Pombiliti® ▼ + Opfolda®
(cipaglucosidase alfa) (miglustat) 65 mg capsules

GUIDE TO **STARTING A PATIENT ON TREATMENT**

Treatment Day Checklist and Frequently Asked Questions for Healthcare Professionals in GB (England, Scotland and Wales)

Always consult the full SmPC and risk management materials before prescribing and administering POMBILITI® + OPFOLDA®.

Find a treatment day checklist and answers to common questions about the administration of POMBILITI® (cipaglucosidase alfa) + OPFOLDA® (miglustat), as well as information about additional resources available.

INDICATION

Pombiliti® (cipaglucosidase alfa) is a long-term enzyme replacement therapy used in combination with the enzyme stabiliser miglustat for the treatment of adults with late-onset Pompe disease (acid α-glucosidase [GAA] deficiency).

Opfolda® (miglustat) is an enzyme stabiliser of cipaglucosidase alfa long-term enzyme replacement therapy in adults with late-onset Pompe disease (acid α-glucosidase [GAA] deficiency).

ADVERSE EVENT REPORTING

▼ This medicinal product is subject to additional monitoring. This will allow quick identification of new safety information. Healthcare professionals are asked to report any suspected adverse reactions.

Adverse events should be reported. Reporting forms and information can be found at **www.yellowcard.mhra.gov.uk** Adverse events should also be reported to Amicus on 08082346864 or via email to **drugsafety@amicusrx.com**

Full Prescribing Information for Pombiliti and Opfolda can be found at the end of this document.

TREATMENT DAY CHECKLIST

Key Dosing Considerations

- ☐ Confirm appropriate fasting 2 hours before and after the patient taking OPFOLDA®[1]
- ☐ Check patient weight to confirm sufficient POMBILITI® vial supply and OPFOLDA® capsule supply[1,2]
- ☐ Inspect each vial carefully and do not use it if the content is discolored, the closure is damaged, and/or the overseal button is missing or has been removed[2]
- ☐ Refer to the Guide to Reconstitution and Administration
- ☐ Review the full Prescribing Information for POMBILITI® and full Prescribing Information for OPFOLDA®

Products

- ☐ **POMBILITI® (cipaglucosidase alfa) 105-mg vials**
  (20 mg/kg body weight administered as an infusion every other week)[2]
- ☐ **OPFOLDA® (miglustat) capsules**
  (for patients ≥50 kg, 4 capsules of 65 mg taken orally every other week [260 mg total];
  for ≥40 kg to <50 kg, 3 capsules [195 mg total] taken orally every other week)[1]
- ☐ Premedications as prescribed
- ☐ Adequate contraception as applicable

Infusion Supplies & Equipment

- ☐ **Sterile water** for injection at room temperature of 20 °C to 25 °C[2]
- ☐ **Sodium chloride 9 mg/mL (0.9%) solution** for injection at room temperature of 20 °C to 25 °C
  - Choose a bag size based on the patient's body weight[2]
- ☐ **A needle that has a diameter of 18 gauge or less**
  - Do not use filter needles[2]
- ☐ **Infusion pump, tubing, and filter[2]**

FREQUENTLY ASKED QUESTIONS

About POMBILITI® + OPFOLDA®

Q Who is POMBILITI® + OPFOLDA® appropriate for?

A POMBILITI® (cipaglucosidase alfa) is a long-term enzyme replacement therapy used in combination with the enzyme stabiliser miglustat for the treatment of adults with late-onset Pompe disease (acid α-glucosidase [GAA] deficiency). OPFOLDA® (miglustat) is an enzyme stabiliser of cipaglucosidase alfa long-term enzyme replacement therapy in adults with late-onset Pompe disease (acid α-glucosidase [GAA] deficiency).

Q How does POMBILITI® work?

A POMBILITI® is an enzyme replacement therapy that degrades excess lysosomal glycogen. POMBILITI® contains bis-M6P—a type of sugar that can bind to receptors on muscle cells. Bis-M6P allows POMBILITI® to be internalized by muscle cells and transported to lysosomes. Once inside the lysosome, POMBILITI® undergoes modifications (proteolytic cleavage and N-glycan trimming), and then exerts enzymatic activity in cleaving glycogen.[2]

Q How does OPFOLDA® work?

A OPFOLDA® binds with, stabilizes, and reduces inactivation of POMBILITI® in the blood after infusion. The bound OPFOLDA® is dissociated from POMBILITI® after it is internalised and transported into lysosomes. OPFOLDA® alone has no pharmacological activity in cleaving glycogen.[1]

Q Can a patient switch from another ERT to POMBILITI® + OPFOLDA® right away?

A A patient can be started on POMBILITI® + OPFOLDA® at the next scheduled dosing if switching from another ERT (ie, 2 weeks after the last ERT administration).

Patients who have switched from another ERT to POMBILITI® + OPFOLDA® should be advised to continue with any premedications used with the previous ERT therapy to minimise infusion-related allergic reactions (IARs). Depending on tolerability, premedications may be modified. Premedication and/or treatment during infusion with corticosteroids, antihistamines, and antipyretics may be administered to assist with signs and symptoms related to IARs.[2]

Q What is the purpose of providing OPFOLDA® prior to starting infusion with POMBILITI®?

