAVENOUS

Date: 05/07/02 ISR Number: 3914100-3 Report Type: Periodic Company Report#: 11669462 Age: Gender: Female IFU: I

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Other	Medication Error Neoplasm Malignant	Health Professional Company Representative Other	Carboplatin Gemzar (Gemcitabine Hcl) Kytril (Granisetron Hcl) Decadron (Dexamethasone)	PS SS SS SS				

Date: 06/10/02 ISR Number: 3930039-1 Report Type: Expedited (15-Day) Company Report#: 305343 Age: 69 YR Gender: Female IFU: F

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Hospitalization - Initial or Prolonged	Constipation Dehydration Vomiting	Health Professional	Kytril Capecitabine	PS SS	Roche Roche		14 DAYS TREATMENT FOLLOWED BY ONE WEEKS REST	1 DAY
			Irinotecan Dexamethasone Primperan Atenolol	SS C C C			STARTED PRE-STUDY.	5 7 3 2 DAY DAY DAY DAY

Date: 06/13/02 ISR Number: 3934133-0 Report Type: Expedited (15-Day) Company Report#: 305343 Age: 69 YR Gender: Female IFU: F

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Hospitalization - Initial or Prolonged	Constipation Dehydration Vomiting	Foreign Study Health Professional	Kytril (Granisetron) Capecitabine (Capecitabine) Irinotecan (Irinotecan Hydrochloride) Dexamethasone (Dexamethasone) Primperan (Metoclopramide Hydrochloride) Atenolol (Atenolol) Phosphate (Phosphate)	PS SS SS C C C		INTRAVENOUS ORAL INTRAVENOUS	3 MG DAILY INTRAVENOUS 3300 MG DAILY ORAL 415 MG 1 PER 3 WEEK INTRAVENOUS	

FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

(Nos)
Nacl (Sodium Chloride) C
C

Date: 06/19/02 **ISR Number:** 3938222-6 **Report Type:** Expedited (15-Day) **Company Report#:** US-BRISTOL-MYERS SQUIBB COMPANY-11669462 **Age:** **Gender:** Female **I/FU:** F

<u>Outcome</u>	<u>PT</u>	<u>Medication Error</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Death				Carboplatin	PS	Bristol-Myers Squibb Company			
Other				Genzar Kytril Decadron	SS SS SS				

Date: 06/26/02 **ISR Number:** 3940480-9 **Report Type:** Expedited (15-Day) **Company Report#:** 2002111750FR **Age:** 77 YR **Gender:** Female **I/FU:** I

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Hospitalization - Initial or Prolonged		Foreign Health Professional Other	Solt-Medrol(Methylprednisolone) Powder, Sterile Kytril(Granisetron) Taxotere(Docetaxel)	PS SS SS		INTRAVENOUS INTRAVENOUS INTRAVENOUS	IV IV IV	

Date: 06/27/02 **ISR Number:** 3940036-8 **Report Type:** Expedited (15-Day) **Company Report#:** 315648 **Age:** 77 YR **Gender:** Female **I/FU:** I

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Hospitalization - Initial or Prolonged		Agranulocytosis Conjunctivitis Bacterial Dermatitis Bullous Dermatitis Exfoliative Pain Pyrexia Skin Fissures Stomatitis Toxic Epidermal Necrolysis Urinary Tract Infection	Kytril Solumedrol Taxotere	PS SS SS	Roche			39 DAY 39 DAY 39 DAY

Date: 07/01/02 **ISR Number:** 3943115-4 **Report Type:** Expedited (15-Day) **Company Report#:** 315648 **Age:** 77 YR **Gender:** Female **I/FU:** I

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Hospitalization - Initial or Prolonged		Agranulocytosis Conjunctivitis Bacterial Dermatitis Bullous Dermatitis Exfoliative Pain Pyrexia Radiation Skin Injury Rash Erythematous Stomatitis						

FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

Toxic Epidermal
Necrolysis
Urinary Tract Infection

Report Source
Foreign
Other

Product
Kytril (Granisetron)
Solumedrol
(Methylprednisolone
Sodium Succinate)
Taxotere (Docetaxel)

Role
PS

Route
INTRAVENOUS

Dose
INTRAVENOUS

Duration

INTRAVENOUS
INTRAVENOUS

INTRAVENOUS
INTRAVENOUS

Date: 07/08/02 **ISR Number:** 3944354-9 **Report Type:** Expedited (15-Day) **Company Report#:** 315648

Age: 77 YR **Gender:** Female **I/FU:** F

PT
Agranulocytosis
Dermatitis Bullous
Dermatitis Exfoliative
Pyrexia
Stomatitis
Toxic Epidermal
Necrolysis

Report Source
Consumer

Product
Kytril
Solumedrol
Taxotere

Role
PS
SS
SS

Route

Dose

Duration
39 DAY
39 DAY
39 DAY

Date: 07/17/02 **ISR Number:** 3949552-6 **Report Type:** Expedited (15-Day) **Company Report#:** 316987

Age: **Gender:** Female **I/FU:** I

PT
Autoimmune
Thrombocytopenia
Chills
Gingival Bleeding
Haemorrhage
Purpura
Thrombocytopenia

Report Source
Health
Professional

Product
Kytril
Solumedrol
Oxaliplatin
5-Fu

Role
PS
SS
SS
SS

Route

Dose

Duration

Date: 07/25/02 **ISR Number:** 3953196-X **Report Type:** Expedited (15-Day) **Company Report#:** 316912

Age: **Gender:** Female **I/FU:** F

PT
Erythema Multiforme

Report Source

Product
Kytril
Piroxicam
Ranitine
Co-Codamol
Metoclopramide
Propofol
Temazepam
Glycopyrronium

Role
PS
C
C
C
C
C
C

Route

Dose

Duration

Date: 07/31/02 **ISR Number:** 3955753-3 **Report Type:** Expedited (15-Day) **Company Report#:** 317667

Age: 65 YR **Gender:** Male **I/FU:** I

PT
Cardiac Arrest

Report Source

Product
Kytril
Heparin

Role
PS
C

Route

Dose

Duration

FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

Date: 08/30/02 ISR Number: 3968524-9 Report Type: Expedited (15-Day) Company Report#: US-BRISTOL-MYERS SQUIBB COMPANY-12012944

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	Age: 60 YR	Gender: Male	I/FU: 1
Hospitalization - Initial or Prolonged	Anaemia Crepitations Dilatation Ventricular Ejection Fraction Decreased Myocardial Infarction Ventricular Hypokinesia Ventricular Tachycardia	Health Professional	Taxol Inj 30 Mg/5 MI	PS	Bristol-Myers Squibb Company	INTRAVENOUS	1st dose on 7-Jun-02	8 DAY			
			Cisplatin	SS	Bristol-Myers Squibb Company	INTRAVENOUS	1ST DOSE ON 01JUL02	8 DAY			
			Etoposide	SS	Bristol-Myers Squibb Company	INTRAVENOUS	Concentration = 100mg/5mL 1st and 2nd doses on 7- and 14-Jun-02	15 DAY 32 DAY 32 DAY			
			Carboplatine Teva	SS		INTRAVENOUS					
			Solu-Medrol Kytril	SS SS		INTRAVENOUS INTRAVENOUS					

Date: 09/05/02 ISR Number: 3972607-7 Report Type: Expedited (15-Day) Company Report#: 2002121778FR

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	Age: 60 YR	Gender: Male	I/FU: 1
Hospitalization - Initial or Prolonged	Dizziness Lung Crepitation Myocardial Infarction Syncope Ventricular Tachycardia	Foreign Health Professional Other	Solu-Medrol (Methylprednisolone) Powder, Sterile Cisplatin (Cisplatin) Taxol (Paclitaxel) Etoposide (Etoposide) Kytril (Granisetron) Carboplatin (Carboplatin)	PS SS SS SS SS SS SS		INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS	IV IV IV IV IV IV IV				

Date: 09/11/02 ISR Number: 3973440-2 Report Type: Expedited (15-Day) Company Report#: 317667

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	Age: 65 YR	Gender: Male	I/FU: F
Life-Threatening	Anaphylactic Shock Cardiac Arrest	Health Professional	Kytril Heparin Aracytine	PS C C	Roche						

Date: 10/03/02 ISR Number: 3987068-1 Report Type: Expedited (15-Day) Company Report#: 2002125321FR

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	Age: 60 YR	Gender: Male	I/FU: 1
Hospitalization - Initial or Prolonged	Anaemia Crepitations Dilatation Ventricular Myocardial Infarction Sinus Tachycardia Ventricular Tachycardia	Foreign Health Professional Other	Etoposide (Etoposide) Solution, Sterile Cisplatin (Cisplatin) Taxol (Paclitaxel) Carboplatin (Carboplatin)	PS SS SS SS SS		INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS	100 MG, IV 200 MG, QD DAYS, 1,8, IV 84 MG, QD, DAYS, 7,14, IV 900 MG, QD,				

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

DAYS,
7,14,21, IV

INTRAVENOUS IV
INTRAVENOUS 15 MG, QD, IV

SS
SS

Solu-Medrol
(Methylprednisolone)
Powder, Sterile
Kytril (Granisetron)

Date: 10/07/02 ISR Number: 3989161-6 Report Type: Expedited (15-Day) Company Report#: 2002125321FR

Age: 60 YR Gender: Male I/FU: F

PT
Anaemia
Crepitations
Dilatation Ventricular
Myocardial Infarction
Sinus Tachycardia
Syncope
Ventricular Hypokinesia
Ventricular Tachycardia

Report Source
Foreign
Health
Professional
Other

Role **Manufacturer**
PS
SS
SS
SS

Product **Dose** **Duration**
Etoposide (Etoposide) 100 MG, IV
Cisplatin (Cisplatin) 200 MG, QD
Taxol (Paclitaxel) DAYS 1,8, IV
Carboplatin (Carboplatin) 84 MG, QD,
DAYS 7,14, IV
Solu-Medrol (Methylprednisolone) Powder, Sterile 900 MG, QD,
DAYS 7, 14, 21, IV
Kytril (Granisetron) 15 MG, QD, IV

Outcome
Hospitalization -
Initial or Prolonged

Date: 10/07/02 ISR Number: 3989556-0 Report Type: Expedited (15-Day) Company Report#: 2002121778FR

Age: 60 YR Gender: Male I/FU: F

PT
Crepitations
Dizziness
Syncope
Ventricular Tachycardia

Report Source
Foreign
Health
Professional
Other

Role **Manufacturer**
PS
SS
SS
SS
SS
SS

Product **Dose** **Duration**
Solu-Medrol (Methylprednisolone) Powder, Sterile IV
Cisplatin (Cisplatin) IV
Taxol (Paclitaxel) IV
Etoposide (Etoposide) IV
Kytril (Granisetron) IV
Carboplatin (Carboplatin) IV

Outcome
Life-Threatening

Date: 10/29/02 ISR Number: 3999060-1 Report Type: Expedited (15-Day) Company Report#: WAES 0210USA02388

Age: Gender: I/FU: I

PT
Anaphylactic Shock

Report Source
Health
Professional

Role **Manufacturer**
PS
SS
SS

Product **Dose** **Duration**
Decadron (Dexamethasone) Sodium Phosphate Merck & Co., Inc
Ranitidine Hydrochloride
Granisetron
Hydrochloride

Outcome
Life-Threatening

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 11/01/02 **ISRN Number:** 4001387-4 **Report Type:** Expedited (15-Day) **Company Report#:** 323871 **Age:** 72 YR **Gender:** Female **I/FU:** 1

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Life-Threatening	Blood Pressure Decreased Cyanosis Depressed Level Of Consciousness Heart Rate Abnormal Hypoesthesia Hypoventilation Nausea Shock	Health Professional	Kytril Zantac Decadron Chemotherapy Taxol	Roche			60 DAY 60 DAY 60 DAY

DOSAGE REPORTED AS 70MG/BODY

Date: 11/06/02 **ISRN Number:** 4004647-6 **Report Type:** Expedited (15-Day) **Company Report#:** B0283969A **Age:** **Gender:** Female **I/FU:** F

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Life-Threatening Other	Anaphylactic Shock		Zantac Dexamethasone Granisetron Hydrochloride	Glaxo Wellcome	INTRAVENOUS UNKNOWN	200MG per day	

Date: 12/04/02 **ISRN Number:** 4018753-3 **Report Type:** Expedited (15-Day) **Company Report#:** B0282226A **Age:** 38 YR **Gender:** Female **I/FU:** F

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Life-Threatening	Apnoea Blood Pressure Fluctuation Loss Of Consciousness	Health Professional	Melphalan Zovirax Metoclopramide Furosemide Granisetron Famotidine Fluconazole Levofloxacin Sulfamethoxazole + Trimethoprim Sodium Bicarbonate Polypharmacy Allopurinol	Glaxo Wellcome Glaxo Wellcome Glaxo Wellcome Glaxo Wellcome Glaxo Wellcome Glaxo Wellcome Glaxo Wellcome Glaxo Wellcome Glaxo Wellcome Glaxo Wellcome Glaxo Wellcome Glaxo Wellcome Glaxo Wellcome	INTRAVENOUS ORAL INTRAVENOUS INTRAVENOUS INTRAVENOUS ORAL ORAL ORAL INTRAVENOUS	60MG/2 per day 1G per day 10MG per day 20MG per day 6MG per day 40MG per day 200MG per day 300MG per day 3TAB per day 100ML per day	3 DAY 42 DAY 1 DAY 3 DAY 3 DAY 59 DAY 29 DAY 50 DAY 7 DAY

Date: 12/12/02 **ISRN Number:** 4021695-0 **Report Type:** Expedited (15-Day) **Company Report#:** B0283969A **Age:** 72 YR **Gender:** Female **I/FU:** F

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Life-Threatening Other	Anaphylactic Shock Blood Pressure Decreased Cyanosis Heart Rate Decreased Loss Of Consciousness Nausea	Health Professional	Zantac Dexamethasone Sodium Phosphate Granisetron Hydrochloride Sodium Chloride	Glaxo Wellcome	INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS	100MG per day 4MG per day 1UNIT per day 100ML Unknown	57 DAY 1 DAY 1 DAY

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 12/27/02 ISR Number: 4035031-7 Report Type: Expedited (15-Day) Company Report#: 2002CG01923

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	Age: 64 YR	Gender: Male	I/FU: 1
Hospitalization - Initial or Prolonged	Myocardial Infarction Myocardial Ischaemia	Foreign Health Professional Other	Mopral Fluorouracil	PS SS		INTRAVENOUS	4800 MG DAILY IV				
			Eloxatine	SS		INTRAVENOUS	200 MG DAILY IV				
			Elvorine	SS		INTRAVENOUS	400 MG DAILY IV				
			Kytril	SS		INTRAVENOUS	2 DF DAILY IV				

Date: 01/02/03 ISR Number: 4039700-4 Report Type: Expedited (15-Day) Company Report#: 2002CG01923

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	Age: 64 YR	Gender: Male	I/FU: F
Hospitalization - Initial or Prolonged	Myocardial Infarction	Foreign Health Professional Other	Mopral Fluorouracil	PS SS		INTRAVENOUS	4800 MG DAILY IV				
			Eloxatine	SS		INTRAVENOUS	200 MG DAILY IV				
			Elvorine	SS		INTRAVENOUS	400 MG DAILY IV				
			Kytril	SS		INTRAVENOUS	2 DF DAILY IV				

Date: 01/03/03 ISR Number: 4039235-9 Report Type: Expedited (15-Day) Company Report#: A02200202158

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	Age: 64 YR	Gender: Male	I/FU: I
Hospitalization - Initial or Prolonged	Myocardial Ischaemia	Health Professional	Eloxatine - (Oxaliplatin) - Powder - 5 Mg/MI (Fluorouracil) - Solution	PS		INTRAVENOUS	200 MG DISC	1 DAY			
			Elvorine - (Calcium Levofolinate) - Powder - 100 Mg Kytril - (Granisetron) - Solution - 1 Mg/MI	SS		INTRAVENOUS	4800 MG DISC	1 DAY			
			Mopral - (Omeprazole) - Powder - 40 Mg	SS		INTRAVENOUS	400 MG DISC	1 DAY			
				SS		INTRAVENOUS	6 MG DISC	1 DAY			

Date: 01/06/03 ISR Number: 4039512-1 Report Type: Expedited (15-Day) Company Report#: 316912

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	Age:	Gender: Female	I/FU: F
Hospitalization - Initial or Prolonged	Erythema Multiforme	Foreign Health Professional	Kytril (Granisetron)	PS							
Intervention to Prevent Permanent Impairment/Damage			Piroxicam Ranitidine (Ranitidine) Co-Codamol (Acetaminophen/Codeine Phosphate) Metoclopramide (Metoclopramide)	C C C							

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Hydrochloride)
Propofol (Propofol)
Temazepam
(Temazepam)
Glycopyrronium
(Glycopyrrolate)

Date: 01/06/03 **ISR Number:** 4039951-9 **Report Type:** Expedited (15-Day) **Company Report#:** 306099 **Age:** 75 YR **Gender:** Female **I/FU:** F

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Hospitalization - Initial or Prolonged		Foreign Health Professional	Kytril (Granisetron) 3 Mg	PS		INTRAVENOUS	3 MG INTRAVENOUS	
			Randa(Cisplatin)	SS		INTRAVENOUS DRIP	20 MG INTRAVENOUS DRIP	
			Taxol (Paclitaxel)	SS		INTRAVENOUS DRIP	210 MG INTRAVENOUS DRIP	
			Leukoprol (Mirimostim)	C				

Date: 01/08/03 **ISR Number:** 4040686-7 **Report Type:** Expedited (15-Day) **Company Report#:** 323871 **Age:** 72 YR **Gender:** Female **I/FU:** F

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Life-Threatening		Foreign Health Professional	Kytril (Granisetron)	PS		INTRAVENOUS DRIP	3 MG DAILY INTRAVENOUS DRIP	
			Zantac (Ranitidine)	SS		INTRAVENOUS DRIP	100 MG DAILY INTRAVENOUS DRIP	
			Decadron (Dexamethasone) Taxol (Paclitaxel)	C C				

