

## INITIAL INFORMATION

164025  
ORG → 20180807

- 7 MAY 2001

Page

Centre Number	Subject Number	Subject Initials	Other
111	██████████	██████████	██████████

## **SERIOUS ADVERSE EXPERIENCE (SAE)**

<b>Person Reporting SAE</b> (Please print clearly)	
<b>Serious Adverse Experience</b> (Please print clearly)	
<b>Eye Problems</b>	
<b>Onset Date and Time</b> <div style="display: flex; justify-content: space-around; align-items: center;"> <span>24</span> <span>APR</span> <span>2000</span> <span>NA</span> </div> <p>Day Month Yr 24hr:min</p>	
<b>End Date and Time</b> (if ongoing please leave blank)	
<b>Outcome</b> If subject died, please complete Form D	
<b>Experience Course</b>	
<b>Intensity (maximum)</b>	
<b>Action Taken with Respect to Investigational Drug</b>	
<b>Relationship to Investigational Drug</b>	
<b>Corrective Therapy</b> If 'Yes', record details in the Concomitant Medication section	
Was subject withdrawn due to this specific SAE?	
<p style="text-align: right;">→ Specify reason(s) for considering this a serious AE. Mark all that apply.</p> <p>[1] <input type="checkbox"/> fatal  [2] <input type="checkbox"/> life threatening  [3] <input type="checkbox"/> disabling/incapacitating  [4] <input type="checkbox"/> results in hospitalisation (excluding elective surgery or routine clinical procedures)  [5] <input type="checkbox"/> hospitalisation prolonged  [6] <input type="checkbox"/> congenital abnormality  [7] <input type="checkbox"/> cancer  [8] <input type="checkbox"/> overdose  [9] <input checked="" type="checkbox"/> Investigator considers serious or a significant hazard, contraindication, side effect or precaution</p>	
Did the SAE abate? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If study medication was interrupted, stopped or dose reduced: Was study medication reintroduced (or dose increased)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If yes, did SAE recur? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<p style="text-align: right;">→ Assessment</p> <p>The SAE is probably associated with:</p> <p><input type="checkbox"/> Protocol design or procedures (but not to study drug)</p> <p>Please specify _____</p>	
<p><input type="checkbox"/> Another condition (eg, condition under study, intercurrent illness)</p> <p>Please specify _____</p> <p><input type="checkbox"/> Another drug</p> <p>Please specify _____</p>	

PRE-REG. Q.

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## NON-ADJECTIVE THAT

02/05 1808 [TICK ON WED 22:55 TX/RX ON 08/05]

## INITIAL INFORMATION

7 MAY 2001

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Centre Number	Subject Number	Subject Initials	
[REDACTED]	[REDACTED]	[REDACTED]	

72886

## SERIOUS ADVERSE EXPERIENCE (SAE) (cont)

## Relevant Laboratory Data

Please provide relevant abnormal laboratory data below

Test	Date	Value	Units	Normal Range
	[REDACTED] Day Month Yr			
	[REDACTED] Day Month Yr			
	[REDACTED] Day Month Yr			
	[REDACTED] Day Month Yr			

Remarks (Please provide a brief narrative description of the SAE, attaching extra pages eg. hospital discharge summary if necessary)

- ① Soldier saw 'edges of square slightly blurred' on Amsler test but unable to be fully assessed due to dilated pupils. Normal macular.
- ② Mild epithelial wharf deposits
- ③ Pre deployment vision screened as 6/6, 6/6 but change at ophthalmologist to 6/4, 6/4. Post deployment screening acuity 6/6, 6/6.

VISION NORMALPOSS

If applicable, was randomisation code broken at investigational site?

