MedWatch:

FDA's "Heads Up" on Medical Product Safety

When the Food and Drug Administration approves drugs and other medical products, the agency takes every precaution to make sure these products are safe when they are marketed.

But that's not always the end of the story. The true picture of product safety actually evolves over the months and even years that make up a product's lifetime in the marketplace. Because the clinical trials that help gauge product safety are conducted on small groups of patients—usually ranging from a few hundred to several thousand—problems can remain hidden, only to be revealed after hundreds of thousands or even millions of people use the product.

For example, clinical trials can't assess the effects of every new drug in combination with other approved drugs. So it is possible that a patient could have a serious reaction from a new drug when taken with another drug in a combination that was not tested in trials.

That's why, through the MedWatch program, FDA conducts "postmarketing surveillance" of medical products to identify safety concerns and take necessary action. MedWatch depends on doctors, dentists, nurses, pharmacists, and other health professionals to pass on to FDA details of serious adverse reactions and medical product problems.

MedWatch reports played major roles in recent decisions to remove the painkilling drug Duract (bromfenac sodium) from the market following reports of deaths and injuries. FDA also moved to withdraw the blood pressure treatment Posicor (mibefradil dihydrochloride) after learning of serious adverse reactions.

"To withdraw a drug or device from the marketplace is a very significant step, and it's something that is done only when necessary," says Michael Friedman, M.D., FDA deputy commissioner. "But when such an action occurs, it proves that the postmarketing surveillance system is working just as it should." He

FDA conducts "postmarketing surveillance" of medical products to identify safety concerns and take necessary action.

"To withdraw a drug or device from the marketplace is a very significant step, and it's something that is done only when necessary."

— Michael Friedman, M.D., FDA

adds that most of the agency's postmarketing actions are less severe than withdrawal from the market. Educational efforts such as labeling changes or letters to health professionals warning of new concerns are more typical responses.

The agency has had a postmarketing surveillance program in place since 1961. It replaced an earlier system sponsored by the American Medical Association. FDA's system eventually evolved into five separate reporting forms for different products, such as drugs or medical devices. In 1993, then-FDA Commissioner David A. Kessler, M.D., citing confusion with the multiple forms, moved to consolidate them, and MedWatch was born. Since then, MedWatch has logged more than 85,000 voluntary reports, mostly from health professionals. (The agency also has a separate mandatory reporting system required by law for medical product manufacturers and certain healthcare facilities.)

The MedWatch program has four goals:

- To clarify what should and should not be reported to FDA.
- To increase awareness of serious reactions caused by drugs or medical devices.
- To make the reporting process easy.
- To give the health community regular feedback about product safety issues.

While participation in MedWatch is voluntary, FDA encourages anyone aware of a serious adverse reaction, including consumers, to make a MedWatch report.

"Health professionals are helpful to us because they usually have the clinical or medical documentation we need to assess the situation," says Dianne Kennedy, FDA's MedWatch director. "Often, consumers don't have detailed information. However, consumers certainly can make reports, but whenever possible, they should work with a health professional in filling out a report." She adds that in cases where consumers are embarrassed or have other reasons why they do not want to report a problem through a health professional, FDA still wants the information and encourages consumers to make the report alone.

Products covered under MedWatch include drugs, biologics (such as blood products), and medical devices (such as heart valves or kidney dialysis machines). FDA also wants reports of serious reactions due to dietary supplements, infant formulas, and medical foods (such as low-nitrogen products used by patients with severely reduced kidney function). Adverse reactions to artificial

How to Make a MedWatch Report

FDA offers several ways for health professionals or consumers to submit MedWatch reports:

- Online—Go to the MedWatch Website at www.fda.gov/medwatch/ and follow the instructions for submitting a report electronically.
- By mail—Use the postage-paid MedWatch form, which includes the address. Many health professionals keep the form in stock. To get a copy, call MedWatch at 1-800-332-1088, and one will be sent by mail or fax. You also can download the software for printing out the form through MedWatch's Website, www.fda.gov/medwatch/.
- By fax—You can submit a completed form to MedWatch's fax number, 1-800-332-0178.