Date: 01/13/03 **ISR Number:** 4042387-8 **Report Type:** Expedited (15-Day) **Company Report#:** 328468 **Age:** 64 YR **Gender:** Male **I/FU:** I

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Hospitalization - Initial or Prolonged		Foreign Health Professional Other	Kytril (Granisetron)	PS		INTRAVENOUS	2 DOSE FORM DAILY INTRAVENOUS	
			Mopral (Omeprazole) 40 Mg	SS		INTRAVENOUS	INTRAVENOUS	

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOD) Report**

Elvorne (Leucovorin Calcium) 100 Mg	SS	INTRAVENOUS	400 MG INTRAVENOUS
Eloxatine (Oxaliplatin) 100 Mg	SS	INTRAVENOUS	200 MG INTRAVENOUS
Fluoro-Uracil (Fluorouracil)	SS	INTRAVENOUS	4800 MG INTRAVENOUS

Date: 02/13/03 ISR Number: 405702-9 Report Type: Expedited (15-Day) Company Report#: 330988 Age: 27 YR Gender: Female I/FU: 1

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Hospitalization - Initial or Prolonged	Asthma	Foreign Health Professional	Kytril (Granisetron) Beclotide (Beclomethasone Dipropionate) Ventolin (Albuterol Or Albuterol Sulfate) Ibuprofen (Ibuprofen)	PS C C C				

Date: 02/14/03 ISR Number: 4056070-6 Report Type: Expedited (15-Day) Company Report#: JP-GLAXOSMITHKLINE-B0289581A Age: 59 YR Gender: Female I/FU: F

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Other	Anaphylactic Shock Blood Pressure Decreased Erythema Flushing Haematocrit Decreased Haemoglobin Decreased Headache Heart Rate Increased Hyperhidrosis Incontinence Nausea Vomiting	Health Professional	Zantac Dexamethasone Sodium Phosphate Granisetron Hydrochloride Isotonic Sodium Chloride	PS SS SS C	Glaxosmithkline	INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS	50MG per day 4MG per day 3MG per day 100ML per day	1 DAY 1 DAY 1 DAY 1 DAY

Date: 02/27/03 ISR Number: 4084782-7 Report Type: Periodic Company Report#: 318705 Age: 20 YR Gender: Female I/FU: 1

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Death	Blood Pressure Decreased Blood Pressure Fluctuation Disease Progression Dyspnoea Headache Neoplasm Malignant Rash Macular Tachycardia	Health Professional	Kytril (Granisetron) 1mg/MI Fentanyl (Fentanyl Citrate) Dexamethasone (Dexamethasone)	PS C C		INTRAVENOUS	0.6MG 1 PER 2 HOUR INTRAVENOUS	

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

<u>Date:</u>	<u>ISR Number:</u>	<u>Report Type:</u>	<u>Company Report#:</u>	<u>Age:</u>	<u>YR</u>	<u>Gender:</u>	<u>Male</u>	<u>I/RU:</u>
02/27/03	4084783-9	Periodic	318905	70		Male		I
<u>Outcome</u> Other	<u>PT</u> Rash	<u>Report Source</u> Health Professional	<u>Product</u> Kytril (Granisetron) 1 Mg Kytril (Granisetron) 1mg	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
				PS		INTRAVENOUS	INTRAVENOUS	
				SS		ORAL	ORAL	
<u>Date:</u>	<u>ISR Number:</u>	<u>Report Type:</u>	<u>Company Report#:</u>	<u>Age:</u>	<u>YR</u>	<u>Gender:</u>	<u>Female</u>	<u>I/RU:</u>
03/18/03	4079935-8	Expedited (15-Day)	US030847	40		Female		F
<u>Outcome</u> Hospitalization - Initial or Prolonged	<u>PT</u> Dyspnoea Hypoxia	<u>Report Source</u> Health Professional	<u>Product</u> Neulasta (Neulasta - Prefilled Syringe) Doxorubicin Hydrochloride Docetaxel Cyclophosphamide Granisetron Hcl Dexamethasone	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
				PS		SUBCUTANEOUS	6 MG, EVERY 3 WEEKS, SC	
				SS				
				SS				
				SS				
				SS				
<u>Date:</u>	<u>ISR Number:</u>	<u>Report Type:</u>	<u>Company Report#:</u>	<u>Age:</u>	<u>YR</u>	<u>Gender:</u>	<u>Male</u>	<u>I/RU:</u>
03/24/03	4082971-9	Expedited (15-Day)	333966	22		Male		I
<u>Outcome</u> Death	<u>PT</u> Arrhythmia Pneumonia Renal Disorder Respiratory Failure Stomatitis	<u>Report Source</u> Foreign Study Health Professional	<u>Product</u> Granisetron Hydrochloride (Granisetron Hydrochloride) Methotrexate (Methotrexate) Ciclosporin (Ciclosporine) Cytarabine (Cytarabine) Prednisone (Prednisone) Cyclophosphamide (Cyclophosphamide) Morphine Hydrochloride (Morphine Hydrochloride) Lasix (Furosemide) Ciprofloxacin (Ciprofloxacin) Firsicin (Cefozopran) Diamox (Acetazolamide)	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
				PS		INTRAVENOUS DRIP	3 MG 2 PER DAY INTRAVENOUS DRIP	
				SS		OTHER	15 MG DAILY OTHER	
				SS				
				C				
				C				
				C				
				C				
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				C				
				C				
				C				
				C				

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date	ISIR Number	Report Type	Expedited (15-Day)	Company Report#	Product	Role	Manufacturer	Route	Dose	Duration	Gender	I/FU
03/24/03	4082972-0	Condition Aggravated Hepatic Failure Stomatitis	Expedited (15-Day)	334137	Kytril (Granisetron)	PS		RECTAL	3MG DAILY RECTAL		Female	I
		PT			Vincristine Sulfate (Vincristine)	C						
					Ifosfamide (Ifosfamide)	C						
					Mtx (Methotrexate)	C						
					Etoposide	C						
					Ara-C (Cytarabine Hydrochloride)	C						
03/27/03	4079562-2	Supraventricular Tachycardia	Expedited (15-Day)	US-GLAXOSMITHKLINE-A0401594A	Zofran Kytril	PS SS	Glaxosmithkline Glaxosmithkline					I
		PT										
03/28/03	4080503-2	Dyspnoea Hypoxia	Expedited (15-Day)	WAES 0503USA02285	Decadron (Dexamethasone Sodium Phosphate) Neulasta Adriamycin Taxotere Cyclophosphamide Kytril	PS SS SS SS SS SS	Merck & Co., Inc	SUBCUTANEOUS		43 23 43 43 43 43 43	Female	I
		PT										
04/02/03	4083545-6	Arrhythmia C-Reactive Protein Increased Malignant Mediastinal Neoplasm Pneumonia Renal Disorder Renal Failure Respiratory Failure Stomatitis	Expedited (15-Day)	JP-ROCHE-333966	Granisetron Hydrochloride Granisetron Hydrochloride Methotrexate Ciclosporin Ciclosporin Cytarabine Prednisone Cyclophosphamide Morphine Hydrochloride Lasix Ciprofloxacin Firstein Diamox	PS SS SS SS C C C C C C C C C C C C	Roche Roche	INTRAVENOUS DRIP INTRAVENOUS DRIP INTRAVENOUS OTHER INTRAVENOUS OTHER INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS		1 1 7 4 1 1 2 6 3 4 2 1	Male	F
		PT										

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 04/02/03 ISR Number: 4088019-4 Report Type: Expedited (15-Day) Company Report#: 2003153054US

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Hospitalization - Initial or Prolonged	Dyspnoea Hypoxia White Blood Cell Count Increased	Health Professional	Adriamycin Pfs (Doxorubicin Hydrochloride) Solution, Sterile Neosar (Cyclophosphamide) Powder, Sterile Neulasta (Neulasta - Prefilled Syringe)	PS SS SS			CYCLE 3. CYCLE 3. 6 MG, EVERY 3 WEEKS, SUBCUTANEOUS SUBCUTANEOUS CYCLE 3.	
			Taxotere (Docetaxel) Kytril (Granisetron) Decadron (Dexamethasone)	SS SS SS				

Date: 04/03/03 ISR Number: 4084328-3 Report Type: Expedited (15-Day) Company Report#: US-ROCHE-334616

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Other	Supraventricular Tachycardia Vomiting		Granisetron Hydrochloride Zofran Vincristin Methotrexate Oncaspar	PS SS C C C	Roche	INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAMUSCULAR		6 DAY 8 DAY

Date: 04/03/03 ISR Number: 4084332-5 Report Type: Expedited (15-Day) Company Report#: JP-ROCHE-333966

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Death Life-Threatening	Arrhythmia Pneumonia Renal Disorder Stomatitis		Granisetron Hydrochloride Granisetron Hydrochloride Methotrexate Ciclosporin Ciclosporin Cytarabine Prednisone Cyclophosphamide Morphine Hydrochloride Lasix Ciprofloxacin Firstcin Diamox	PS SS SS SS C C C C C C C C C C C	Roche Roche	INTRAVENOUS DRIP INTRAVENOUS DRIP OTHER INTRAVENOUS INTRAVENOUS OTHER OTHER INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS		1 DAY 2 DAY 1 DAY 7 DAY 4 DAY 1 DAY 1 DAY 2 DAY 6 DAY 3 DAY 4 DAY 2 DAY 1 DAY

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 04/08/03	ISRN: 4086486-3	Report Type: Expedited (15-Day)	Company Report#: US-GLAXOSMITHKLINE-A0401594A	Age: 5 YR	Gender: Male	I/FU: F
Outcome: Other	PT: Supraventricular Tachycardia		Report Source:	Role: PS SS	Manufacturer: Glaxosmithkline Glaxosmithkline	Duration:
Date: 04/28/03	ISRN: 4098476-5	Report Type: Expedited (15-Day)	Company Report#: US-BRISTOL-MYERS SQUIBB COMPANY-12243572	Age: 40 YR	Gender: Female	I/FU: I
Outcome: Hospitalization - Initial or Prolonged	PT: Dyspnoea Hypoxia		Report Source:	Role: PS SS SS SS SS SS	Manufacturer: Bristol-Myers Squibb Company Adriamycin Taxotere Neulasta Kytril Decadron	Duration:
					SUBCUTANEOUS	
Date: 05/07/03	ISRN: 4107494-X	Report Type: Direct	Company Report#: CTU 192451	Age: 63 YR	Gender: Male	I/FU: I
Outcome: Life-Threatening	PT: Chest Pain		Report Source:	Role: PS	Manufacturer: Roche	Duration:
			Product: Kytril 1mg/MI Roche Gemzar 1 Gram Vials Lilly Dexamethasone	Route: INTRAVENOUS INTRAVENOUS C	Dose: IMG IV-SS WEEKLY 2375ML IV-SS WEEKLY	
Date: 05/19/03	ISRN: 4110684-3	Report Type: Expedited (15-Day)	Company Report#: JP-BRISTOL-MYERS SQUIBB COMPANY-12270377	Age: 38 YR	Gender: Female	I/FU: F
Outcome: Hospitalization - Initial or Prolonged	PT: Anaphylactic Shock		Report Source:	Role: PS SS C	Manufacturer: Bristol-Myers Squibb Company	Duration: 1 DAY
			Product: Paraplatin Kytril Docetaxel	Route: INTRAVENOUS INTRAVENOUS INTRAVENOUS	Dose:	
Date: 05/19/03	ISRN: 4111182-3	Report Type: Periodic	Company Report#: US-BRISTOL-MYERS SQUIBB COMPANY-11974201	Age:	Gender:	I/FU: I
Outcome:	PT: Drug Interaction Headache		Report Source:	Role: PS SS SS SS	Manufacturer: Bristol-Myers Squibb Company	Duration:
			Product: Cytoxan Adriamycin Rdf Kytril Solu-Medrol	Route:	Dose:	
Date: 05/19/03	ISRN: 4111193-8	Report Type: Periodic	Company Report#: US-BRISTOL-MYERS SQUIBB COMPANY-12027900	Age:	Gender:	I/FU: I
Outcome:	PT: Drug Interaction Headache		Report Source:	Role: PS SS SS	Manufacturer: Bristol-Myers Squibb Company	Duration:
			Product: Cytoxan Adriamycin Rdf Kytril	Route:	Dose:	

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Solu-Medrol SS

Date: 05/27/03 **ISR Number:** 4118100-2 **Report Type:** Expedited (15-Day) **Company Report#:** 081-9033-M0100001

Age: 74 YR **Gender:** Male **I/FU:** 1

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Hospitalization - Initial or Prolonged	Angina Pectoris Atrioventricular Block Complete Blood Pressure Decreased Bradycardia Cardioactive Drug Level Increased Condition Aggravated Dizziness Renal Impairment	Foreign Health Professional	Norvasc (Amlodipine)	PS		ORAL	5 MG (DAILY), ORAL	
			Herbesser R (Diltiazem Hydrochloride)	SS		ORAL	200 MG (DAILY), ORAL	
			Artist (Carvedilol)	SS		ORAL	10 MG (DAILY), ORAL	
			Sigmart (Nicorandil)	SS		ORAL	15 MG (DAILY), ORAL	
			Bayaspirin (Acetylsalicylic Acid)	SS		ORAL	100 MG (DAILY), ORAL	
			5 Fu (Fluorouracil)	SS		INTRAVENOUS	500 MG (DAILY), INTRAVENOUS	
			Cisplatin (Cisplatin)	SS		INTRAVENOUS	10 MG (DAILY), INTRAVENOUS	
			Kaytril (Granisetron Hydrochloride)	SS		INTRAVENOUS	3 MG (DAILY), INTRAVENOUS	
			Ciprofloxacin (Ciprofloxacin)	SS				
			Isosorbide Mononitrate (Isosorbide Mononitrate)	C				
			Famotidine (Famotidine)	C				
			Plauunotol (Plauunotol)	C				

Date: 06/05/03 **ISR Number:** 4122854-9 **Report Type:** Expedited (15-Day) **Company Report#:** JP-BRISTOL-MYERS SQUIBB COMPANY-12270377

Age: 38 YR **Gender:** Female **I/FU:** F

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Hospitalization - Initial or Prolonged	Anaphylactoid Reaction	Health Professional	Paraplatin	PS	Bristol-Myers Squibb Company	INTRAVENOUS		1 DAY
			Kytril	SS		INTRAVENOUS		
			Docetaxel	C		INTRAVENOUS		

Date: 06/30/03 **ISR Number:** 4148564-X **Report Type:** Periodic **Company Report#:** 2003012317

Age: 55 YR **Gender:** Male **I/FU:** 1

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Hospitalization - Initial or Prolonged Other	Feeling Abnormal Leukopenia Pyrexia Skin Lesion	Health Professional	Zolof (Sertraline)	PS		ORAL	200 MG (DAILY), ORAL	
			Granisetron (Granisetron)	SS				

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Trazodone
(Trazodone) C
Ibuprofen C
(Ibuprofen) C
Docusate (Docusate)
Prochlorperazine
Edisylate
(Prochlorperazine
Edisylate) C

Date: 07/02/03 ISR Number: 4139918-6 Report Type: Expedited (15-Day) Company Report#: TW-ROCHE-340784

Age: 61 YR Gender: Female I/FU: I

Outcome Hospitalization - Initial or Prolonged	PT Gastritis	Report Source Health Professional	Product Kytril Epoetin Beta Docetaxel Vitamin B Complex Kolantyl	Role PS SS C C C	Manufacturer Roche Roche	Route UNKNOWN SUBCUTANEOUS SUBCUTANEOUS	Dose	Duration
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Date: 07/11/03 ISR Number: 4190112-2 Report Type: Periodic Company Report#: 20031270US

Age: 40 YR Gender: Female I/FU: I

Outcome Hospitalization - Initial or Prolonged	PT Dyspnoea Hypoxia White Blood Cell Count Increased	Report Source Health Professional	Product Docetaxel (Taxotere) Doxorubicin Cyclophosphamide Granisetron Hydrochloride Dexamethasone Neulasta	Role PS SS SS SS SS SS C	Manufacturer	Route	Dose	Duration 1 DAY 1 DAY 1 DAY
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Date: 07/11/03 ISR Number: 4194561-8 Report Type: Periodic Company Report#: 200312762US

Age: 40 YR Gender: Female I/FU: I

Outcome Hospitalization - Initial or Prolonged	PT Dyspnoea Hypoxia White Blood Cell Count Increased	Report Source Health Professional	Product Docetaxel (Taxotere) Doxorubicin Cyclophosphamide Granisetron Hydrochloride Dexamethasone Neulasta	Role PS SS SS SS SS SS C	Manufacturer	Route	Dose	Duration 1 DAY 1 DAY 1 DAY
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Date: 07/15/03 ISR Number: 4147078-0 Report Type: Expedited (15-Day) Company Report#: JP-GLAXOSMITHKLINE-A0404662A

Age: 60 YR Gender: Male I/FU: F

Outcome Hospitalization - Initial or Prolonged	PT Hepatic Function Abnormal Liver Function Test Abnormal	Report Source Consumer	Product Navelbine Randa Kytril Ms Contin Sennoside Pantosin Decadron Radiation Magnesium Oxide	Role PS SS SS C C C C C C	Manufacturer Glaxosmithkline Glaxosmithkline Glaxosmithkline Glaxosmithkline	Route INTRAVENOUS INTRAVENOUS INTRAVENOUS	Dose 32MG Per day 126MG Per day 3MG Per day	Duration 8 DAY 1 DAY 8 DAY
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**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

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Urso

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Date: 07/28/03 **ISR Number:** 4155377-1 **Report Type:** Expedited (15-Day) **Company Report#:** JP-ROCHE-342994

Outcome Life-Threatening	PT Blood Pressure Decreased Chills Dyspnoea Pyrexia	Report Source	Product Kytril Chemotherapy	Role PS C	Manufacturer Roche	Route INTRAVENOUS	Dose	Duration 57 DAY	Gender: Male	IFU: I
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Date: 08/07/03 **ISR Number:** 4163381-2 **Report Type:** Expedited (15-Day) **Company Report#:** US-ROCHE-343928