 No  Yes

Randomisation / Study Medication Number: [REDACTED]

Investigator's Signature: [REDACTED]

(confirming that the above data are accurate and complete)

Date

01 MAY 01  
Day Month Year

Please PRINT Name: [REDACTED]

Please PRINT Name: [REDACTED]

**FAX**

- 7 MAY 2001



GlaxoSmithKline

**To** ADRAC

SmithKline Beecham (Australia)

Pty Ltd

ABN 73 008 399 415

300 Frankston Road

Private Mail Bag 34

Dandenong Vic 3175

Australia

**Company**

**Fax** 02 6232 8392

Tel: 613 9213 4444

Fax 613 9706 5883

[www.gsk.com](http://www.gsk.com)

**From** [REDACTED]

**Tel** [REDACTED]

**E-mail**

**Date** 07-May-2001 **Pages including cover** 12

**CC**

**Subject** Clinical Trial Serious Adverse Event (local ID#

2806 to 2810)

Dear Sir / Madam

The attached fax contains five cases for reporting to you in this investigator driven study.

**Study:** 252263/033

**Study Title:** A randomised, double-blind, comparative study to evaluate the safety, tolerability and effectiveness of tafenoquine and mefloquine for the prophylaxis of malaria in non-immune Australian soldiers deployed to East Timor.

**Study Drug:** Tafenoquine, This Study has been unblinded

**Relationship to study Drug (causality):** Suspected

*CF*  
*POSS*

Please note full documentation of the Safety Report has been sent to the TGA under separate cover. To follow as an attachment is a summary of the Safety Report as background information.

Should you have any enquires regarding this case, please do not hesitate to contact me on [REDACTED] or directly on [REDACTED]

Yours sincerely

- 7 MAY 2001

**CONFIDENTIAL**

**Letter to the Regulatory Authorities**

**TO WHOM IT MAY CONCERN**

Dear Sirs

**Summary**

The purpose of this Safety Report is to inform Regulatory Agencies, Ethics Committees and Investigators of preliminary safety findings related to the monitoring for the effects of phospholipidosis in a Phase III Tafenoquine clinical study.

These data are from a subset of subjects (n = 33/99) in a Phase III study (Study 252263/033) investigating the safety, tolerability and effectiveness of tafenoquine in the prophylaxis of malaria in non-immune Australian soldiers deployed to East Timor.

Ophthalmological (corneal examination, visual acuity, visual field) and lung function testing (diffusing capacity of carbon monoxide – DLCO) data are presented on the first 33 soldiers within this subset, 26 of whom were receiving tafenoquine and 7 of whom were receiving mefloquine. After 6 months weekly dosing corneal changes (a vortex keratopathy) have been seen in 25 of 26 tafenoquine subjects, but in none of the 7 mefloquine subjects. Amsler Grid examinations suggest mild visual field changes in 4 tafenoquine subjects, but not mefloquine subjects. Minor visual acuity changes are reported across both treatment groups. All examinations were normal at baseline.

The changes considered to be clinically significant are the 4 tafenoquine subjects with Amsler Grid changes (subjects 17, 18, 22, 24 in Appendix B), and single tafenoquine subject (subject 14) with more central corneal changes in a Lasik-corrected eye and a reduction in visual acuity. These have been reported as SAEs by the Investigator.

Similar corneal changes (vortex keratopathy) have been observed with other cationic amphiphilic agents. However given the requirement to establish the reversibility of these changes off study drug, and more fully understand the associated visual field and visual acuity changes, GlaxoSmithKline have voluntarily suspended all tafenoquine dosing across both the adult and paediatric programmes.

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ORIG→EDG 18/03

## INITIAL INFORMATION

Centre Number	Subject Number	Subject Initials	- 7 MAY 2001	Page
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]