Reports of serious adverse reactions or problem products also may be made to product manufacturers, where, by law, they must be reported to FDA.

If you have any questions about the reporting process, call 1-800-332-1088; press "0" or wait on the line. Or send questions by e-mail to medwatch@bangate.fda.gov

MEDWATCH

THE FDA MEDICAL PRODUCTS REPORTING PROGRAM

For VOLUNTARY reporting by health professionals of adverse events and product problems

Page ____ of ____

Form Approved: OMB No. 0910-0291 Expiration: 12/31/99
See OMB statement on reverse.

FDA Use Only

Triage unit

PLEASE TYPE OR USE BLACK INK

A. Patient information

1. Patient identifier	2. Age at time of event: or Date of birth	3. Sex	4. Weight
In confidence		☐ female ☐ male	____ lbs or ____ kgs

B. Adverse event or product problem

1. ☐ Adverse event and/or ☐ Product problem (e.g., defect/malfunction)

2. Outcomes attributed to adverse event (check all that apply)
   - ☐ death (mm/dd/yy)
   - ☐ life-threatening
   - ☐ hospitalization – initial or prolonged
   - ☐ disability
   - ☐ congenital anomaly
   - ☐ required intervention to prevent permanent impairment/damage
   - ☐ other: _____

3. Date of event (mm/dd/yy)

4. Date of this report (mm/dd/yy)

5. Describe event or problem

6. Relevant tests/laboratory data, including dates

7. Other relevant history, including preexisting medical conditions (e.g., allergies, race, pregnancy, smoking and alcohol use, hepatic/renal dysfunction, etc.)

C. Suspect medication(s)

1. Name (give labeled strength & manufacturer, if known)
   #1
   #2

2. Dose, frequency & route used
   #1
   #2

3. Therapy dates (if unknown, give duration) (mm/dd/yy or best estimate)
   #1
   #2

4. Diagnosis for use (indication)
   #1
   #2

5. Event abated after use stopped or dose reduced
   #1 ☐ yes ☐ no ☐ doesn't apply
   #2 ☐ yes ☐ no ☐ doesn't apply

6. Lot # (if known)
   #1
   #2

7. Exp. date (if known)
   #1
   #2

8. NDC # (for product problem only)
   – –

9. Event reappeared after reintroduction
   #1 ☐ yes ☐ no ☐ doesn't apply
   #2 ☐ yes ☐ no ☐ doesn't apply

10. Concomitant medical products and therapy dates (exclude treatment of event)

D. Suspect medical device

1. Brand name

2. Type of device

3. Manufacturer name & address

4. Operator of device
   - ☐ health professional
   - ☐ lay user/patient
   - ☐ other: _____

5. Expiration date (mm/dd/yy)

6.
   model # _____
   catalog # _____
   serial # _____
   lot # _____
   other # _____

7. If implanted, give date (mm/dd/yy)

8. If explanted, give date (mm/dd/yy)

9. Device available for evaluation? (Do not send to FDA)
   ☐ yes ☐ no ☐ returned to manufacturer on _____ (mm/dd/yy)

10. Concomitant medical products and therapy dates (exclude treatment of event)

E. Reporter

1. Name & address

phone #

2. Health professional?
   ☐ yes ☐ no

3. Occupation

4. Also reported to
   - ☐ manufacturer
   - ☐ user facility
   - ☐ distributor

5. If you do NOT want your identity disclosed to the manufacturer, please enter "X" in this box. ☐

FDA

Mail to: MEDWATCH
5600 Fishers Lane
Rockville, MD 20857-9787

or FAX to: 1-800-FDA-0178

FDA Form 3500

Submission of a report does not constitute an admission that medical personnel or the product caused or contributed to the event.