Outcome Hospitalization - Initial or Prolonged	PT Chest Pain Lethargy	Report Source	Product Kytril Kytril Decadron	Role PS SS C	Manufacturer Roche Roche	Route INTRAVENOUS INTRAVENOUS INTRAVENOUS	Dose	Duration 1 DAY 1 DAY	Gender: Female	IFU: I
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Date: 08/18/03 **ISR Number:** 4169524-9 **Report Type:** Expedited (15-Day) **Company Report#:** GB-BRISTOL-MYERS SQUIBB COMPANY-12357257

Outcome Hospitalization - Initial or Prolonged	PT Lymphadenopathy Pancreatitis Acute	Report Source	Product Cyclophosphamide Fludarabine Granisetron Co-Trimoxazole Allopurinol	Role PS SS SS SS C	Manufacturer Bristol-Myers Squibb Company	Route ORAL ORAL ORAL ORAL ORAL	Dose	Duration	Gender: Male	IFU: I
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Date: 09/02/03 **ISR Number:** 4176950-0 **Report Type:** Expedited (15-Day) **Company Report#:** TW-ROCHE-340784

Outcome Hospitalization - Initial or Prolonged	PT Aspartate Aminotransferase Increased Blood Urea Decreased Cellulitis Gastritis Haemoglobin Decreased Skin Exfoliation	Report Source	Product Kytril Epoetin Beta Docetaxel Vitamin B Complex Kolantyl Furosemide Potassium Chloride Diclofenac Sr Vitamin B6 Cyprohepatadine Celecoxib	Role PS SS SS C C C C C C C	Manufacturer Roche Roche Roche Roche	Route UNKNOWN SUBCUTANEOUS INTRAVENOUS DOSING REGIMEN REPORTED AS 115 MG Q3S.	Dose	Duration 106 DAY 17 DAY 17 DAY 17 DAY 17 DAY 3 DAY 3 DAY	Gender: Female	IFU: F
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Date: 09/10/03 **ISR Number:** 4183087-3 **Report Type:** Expedited (15-Day) **Company Report#:** JP-ROCHE-342994

Outcome Life-Threatening	PT Blood Alkaline Phosphatase Decreased	Report Source							Gender: Male	IFU: F
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FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Blood Creatinine Decreased	Kytril	PS	Roche	INTRAVENOUS		57 DAY
Blood Pressure Decreased	Chemotherapy	C		INTRAVENOUS		
C-Reactive Protein Increased	Oncovin	C		INTRAVENOUS		
Chills				DRIP		1 DAY
Dyspnoea	Cycloide	C		INTRAVENOUS		
Haematocrit Decreased				DRIP		2 DAY
Haemoglobin Decreased	Predomine	C		ORAL		22 DAY
Heart Rate Increased	Fungizone	C		ORAL		98 DAY
Irritability	Baktar	C		ORAL		3 DAY
Peripheral Coldness						
Protein Total Decreased						
Pyrexia						
Red Blood Cell Count Decreased						
Tachypnoea						
White Blood Cell Count Decreased						

Date: 09/30/03 ISR Number: 4197603-9 Report Type: Expedited (15-Day) Company Report#: JP-ROCHE-342994

Outcome	Product	Role	Manufacturer	Route	Dose	Duration	I/FU: F
Life-Threatening	Kytril	PS	Roche	INTRAVENOUS		1 DAY	
Anaphylactoid Reaction	Kytril	SS	Roche	INTRAVENOUS		1 DAY	
Blood Alkaline	Chemotherapy	C		INTRAVENOUS			
Phosphatase Decreased	Oncovin	C		DRIP		1 DAY	
Blood Calcium Decreased				INTRAVENOUS			
Blood Creatinine Decreased	Cycloide	C		INTRAVENOUS			
Decreased				DRIP		2 DAY	
Blood Pressure Decreased	Predomine	C		ORAL		22 DAY	
C-Reactive Protein Increased	Fungizone	C		ORAL		98 DAY	
Chills	Baktar	C		ORAL		3 DAY	
Crying							
Dyspnoea							
Haematocrit Decreased							
Haemoglobin Decreased							
Heart Rate Increased							
Irritability							
Protein Total Decreased							
Red Blood Cell Count Decreased							
Decreased							
Respiratory Rate Increased							
Rhinorrhoea							
Sepsis							
White Blood Cell Count Decreased							

Date: 10/06/03 ISR Number: 4201960-4 Report Type: Expedited (15-Day) Company Report#: TW-ROCHE-340784

Outcome	Product	Role	Manufacturer	Route	Dose	Duration	I/FU: F
Hospitalization - Initial or Prolonged	Aspartate						
	Aminotransferase Increased						
	Blood Urea Decreased						
	Cellulitis						

FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

Gastritis
Haemoglobin Decreased

<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
	Kytril Docetaxel	PS SS	Roche Roche	UNKNOWN INTRAVENOUS	DOSING REGIMEN REPORTED, AS 115 MG Q3S.	106 DAY
	Epoetin Beta Vitamin B Complex Kolantyl Furosemide Potassium Chloride Diclofenac Sr Vitamin B6 Cyphepatadine Celecoxib	C C C C C C C C C	Roche	SUBCUTANEOUS		17 DAY 17 DAY 17 DAY 17 DAY 3 DAY 3 DAY

Date: 10/16/03 ISR Number: 4209958-7 Report Type: Expedited (15-Day) Company Report#: US-ROCHE-343928

PT
Hospitalization -
Initial or Prolonged

<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
	Kytril Kytril Kytril Decadron	PS SS SS C	Roche Roche Roche	INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS		1 DAY 1 DAY 1 DAY 1 DAY

Age: 72 YR Gender: Female I/FU: F

PT
Blood Pressure Decreased
Dyspnoea
Erythema
Pruritus

Date: 10/27/03 ISR Number: 4218608-5 Report Type: Expedited (15-Day) Company Report#: US-ROCHE-349784

<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
	Kytril Decadron Benadryl	PS C C	Roche	INTRAVENOUS INTRAVENOUS INTRAVENOUS		

Age: Gender: I/FU: I

PT
Chills
Diarrhoea Haemorrhagic
Nausea
Paraesthesia
Paraesthesia Oral
Pyrexia
Rectal Stenosis
Tachypnoea
Vomiting

Date: 12/01/03 ISR Number: 4243247-X Report Type: Expedited (15-Day) Company Report#: DE-ROCHE-350744

<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
	Kevalril Capecitabine	PS SS	Roche Roche	INTRAVENOUS ORAL	ACTUAL DOSE RECEIVED = 3500 MG. INTERMITTENT THERAPY GIVEN 16 DAY	
	Capecitabine Oxaliplatin Dexamethasone	SS SS SS	Roche Roche	ORAL INTRAVENOUS ORAL	ACTUAL DOSE RECEIVED = 250 MG.	

Age: 53 YR Gender: Male I/FU: F

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 12/01/03		ISR Number: 4243436-4	Report Type: Expedited (15-Day)	Company Report#: JP-GLAXOSMITHKLINE-B0311341A	Age: 68 YR	Gender: Female	I/FU: F
<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Dose</u>	<u>Duration</u>
Other	Anaphylactic Shock		Zantac	PS	Glaxosmithkline	50MG Per day	139 DAY
			Granisetron	SS	Glaxosmithkline	3MG Per day	139 DAY
			Dexamethasone	C			1 DAY
			Sodium Chloride Solution	C	Glaxosmithkline		
Date: 12/16/03		ISR Number: 4252277-3	Report Type: Expedited (15-Day)	Company Report#: DE-ROCHE-353826	Age: 49 YR	Gender: Male	I/FU: 1
<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Dose</u>	<u>Duration</u>
Death	Anaemia	Health Professional	Interferon Alfa-2a	PS	Roche		
Hospitalization - Initial or Prolonged	Cachexia		Granisetron	SS	Roche		
	Cardiac Failure		Hydrochloride	SS			
	Cold Sweat		Vinblastin	SS			
	Drug Toxicity		Gemzar	SS			
			Dexa	SS			
			Zometa	SS			
Date: 12/17/03		ISR Number: 4253562-1	Report Type: Expedited (15-Day)	Company Report#: DE-ROCHE-353826	Age: 49 YR	Gender: Male	I/FU: 1
<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Dose</u>	<u>Duration</u>
Death	Anaemia	Health Professional	Interferon Alfa-2a	PS	Roche		
Hospitalization - Initial or Prolonged	Cachexia		Granisetron	SS	Roche		
	Cardiovascular Disorder		Hydrochloride	SS			
	Cold Sweat		Vinblastin	SS			
	Drug Toxicity		Gemzar	SS			
	Shock		Dexa	SS			
			Zometa	SS			
Date: 01/13/04		ISR Number: 4269462-7	Report Type: Expedited (15-Day)	Company Report#: FR-ROCHE-355362	Age: 34 YR	Gender: Male	I/FU: 1
<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Dose</u>	<u>Duration</u>
Disability	Osteonecrosis		Kytril	PS	Roche	ONE VIAL GIVEN DAILY ON DAYS 1 - 5 OF CYCLIC THERAPY. INTERMITTENT THERAPY GIVEN ON DAYS 1, 7 AND 15.	46 DAY
			Bleomycine	SS		INTERMITTENT THERAPY GIVEN FROM DAY 1 - 5	46 DAY
			Solu Medrol	SS		INTERMITTENT THERAPY GIVEN FROM DAY 1 - 5	46 DAY
			Vepeside	SS		GIVEN DAILY FROM DAY 1 - 5	46 DAY
			Cisplatine	SS		GIVEN ON DAYS 1 - 5.	46 DAY

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 01/15/04 ISR Number: 4274056-3 Report Type: Expedited (15-Day) Company Report#: 2004193697FR

Age: 34 YR Gender: Male IFU: I

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Disability	Osteonecrosis	Foreign Health Professional Other	Solu-Medrol (Methylprednisolone) Powder, Sterile	PS		INTRAVENOUS	SEE IMAGE	
			Cisplatin (Cisplatin)	SS		INTRAVENOUS	SEE IMAGE	
			Bleomycin (Bleomycin)	SS		INTRAVENOUS	SEE IMAGE	
			Vepesid (Etoposide)	SS		INTRAVENOUS	SEE IMAGE	
			Kytril (Granisetron)	SS		INTRAVENOUS	1 DF, IV	

Date: 02/06/04 ISR Number: 4286783-2 Report Type: Expedited (15-Day) Company Report#: DE-ROCHE-353826

Age: 49 YR Gender: Male IFU: F

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Death	Alpha 1 Globulin Increased	Foreign Health Professional Other	Solu-Medrol (Methylprednisolone) Powder, Sterile	PS		INTRAVENOUS	SEE IMAGE	
Hospitalization - Initial or Prolonged	Alpha 2 Globulin Increased	Foreign Health Professional Other	Cisplatin (Cisplatin)	SS		INTRAVENOUS	SEE IMAGE	
	Anaemia	Foreign Health Professional Other	Bleomycin (Bleomycin)	SS		INTRAVENOUS	SEE IMAGE	
	Beta Globulin Abnormal	Foreign Health Professional Other	Vepesid (Etoposide)	SS		INTRAVENOUS	SEE IMAGE	
	Blood Albumin Decreased	Foreign Health Professional Other	Kytril (Granisetron)	SS		INTRAVENOUS	1 DF, IV	
	Blood Alkaline Phosphatase Increased	Foreign Health Professional Other						
	Blood Cholinesterase Decreased	Foreign Health Professional Other						
	Bowel Sounds Abnormal	Foreign Health Professional Other						
	Bundle Branch Block Right	Foreign Health Professional Other						
	Cachexia	Foreign Health Professional Other						
	Cardiovascular Disorder	Foreign Health Professional Other						
	Cold Sweat	Foreign Health Professional Other						
	Drug Toxicity	Foreign Health Professional Other						
	Dyspnoea	Foreign Health Professional Other						
	Electrocardiogram Repolarisation Abnormality	Foreign Health Professional Other						
	Gamma-Glutamyltransferase Increased	Foreign Health Professional Other						
	General Physical Condition Abnormal	Foreign Health Professional Other						
	Immunoglobulins Increased	Foreign Health Professional Other						
	Ischaemia	Foreign Health Professional Other						
	Metastases To Bone	Foreign Health Professional Other						
	Metastases To Lung	Foreign Health Professional Other						
	Metastases To Nervous System	Foreign Health Professional Other						
	Metastases To The Mediastinum	Foreign Health Professional Other						
	Muscular Weakness	Foreign Health Professional Other						
	Neoplasm Progression	Foreign Health Professional Other						
	Neutrophil Count Increased	Foreign Health Professional Other						
	Oesophageal Disorder	Foreign Health Professional Other						
	Pneumonia	Foreign Health Professional Other						
	Prothrombin Time Shortened	Foreign Health Professional Other						
	Qrs Axis Abnormal	Foreign Health Professional Other						
	Reticulocyte Count	Foreign Health Professional Other						

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Decreased
Tachycardia

Report Source
Health Professional

Product
Interferon Alfa-2a
Granisetron
Hydrochloride
Vinblastin
Gemzar
Dexa
Zometa
Morphine

Role
PS
SS
SS
SS
SS
SS
SS
C

Manufacturer
Roche
Roche

Route
UNKNOWN
UNKNOWN
UNKNOWN
UNKNOWN
UNKNOWN
UNKNOWN

Dose

Duration

Date: 02/09/04 **ISR Number:** 4289971-4 **Report Type:** Expedited (15-Day) **Company Report#:** DE-ROCHE-357741 **Gender:** I **I/FU:** 1

Outcome
Hospitalization -
Initial or Prolonged

PT
Arthralgia
Myalgia
Oedema Peripheral
Parainfluenzae Virus
Infection
Pyrexia
Thrombophlebitis

Report Source
Consumer

Product
Kevairil
Taxotere
Fortecortin

Role
PS
SS
SS

Manufacturer
Roche

Route
INTRAVENOUS
INTRAVENOUS
INTRAVENOUS

Dose
ROUTE IS
REPORTED AS
IV/ORAL.
DOSING
REGIMEN IS

Duration
3 DAY
4 DAY

Date: 02/23/04 **ISR Number:** 4302036-8 **Report Type:** Expedited (15-Day) **Company Report#:** FR-ROCHE-355362 **Gender:** Male **I/FU:** F

Outcome
Disability

PT
Osteonecrosis

Report Source

Product
Kytril

Role
PS

Manufacturer
Roche

Route
INTRAVENOUS

Dose
ONE VIAL
GIVEN DAILY
ON DAYS 1 - 5
OF CYCLIC
THERAPY.
INTERMITTENT
THERAPY GIVEN
ON DAYS 1, 7
AND 15.

Duration
46 DAY

Product
Bleomycine

Role
SS

Manufacturer

Route
INTRAVENOUS

Dose
INTERMITTENT
THERAPY GIVEN
FROM DAY 1
-5.

Duration
46 DAY

Product
Solu Medrol

Role
SS

Manufacturer

Route
INTRAVENOUS

Dose
GIVEN DAILY
FROM DAY 1 -

Duration
46 DAY

Product
Vepeside

Role
SS

Manufacturer

Route
INTRAVENOUS

Dose
GIVEN DAILY
FROM DAY 1 -

Duration
46 DAY

Product
Cisplatine

Role
SS

Manufacturer

Route
INTRAVENOUS

Dose
GIVEN ON DAYS
1-5.

Duration
46 DAY

Date: 02/23/04 **ISR Number:** 4303411-8 **Report Type:** Expedited (15-Day) **Company Report#:** 2004195147DE **Gender:** Female **I/FU:** F

Outcome
Hospitalization -
Initial or Prolonged

PT
Arthralgia
Myalgia

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Nasopharyngitis
Oedema Peripheral
Rheumatoid Arthritis
Thrombophlebitis

Report Source
Foreign
Study
Health
Professional
Other

Product
Comparator-Docetaxel
(Comparator-Docetaxe
l) Injection

Role
PS

Route
INTRAVENOUS

Dose
75 MG/M2,
DAILY,
CYCLIC, IV

Duration

Comparator -
Dexamethasone
(Dexamethasone)
Injection
Comparator -
Dexamethasone
(Dexamethasone,
Dexamethasone)
Tablet

SS

INTRAVENOUS

8MG, IV, IV

SS

ORAL

8 MG, ORAL,
ORAL

Kevairil
(Granisetron
Hydrochloride)
Paspertin
(Metoclopramide
Hydrochloride)

SS

INTRAVENOUS

3 MG, QD, IV

SS

ORAL

40 MG, QID,
ORAL

Pantozol
(Pantoprazole
Sodium)
Imap (Fluspiritene)
Begodural

C

C

C

Date: 02/27/04 ISR Number: 4308988-4 Report Type: Expedited (15-Day) Company Report#: 2004193697FR

Outcome
Disability

PT
Osteonecrosis

Report Source
Foreign
Health
Professional
Other

Product
Solu-Medrol
(Methylprednisolone)
Powder, Sterile
Cisplatin
(Cisplatin)
Bleomycin
(Bleomycin)
Vepesid (Etoposide)
Kytril (Granisetron)

PS

SS

SS

SS

SS

INTRAVENOUS

INTRAVENOUS

INTRAVENOUS

INTRAVENOUS

INTRAVENOUS

SEE IMAGE

SEE IMAGE

SEE IMAGE

SEE IMAGE

SEE IMAGE

Age: 34 YR Gender: Male I/FU: F

Date: 03/01/04 ISR Number: 4308489-3 Report Type: Expedited (15-Day) Company Report#: US-ROCHE-359775

Outcome
Death

PT
Laryngeal Cancer

Report Source

Product
Kytril

PS

Manufacturer
Roche

Route
UNKNOWN

Dose

Duration

Age: 52 YR Gender: Female I/FU: I

Date: 03/02/04 ISR Number: 4311179-4 Report Type: Direct Company Report#: CTU 213586