## SERIOUS ADVERSE EXPERIENCE (SAE)

Person Reporting SAE (Please print clearly)				
Serious Adverse Experience (Please print clearly)		Eye Problems		
Onset Date and Time		24 APR 00	N/A	Specify reason(s) for considering this a serious AE. Mark all that apply.
End Date and Time (If ongoing please leave blank)		Day Month Yr	24hr:min	[1] <input type="checkbox"/> fatal
Outcome If subject died, please complete Form D		Resolved	<input checked="" type="checkbox"/>	[2] <input type="checkbox"/> life threatening
		Ongoing	<input checked="" type="checkbox"/>	[3] <input type="checkbox"/> disabling/incapacitating
		Died	<input type="checkbox"/>	[4] <input type="checkbox"/> results in hospitalisation (excluding elective surgery or routine clinical procedures)
Experience Course		Intermittent → No. of episodes	<input type="checkbox"/>	[5] <input type="checkbox"/> hospitalisation prolonged
		Constant	<input checked="" type="checkbox"/>	[6] <input type="checkbox"/> congenital abnormality
Intensity (maximum)		Mild	<input checked="" type="checkbox"/>	[7] <input type="checkbox"/> cancer
		Moderate	<input type="checkbox"/>	[8] <input type="checkbox"/> overdose
		Severe	<input type="checkbox"/>	[9] <input checked="" type="checkbox"/> Investigator considers serious or a significant hazard, contraindication, side effect or precaution
Action Taken with Respect to Investigational Drug		None	<input checked="" type="checkbox"/>	Did the SAE abate? <input type="checkbox"/> Yes <input type="checkbox"/> No
		Dose reduced	<input type="checkbox"/>	If study medication was interrupted, stopped or dose reduced: Was study medication reintroduced (or dose increased)? <input type="checkbox"/> Yes <input type="checkbox"/> No
		Dose increased	<input type="checkbox"/>	
		Drug interrupted/restarted	<input type="checkbox"/>	
		Drug stopped	<input type="checkbox"/>	
Relationship to Investigational Drug		Not related	<input type="checkbox"/>	Assessment
		Unlikely	<input type="checkbox"/>	The SAE is probably associated with:
		Suspected (reasonable possibility)	<input checked="" type="checkbox"/>	<input type="checkbox"/> Protocol design or procedures (but not to study drug)
		Probable	<input type="checkbox"/>	Please specify _____
Corrective Therapy If 'Yes', record details in the Concomitant Medication section		Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Another condition (e.g. condition under study, intercurrent illness)
Was subject withdrawn due to this specific SAE?		Yes	<input checked="" type="checkbox"/> No	Please specify _____
				<input type="checkbox"/> Another drug
				Please specify _____

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NON-ADAC THT

## INITIAL INFORMATION

X2801  
- 7 MAY 2001

Page

Centre Number	Subject Number	Subject Initials
[Redacted]	[Redacted]	[Redacted]

## SERIOUS ADVERSE EXPERIENCE (SAE) (cont)

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	[Redacted] Day Month Yr			
	[Redacted] Day Month Yr			
	[Redacted] Day Month Yr			

Remarks (Please provide a brief narrative description of the SAE, attaching extra pages eg. hospital discharge summary if necessary)

① Soldier had red/Green colour deficiency on pre-deployment but otherwise normal examination. **DESE**

② On post deployment saw "waving line" on Amsler testing but unable to fully assess due to dilated pupils - requires follow up without dilation. Normal macular examination.

③ Linear epithelial whorl on corneal examination

④ Visual acuity unchanged 6/6 6/6 to 6/6 6/6. **POSS**

If applicable, was randomisation code broken at investigational site?

 No  Yes

Randomisation / Study Medication Number: [Redacted]

Investigator's Signature: [Redacted]

Date

O I M A Y G I  
Day Month Year

Please PRINT Name: [Redacted]

Please PRINT Name: [Redacted]

Day Month Year



GlaxoSmithKline

**FAX**

- 7 MAY 2001

**To** ADRAC

SmithKline Beecham (Australia)

Pty Ltd

ABN 73 008 399 415

300 Frankston Road

Private Mail Bag 34

Dandenong Vic 3175

Australia

**Company**

**Fax** 02 6232 8392

Tel: 613 9213 4444

Fax 613 9706 5883

[www.gsk.com](http://www.gsk.com)

**From** [REDACTED]

**Tel** [REDACTED]

**E-mail**

**Date** 07-May-2001 **Pages including cover** 12

**CC**

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