ADVICE ABOUT VOLUNTARY REPORTING

Report experiences with:

- medications (drugs or biologics)
- medical devices (including in-vitro diagnostics)
- special nutritional products (dietary supplements, medical foods, infant formulas)
- other products regulated by FDA

Report SERIOUS adverse events. An event is serious when the patient outcome is:

- death
- life-threatening (real risk of dying)
- hospitalization (initial or prolonged)
- disability (significant, persistent or permanent)
- congenital anomaly
- required intervention to prevent permanent impairment or damage

Report even if:

- you're not certain the product caused the event
- you don't have all the details

Report product problems – quality, performance or safety concerns such as:

- suspected contamination
- questionable stability
- defective components
- poor packaging or labeling
- therapeutic failures

How to report:

- just fill in the sections that apply to your report
- use section C for all products except medical devices
- attach additional blank pages if needed
- use a separate form for each patient
- report either to FDA or the manufacturer (or both)

Important numbers:

- 1-800-FDA-0178 to FAX report
- 1-800-FDA-7737 to report by modem
- 1-800-FDA-1088 to report by phone or for more information
- 1-800-822-7967 for a VAERS form for vaccines

If your report involves a serious adverse event with a device and it occurred in a facility outside a doctor's office, that facility may be legally required to report to FDA and/or the manufacturer. Please notify the person in that facility who would handle such reporting.

Confidentiality: The patient's identity is held in strict confidence by FDA and protected to the fullest extent of the law. The reporter's identity, including the identity of a self-reporter, may be shared with the manufacturer unless requested otherwise. However, FDA will not disclose the reporter's identity in response to a request from the public, pursuant to the Freedom of Information Act.

[illegible] Please DO NOT RETURN this form to this address.

[illegible]

Please Use Address Provided Below – Just Fold in Thirds, Tape and Mail

---

Department of Health and Human Services
Public Health Service
Food and Drug Administration
Rockville, MD 20857

Official Business
Penalty for Private Use $300

BUSINESS REPLY MAIL
FIRST CLASS MAIL PERMIT NO. 949 ROCKVILLE, MD

POSTAGE WILL BE PAID BY FOOD AND DRUG ADMINISTRATION

MEDWATCH
The FDA Medical Products Reporting Program
Food and Drug Administration
5600 Fishers Lane
Rockville, MD 20852-9787

[illegible]

Other Kinds of Reporting

Though FDA accepts MedWatch reports for a variety of medical products, there are two product categories that have different ways of reporting. They are:

- Vaccines—Any adverse events or product problems with vaccines should not be sent to MedWatch but to the Vaccine Adverse Event Reporting System (VAERS), operated jointly by FDA and the national Centers for Disease Control and Prevention. For a copy of the VAERS form, call 1-800-822-7967, or download the form (in PDF format) from www.fda.gov/cber/vaers/vaers1.pdf on FDA's Website.
- Veterinary products—Report any adverse events related to use of medical products in animals to FDA's Center for Veterinary Medicine, 1-888-332-8387.

sweeteners, preservatives, and other food additives also should be reported.

Serious Adverse Reaction

The key point to remember when making a MedWatch report is that the adverse reaction should be serious. FDA does not want reports of all adverse reactions, especially ones that are listed in a product's labeling, such as a minor rash following drug therapy. "All drugs have side effects," says Kennedy. "If we were to get reports of all adverse reactions, we'd be overwhelmed, making it difficult for us to focus on the issues with the most public health impact." She says patients can avoid making an unnecessary report by asking their doctors or pharmacists what side effects to expect from products.