Outcome

PT
Bradycardia

Report Source

Product
Kytril 1 Mg Roche
Fluconazole

PS

Manufacturer
Roche

Route
ORAL

Dose
1 MG DAILY
ORAL

Duration

Age: Gender: Female I/FU: I

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

C
Gatifloxacin
C
Acyclovir
C
Allopurinol
C
Dexamethasone
C
Medroxyprogesterone

Date: 03/05/04 **ISR Number:** 4313375-9 **Report Type:** Direct **Company Report#:** CTU 213950 **Age:** **Gender:** Female **I/FU:** 1

Outcome
Required
Intervention to
Prevent Permanent
Impairment/Damage

PT
Pruritus
Rash

Report Source

Product
Kyril

Role
PS

Manufacturer

Route
INTRAVENOUS

Dose
1 MG IV

Duration

Date: 03/08/04 **ISR Number:** 4313492-3 **Report Type:** Expedited (15-Day) **Company Report#:** US-ROCHE-360234 **Age:** 65 YR **Gender:** Male **I/FU:** 1

Outcome
Death

PT
Myocardial Infarction

Report Source

Product
Kyril

Role
PS

Manufacturer
Roche

Route
UNKNOWN

Dose

Duration

Date: 03/24/04 **ISR Number:** 4325501-6 **Report Type:** Expedited (15-Day) **Company Report#:** 2004204331JP **Age:** 72 YR **Gender:** Male **I/FU:** 1

Outcome
Hospitalization -
Initial or Prolonged

PT
Delirium

Report Source
Foreign
Health
Professional
Other

Product
Camptosar (irinotecan
) Solution, Sterile

Role
PS

Manufacturer

Route
INTRAVENOUS
DRIP

Dose
80 MG, IV
DRIP

Duration

Product
Randa (Cisplatin)

Role
SS

Manufacturer

Route
INTRAVENOUS
DRIP

Dose
IV DRIP

Duration

Date: 04/09/04 **ISR Number:** 4335639-5 **Report Type:** Expedited (15-Day) **Company Report#:** US-ROCHE-363445 **Age:** **Gender:** Female **I/FU:** 1

Outcome
Other

PT
Bronchospasm

Report Source

Product
Kyril

Role
PS

Manufacturer
Roche

Route
INTRAVENOUS

Dose

Duration

Date: 04/19/04 **ISR Number:** 4341086-2 **Report Type:** Expedited (15-Day) **Company Report#:** FR-ROCHE-363963 **Age:** 64 YR **Gender:** Male **I/FU:** 1

Outcome
Hospitalization -
Initial or Prolonged

PT
Alanine Aminotransferase
Increased
Aspartate
Aminotransferase
Increased
Hepatitis
Hepatitis Cholestatic

Report Source

Product
Kyril
Miphoran
Kyril

Role
PS
SS
C

Manufacturer
Roche

Route
INTRAVENOUS
INTRAVENOUS
ORAL

Dose
CYCLE
CYCLE
CYCLE

Duration
57 DAY
57 DAY

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 04/22/04 **ISRN Number:** 4343974-X **Report Type:** Expedited (15-Day) **Company Report#:** FR-ROCHE-363963 **Age:** 64 YR **Gender:** Male **I/FU:** F

Outcome: Hospitalization - Initial or Prolonged
PT: Alanine Aminotransferase Increased, Aspartate Aminotransferase Increased, Hepatitis, Hepatitis Cholestatic
Report Source: Consumer
Product: Kytril, Kytril, Muphoran
Role: PS, SS, SS
Manufacturer: Roche, Roche
Route: ORAL, INTRAVENOUS, INTRAVENOUS
Dose: CYCLE, CYCLE, CYCLE
Duration: 57 DAY, 57 DAY, 57 DAY

Date: 05/11/04 **ISRN Number:** 4356076-3 **Report Type:** Periodic **Company Report#:** US-BRISTOL-MYERS SQUIBB COMPANY-12279592 **Age:** 42 YR **Gender:** Female **I/FU:** 1

Outcome: **PT:** Migraine
Report Source:
Product: Doxorubicin Hcl, Cyclophosphamide, Neulasta, Granisetron Hcl, Dexamethasone
Role: PS, SS, SS, SS, SS
Manufacturer: Bristol-Myers Squibb Company, Bristol-Myers Squibb Company
Route: SUBCUTANEOUS
Dose:
Duration:

Date: 06/02/04 **ISRN Number:** 4372362-5 **Report Type:** Expedited (15-Day) **Company Report#:** 2004204331JP **Age:** 72 YR **Gender:** Male **I/FU:** F

Outcome: Hospitalization - Initial or Prolonged
PT: Abnormal Behaviour, Amnesia, Blood Pressure Systolic Increased, Body Temperature Increased, Delirium, Depressed Level Of Consciousness, Restlessness, Tremor, Urinary Incontinence
Report Source: Foreign Health Professional, Other
Product: Camptosar (Irinotecan) Solution, Sterile, Randa (Cisplatin), Kytril (Granisetron), Tenormin (Atenolol), Norvasc (Amlodipine Besilate), Blopress (Candesartan Cilxetil), Decadron
Role: PS, SS, SS, SS, SS, SS, C
Manufacturer:
Route: INTRAVENOUS DRIP, INTRAVENOUS DRIP, INTRAVENOUS DRIP, ORAL, ORAL, ORAL
Dose: 80 MG, IV DRIP, 80 MG, IV DRIP, 3 MG, IV DRIP, 25 MG, ORAL, 5 MG, ORAL, 8 MG, ORAL
Duration:

FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

Date: 06/09/04 ISR Number: 4374935-2 Report Type: Expedited (15-Day) Company Report#: GB-BRISTOL-MYERS SQUIBB COMPANY-12349288
 Outcome: Hospitalization - Initial or Prolonged
 PT: Lymphadenopathy, Pancreatitis Acute
 Report Source: Cyclophosphamide
 Product: Fludarabine, Granisetron, Co-Trimoxazol, Allopurinol
 Role: PS, SS, SS, C
 Manufacturer: Bristol-Myers Squibb Company
 Route: ORAL, ORAL, ORAL, ORAL
 Dose: [Blank]
 Gender: Male
 Age: 50 YR
 I/FU: F

Date: 06/10/04 ISR Number: 4378624-X Report Type: Expedited (15-Day) Company Report#: 2004AP02925
 Outcome: Hospitalization - Initial or Prolonged
 PT: Delirium, Depressed Level Of Consciousness, Hypoaecusis, Memory Impairment, Tremor, Urinary Incontinence
 Report Source: Foreign Health Professional, Other
 Product: Tenormin, Camptosar, Randa, Kytril, Norvasc, Blopress
 Role: PS, SS, SS, SS, SS, SS
 Manufacturer: [Blank]
 Route: [Blank]
 Dose: 25 MG DAILY, PO, 80 MG DAILY, IVD, 80 MG DAILY, IVD, 3 MG DAILY, IVD, 5 MG DAILY PO, 8 MG DAILY PO
 Gender: Male
 Age: 72 YR
 I/FU: I

Date: 06/21/04 ISR Number: 4384424-7 Report Type: Expedited (15-Day) Company Report#: 2004204331JP
 Outcome: Hospitalization - Initial or Prolonged
 PT: Abnormal Behaviour, Amnesia, Blood Pressure Increased, Body Temperature Increased, Delirium, Depressed Level Of Consciousness, Hyperhidrosis, Hypoaecusis, Restlessness, Tremor, Urinary Incontinence
 Report Source: Foreign Health Professional
 Product: Camptosar (Irinotecan) Solution, Sterile, Randa (Cisplatin), Kytril (Granisetron), Atenolol (Atenolol), Atenolol Tablet, Norvasc (Amlodipine Besilate), Blopress (Candesartan Cilxetil), Decadron
 Role: PS, SS, SS, SS, SS, SS, C
 Manufacturer: [Blank]
 Route: INTRAVENOUS DRIP, INTRAVENOUS DRIP, INTRAVENOUS DRIP, ORAL, ORAL, ORAL
 Dose: 80 MG, UNK, IV DRIP, 80 MG, UNK, IV DRIP, 3 MG, UNK, IV DRIP, 25 MG, UNK, ORAL, 5 MG, UNK, ORAL, 8 MG, UNK, ORAL
 Gender: Male
 Age: 72 YR
 I/FU: F

Date: 06/23/04 ISR Number: 4386565-7 Report Type: Expedited (15-Day) Company Report#: 2004218807JP
 Outcome: Hospitalization - Initial or Prolonged
 PT: Pancytopenia, Streptococcal Sepsis
 Report Source: Foreign Literature
 Gender: Female
 Age: 3 YR
 I/FU: I

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Health
Professional
Other

<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Cytosar (Cytarabine) Powder, Sterile	PS		INTRAVENOUS DRIP	2400 MG, QD, IV DRIP	
Methotrexate (Methotrexate) Solution, Sterile Solu-Cortef (Hydrocortisone) Powder, Sterile L-Asparaginase (Asparaginase)	SS			12.5 MG, QD	
Granisetron Hydrochloride Methylprednisolone Sodium Succinate (Methylprednisolone Sodium Succinate)	SS		INTRAVENOUS DRIP	25 MG, QD	
	C			6000 U, QD, IV DRIP	

<u>Report Source</u>	<u>Report Type</u>	<u>Report Date</u>	<u>Company Report#</u>	<u>Age</u>	<u>Gender</u>	<u>IFU</u>
Pulmonary Fibrosis	PT	07/23/04	4405350-0	15-Day	Female	I
			JP-BRISTOL-MYERS SQUIBB COMPANY-12648861	10 YR	Female	I

<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Endoxan	PS	Bristol-Myers Squibb Company	INTRAVENOUS		1091 DAY
Uromitexan	SS	Bristol-Myers Squibb Company	INTRAVENOUS		1091 DAY
Oncovin Randa Kytril	SS		INTRAVENOUS		1091 DAY
	SS		INTRAVENOUS		1091 DAY
	SS		INTRAVENOUS		1091 DAY

<u>Report Source</u>	<u>Report Type</u>	<u>Report Date</u>	<u>Company Report#</u>	<u>Age</u>	<u>Gender</u>	<u>IFU</u>
Pulmonary Fibrosis	PT	08/05/04	4416578-8	15-Day	Female	F
			JP-BRISTOL-MYERS SQUIBB COMPANY-12648861	10 YR	Female	F

<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Endoxan	PS	Bristol-Myers Squibb Company	INTRAVENOUS		1091 DAY
Uromitexan	SS	Bristol-Myers Squibb Company	INTRAVENOUS		1091 DAY
Oncovin Randa Kytril	SS		INTRAVENOUS		1091 DAY
	SS		INTRAVENOUS		1091 DAY
	SS		INTRAVENOUS		1091 DAY

<u>Report Source</u>	<u>Report Type</u>	<u>Report Date</u>	<u>Company Report#</u>	<u>Age</u>	<u>Gender</u>	<u>IFU</u>
Hypersensitivity Oropharyngeal Swelling Throat Tightness	PT	08/13/04	4425135-9	15-Day	Female	I
			US-AMGEN-US084356		Female	I

<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Neulasta - Prefilled Syringe Kytril Adriamycin Cytosar	PS SS C C		SUBCUTANEOUS		

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 08/13/04 ISR Number: 4425471-6 Report Type: Expedited (15-Day) Company Report#: JP-ROCHE-377253

<u>Outcome</u> Life-Threatening	<u>PT</u> Arrhythmia Cardioplegia Shock	<u>Report Source</u>	<u>Product</u> Kytril Briplatin Saxizone	<u>Role</u> PS C C	<u>Manufacturer</u> Roche	<u>Route</u> INTRAVENOUS	<u>Dose</u>	<u>Gender: Male</u>	<u>IFU: I</u>
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Date: 08/19/04 ISR Number: 4431801-1 Report Type: Expedited (15-Day) Company Report#: 104959ISR

<u>Outcome</u> Hospitalization - Initial or Prolonged	<u>PT</u> Dyspnoea Hyperhidrosis Pain Paraesthesia Syncope Vomiting	<u>Report Source</u> Health Professional	<u>Product</u> Carboplatin Fluorouracil Alizapride Hydrochloride Granisetron	<u>Role</u> PS SS SS SS	<u>Manufacturer</u>	<u>Route</u> INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS	<u>Dose</u> 40 MILLIGRAM; INTRAVENOUS (NOS) 80 MILLIGRAM; INTRAVENOUS (NOS) NI; INTRAVENOUS NOS NI; INTRAVENOUS NOS	<u>Gender: Male</u>	<u>IFU: I</u>
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Date: 08/23/04 ISR Number: 4430893-3 Report Type: Expedited (15-Day) Company Report#: DE-ROCHE-375868

<u>Outcome</u> Hospitalization - Initial or Prolonged	<u>PT</u> Constipation Intestinal Obstruction	<u>Report Source</u> Health Professional	<u>Product</u> Kevatri Kevatri Investigational Drug Morphine Oxaliplatin 5-Fu Leucovorin	<u>Role</u> PS SS SS SS C C C	<u>Manufacturer</u> Roche Roche	<u>Route</u> ORAL ORAL UNKNOWN UNKNOWN	<u>Dose</u> STUDY DRUG: PIK787ZK2225 84 VS PLACEBO.	<u>Gender: Female</u>	<u>IFU: I</u>
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Date: 08/24/04 ISR Number: 4433273-X Report Type: Expedited (15-Day) Company Report#: DRON00204002739

<u>Outcome</u> Hospitalization - Initial or Prolonged	<u>PT</u> Blood Glucose Increased Blood Magnesium Decreased Blood Sodium Decreased Confusional State Contusion Convulsion Eye Injury Face Injury Fall Gastrointestinal Haemorrhage Haemolytic Anaemia Liver Transplant Rejection	<u>Report Source</u>						<u>Gender: Male</u>	<u>IFU: I</u>
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**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Mental Status Changes
Metabolic Encephalopathy
Nausea
Pancytopenia
Vomiting

<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Health Professional	Marinol (Dronabinol)	PS		ORAL	DAILY PO	
	Aranesp (Eprex)	SS		SUBCUTANEOUS	200 IU QD SC	
	Kytril (Granisetron)	SS		INTRAVENOUS	1 MG QD IV	
	Oxycotin (Oxycodone Hydrochloride)	SS		ORAL	20 MG BID PO	
	Neurontin	SS		ORAL	DAILY PO	
	(Gabapentin)	SS		ORAL	DAILY PO	
	Aricept (Donepezil Hydrochloride)	SS		ORAL	DAILY PO	
	Morphine Sulfate (Morphine Sulfate)	C		ORAL	DAILY PO	
	Chlorpromazine (Chlorpromazine)	C				
	Oxycodone (Oxycodone)	C				
	Prograf (Prograf)	C				
	Protonix (Protonix)	C				
	Prandin "Kuh"	C				
	(Deflazacort)	C				
	Zoloft (Sertraline Hydrochloride)	C				
	Glipizide (Glipizide)	C				
	Procardia	C				
	(Nifedipine)	C				
	Magnesium (Magnesium)	C				
	Levaquin (Levofloxacin)	C				
	Pentamidine (Pentamidine)	C				
	Pericolace (Pericolace)	C				
	Dulcolax (Bisacodyl)	C				
	Asa (Acetylsalicylic Acid)	C				
	Lasix (Lasix)	C				
	Leukine	C				
	(Sargramostim)	C				
	Dexamethasone (Dexamethasone)	C				
	Adriamycin (Doxorubicin)	C				
	Cisplatinum (Cisplatin)	C				
	Senecot (Senecot)	C				
	Inderal (Inderal)	C				
	Multivitamins (Multivitamins)	C				
	Insulin (Insulin)	C				
	Aldactone (Aldactone)	C				
	Megace (Megace)	C				

FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

Date: 08/27/04 ISR Number: 4435177-5 Report Type: Expedited (15-Day) Company Report#: GB-ROCHE-378163

Outcome: Other
 PT: Cardiac Arrest
 Report Source: Kyril Midazolam
 Role: PS C
 Manufacturer: Roche
 Route: INTRAVENOUS UNKNOWN
 Dose: UNKNOWN
 Duration: UNKNOWN
 Age: 62 YR
 Gender: Female
 I/FU: 1

Date: 08/30/04 ISR Number: 4439646-3 Report Type: Expedited (15-Day) Company Report#: USA-2004-0016457

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Hospitalization - Initial or Prolonged	Blood Glucose Increased	Health Professional	Oxycontin Tablets	PS			20 MG, QL2H	
	Blood Magnesium Decreased	Other	(Oxycodone Hydrochloride) Cr Tablet					
	Blood Sodium Decreased		Oxyir Capsules 5 Mg(Oxycodone Hydrochloride, Oxycodone Hydrochloride) Ir	SS			5 MG, Q4H	
	Confusional State		Aranesp(Darbepoetin) Kyril(Granisetron)	SS			1 MG, INTRAVENOUS	
	Contusion		Prograf(Tacrolimus)	SS			2 MG, 4 MG	
	Convulsion		Protonix(Pantoprazole)	SS			40 MG, DAILY	
	Eye Disorder		Acetylsalicylic Acid(Acetylsalicylic Acid)	SS			81 MG, DAILY	
	Face Injury		Gabapentin(Gabapentin)	SS			400 MG	
	Fall		Magnesium(Magnesium)	SS				
	Mental Status Changes		Senokot(Senna Fruit)	SS				
	Nausea		Donepezil(Donepezil)	SS				
	Pancytopenia		Inderal(Propranolol Hydrochloride)	SS				
	Vomiting		Dronabinol(Dronabinol)	SS				
			Megace(Megestrol Acetate)	SS				
			Insulin(Insulin)	SS				
			Aldactone(Spironolactone)	SS				
			Ambien(Zolpidem Tartrate)	SS				
			Chlorpromazine(Chlorpromazine)	C				
			Glipizide(Glipizide)	C				
			Procordia	C				
			Pentamidine(Pentamidine)	C				
			Peri-Colace (Sennoside A+B, Docusate Sodium) Tablet	C				
			Dulcolax	C				
			Dexamethasone(Dexamethasone)	C				
			Cis-Platinum(Cisplatin)	C				
			Zolofl(Sertraline)	C				

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Hydrochloride) C
Leukine(Sargramostim) C
Adriamycin(Doxorubicin) C

