

**Patient Alert
Card: CAPRELSA®
(vandetanib)**

SANOFI GENZYME 

Information for the patient

- This card contains important safety information that you should know before you are given vandetanib and during treatment with vandetanib
- Show this card to any doctor involved in your treatment. If you get any side effects, talk to your doctor, pharmacist or nurse. This includes any possible side effects not listed in the package leaflet.
- Please report suspected side effects to the MHRA through the Yellow Card scheme, via the Yellow Card website **www.mhra.gov.uk/yellowcard** the free Yellow Card app available in Apple App Store or Google Play Store, and also some clinical IT systems for healthcare professionals. Alternatively, you can call **0800 731 6789** for free, Monday to Friday between 9am and 5pm. By reporting side effects, you can help provide more information on the safety of this medicine. Side effects should also be reported to Sanofi: Tel: **0800 0902314**. email: **uk-drugsafety@sanofi.com**

Vandetanib can cause a change in the electrical activity of your heart called **QTc prolongation**, which can cause irregular heartbeats and life threatening changes in heart rhythm.

A condition called **posterior reversible encephalopathy syndrome (PRES; also known as reversible posterior leukoencephalopathy syndrome [RPLS])** can occur while taking vandetanib.

During vandetanib treatment, telephone your doctor or tell your caregiver immediately if you:

- Feel faint, dizzy or feel your heart beating irregularly, as these may be symptoms related to QTc prolongation
- Experience headaches, seizures, convulsions, confusion, problems seeing or have problems concentrating, as these may be symptoms of PRES

Do not stop taking vandetanib, or change your dose, unless told to by your doctor.

If you take too many vandetanib tablets, telephone your doctor immediately.

See the package leaflet that came with your medicine for more information.

Please make sure that you have a list of all your other medicines with you at any visit to your doctor.

Patient's name: _____

Caregiver's name: _____

Caregiver's telephone number: _____

Doctor's name: _____

Doctor's telephone number: _____

Start date of vandetanib treatment: _____