SYNOPSIS

Name of Sponsor/Company	Daiichi Sankyo Co., Ltd.	
Name of Finished Product	NARURAPID® TABLETS	
Name of Active Ingredient	hydromorphone hydrochloride (INN)	
Title of Study	DS-7113b phase III study	
	A DS-7113b immediate release (IR) tablet long-term study in	
	patients with cancer pain	
Investigators	-	
Study Centre(s)	14 sites	
Publication (reference)		
Studied Period	October 2013 – February 2015	
Phase of Development	Phase 3	
Objectives	To evaluate the safety, efficacy and pharmacokinetics following	
	long-term (maximum of 84 days) treatment of DS-7113b IR tablets	
	in patients with cancer pain on opioid analgesics, patients with	
	cancer pain without opioid analgesics, or patients who had	
	completed DS7113-A-J301 study (DS-7113b phase III study, a	
	randomized double-blind comparison study with IR oxycodone in	
	opioid-naive patients with cancer pain) and hoped to continue	
	administration of DS-7113b tablet	
Methodology	A multicenter, open-label, uncontrolled study	
Number of Patients (planned	Planned: 50 subjects	
and analyzed)	Analyzed: 48 subjects	
Diagnosis and Main Criteria	nosis and Main Criteria Inclusion:	
for Inclusion	Patients on opioid analgesics less than 240 mg in morphine	
	equivalent and judged effective to be treated with strong	
	opioid analgesics (Opioid-use group)	
	Patients who have not been on opioid analgesics, whose VAS	
	is 35 mm and over and judged necessary to be treated with	
	strong opioid analgesics (Opioid-naïve group)	
	Patients who prefer to take DS-7113b IR tablets after	
	completion of the study treatment of DS7113-A-J301 trial	
	(J301 group)	
	• Patients with an ECOG Performance Status (PS) is ≤ 3 , etc.	
	Exclusion:	
	Patients with symptom(s)/finding(s) falling under the	
	contraindications or relative contraindications stated in the	

package insert for oxycodone hydrochloride powder and
morphine hydrochloride preparations, etc.

 Patients with serious hepatic, renal, or respiratory disorder.

Test Product, Dose and Mode of Administration, Batch Number Test product (batch number):

DS-7113b tablet 1 mg (D7113T1H12T05*, D7113T2H13M03)
DS-7113b tablet 2 mg (D7113T1H12T06*, D7113T2H13M06)
DS-7113b tablet 4 mg (D7113T1H12T07*, D7113T2H13M07)
*They are also used as rescue medication.

Dosage and Administration:

As in the table below, subjects received a hydromorphone tablet orally four or six times daily for up to 84 days. The initial dose of Opioid-use group depended on their pre-opioid daily dose. When it was judged that a dose increase or reduce was necessary during the period of study drug administration, it was possible to increase or reduce the dose step by step.

	Daily dose		
	Opioid-use group	Opioid naïve group	J301 group
Number of daily dose	6 times		4 times
Initial dose	Converted according to the daily dose of pre-treatment opioid	4 mg	The dose when J301 trial is completed
1	4 mg		4 mg
2	6 mg		8 mg
3	12 mg		12 mg
4	18 mg		16 mg
5	24 mg		24 mg
6	36 mg		36 mg
7	48 mg		48 mg

Dosage as rescue medication:

In opioid-based patient group and non-opioid patient group, the dose per rescue medication is administered according to the daily dose as shown in the table below.

	Dose per	
one rescue medication		
1	1 mg	

	2 1 mg	
	3 2 mg	
	4 3 mg	
	5 4 mg	
	6 6 mg	
	7 8 mg	
Duration of Treatment	Treatment period: up to 84 days	
	Post-treatment observation period: 2 day	
Reference Therapy, Dose and	None	
Mode of Administration,		
Batch Number		
Criteria for Evaluation	Efficacy: Efficacy rate (post-switch improvement and analgesia	
	improvement) at each visit and early termination visit (Primary	
	endpoint), use of rescue medication	
	Safety: Adverse event, Clinical laboratory evaluation	
Statistical Method	Primary endpoint: Efficacy rate and its 95% CI were calculated at	
	each evaluate point	
Summary - Conclusion	• The efficacy rate at FAS was as high as 80.9% at Visit 2 at the	
·	time of evaluation just after initiation of administration, and	
	that at each evaluation time was almost 80% or more. Eleven	
	of 47 subjects continued to be administered to Visit 8 at the	
	longest 85th day, and high efficacy rates were maintained	
	even for subjects who were continuously administered for a	
	long period of time.	
	Regarding safety, most adverse events observed were events	
	commonly associated with the original disease or events	
	commonly observed when opioid analgesics were used,	
	except for safety issues to be noted when using strong opioid	
	analgesics noteworthy things were not recognized.	
	• Even when DS-7113b tablet was administered as a rescue	
	medicine, no noteworthy safety problem was noticed. A	
	significant pain improvement was confirmed for its	
	effectiveness as a rescue medicine.	
	As described above, DS-711b tablet was confirmed to be safe and	
	effective when used as a regular treatment with a strong opioid	
	analgesic in patients with various cancer pain and as a rescue	
	medicine.	

Date of Report	March 26, 2018
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