Date: 08/31/04 **ISR Number:** 4437964-6 **Report Type:** Expedited (15-Day) **Company Report#:** DE-ROCHE-375868 **Age:** 66 YR **Gender:** Female **I/FU:** 1

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Hospitalization - Initial or Prolonged	Constipation Intestinal Obstruction	Health Professional	Kevaltri Kevaltri Investigational Drug	PS SS SS	Roche Roche	ORAL ORAL UNKNOWN	STUDY DRUG: PTK787/ZK2225 84 VS PLACEBO.	1 DAY
			Morphine Oxaliplatin 5-Fu Leucovorin	SS C C C		UNKNOWN		

Date: 08/31/04 **ISR Number:** 4439240-4 **Report Type:** Expedited (15-Day) **Company Report#:** 2004057138 **Age:** 51 YR **Gender:** Male **I/FU:** 1

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Hospitalization - Initial or Prolonged	Confusional State Contusion Convulsion Eye Injury Fall Mental Status Changes Nausea Pancytopenia Soft Tissue Disorder Swelling Vomiting	Consumer Health Professional	Neuronin (Gabapentin) Aricept (Donepezil Hydrochloride) Oxycodone Hydrochloride (Oxycodone Hydrochloride) Darbepoetin Alfa (Darbepoetin Alfa) Dronabinol (Dronabinol) Granisetron (Granisetron) Zolpidem Tartrate (Zolpidem Tartrate) Sertraline Hydrochloride Glipizide (Glipizide) Nifedipine (Nifedipine) Magnesium (Magnesium) Levofloxacin (Levofloxacin) Pentamidine (Pentamidine) Bisacodyl (Bisacodyl) Acetylsalicylic Acid (Acetylsalicylic	PS SS SS SS SS SS SS SS SS SS C C C C C C C C C			40 MG (20 MG, 2 IN 1 D) (200 MCG), SUBCUTANEOUS 1 MG (1 MG, 1 IN 1 D)	

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOD) Report**

Acid) C
 Furosemide C
 (Furosemide) C
 Sargramostim C
 (Sargramostim) C
 Dexamethasone C
 (Dexamethasone) C
 Granisetron C
 (Granisetron) C
 Morphine Sulfate C
 (Morphine Sulfate) C
 Chlorpromazine C
 (Chlorpromazine) C
 Tacrolimus C
 (Tacrolimus) C
 Pantoprazole C
 (Pantoprazole) C
 Doxorubicin C
 (Doxorubicin) C
 Cisplatin C
 (Cisplatin) C
 Deflazacort C
 (Deflazacort) C
 Senna Fruit (Senna C
 Fruit) C
 Propranolol
 Hydrochloride
 (Propranolol) C
 Hydrochloride)
 Multivitamins
 (Ascorbic Acid,
 Ergocalciferol,
 Folic Acid,
 Nicotinamide,
 Insulin (Insulin) C
 Spirolactone C
 (Spirolactone) C
 Megestrol Acetate C
 (Megestrol Acetate) C
 Repaglinide C
 (Repaglinide) C

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Hospitalization - Initial or Prolonged	Intestinal Obstruction		Carboplatin	PS	Bristol-Myers Squibb Company	INTRAVENOUS	cycle 2: 12-May-2004, cycle 3: 26-May2004.	
			Paclitaxel	SS	Bristol-Myers Squibb Company	INTRAVENOUS	cycle 2: 12-May-2004, cycle 3: 26-May2004.	
			Polaramine Methylprednisolone Kytril	SS SS SS		INTRAVENOUS INTRAVENOUS INTRAVENOUS		

Date: 09/01/04 ISR Number: 4439042-9 Report Type: Expedited (15-Day) Company Report#: FR-BRISTOL-MYERS SQUIBB COMPANY-12683827 Age: 49 YR Gender: Female I/FU: 1

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 09/02/04 **ISRN** Number: 4444227-1 **Report Type:** Expedited (15-Day) **Company Report#:** A03200402800

Age: 51 YR **Gender:** Male **I/FU:** 1

<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Hospitalization - Initial or Prolonged	Health Professional	Ambien - Zolpidem Tartrate - Tablet	PS		ORAL	ORAL	
	Confusional State	Aranesp - Darbeoetin Alfa - Solution	SS		SUBCUTANEOUS	SUBCUTANEOUS	
	Convulsion	Marinol - Dronabinol Solution	SS				
	Face Injury	Kytril - Granisetron - Solution - 1 Mg	SS		INTRAVENOUS	1 MG QD - INTRAVENOUS NOS	
	Fall						
	Fatigue						
	Gastrointestinal	Oxycontin - Oxycodone	SS				
	Haemorrhage	Hydrochloride - 20 Mg	SS			20 MG Q12HR	
	Haemolytic Anaemia	Neurontin - Gabapentin	SS				
	Liver Transplant	Aricept - Donepezil Hydrochloride	SS				
	Metabolic Encephalopathy	Morphine Sulfate	C				
	Pancytopenia	Chlorpromazine	C				
	Swelling	Oxycodone	C				
		Tacrolimus	C				
		Pantoprazole	C				
		Deflazacort	C				
		Setraline	C				
		Hydrochloride	C				
		Glipizide	C				
		Nifedipine	C				
		Magnesium	C				
		Levofloxacin	C				
		Pentamidine	C				
		Peri-Colace	C				
		Bisacodyl	C				
		Acetylsalicylic Acid	C				
		Furosemide	C				
		Sargramostim	C				
		Dexamethasone	C				
		Doxorubicin	C				
		Cisplatin	C				
		Senna Fruit	C				
		Propranolol	C				
		Hydrochloride	C				
		Multivitamins	C				
		Insulin	C				
		Spirolactone	C				
		Megestrol Acetate	C				

Date: 09/03/04 **ISRN** Number: 4440191-X **Report Type:** Expedited (15-Day) **Company Report#:** FR-ROCHE-378555

Age: 49 YR **Gender:** Female **I/FU:** 1

<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Hospitalization - Initial or Prolonged	Consumer	Kytril	PS	Roche	INTRAVENOUS		1 DAY
	Intestinal Obstruction	Pacitaxel	SS		INTRAVENOUS		1 DAY
		Carboplatine	SS		INTRAVENOUS		1 DAY
		Methylprednisolone	SS		INTRAVENOUS	"A DOSE OF 1"	1 DAY
		Polaramine	SS		INTRAVENOUS	"A DOSE OF 5"	1 DAY

FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

Date: 09/08/04 ISR Number: 4443661-3 Report Type: Expedited (15-Day) Company Report#: JP-GLAXOSMITHKLINE-B0340349A Age: 73 YR Gender: Female I/FU: F

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Hospitalization - Initial or Prolonged	Anaphylactic Shock	Health Professional	Zantac	PS	Glaxosmithkline	INTRAVENOUS	50MG Per day	18 WK
	Cough	Health Professional	Kytril	SS	Glaxosmithkline	INTRAVENOUS	3MG Per day	18 WK
	Depressed Level Of Consciousness	Health Professional	Decadron	SS	Glaxosmithkline	INTRAVENOUS	12MG Per day	18 WK
	Feeling Abnormal	Health Professional	Restamin	C	Glaxosmithkline	ORAL		18 WK
	Hot Flush	Health Professional	Taxol	C	Glaxosmithkline	INTRAVENOUS	100MG Per day	120 DAY
	Vomiting	Health Professional						

Date: 09/09/04 ISR Number: 4444935-2 Report Type: Expedited (15-Day) Company Report#: DE-ROCHE-375868 Age: 66 YR Gender: Female I/FU: F

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Hospitalization - Initial or Prolonged	Constipation	Health Professional	Granisetron	PS	Roche	ORAL		
	Intestinal Obstruction	Health Professional	Hydrochloride	SS	Roche	ORAL		1 DAY
		Health Professional	Investigational Drug	SS		UNKNOWN	STUDY DRUG: PTK787/ZK2225	
		Health Professional	Morphine	SS		UNKNOWN	84 VS	
		Health Professional	Oxaliplatin	C			PLACEBO.	
		Health Professional	5-Fu	C				
		Health Professional	Leucovorin	C				

Date: 09/10/04 ISR Number: 4449121-8 Report Type: Expedited (15-Day) Company Report#: 2004230236FR Age: 49 YR Gender: Female I/FU: I

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Hospitalization - Initial or Prolonged	Intestinal Obstruction	Foreign Health Professional	Solu-Medrol (Methylprednisolone) Powder, Sterile	PS		INTRAVENOUS	120 MG, SINGLE, IV SEE IMAGE	
		Other	Polaramine (Dexchlorpheniramine Maleate)	SS		INTRAVENOUS	5 MG, SINGLE, IV	
		Other	Carboplatin (Carboplatin) Solut	SS		INTRAVENOUS	3 MG, SINGLE, IV	
		Other	Clitaxel (Pacitaxel) Solution, Sterile	SS		INTRAVENOUS	SINGLE, IV	
		Other	Eumetic (Granisetron Hydrochloride) Solution, Sterile	SS		INTRAVENOUS	3 MG, SINGLE, IV	
		Other		C				
		Other		C				
		Other		C				
		Other		C				
		Other		C				
		Other		C				

FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

Date: 09/15/04 ISR Number: 4450267-9 Report Type: Expedited (15-Day) Company Report#: USA-2004-0016457

Age: 51 YR Gender: Male

IRU: F

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Hospitalization - Initial or Prolonged	Asthma	Health	Oxycontin Tablets	PS			20 MG, Q12H	
	Blood Glucose Increased	Professional	(Oxycodone Hydrochloride) Cr Tablet					
	Blood Magnesium Decreased	Other	Oxyir Capsules 5mg					
	Blood Sodium Decreased		(Oxycodone Hydrochloride, Hydrochloride) Ir	SS			5 MG, Q4H	
	Confusional State		Aranesp	SS				
	Contusion		(Darbepoetin)	SS				
	Convulsion		Kytril (Granisetron)	SS		INTRAVENOUS	1 MG, INTRAVENOUS SEE IMAGE	
	Face Injury		Prograf (Tacrolimus)	SS			40 MG DAILY	
	Fall		Protonil	SS				
	Fatigue		(Pantoprazole)	SS				
	Mental Status Changes		Acetylsalicylic Acid (Acetylsalicylic Acid)	SS			81 MG, DAILY	
	Nausea		Gabapentin	SS				
	Pancytopenia		(Gabapentin)	SS				
	Swelling		Magnesium	SS			400 MG	
	Vomiting		(Magnesium)	SS				
			Senokot (Sennoside A+B)	SS				
			Donepezil	SS				
			(Donepezil)	SS				
			Inderal (Propranolol Hydrochloride)	SS				
			Dronabinol	SS				
			(Dronabinol)	SS				
			Megace (Megestrol Acetate)	SS				
			Insulin (Insulin)	SS				
			Aldactone	SS				
			(Spironolactone)	SS				
			Ambien (Zolpidem Tartrate)	SS				
			Chlorpromazine	C				
			(Chlorpromazine)	C				
			Glipizide	C				
			(Glipizide)	C				
			Procordia	C				
			Pentamidine	C				
			(Pentamidine)	C				
			Peri-Colace	C				
			(Sennoside A+B, Docusate Sodium)	C				
			Dulcolax	C				
			Dexamethasone	C				
			(Dexamethasone)	C				
			Cis-Platinum	C				
			(Cisplatin)	C				
			Zoloft (Sertraline Hydrochloride)	C				
			Leukine	C				
			(Sargramostim)	C				
			Adriamycin	C				

FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

(Doxorubicin) C

Date: 09/17/04 ISR Number: 4452316-0 Report Type: Expedited (15-Day) Company Report#: US-ROCHE-380104

Age: 51 YR Gender: Male IFU: I

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Hospitalization - Initial or Prolonged	Asthenia	Consumer	Granisetron	PS	Roche	UNKNOWN		1 DAY
	Convulsion	Health	Hydrochloride	SS		SUBCUTANEOUS		
	Fall	Professional	Darbepoetin Alfa	SS		UNKNOWN		31 DAY
	Fatigue		Dronabinol	SS		UNKNOWN		
	Gastrointestinal		Oxycodone	SS		UNKNOWN		
	Haemorrhage		Gabapentin	SS		UNKNOWN		
	Haemolytic Anaemia		Donepezil	SS		UNKNOWN		
	Head Injury		Hydrochloride	SS		UNKNOWN		
	Liver Transplant		Zolpidem Tartrate	SS		UNKNOWN		
	Rejection		Morphine Sulfate	C		UNKNOWN		
	Mental Status Changes		Chlorpromazine	C		UNKNOWN		55 DAY
	Metabolic Encephalopathy		Oxyir	C				
	Nausea		Tacrolimus	C				
	Neuropathy		Pantoprazole	C				
	Pancytopenia		Prandin	C				
	Swelling		Sertraline	C				
	Tremor		Hydrochloride	C				
	Vomiting		Glipizide	C				
			Nifedipine	C				
			Magnesium	C				
			Levofloxacin	C				8 DAY
			Pentamidine	C				
			Pericolace	C				
			Bisacodyl	C				
			Acetylsalicylic Acid	C				
			Frusemide	C				
			Sargamostim	C		INTRAVENOUS		1 DAY
			Dexamethasone	C		SUBCUTANEOUS		6 DAY
			Doxorubicin	C		INTRAVENOUS		1 DAY
			Cisplatin	C				
			Senna Fruit	C				
			Propranolol	C				
			Multivitamins	C				
			Insulin	C				
			Spiroonolactone	C				
			Megestrol Acetate	C				

Date: 09/17/04 ISR Number: 4452830-8 Report Type: Expedited (15-Day) Company Report#: 2004057138

Age: 51 YR Gender: Male IFU: F

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Hospitalization - Initial or Prolonged	Asthenia	Consumer	Neurontin	PS				
	Confusional State	Health	(Gabapentin)					
	Contusion	Professional	Aricept (Donepezil)					
	Convulsion		Hydrochloride	SS				
	Fall		(Donepezil)					
	Fatigue		Oxycodone					
	Mental Status Changes		Hydrochloride	SS			40 MG (20 MG	
	Nausea		(Oxycodone				.2 IN 1 D)	
	Pancytopenia		Hydrochloride					
	Skull X-Ray Abnormal		Hydrochloride					
	Swelling		Darbepoetin Alfa	SS		SUBCUTANEOUS	(200 MCG),	
	Vomiting		(Darbepoetin Alfa)			SUBCUTANEOUS		

FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report

Dronabinol (Dronabinol)	SS	
Granisetron (Granisetron)	SS	1 MG (1 MG, 1 IN 1 D)
Zolpidem Tartrate (Zolpidem Tartrate)	C	
Serrraline Hydrochloride(Sertraline Hydrochloride)	C	
Glipizide (Glipizide)	C	
Nifedipine (Nifedipine)	C	
Magnesium (Magnesium)	C	
Levofloxacin (Levofloxacin)	C	
Pentamidine (Pentamidine)	C	
Peri-Colace (Casantranol, Docusate Sodium)	C	
Bisacodyl (Bisacodyl)	C	
Acetylsalicylic Acid (Acetylsalicylic Acid)	C	
Furosemide (Furosemide)	C	
Sargramostim (Sargramostim)	C	
Dexamethasone (Dexamethasone)	C	
Granisetron (Granisetron)	C	
Morphine Sulfate (Morphine Sulfate)	C	
Chlorpromazine (Chlorpromazine)	C	
Tacrolimus (Tacrolimus)	C	
Pantoprazole (Pantoprazole)	C	
Doxorubicin (Doxorubicin)	C	
Cisplatin(Cisplatin)	C	
Deflazacort (Deflazacort)	C	
Senna Fruit (Senna Fruit)	C	
Propranolol Hydrochloride (Propranolol Hydrochloride)	C	
Multivitamins (Ascorbic Acid, Ergocalciferol, Folic Acid, Nicotinamide, Insulin (Insulin)	C	

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Spirolactone
(Spirolactone) C
Megestrol Acetate C
(Megestrol Acetate)
Repaglinide C
(Repaglinide)

Date: 09/20/04 ISR Number: 4453840-7 Report Type: Expedited (15-Day) Company Report#: FR-ROCHE-380528

Age: 53 YR Gender: Male I/F/U: I

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Other	Angioneurotic Oedema Urticaria		Kytril 5-Fluorouracil	PS C	Roche	UNKNOWN		

Date: 09/21/04 ISR Number: 4454926-3 Report Type: Expedited (15-Day) Company Report#: FR-ROCHE-378555

Age: 49 YR Gender: Female I/F/U: F

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Hospitalization - Initial or Prolonged	Intestinal Obstruction		Kytril Paclitaxel Paclitaxel Paclitaxel Carboplatine Carboplatine Carboplatine Methylprednisolone Methylprednisolone Methylprednisolone Polaramine Polaramine Polaramine	PS SS SS SS SS SS SS SS SS SS SS SS SS	Roche	INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS	1 DAY 1 DAY 1 DAY 1 DAY 1 DAY 1 DAY 1 DAY 1 DAY 1 DAY 1 DAY 1 DAY 1 DAY 1 DAY	

Date: 09/21/04 ISR Number: 4481626-6 Report Type: Periodic Company Report#: 167-20785-04060472(0)

Age: 72 YR Gender: Male I/F/U: I

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Death	Constipation	Foreign Study	Thalidomide - Pharmon (Thalidomide) (Capsules)	PS	Pharmon	ORAL	100 MG, QD, ORAL; 50 MG, QD, ORAL	
Hospitalization - Initial or Prolonged	Disease Progression Dyspnoea Pleural Effusion	Health Professional Other	Granisetron (Granisetron)	SS		INTRAVENOUS	1 MG, QD, INTRAVENOUS	
			Gemcitabine (Gemcitabine) (Unknown) Carboplatin (Carboplatin) (Unknown) Manevac (Manevac) Maxalon (Metoclopramide) Hydrochloride) Cover syl (Perindopril)	SS SS SS C C C				