Report to MedWatch only if one or more of the following occurs:

- Death—If an adverse reaction to a medical product is a suspected cause of a patient's death.
- Life-threatening hazard—If the patient was at risk of dying at the time of the adverse reaction or if it is suspected that continued use of a product would cause death (examples: pacemaker breakdown or failure of an intravenous (IV) pump that could cause excessive drug dosing).
- Hospitalization—If a patient is admitted or has a prolonged hospital stay because of a serious adverse reaction (example: a serious allergic reaction to a product such as latex).
- Disability—If the adverse reaction caused a significant or permanent change in a patient's body function, physical activities, or quality of life (examples: strokes or nervous system disorders brought on by drug therapy).
- Birth defects, miscarriage, stillbirth, or birth with disease—If exposure to a medical product before conception or during pregnancy is suspected of causing an adverse outcome in the child (example: malformation in the child caused by the acne drug Accutane, or isotretinoin).
- Needs intervention to avoid permanent damage—If use of a medical product required medical or surgical treatment to prevent impairment (examples: burns from radiation equipment or breakage of a screw supporting a bone fracture).

FDA emphasizes that it is not necessary to prove that a medical product caused an adverse reaction—a suspected association is sufficient reason to make a report.

"If we were to get reports of all adverse reactions, we'd be overwhelmed, making it difficult for us to focus on the issues with the most public health impact."

— Dianne Kennedy

FDA also wants to know about defective or malfunctioning medical products. Any concerns about quality, performance or safety of any drug or device warrant a MedWatch report. Some product problems may occur during manufacturing, shipping or storage. For example, a pharmacist may notice an off-color tablet in a drug container. A consumer may hear a rattling noise in a bottle, possibly indicating broken glass. Or a nurse may notice a wiring defect on a medical device.

Once an adverse event or product problem is identified, the agency can initiate various actions.

The identity of patients and other persons making MedWatch reports is kept confidential. The agency has regulations in place to preserve privacy.

What does FDA do with the information from MedWatch reports? "All reports are entered into a postmarketing surveillance database and are evaluated by a postmarketing safety evaluator," says Kennedy. Once an adverse event or product problem is identified, the agency can initiate various actions, including:

- Medical alerts—"Dear Health Professional" letters or safety alerts provide important product safety information to doctors, pharmacists, and other health professionals, as well as trade and media groups. For example, FDA issued an alert after receiving reports that some SureStep blood glucose meters used by diabetics were giving confusing error readings. Because they could have led to serious adverse reactions or possibly death by failing to indicate high blood sugar, defective devices were subsequently recalled.
- Labeling changes—Sometimes the agency may require the manufacturer to add new information to the product's package insert. Such was the case when FDA required strengthened labeling on the diabetes drug Rezulin (troglitazone) to indicate possible liver damage hazards.
- Boxed warnings—FDA can require that warnings be placed in a prominent place—often within a box in the labeling—to ensure that patients and doctors don't miss the warnings. For example, FDA required Roche Laboratories to place boxed warnings in the labeling of its stroke prevention drug Ticlid (ticlopidine) after reports of a life-threatening blood disorder that was not observed in clinical trials.
- Product withdrawals—One of the most serious actions FDA can advise a company to take, withdrawals usually involve removing a product permanently from the marketplace. Such a withdrawal took place last year when the weight-loss drugs Redux (dexfenfluramine) and Pondimin (fenfluramine) were taken off the market after being associated with heart-valve problems.

MedWatch reports also may prompt the agency to require manufacturers to conduct postmarketing studies on a product or to make manufacturing facilities available for inspection.

Getting the Word Out

The MedWatch program relies on a collaborative network of about 140 health professional and trade organizations to spread the word about MedWatch to their constituents and encourage participation. The list of these MedWatch "partners" reads like a Who's Who of the health profession, with collaborators such as the American Medical Association, the College of American Pathologists, and the National Association of Chain Drug Stores. Partners help by inserting the MedWatch form into their journals or newsletters and sharing important new safety information from FDA with their members.

"We're now going directly to the major pharmacy chains, and several have already joined us as partners," says Gale White, MedWatch deputy director. She says it makes sense to have pharmacies as partners so the agency can have another direct route to patients and any adverse reactions that may occur.

Meanwhile, Kennedy says the MedWatch program has proven its value repeatedly by helping patients escape illness or even death. "The bottom line," she says, "is that we have this system in place and it works."