Approved: 6th December, 2016

Summary of protocol for post-marketing surveillance (031-101-00116)

- Aripiprazole for irritability associated with pediatric autism spectrum disorder (ASD) in Japan

Study Title	Abilify special-drug-use-results survey (pediatric autism spectrum disorder: oral formulations)
Study Code	031-101-00116
Name of Company	Otsuka Pharmaceutical Co., Ltd.
Responsible party	Office of Surveillance Management, Pharmacovigilance Department
Product Name	ABILIFY Tablets(Aripiprazole), ABILIFY Powder(Aripiprazole), ABILIFY Oral Solution(Aripiprazole), ABILIFY OD Tablets (Aripiprazole)
Product, Dose	Drug products investigated: ABILIFY Tablets 1mg / 3mg /6mg /12mg ABILIFY Powder 1% ABILIFY Oral Solution 0.1% ABILIFY OD Tablets 3mg /6mg /12mg Dosage and Administration: The usual starting dose in children (from 6 to 17 years old) is 1 mg of aripiprazole per day administered. Maintenance dose are from 1mg to 15 mg per day are administrated. The dose may be changed for symptom, The fluctuation of dose are restricted to 3mg per day.
Clinical Phase	IV (non-interventional study)
Rationale and background	Observational study conducted in Japan is based on the re-examination system and not as a condition of the marketing authorization. This kind of non-interventional study is generally imposed to all new drugs to quantify the incidence of adverse drug reactions (ADRs), and not requested to identify the safety concerns. The re-examination system in Japan is defined by the article 14-4 of the Pharmaceutical Affairs Law. During a period of re-examination, the MAH plans and conducts post-marketing surveys based on GPSP ordinance. In meantime, results from post-marketing surveys are reported periodically to PMDA based on Periodic Safety Reports (Article 63 of the Enforcement Regulations of the Law).
Objective	The purpose of this survey is to identify the following safety and efficacy-related questions for an observation period of 1 year with use of oral drug of Abilify in the routine clinical setting.
Study design	Observational study (Multicenter, prospective post-marketing surveillance)
Data source	Not applicable (Primary data collection)

Population	Pediatric patients in Japan with irritability associated with autism spectrum disorder who are planned to be newly started on oral drug of Abilify.
Sample size	300 patients
Study Period	Study period: April 2017 to September 2019 (30 months) Enrollment period: April 2017 to June 2018 (15 months) End of Data collection: December 2019
Primary end point	For each patient, the observation period is 1 year from the start date of oral drug of Abilify. For patients who discontinue oral drug of Abilify therapy within 1 year, the observation period is to be up to the date of discontinuation of Abilify administration.
Methodology	Safety information is collected with the procedure described in applicable SOPs. Safety Information is defined as "Any information from any source containing information such as : ・Adverse event or suspicion thereof ・Lack of efficacy ・Overdose/incorrect dosage (accidental or intentional) ・Abuse/misuse (e.g. patients sharing medication) – even without resulting adverse reaction ・Accidental exposure (e.g. child takes parent's medication) ・Medication error ・Withdrawal reactions ・Disease progression/exacerbation of existing disease ・Drug-drug/Drug-food interactions ・Exposure to drug during pregnancy, where the embryo or fetus may have been exposed to medicinal products (either through maternal exposure or transmission of a medicinal product via semen following paternal exposure). ・Exposure to drug during lactation (including uneventful) ・Suspected counterfeit product ・Suspected transfer of infectious disease/agent by the medicinal product concerned. ・Product Quality Complaint (PQC) with safety related/medically important information ・Pediatric use (if not an approved use) ・Occupational exposure ・Off-label use Data entry system for original data: PostMaNet (Ver.4) (an electronic data

	capturing system of Fujitsu FIP Corporation) Forwards Safety Information from any source to the Local Safety Manager (LSM) or appropriate local PV Representative within 24 hours of awareness or the next working day in the case of receipt the day prior to or during a weekend, but no later than 3 calendar days for reporting to the Global Case Receipt Mailbox. Type of CRF: eCRF
Reconciliation	The reconciliation of the serious and non-serious AEs between PV database (Argus) and study database is going to be performed on a monthly basis and at the end of the study.
Final study report	The FSR will be finalized within one year of the end of data collection (30 December 2020).