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 09/27/04	ISRN: 4461606-7	Report Type: Direct	Company Report#: CTU 228120	Age:	Gender: Female	I/FU: 1
Outcome:	PT: Dystonia Grip Strength Decreased	Report Source:	Product: Kytril	Route: INTRAVENOUS	Dose: 0.1 MG IV PRN	Duration:
Date: 09/28/04	ISRN: 4461248-3	Report Type: Expedited (15-Day)	Company Report#: FR-ROCHE-378555	Age: 49 YR	Gender: Female	I/FU: F
Outcome: Hospitalization - Initial or Prolonged	PT: Intestinal Obstruction	Report Source:	Product: Kytril Taxol Taxol Taxol Carboplatine Carboplatine Methylprednisolone	Route: INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS	Dose:	Duration: 1 DAY 1 DAY 1 DAY 1 DAY 1 DAY 1 DAY 1 DAY
			Methylprednisolone Methylprednisolone Polaramine Polaramine Polaramine	INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS	MARKETED BY MERCK LABORATORY.	1 DAY 1 DAY 1 DAY 1 DAY 1 DAY
Date: 09/28/04	ISRN: 4464806-5	Report Type: Direct	Company Report#: CTU 228149	Age:	Gender: Female	I/FU: 1
Outcome:	PT: Dystonia Grip Strength Decreased	Report Source:	Product: Kytril	Route: INTRAVENOUS	Dose: 0.1 MG IV PRN	Duration:
Date: 10/15/04	ISRN: 4475449-1	Report Type: Expedited (15-Day)	Company Report#: US-ROCHE-382568	Age:	Gender: Female	I/FU: 1
Outcome: Other	PT: Convulsion	Report Source:	Product: Kytril Demerol	Route: UNKNOWN ORAL	Dose:	Duration:
Date: 10/15/04	ISRN: 4479026-8	Report Type: Expedited (15-Day)	Company Report#: 104959ISR	Age: 40 YR	Gender: Male	I/FU: F
Outcome: Hospitalization - Initial or Prolonged	PT: Drug Hypersensitivity Dyspnoea Hypertidrosis Infusion Related Reaction Pain Paraesthesia Syncope Vomiting	Report Source: Health Professional	Product: Carboplatin Fluorouracil Alizapride Hydrochloride Granisetron	Route: INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS	Dose: 40 MILLIGRAM INTRAVENOUS NOS 80 MILLIGRAM INTRAVENOUS NOS INTRAVENOUS NOS INTRAVENOUS NOS INTRAVENOUS NOS	Duration: 1 DAY 1 DAY 1 DAY 1 DAY 1 DAY 1 DAY 1 DAY

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 10/27/04 **ISR Number:** 4486980-7 **Report Type:** Expedited (15-Day) **Company Report#:** US-ROCHE-383879

Age: 41 YR **Gender:** Female **I/FU:** 1

Outcome Other	PT Amnesia Chest Discomfort Chills Dyspnoea Flushing Musculoskeletal Stiffness Nausea Oxygen Saturation Decreased Tremor Urinary Incontinence	Report Source	Product Kytril Taxol Decadron Benadryl Peppid	Role PS C C C C	Manufacturer Roche	Route UNKNOWN INTRAVENOUS	Dose	Duration
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Date: 10/28/04 **ISR Number:** 4488120-7 **Report Type:** Expedited (15-Day) **Company Report#:** US-ROCHE-384077

Age: 45 YR **Gender:** Male **I/FU:** 1

Outcome Death	PT Lung Neoplasm Malignant	Report Source	Product Kytril	Role PS	Manufacturer Roche	Route UNKNOWN	Dose	Duration
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Date: 11/02/04 **ISR Number:** 4494448-7 **Report Type:** Expedited (15-Day) **Company Report#:** 2004IC000341

Age: 73 YR **Gender:** Male **I/FU:** F

Outcome Other	PT Asthma Cerebral Haemorrhage Hepatic Neoplasm Malignant Metastases To Abdominal Cavity Metastases To Lung Pain In Extremity Renal Mass	Report Source Foreign Health Professional	Product 5-Fluorouracil (Fluorouracil) Calcium Levofolinate (Calcium Levofolinate) Kytril (Granisetron) Firstcin (Cefozopran Hydrochloride) Uniphyll (Theophylline) Omepral (Omeprazole) Allopurinol Lac B (Lactobacillus Bifidus, Lyophilized) Myslee (Zolpidem Tartrate) Depas (Etizolam) Herbal Extracts Nos (Herbal Extracts Nos) Lepetan (Buprenorphine Hydrochloride)	Role PS SS SS SS SS SS SS SS SS SS SS SS	Manufacturer	Route INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS ORAL ORAL ORAL ORAL ORAL ORAL ORAL ORAL RECTAL RECTAL	Dose 937 MG; INTRAVENOUS 400 MG; INTRAVENOUS 1 DF; INTRAVENOUS 4 GM; INTRAVENOUS 200 MG; ORAL 20 MG; ORAL 100 MG; ORAL 3 GM; ORAL 10 MG; ORAL 0.5 MG; ORAL ORAL RECTAL	Duration
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**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 11/17/04	ISRN Number: 4503166-8	Report Type: Expedited (15-Day)	Company Report#: JP-MERCK-0411USA02460	Age: 50 YR	Gender: Female	I/FU: 1
Outcome: Other	PT: Anaphylactic Shock	Report Source:	Product: Decadron Tablets Zantac Kytril Lactec	Role: PS SS SS C	Manufacturer: Merck & Co., Inc	Route: ORAL PARENTERAL PARENTERAL INTRAVENOUS DRIP
						Dose: 1 DAY 1 DAY 1 DAY
						Duration: 0 DAY 0 DAY 0 DAY 0 DAY
Date: 11/19/04	ISRN Number: 4505766-8	Report Type: Expedited (15-Day)	Company Report#: JP-GLAXOSMITHKLINE-B0356810A	Age: 50 YR	Gender: Female	I/FU: F
Outcome: Other	PT: Anaphylactoid Reaction Hypotension	Report Source:	Product: Zantac Kytril Decadron Lactec	Role: PS SS SS C	Manufacturer: Glaxosmithkline Glaxosmithkline	Route: INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS
						Dose: 50MG Per day 3MG Per day 8MG Per day 100ML Per day
Date: 11/19/04	ISRN Number: 4506181-3	Report Type: Expedited (15-Day)	Company Report#: JP-MERCK-0411USA02460	Age: 50 YR	Gender: Female	I/FU: F
Outcome: Other	PT: Anaphylactic Shock Unresponsive To Verbal Stimuli	Report Source: Health Professional	Product: Decadron Tablets Zantac Kytril Lactec Sodium Chloride	Role: PS SS SS C C	Manufacturer: Merck & Co., Inc	Route: ORAL PARENTERAL PARENTERAL INTRAVENOUS DRIP INTRAVENOUS
						Dose: 1 DAY 1 DAY 1 DAY
Date: 11/23/04	ISRN Number: 4507626-5	Report Type: Expedited (15-Day)	Company Report#: JP-BRISTOL-MYERS SQUIBB COMPANY-12770061	Age:	Gender: Male	I/FU: 1
Outcome: Death Hospitalization - Initial or Prolonged	PT: Anaphylactic Shock Hypoxic Encephalopathy Pulse Absent	Report Source:	Product: Briplatin Kytril Saxizon Ts-1 Bayaspirin Pietaal Aldactone-A Diovan Stigmat Artist Mexitil Lendormin	Role: PS SS SS SS C C C C C C C C	Manufacturer: Bristol-Myers Squibb Company	Route: INTRAVENOUS DRIP INTRAVENOUS DRIP INTRAVENOUS DRIP ORAL ORAL ORAL ORAL ORAL ORAL ORAL ORAL
						Dose: initiated therapy: 05-Aug-2003 323 DAY 323 DAY 323 DAY 350 DAY

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 11/29/04 **ISR Number:** 4512311-X **Report Type:** Expedited (15-Day) **Company Report#:** JP-GLAXOSMITHKLINE-B0356810A **Age:** 50 YR **Gender:** Female **I/FU:** F

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Other	Anaphylactoid Reaction		Zantac	PS	Glaxosmithkline	INTRAVENOUS	50MG Per day	0 DAY
	Defaecation Urgency		Kytril	SS	Glaxosmithkline	INTRAVENOUS	3MG Per day	0 DAY
	Depressed Level Of Consciousness		Decadron	SS	Glaxosmithkline	INTRAVENOUS	8MG Per day	0 DAY
	Face Oedema		Lactec	C		INTRAVENOUS	100ML Per day	0 DAY
	Hypoaesthesia		Isotonic Sodium Chloride	C	Glaxosmithkline	INTRAVENOUS	100ML Per day	1 DAY
	Hypotension							
	Nausea							
	Pallor							
	Pulse Pressure Decreased							
	Vomiting							

Date: 12/01/04 **ISR Number:** 4515198-4 **Report Type:** Expedited (15-Day) **Company Report#:** JP-GLAXOSMITHKLINE-B0349721A **Age:** 51 YR **Gender:** Female **I/FU:** F

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Other	Anaphylactic Shock		Zantac	PS	Glaxosmithkline	INTRAVENOUS	50MG Per day	1 DAY
	Cold Sweat		Zofran	SS	Glaxosmithkline	INTRAVENOUS	3MG Per day	1 DAY
	Feeling Abnormal		Kytril	SS	Glaxosmithkline	INTRAVENOUS	3MG Single dose	1 DAY
	Hyperhidrosis		Vena	C	Glaxosmithkline	ORAL	3TAB Weekly	1 DAY
	Hypotension		Decadron	C	Glaxosmithkline	INTRAVENOUS	8MG Per day	1 DAY
	Nausea		Isotonic Sodium Chloride	C	Glaxosmithkline	INTRAVENOUS		
	Vomiting		Taxol	C	Glaxosmithkline	INTRAVENOUS		

Date: 12/10/04 **ISR Number:** 4523558-0 **Report Type:** Expedited (15-Day) **Company Report#:** US-ROCHE-388424 **Age:** 22 YR **Gender:** Female **I/FU:** I

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Life-Threatening	Cardiac Arrest		Kytril	PS	Roche	UNKNOWN		1 DAY

Date: 12/21/04 **ISR Number:** 4533383-2 **Report Type:** Expedited (15-Day) **Company Report#:** JP-BRISTOL-MYERS SQUIBB COMPANYY-12648861 **Age:** 10 YR **Gender:** Female **I/FU:** F

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Death	Body Temperature Decreased		Endoxan	PS	Bristol-Myers Squibb Company	INTRAVENOUS		1091 DAY
	Pericardial Effusion		Uromitexan	SS	Bristol-Myers Squibb Company	INTRAVENOUS		1091 DAY
	Pleural Effusion		Oncovin	SS		INTRAVENOUS		1091 DAY
	Pleural Fibrosis		Randa	SS		INTRAVENOUS		1091 DAY
	Pulmonary Fibrosis		Kytril	SS		INTRAVENOUS		1091 DAY
	Shock							

Date: 12/29/04 **ISR Number:** 4540944-3 **Report Type:** Expedited (15-Day) **Company Report#:** FR-GLAXOSMITHKLINE-B0362704A **Age:** 49 YR **Gender:** Female **I/FU:** I

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Hospitalization - Initial or Prolonged	Abdominal Pain		Azantac	PS	Glaxosmithkline	INTRAVENOUS	25MG per day	1 DAY
	Dyspepsia		Taxol	SS		INTRAVENOUS	120MG per day	1 DAY
	Glossodynia		Paraplatine	SS		INTRAVENOUS	150MG per day	1 DAY
	Tachycardia		Kytril	SS	Glaxosmithkline	INTRAVENOUS	3MG per day	1 DAY
			Polaramine	SS		INTRAMUSCULAR	5MG per day	1 DAY
			Solumedrol	SS		INTRAVENOUS	20MG per day	1 DAY

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 01/10/05 **ISR Number:** 4556013-2 **Report Type:** Periodic **Company Report#:** A03200403494 **Gender:** Female **I/FU:** 1

Outcome: Other
PT: Convulsion
Report Source: Health Professional
Product: Demerol
 Kytril - Granisetron
 - Unit Dose
Role: PS
Manufacturer:
Route:
Dose: UNIT DOSE
Duration:

Date: 01/14/05 **ISR Number:** 4552398-1 **Report Type:** Periodic **Company Report#:** US-GLAXOSMITHKLINE-A0508350A **Gender:** Female **I/FU:** 1

Outcome: Drug Interaction
PT:
Report Source:
Product: Imitrex
 Kytril
Role: PS
Manufacturer: Glaxosmithkline
Route: UNKNOWN
Dose:
Duration:

Date: 01/14/05 **ISR Number:** 4553018-2 **Report Type:** Expedited (15-Day) **Company Report#:** FR-BRISTOL-MYERS SQUIBB COMPANY-12814232 **Gender:** Female **I/FU:** 1

Outcome: Hospitalization - Initial or Prolonged
PT: Abdominal Pain
 Abdominal Pain Upper
 Drug Tolerance Decreased
 Dyspepsia
 Glossodynia
 Tachycardia
Report Source:
Product: Taxol
 Carboplatin
Role: PS
Manufacturer: Bristol-Myers Squibb Company
Route: INTRAVENOUS
Dose: 6 mg/ml concentrate solution for infusion
Duration: 1 DAY
Report Source:
Product:
 Kytril
 Polaramine
 Solu-Medrol
 Azantac
Role: SS
Manufacturer: Bristol-Myers Squibb Company
Route: INTRAVENOUS
Dose: 50 mg solution for perfusion
Duration: 1 DAY
Report Source:
Product:
 Polaramine
 Solu-Medrol
 Azantac
Role: SS
Manufacturer:
Route: INTRAVENOUS
Dose:
Duration: 1 DAY

Date: 01/18/05 **ISR Number:** 4555843-0 **Report Type:** Periodic **Company Report#:** A001-002-006183 **Gender:** Male **I/FU:** 1

Outcome: Hospitalization - Initial or Prolonged
 Intervention to Prevent Permanent Impairment/Damage
PT: Convulsion
 Mental Status Changes
Report Source: Health Professional
Product: Aricept (Donepezil Hydrochloride)
 Aranesp (Darbepoetin Alfa)
 Marinol (Dronabinol)
 Kytril (Granisetron)
 Oxycotin (Oxycodone Hydrochloride)
 Neurontin (Gabapentin)
 Ambien (Zolpidem Tartrate)
 Oxy Ir (Oxycodone Hydrochloride)
 Morphine Sulfate
 Chlorpromazine
 Prograf (Tacrolimus)
 Protonix
Role: PS
Manufacturer:
Route: ORAL
Dose: ORAL
Duration:
Report Source:
Product:
 Oxycotin (Oxycodone Hydrochloride)
 Neurontin (Gabapentin)
 Ambien (Zolpidem Tartrate)
 Oxy Ir (Oxycodone Hydrochloride)
 Morphine Sulfate
 Chlorpromazine
 Prograf (Tacrolimus)
 Protonix
Role: SS
Manufacturer:
Route: SUBCUTANEOUS
Dose: 200 MCG, SUBCUTANEOUS
Duration:
Report Source:
Product:
 Oxycotin (Oxycodone Hydrochloride)
 Neurontin (Gabapentin)
 Ambien (Zolpidem Tartrate)
 Oxy Ir (Oxycodone Hydrochloride)
 Morphine Sulfate
 Chlorpromazine
 Prograf (Tacrolimus)
 Protonix
Role: SS
Manufacturer:
Route: INTRAVENOUS
Dose: INTRAVENOUS (NOT)
Duration:
Report Source:
Product:
 Oxycotin (Oxycodone Hydrochloride)
 Neurontin (Gabapentin)
 Ambien (Zolpidem Tartrate)
 Oxy Ir (Oxycodone Hydrochloride)
 Morphine Sulfate
 Chlorpromazine
 Prograf (Tacrolimus)
 Protonix
Role: SS
Manufacturer:
Route: INTRAVENOUS
Dose: 20 MG, 1 IN 12 HR
Duration:
Report Source:
Product:
 Oxycotin (Oxycodone Hydrochloride)
 Neurontin (Gabapentin)
 Ambien (Zolpidem Tartrate)
 Oxy Ir (Oxycodone Hydrochloride)
 Morphine Sulfate
 Chlorpromazine
 Prograf (Tacrolimus)
 Protonix
Role: SS
Manufacturer:
Route: INTRAVENOUS
Dose: 5 MG, 1 IN 4 HR
Duration:

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

(Pantoprazole) C
 Prandin C
 (Repaglinide) C
 Zolofl (Sertraline) C
 Hydrochloride) C
 Glipizide C
 Procardia C
 (Nifedipine) C
 Magnesium C
 Levaquin C
 (Levofloxacin) C
 Pentamidine C
 Peri-Colace C
 Dulcolax (Bisacodyl) C
 Baby Aspirin C
 (Acetylsalicylic C
 Acid) C
 Dexamethasone C
 Adriamycin C
 Cisplatinum C
 Senokot (Senna C
 Fruit) C
 Inderal (Propranolol C
 Hydrochloride) C
 Multivitamins C
 Insulin C
 Aldactone C
 (Spironolactone) C
 Megace (Megestrol C
 Acetate) C

Date: 01/24/05 ISR Number: 4559274-9 Report Type: Expedited (15-Day) Company Report#: FR-ROCHE-392640

Outcome Life-Threatening	PT Anoxia Chills Cough Cyanosis Dyspnoea General Physical Health Deterioration Hyperhidrosis Hypoxia Lymphangitis Pyrexia Tachypnoea	Report Source	Product Kytril Gemzar	Role PS SS	Manufacturer Roche	Route INTRAVENOUS INTRAVENOUS	Dose	Duration 1 DAY 70 DAY	Gender: Male	IFU: I
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Date: 01/25/05 ISR Number: 4563090-1 Report Type: Expedited (15-Day) Company Report#: 2005015505

Outcome Hospitalization - Initial or Prolonged	PT Abdominal Pain Burning Sensation Dyspepsia Tachycardia	Report Source Foreign Health Professional	Product Solu-Medrol (Methylprednisolone Sodium Succinate)	Role PS	Manufacturer	Route INTRAVENOUS	Dose 20 MG (20 MG, 1 IN 1 D), INTRAVENOUS	Duration	Gender: Female	IFU: I
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**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Maleate)	SS	INTRAMUSCULAR 5 MG (5 MG, 1 IN 1 D), INTRAMUSCULAR
Clitaxel (Pacitaxel)	SS	INTRAVENOUS 120 MG (120 MG, 1 IN 1 D), INTRAVENOUS
Ranitidine (Ranitidine Hydrochloride)	SS	INTRAVENOUS 25 MG (25 MG, 1 IN 1 D), INTRAVENOUS
Carboplatin (Caraboplatin)	SS	INTRAVENOUS 150 MG (150 MG, 1 IN 1 D), INTRAVNEOUS
Eumetic (Granisetron Hydrochloride)	SS	INTRAVENOUS 3 MG (3 MG, 1 IN 1 D), INTRAVENOS

Date: 01/28/05 **ISR Number:** 4563370-X **Report Type:** Periodic
Company Report#: US-GLAXOSMITHKLINE-A0501961A **Age:** 49 YR **Gender:** Female **I/FU:** 1

<u>Outcome</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
PT Abdominal Pain	Wellbutrin	Wellbutrin	PS	Glaxosmithkline	ORAL	100MG Twice per day	12 YR
Drug Interaction	Percocet	Percocet	SS		UNKNOWN		
Ear Congestion	Decadron	Decadron	SS		UNKNOWN		
Insomnia	Kytril	Kytril	SS	Glaxosmithkline	UNKNOWN		
Nausea	Compazine	Compazine	SS	Glaxosmithkline	UNKNOWN		
Pharyngolaryngeal Pain	Ativan	Ativan	SS		UNKNOWN		
Tinnitus	Benadryl	Benadryl	SS	Glaxosmithkline			
Tremor							
Vomiting							
White Blood Cell Count Decreased							

Date: 02/10/05 **ISR Number:** 4577057-0 **Report Type:** Expedited (15-Day)
Company Report#: FR-SANOFI-SYNTHELABO-A02200500273 **Age:** 76 YR **Gender:** Male **I/FU:** 1

<u>Outcome</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Life-Threatening		Eloxatine	PS		INTRAVENOUS		1 DAY
Renal Failure Acute		Kytril	SS		INTRAVENOUS		
		Elivorine	SS		INTRAVENOUS		
		Fluorouracil Dakota Pharm	SS		INTRAVENOUS		

Date: 02/15/05 **ISR Number:** 4582840-1 **Report Type:** Expedited (15-Day)
Company Report#: FR-ROCHE-394646 **Age:** 50 YR **Gender:** Male **I/FU:** 1

<u>Outcome</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Life-Threatening		Kytril	PS	Rochte	INTRAVENOUS	DOSE REPORTED AS 1 DOSE/CYCLE	
Angioneurotic Oedema							
Myocardial Ischaemia Shock							

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 02/15/05 ISR Number: 4582851-6 Report Type: Expedited (15-Day) Company Report#: FR-ROCHE-394891

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Life-Threatening	Renal Failure Acute		Kytril Fluorouracil Eloxatine Elvornine	PS SS SS SS	Roche	INTRAVENOUS INTRAVENOUS INTRAVENOUS INTRAVENOUS		I/FU: 1

Date: 02/23/05 ISR Number: 4589654-7 Report Type: Expedited (15-Day) Company Report#: FR-ROCHE-391539

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Hospitalization - Initial or Prolonged	Anaphylactic Shock Hypersensitivity Hypotension Loss Of Consciousness Myocardial Ischaemia		Kytril Kytril	PS SS	Roche Roche	INTRAVENOUS INTRAVENOUS		1 DAY

Date: 02/25/05 ISR Number: 4591318-0 Report Type: Expedited (15-Day) Company Report#: FR-ROCHE-395684

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Hospitalization - Initial or Prolonged	Dyspnoea Haemodialysis Hypertension Oedema Peripheral Renal Failure Acute Respiratory Distress		Kytril Gemzar Methylprednisolone	PS SS SS	Roche	INTRAVENOUS INTRAVENOUS INTRAVENOUS		223 DAY 223 DAY 223 DAY

Date: 02/25/05 ISR Number: 4591322-2 Report Type: Expedited (15-Day) Company Report#: JP-ROCHE-395943

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Other	Drug Interaction Vomiting		Kytril Paxil Cisplatin	PS SS SS	Roche	INTRAVENOUS DRIP ORAL INTRAVENOUS DRIP		

Date: 02/25/05 ISR Number: 4596128-6 Report Type: Expedited (15-Day) Company Report#: A001-OCT-3720

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Hospitalization - Initial or Prolonged	Contusion Face Injury Fall Mental Status Changes	Study Health Professional	Aricept (Donepezil) Hydrochloride Marinol (Dronabinol) Kytril (Granisetron) Oxycontin (Oxycodone) Hydrochloride Neurontin (Gabapentin) Ambien (Zolpidem) Tartrate Aranesp (Darbepoetin Alfa) Morphine Sulfate	PS SS SS SS SS SS SS SS SS C		INTRAVENOUS	1 IN 1 D, INTRAVENOUS 1 IN 12 HR	

FDA - Adverse Event Reporting System (AERS)

Freedom Of Information (FOI) Report

(Morphine Sulfate) C
 Chlorpromazine C
 Oxy Ir (Oxycodone) C
 Hydrochloride) C
 Prograf (Tacrolimus) C
 Protonix C
 (Pantoprazole) C
 Prandin C
 (Repaglinide) C
 Zolof (Sertraline) C
 Hydrochloride) C
 Glipizide C
 (Glipizide) C
 Procardia C
 (Nifedipine) C
 Magnesium C
 (Magnesium) C
 Levaquin C
 (Levofloxacin) C
 Pentamidine C
 (Pentamidine) C
 Pericolace C
 (Peri-Colace) C
 Dulcolax Suppository C
 (Bisacodyl) C
 Baby Aspirin C
 (Acetylsalicylic Acid) C
 Lasix (Furosemide) C
 Leukine C
 (Sargramostim) C
 Dexamethasone C
 (Dexamethasone) C
 Adriamycin C
 (Doxorubicin) C
 Cisplatinum C
 (Cisplatin) C
 Senekot (Senna Fruit) C
 Inderal (Propranolol Hydrochloride) C
 Multivitamins C
 (Multivitamins) C
 Insulin (Insulin) C
 Aldactone C
 (Spironolactone) C
 Megace (Megestrol Acetate) C

Date: 02/28/05 ISR Number: 4592757-4 Report Type: Expedited (15-Day) Company Report#: US-SOLVAY-00204002739

Age: 18935 DY Gender: Male IFU: F

Outcome
 Death
 Hospitalization -
 initial or Prolonged
 PT
 Anaemia
 Confusional State
 Convulsion
 Face Injury
 Fall
 Hepatic Neoplasm
 Malignant

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Mental Status Changes	Marinol	PS		ORAL	Daily Dose: unk.	
Nausea	Aranesp	SS		SUBCUTANEOUS	Daily Dose: 200 ug.	
Pancytopenia	Oxycontin	SS		ORAL	Daily Dose: 40 mg.	31 DAY
Vomiting	Aricept	SS		ORAL	Daily Dose: unk.	
	Neurontin	SS		ORAL	Daily Dose: unk.	
	Kytril	SS		INTRAVENOUS	Daily Dose: 1 mg.	1 DAY
	Morphine Sulfate	C		UNKNOWN	Daily Dose: 15 mg. Frequency:As needed	55 DAY
	Zoloft	C		ORAL	Daily Dose: 100 mg.	
	Procardia	C		ORAL	Daily Dose: 120 mg.	
	Dexamethasone	C		INTRAVENOUS	Daily Dose: 10 mg. Frequency:Onc e	1 DAY
	Leukine	C		SUBCUTANEOUS	Daily Dose: 500 mg.	7 DAY
	Lasix	C		INTRAVENOUS	Daily Dose: 40 mg. Frequency:Onc e	1 DAY
	Asa	C		ORAL	Daily Dose: 81 mg.	
	Dulcolax	C		RECTAL	Daily Dose: 5 mg. Frequency:As needed	
	Pericolace	C		UNKNOWN	Daily Dose: 2 DF.	
	Pentamidine	C		RESPIRATORY (INHALATION)	Daily Dose: unk.	
	Levaquin	C		ORAL	Daily Dose: 500 mg.	8 DAY
	Magnesium	C		ORAL	Daily Dose: 800 mg.	
	Darbepoetin Alfa	C		SUBCUTANEOUS	Daily dose: unknown	87 DAY
	Megace	C		ORAL	Daily Dose: unk.	
	Aldactone	C		ORAL	Daily Dose: unk.	
	Insulin	C		UNKNOWN	Daily Dose: unk.	
	Multivitamins	C		UNKNOWN	Daily Dose: unk.	
	Inderal	C		ORAL	Daily Dose: unk.	
	Senecot	C		UNKNOWN	Daily Dose: unk.	

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>	<u>Gender</u>	<u>I/FU</u>
unk										
Daily Dose:										
unk										
Daily Dose:										
unk										
Daily Dose:										
500 mg										
Daily Dose:										
0.1 mg										
Daily Dose:										
40 mg										
Daily Dose: 8										
mg										
Daily Dose:										
25 mg										
Frequency:As										
needed										
Daily Dose: 4										
mg										
Daily Dose:										
30 mg										

Date: 02/28/05 **ISR Number:** 4592838-5 **Report Type:** Expedited (15-Day) **Company Report#:** US-ROCHE-388424 **Age:** 22 YR **Gender:** Female **I/FU:** F

Outcome: Life-Threatening **PT:** Bradycardia
Cardiac Arrest
Ventricular Extrasystoles
Ventricular Fibrillation

<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Health Professional	Kytril	PS	Roche	INTRAVENOUS		1 DAY

Date: 02/28/05 **ISR Number:** 4610652-9 **Report Type:** Periodic **Company Report#:** 374438 **Age:** 64 YR **Gender:** Female **I/FU:** I

Outcome: Death **PT:** Lung Neoplasm Malignant

<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Health Professional	Kytril (Granisetron)	PS		INTRAVENOUS	INTRAVENOUS	

Date: 03/11/05 **ISR Number:** 4605874-7 **Report Type:** Expedited (15-Day) **Company Report#:** PHBS2005JP02931 **Age:** 68 YR **Gender:** Male **I/FU:** F

Outcome: Death **PT:** Acute Leukaemia
Bradycardia
Cardio-Respiratory Arrest
Electrocardiogram Qrs
Complex Prolonged
Fatigue
Haematemesis
Nausea
Oedema Peripheral
Urine Output Decreased
Weight Increased

<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
	Glivec	PS	Novartis Sector: Pharma	ORAL	400 mg/day	8640 MIN
	Prednisolone	SS		ORAL	30 mg/d	17280 MIN
	Kytril	SS		ORAL	1 DF/d	17280 MIN
	Oncovin	SS			2 mg/d	1440 MIN
	Daumomycin	SS			35 mg/d	2880 MIN
	Daumomycin	SS			35 mg/d	2880 MIN
	Sunrabin	SS			250 mg/d	15840 MIN
	Leukerin	SS		ORAL	100 mg/d	17280 MIN
	Micardis	SS		ORAL	40 mg/d	10080 MIN
	Separmit - Slow Release	SS		ORAL	10 mg/d	11520 MIN
	Itorol	SS		ORAL	40 mg/d	
	Novorapid	SS		SUBCUTANEOUS		
	Novorapid	SS		SUBCUTANEOUS		
	Baktar	SS		ORAL	4 DF/d	1440 MIN
	Baktar	SS		ORAL	4 DF/d	1440 MIN

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Magnesium Oxide SS
 Gran SS
 Decadron SS
 Marzulene S SS
 Acecol SS
 Acecol SS
 Salobel SS
 Itrizole SS
 Pyrimazin SS
 Myslee SS
 Ornepral SS
 Adona (Ac-17) SS
 Hamp SS
 Catabon SS
 Albumin Human SS
 Lasix SS
 Hyper-Cvad SS

ORAL
 SUBCUTANEOUS
 ORAL
 ORAL
 ORAL
 ORAL
 ORAL
 ORAL
 ORAL
 INTRAVENOUS
 INTRAVENOUS
 INTRAVENOUS
 INTRAVENOUS

2 g/d
 150 ug/d
 40 mg/d
 2 g/d
 2 mg/d
 4 mg/d
 100 mg/d
 200 mg/d
 1.2 g/d
 40 mg/d
 100 mg/d
 UNK, UNK
 72 ml/d
 2.5-5 g/d
 20-80 mg/d

8640 MIN
 7200 MIN
 5760 MIN
 27360 MIN
 7200 MIN
 23040 MIN
 23040 MIN
 24480 MIN
 12960 MIN
 31680 MIN
 20160 MIN

Date: 03/11/05 ISR Number: 4606031-0 Report Type: Expedited (15-Day) Company Report#: FR-ROCHE-397179

Age: 51 YR Gender: Female I/FU: 1

Outcome
 Hospitalization -
 Initial or Prolonged

PT
 Aplasia
 Lymphangioliomyomatosis
 Myeloid Leukaemia

Product	Role	Manufacturer	Route	Dose	Duration
Kytril	PS	Roche	INTRAVENOUS	DOSAGE REGIMEN REPORTED AS 6 DOSES TOTAL	102 DAY
Methylprednisolone	SS		INTRAVENOUS	DOSAGE REGIMEN REPORTED AS 6 DOSES TOTAL	102 DAY
Cardioxane	SS		INTRAVENOUS	DOSAGE REGIMEN REPORTED AS 6 DOSES TOTAL	102 DAY
Primperan	SS		INTRAVENOUS	DOSAGE REGIMEN REPORTED AS 6 DOSES TOTAL	102 DAY
Endoxan	SS		INTRAVENOUS	DOSAGE REGIMEN REPORTED AS 6 DOSES TOTAL	102 DAY
Unknown Study Drug	SS		INTRAVENOUS	DOSAGE REGIMEN REPORTED AS 6 DOSES TOTAL DRUG NAME REPORTED AS EPIADRIAMYCIN E. DOSAGE REGIMEN	102 DAY

Date: 03/18/05 ISR Number: 4612576-X Report Type: Expedited (15-Day) Company Report#: DE-BRISTOL-MYERS SQUIBB COMPANY-12891685

Age: 78 YR Gender: Male I/FU: 1

Outcome
 Hospitalization -
 Initial or Prolonged

PT
 Constipation
 Diarrhoea
 Proctalgia
 Proctitis

Product	Role	Manufacturer	Route	Dose	Duration
Cisplatin	PS	Bristol-Myers Squibb Company	PARENTERAL PARENTERAL INTRAVENOUS		2 DAY
Pemetrexed Disodium	SS				
Kevaryl	SS				
Vitamin B12	C				
Lafol	C				
Dexamethasone	C				

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Enalapril
Glucophage
L-Thyroxine
C
C
C
Bristol-Myers Squibb
Company
Dose: 100 ug

Date: 03/29/05 ISR Number: 4621873-3 Report Type: Expedited (15-Day) Company Report#: TR-SANOFL-SYNTHELABO-A01200501677 Age: 56 YR Gender: Male I/F/U: I

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Other	Grand Mal Convulsion		Oxaliplatin	PS		INTRAVENOUS		1 DAY
			Fluorouracil	SS		INTRAVENOUS		2 DAY
			Granisetron	SS		INTRAVENOUS		1 DAY
			Folic Acid	C		INTRAVENOUS		

Date: 04/04/05 ISR Number: 4626132-0 Report Type: Expedited (15-Day) Company Report#: PHBS2005JP02931 Age: 68 YR Gender: Male I/F/U: F

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration
Death	Acute Leukaemia		Glivec	PS	Novartis Sector: Pharma	ORAL	400 mg/day	8640 MIN
	Aspiration		Prednisolone	SS		ORAL	30 mg/d	17280 MIN
	Blood Pressure Systolic Increased		Kytril	SS			1 DF/d	17280 MIN
	Bradycardia		Oncovin	SS			2 mg/d	1440 MIN
	Cardio-Respiratory Arrest		Daunomycin	SS			35 mg/d	2880 MIN
	Cardiovascular Disorder		Daunomycin	SS			35 mg/d	2880 MIN
	Electrocardiogram Qrs Complex Prolonged		Sunrabin	SS			250 mg/d	15840 MIN
	Fall		Leukerin	SS		ORAL	100 mg/d	17280 MIN
	Fatigue		Micardis	SS		ORAL	40 mg/d	10080 MIN
	Gastrointestinal Haemorrhage		Sepamit - Slow Release	SS		ORAL	10 mg/d	11520 MIN
	Haematemesis		Itorol	SS		ORAL	40 mg/d	
	Head Injury		Novorapid	SS		SUBCUTANEOUS		
	Nausea		Novorapid	SS		SUBCUTANEOUS		
	Oedema Peripheral		Baktar	SS		ORAL	4 DF/d	1440 MIN
	Platelet Count Decreased		Baktar	SS		ORAL	4 DF/d	1440 MIN
	Pulmonary Haemorrhage		Magnesium Oxide	SS		ORAL	2 g/d	8640 MIN
	Pulse Absent		Gran	SS		SUBCUTANEOUS	150 ug/d	7200 MIN
	Respiratory Rate Decreased		Decadron	SS		ORAL	40 mg/d	5760 MIN
	Therapy Non-Responder		Marzulene S	SS		ORAL	2 g/d	27360 MIN
	Unresponsive To Verbal Stimuli		Accel	SS		ORAL	2 mg/d	7200 MIN
	Urinary Incontinence		Accel	SS		ORAL	4 mg/d	23040 MIN
	Urine Output Decreased		Salobel	SS		ORAL	100 mg/d	23040 MIN
	Weight Decreased		Irizole	SS		ORAL	200 mg/d	24480 MIN
			Pyrnamin	SS		ORAL	100 mg/d	12960 MIN
			Myslec	SS		ORAL	1.2 g/d	31680 MIN
			Omepral	SS			40 mg/d	
			Adona (Ac-17)	SS			100 mg/d	
			Hanp	SS		INTRAVENOUS	UNK, UNK	
			Catabon	SS		INTRAVENOUS	72 ml/d	
			Albumin Human	SS		INTRAVENOUS	2.5-5 g/d	
			Lasix	SS		INTRAVENOUS	20-80 mg/d	
			Hyper-Cvad	SS				20160 MIN

**FDA - Adverse Event Reporting System (AERS)
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Date: 04/08/05 **ISR Number:** 4630817-X **Report Type:** Expedited (15-Day) **Company Report#:** FR-ROCHE-400863

Age: 75 YR **Gender:** Male **I/FU:** 1

Outcome: Other
PT: Rectal Haemorrhage
 Thrombocytopenia
Report Source:
Product: Kytril
 Solu-Medrol
 Fluorouracil
 Oxaliplatin
 Leucovorin
 Irinotecan
Role: PS
 SS
 C
 C
 C
Manufacturer: Roche
Dose:
Duration:

Date: 04/15/05 **ISR Number:** 4636424-7 **Report Type:** Expedited (15-Day) **Company Report#:** CA-ROCHE-400862

Age: 77 YR **Gender:** Female **I/FU:** 1

Outcome: Other
PT: Hepatic Failure
 Pleural Effusion
 Small Intestinal
 Obstruction
Report Source:
Product: Kytril
 Carboplatin
 Taxol
 Pariet
 Levothyroxine
Role: PS
 C
 C
 C
 C
Manufacturer: Roche
Dose:
Duration:

Date: 04/18/05 **ISR Number:** 4639296-X **Report Type:** Expedited (15-Day) **Company Report#:** USA-2004-0016457

Age: 51 YR **Gender:** Male **I/FU:** F

Outcome: Hospitalization - Initial or Prolonged
PT: Asthenia
 Blood Glucose Increased
 Blood Magnesium Decreased
 Blood Sodium Decreased
 Brain Oedema
 Confusional State
 Confusion
 Fall
 Fatigue
 Injury
 Mental Status Changes
 Nausea
 Pancytopenia
 Reticulocyte Count Increased
 Vomiting
Report Source: Health Professional Other
Product: Oxycotin Tablets
 (Oxycodone Hydrochloride) Cr Tablet
 Oxycotin Capsules 5 Mg
 (Oxycodone Hydrochloride,
 Oxycodone Hydrochloride)
 Aranesp
 (Darbepoetin)
 Kytril (Granisetron)
 Prograf (Tacrolimus)
 Protonix
 (Pantoprazole)
 Acetylsalicylic Acid
 (Acetylsalicylic Acid)
 Gabapentin
 (Gabapentin)
 Magnesium
 (Magnesium)
 Donepezil
 (Donepezil)
 Inderal
 (Propranolol Hydrochloride)
 Dronabinol
 (Dronabinol)
 Megace (Megestrol Acetate)
 Insulin (Insulin)
 Aldactone
 (Spironolactone)
Role: PS
 SS
 SS
 SS
 SS
 SS
 SS
 SS
 SS
 SS
 SS
 SS
 SS
 SS
 SS
Manufacturer:
Dose: 20 MG, Q12H
 5 MG, Q4H
 1 MG, INTRAVENOUS
 SEE IMAGE
 40 MG, DAILY
 81 MG, DAILY
 400 MG
Duration:
Route: INTRAVENOUS

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Ambien (Zolpidem Tartrate) SS
 Senokot (Sennoside A+B) C
 Chlorpromazine (Chlorpromazine) C
 Glipizide (Glipizide) C
 Procardia (Nifedipine) C
 Pentamidine (Pentamidine) C
 Peri-Colace (Sennoside A+B, Docusate Sodium) C
 Dulcolax (Bisacodyl) C
 Dexamethasone (Dexamethasone) C
 Cis-Platinum (Cisplatin) C
 Zolof (Sertraline Hydrochloride) C
 Leukine (Sargramostim) C
 Adriamycin (Doxorubicin) C

Date: 04/29/05 ISR Number: 4648319-3 Report Type: Expedited (15-Day) Company Report#: CA-ROCHE-401304

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	Gender	Age	YR
Other	Eye Pain Photophobia Vision Blurred		Kytril 5 Fu Stemetil Leucovorin	PS SS SS C	Roche	OTHER INTRAVENOUS ORAL INTRAVENOUS	ROUTE: IV/PO.	21 32 37 32	Male	45	DAY DAY DAY DAY

Date: 05/09/05 ISR Number: 4656163-6 Report Type: Expedited (15-Day) Company Report#: FR-ROCHE-403724

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	Gender	Age	YR
Hospitalization - Initial or Prolonged	Acute Myeloid Leukaemia Bone Marrow Depression		Kytril Cardioxane Endoxan Primperan Methylprednisolone 4'-Epiadriamycin	PS SS SS SS SS SS	Roche	INTRAVENOUS INTRAVENOUS UNKNOWN UNKNOWN UNKNOWN UNKNOWN		93 102 102 102 102	Female	51	DAY DAY DAY DAY DAY

Date: 05/10/05 ISR Number: 4657548-4 Report Type: Expedited (15-Day) Company Report#: JP-BRISTOL-MYERS SQUIBB COMPANY-12949327

Outcome	PT	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	Gender	Age	YR
Hospitalization - Initial or Prolonged	Dyspnoea Lung Disorder Pulmonary Oedema		Maxipime Gemzar Kytril Mucodyne Opso	PS SS SS C C	Bristol-Myers Squibb Company	INTRAVENOUS INTRAVENOUS INTRAVENOUS ORAL ORAL		4 1 1	Female	70	DAY DAY DAY

**FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report**

Date: 05/13/05 ISR Number: 4661752-9 Report Type: Expedited (15-Day) Company Report#: JP-ROCHE-404255

Outcome Hospitalization - Initial or Prolonged	PT Cardiomegaly Dyspnoea Lung Disorder Pulmonary Haemorrhage Pulmonary Oedema	Report Source	Product Kytril Gemzar Maxipime Mucodyne Morphine Hydrochloride	Role PS SS SS C C	Manufacturer Roche	Route INTRAVENOUS INTRAVENOUS INTRAVENOUS ORAL ORAL	Dose	Duration 4 DAY	Gender: Male	I/FU: 1
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Date: 05/23/05 ISR Number: 4669493-9 Report Type: Expedited (15-Day) Company Report#: JP-ROCHE-404255

Outcome Death Hospitalization - Initial or Prolonged	PT Disseminated Intravascular Coagulation Liver Disorder Lung Disorder Pulmonary Oedema Respiratory Failure	Report Source	Product Kytril Gemzar Maxipime Mucodyne Morphine Hydrochloride	Role PS SS SS C C	Manufacturer Roche	Route INTRAVENOUS INTRAVENOUS INTRAVENOUS ORAL ORAL	Dose FORM REPORTED AS ORAL FORMULATION.	Duration 1 DAY 1 DAY 4 DAY	Gender: Male	I/FU: F
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Date: 05/26/05 ISR Number: 4674526-X Report Type: Expedited (15-Day) Company Report#: JP-ROCHE-404255

Outcome Death Hospitalization - Initial or Prolonged	PT Cardiomegaly Disseminated Intravascular Coagulation Liver Disorder Lung Disorder Pulmonary Oedema Respiratory Failure	Report Source	Product Kytril Gemzar Maxipime Mucodyne Morphine Hydrochloride Picibanil	Role PS SS SS C C	Manufacturer Roche	Route INTRAVENOUS INTRAVENOUS INTRAVENOUS ORAL ORAL	Dose FORM REPORTED AS ORAL FORMULATION.	Duration 1 DAY 1 DAY 4 DAY	Gender: Male	I/FU: F
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Date: 05/31/05 ISR Number: 4677314-3 Report Type: Expedited (15-Day) Company Report#: 200511035DE

Outcome Hospitalization - Initial or Prolonged	PT Acute Stress Disorder	Report Source	Product Docetaxel Cyclophosphamid Adriamycin Fortecortin Kevalril Uromitexan	Role PS SS SS SS SS	Manufacturer Aventis Pharmaceuticals Inc.	Route	Dose	Duration	Gender: Female	I/FU: 1
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Date: 06/06/05 ISR Number: 4682446-X Report Type: Expedited (15-Day) Company Report#: US-ROCHE-380104

Outcome Hospitalization - Initial or Prolonged	PT Anaemia Convulsion Disease Progression Gastrointestinal	Report Source	Product	Role	Manufacturer	Route	Dose	Duration	Gender: Male	I/FU: F
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**FDA - Adverse Event Reporting System (AERS)
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<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Haemorrhage	Granisetron	PS	Roche	INTRAVENOUS		1 DAY
Haemolytic Anaemia	Hydrochloride	SS		SUBCUTANEOUS		87 DAY
Liver Transplant	Darbepoetin Alfa	SS		UNKNOWN		
Rejection	Dronabinol	SS		UNKNOWN		
Mental Status Changes	Oxycodone	SS		UNKNOWN		31 DAY
Metabolic Encephalopathy	Gabapentin	SS				
Nausea	Donepezil	SS				
Pancytopenia	Hydrochloride	SS		UNKNOWN		
Vomiting	Zolpidem Tartrate	SS		UNKNOWN		
	Morphine Sulfate	C				55 DAY
	Chlorpromazine	C				
	Oxyir	C				
	Tacrolimus	C				
	Pantoprazole	C				
	Prandin	C				
	Sertraline	C				
	Hydrochloride	C				
	Glipizide	C				
	Nifedipine	C				
	Magnesium	C				
	Levofloxacin	C				8 DAY
	Pentamidine	C				
	Pericolace	C				
	Bisacodyl	C				
	Acetylsalicylic Acid	C				
	Frusemide	C				1 DAY
	Sargamostim	C		SUBCUTANEOUS		6 DAY
	Dexamethasone	C		INTRAVENOUS		1 DAY
	Doxorubicin	C				
	Cisplatin	C				
	Senna Fruit	C				
	Propranolol	C				
	Multivitamins	C				
	Insulin	C				
	Spirolactone	C				
	Megestrol Acetate	C				

Date: 06/17/05 **ISR Number:** 4695051-6 **Report Type:** Expedited (15-Day) **Company Report#:** 081-9033-M0100001 **Age:** 74 YR **Gender:** Male **I/FU:** F

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>
Hospitalization - Initial or Prolonged	Arrioventricular Block Complete	Foreign Health Professional	Norvasc (Amlodipine)	PS		ORAL	5 MG (DAILY), ORAL	
	Blood Pressure Decreased		Diltiazem	SS		ORAL	200 MG (DAILY), ORAL	
	Bradycardia		Hydrochloride (Diltiazem Hydrochloride)	SS		ORAL	10 MG (DAILY), ORAL	
	Dizziness		Artist (Carvedilol)	SS		ORAL	15 MG (DAILY), ORAL	
	Malaise		Sigmat (Nicorandil)	SS		ORAL		
	Renal Impairment		Bayaspirin (Acetylsalicylic Acid)	SS		ORAL	100 MG (DAILY), ORAL	
			Fluorouracil					

**FDA - Adverse Event Reporting System (AERS)
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<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>	<u>I/FU:</u>
			(Fluorouracil)	SS		INTRAVENOUS	500 MG (DAILY), INTRAVENOUS		F
			Cisplatin (Cisplatin)	SS		INTRAVENOUS	10 MG (DAILY), INTRAVENOUS		F
			Granisetron (Granisetron Hydrochloride)	SS		INTRAVENOUS	3 MG (DAILY), INTRAVENOUS		F
			Ciprofloxacin (Ciprofloxacin Isosorbide Mononitrate)	SS					F
			(Isosorbide Mononitrate)	C					F
			Famotidine (Famotidine)	C					F
			Plauunotol (Plauunotol)	C					F

Date: 06/20/05 ISR Number: 4696103-7 Report Type: Expedited (15-Day) Company Report#: 200510266BYL

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>	<u>I/FU:</u>
Death	Acute Respiratory Failure Dyspnoea Lung Disorder	Foreign Health Professional Other	Ciproxan-I.V. 300 (Ciprofloxacin)	PS		INTRAVENOUS DRIP	300 MG, QD, INTRAVENOUS DRIP		F
			Maxipime (Cefepime Hydrochloride)	SS		INTRAVENOUS DRIP	2 G, TOTAL DAILY, INTRAVENOUS DRIP		F
			Gemzar (Gemcitabine Hydrochloride)	SS		INTRAVENOUS DRIP	1500 MG, QD, INTRAVENOUS DRIP		F
			Kytril (Granisetron)	SS		INTRAVENOUS DRIP	3 MG, QD, INTRAVENOUS DRIP		F
			Picitbanil	C					F

Date: 06/23/05 ISR Number: 4699642-8 Report Type: Expedited (15-Day) Company Report#: 200510266BYL

<u>Outcome</u>	<u>PT</u>	<u>Report Source</u>	<u>Product</u>	<u>Role</u>	<u>Manufacturer</u>	<u>Route</u>	<u>Dose</u>	<u>Duration</u>	<u>I/FU:</u>
Death	Acute Respiratory Failure Disseminated Intravascular Coagulation Lung Disorder	Foreign Health Professional Other	Ciproxan-I.V. 300 (Ciprofloxacin Lactate)	PS		INTRAVENOUS DRIP	300 MG, QD, INTRAVENOUS DRIP		F
			Maxipime (Cefepime Hydrochloride)	SS		INTRAVENOUS			F

**FDA - Adverse Event Reporting System (AERS)
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<p>Outcome Death</p>	<p>PT Acute Respiratory Failure Disseminated Intravascular Coagulation Dyspnoea Lung Disorder</p>	<p>Report Source Foreign Health Professional Other</p>	<p>Product Ciproxan-I.V. 300 (Ciprofloxacin Lactate)</p>	<p>Role PS</p>	<p>Manufacturer</p>	<p>Route INTRAVENOUS DRIP</p>	<p>Dose 300 MG, QD, INTRAVENOUS DRIP</p>	<p>Duration</p>
<p>Outcome Other</p>	<p>PT Grand Mal Convulsion</p>	<p>Report Source</p>	<p>Product Kytril Kytril</p>	<p>Role PS SS</p>	<p>Manufacturer Roche Roche</p>	<p>Route UNKNOWN UNKNOWN INTRAVENOUS INTRAVENOUS</p>	<p>Dose 1500 MG, QD, INTRAVENOUS DRIP 3 MG, QD, INTRAVENOUS DRIP</p>	<p>Duration 1 1 1 1</p>

Date: 06/30/05 **ISR Number:** 4704784-4 **Report Type:** Expedited (15-Day) **Company Report#:** 200510266BYL **Age:** 70 YR **Gender:** Male **I/FU:** F

Outcome
Death

PT
Acute Respiratory Failure
Disseminated
Intravascular Coagulation
Dyspnoea
Lung Disorder

Report Source
Foreign
Health
Professional
Other

Product
Ciproxan-I.V. 300
(Ciprofloxacin
Lactate)

Role
PS

Manufacturer

Route
INTRAVENOUS
DRIP

Dose
300 MG, QD,
INTRAVENOUS
DRIP

Duration

Date: 07/08/05 **ISR Number:** 4709923-7 **Report Type:** Expedited (15-Day) **Company Report#:** IE-ROCHE-407181 **Age:** 43 YR **Gender:** Female **I/FU:** F

Outcome
Hospitalization -
Initial or Prolonged

PT
Localised Infection
Parotid Gland Enlargement
Swelling Face

Report Source

Product
Kytril
Kytril
Dexamethasone
Doxorubicin
Cyclophosphamide

Role
PS
SS
C
C
C

Manufacturer
Roche
Roche

Route
UNKNOWN
UNKNOWN
INTRAVENOUS
INTRAVENOUS
INTRAVENOUS

Dose
1500 MG, QD,
INTRAVENOUS
DRIP
3 MG, QD,
INTRAVENOUS
DRIP

Duration
1
1
1
1

Date: 07/11/05 **ISR Number:** 4710514-2 **Report Type:** Expedited (15-Day) **Company Report#:** US-ROCHE-409123 **Age:** **Gender:** **I/FU:** I

Outcome
Other

PT
Grand Mal Convulsion

Report Source

Product
Kytril
Kytril

Role
PS
SS

Manufacturer
Roche
Roche

Route
UNKNOWN
UNKNOWN

Dose
UNKNOWN
UNKNOWN

Duration

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Freedom Of Information (FOI) Report**

Date: 07/15/05 ISR Number: 4715211-5 Report Type: Expedited (15-Day) Company Report#: IE-ROCHE-407181

Outcome Hospitalization - Initial or Prolonged	PT Sialoadenitis Swelling Face	Report Source	Product Kytril Kytril Dexamethasone Doxorubicin Cyclophosphamide	Role PS SS C C C	Manufacturer Roche Roche	Route ORAL ORAL INTRAVENOUS INTRAVENOUS INTRAVENOUS	Dose	Duration 1 1 1 1 1	IFU: F
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Date: 07/15/05 ISR Number: 4715230-9 Report Type: Expedited (15-Day) Company Report#: AU-ROCHE-409696

Outcome Other	PT Erythema Infusion Related Reaction Infusion Site Burning Injection Site Irritation Pruritus Urticaria	Report Source	Product Kytril	Role PS	Manufacturer Roche	Route INTRAVENOUS	Dose	Duration 1	IFU: I
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Date: 07/19/05 ISR Number: 4719234-1 Report Type: Direct Company Report#: CTU 253570

Outcome Hospitalization - Initial or Prolonged	PT Pain Of Skin Rash Skin Exfoliation	Report Source	Product Docetaxel (Taxotere) Kytril 1mg Decadron 20 Mg Iv Ambien Paxil Coreg Zyrtec Zestril	Role PS SS SS C C C C C C	Manufacturer	Route INTRAVENOUS INTRAVENOUS	Dose 180 MG IV Q 2 WEEKS 1MG 20 MG	Duration	IFU: I
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FDA - Adverse Event Reporting System (AERS)
Freedom Of Information (FOI) Report

Summary report for FOI selections:

Selection by inexact search of active ingredient: GRANISETRON %

Selection by inexact search of Tradename/Verbatim: KYTRIL %

Total number of reports: 475

From: 01-NOV-1997 To: Present