A OPFOLDA® should be taken approximately 1 hour prior to POMBILITI® so it has time to be absorbed. Given time to absorb, it can then be available to stabilize POMBILITI® in the unfavorable conditions of the blood during infusion to reduce enzyme loss while in circulation.[1]

Q Can either medication be provided without the other?

A POMBILITI® must be taken in combination with OPFOLDA® (65 mg). Because POMBILITI® + OPFOLDA® were designed to work exclusively with each other, they must be taken at the right time under the right circumstances.

FREQUENTLY ASKED QUESTIONS

Dosing and Administration

On average, how long does it take to administer POMBILITI® + OPFOLDA®?

The entire process takes about 7 hours, from the beginning of the fast until the end of the infusion. The infusion itself takes about 4 hours. Please see below for a detailed timeline.[2]

What the infusion day should look like

How long should a patient fast prior to taking OPFOLDA®?

Patients are required to fast for 2 hours prior to and 2 hours after taking OPFOLDA®. OPFOLDA® should be taken on an empty stomach. Capsules should be swallowed whole. During the fasting period, water, fat-free (skimmed) cow's milk, and tea or coffee with no cream, sugars, or sweeteners can be consumed. Please refer to the timeline above.[1]

How do I calculate the number of vials of POMBILITI® needed for my patient?

The formula used for dosing POMBILITI® is as follows:

Patient body weight (kg) x 20 mg/kg of body weight = Total dose of POMBILITI® (mg) administered every other week/105 mg per vial = Number of vials needed

Example: 85 kg x 20 mg/kg = 1700 mg/105 mg per vial = 16.19 vials -> 17 vials to reconstitute.[2]

What is the infusion rate for POMBILITI®?

An initial infusion rate of 1 mg/kg/hour is recommended. This infusion rate may be gradually increased by 2 mg/kg/hour every 30 minutes if there are no signs of infusion-associated allergic reactions (IARs) until a maximum rate of 7 mg/kg/hour is reached. Then, maintain the infusion rate at 7 mg/kg/hour until the infusion is complete. The approximate total infusion duration is 4 hours. Vital signs should be obtained at the end of each step.

The infusion rate may be slowed or temporarily stopped in the event of mild to moderate IARs. In the event of severe allergic reaction or anaphylaxis, immediately stop the infusion, and initiate appropriate medical treatment.[2]

What happens if there is a greater than 3-hour delay in starting POMBILITI® after taking OPFOLDA®?

If the POMBILITI® infusion cannot be started within 3 hours of oral administration of OPFOLDA®, reschedule treatment of POMBILITI® + OPFOLDA® at least 24 hours after OPFOLDA® was last taken.[2]

How is POMBILITI® supplied?

POMBILITI® is supplied as a sterile, nonpyrogenic, white to slightly yellowish lyophilised powder for reconstitution with sterile water for injection to yield a concentration of 15 mg/mL, then further diluted with 0.9% sodium chloride for injection for intravenous infusion.

Single-use vials are available in 105-mg dosage only.[2]

FREQUENTLY ASKED QUESTIONS

Dosing and Administration (continued)

How is OPFOLDA® supplied?

OPFOLDA® capsules are supplied as 65 mg of miglustat, with a grey opaque cap and a white opaque body, printed with “AT2221” in black ink on the body.[1]

What are the key steps to reconstituting POMBILITI®?

Use aseptic technique during preparation. Reconstitute and dilute POMBILITI® in the following manner:

Reconstitute the Lyophilised Powder

- Determine the number of POMBILITI® vials to be reconstituted based on the calculated dose (based on patient’s actual body weight in kg).
- Remove vials from the refrigerator and set aside for approximately 30 minutes to allow vials to come to room temperature.
- Reconstitute each vial by slowly injecting 7.2 mL of sterile water for injection, down the inside wall of each vial to avoid foaming. Avoid forceful impact of sterile water for injection on the lyophilised powder and avoid foaming.
- Roll and tilt each vial to allow the lyophilised powder to dissolve completely which typically takes 2 minutes. Each vial will yield a concentration of 15 mg/mL. Do not invert, swirl, or shake.
- Visually inspect the reconstituted solution for particulate matter and discoloration. The reconstituted solution appears as a clear to opalescent, colorless to slightly yellow solution, free of foreign particles and practically free of white to translucent particles. Discard if foreign matter is observed or the solution is discolored.
- Repeat above steps for the number of vials needed for dilution.

Storage of the Reconstituted Solution

- If the reconstituted POMBILITI® vials are not used immediately, store refrigerated at 2°C to 8°C for up to 24 hours. Do not freeze.

Dilute the Reconstituted Solution

- Remove airspace within an infusion bag of 0.9% (9 mg/mL) sodium chloride solution for injections. Remove an equal volume of 0.9% Sodium Chloride Injection from the bag that will be replaced by the total volume (mL) of reconstituted POMBILITI® (see Table 1 for the recommended total infusion volume based on the patient’s weight).
- Slowly withdraw 7 mL of reconstituted solution from each of the vials until the patient’s dose is obtained. Discard any remaining reconstituted solution in the last vial.
- Add the reconstituted solution slowly and directly into the infusion bag.
- To prevent foaming, gently invert infusion bag to mix the solution and avoid vigorous shaking or agitation. After dilution, the solution will have a final concentration of 0.5 to 4 mg/mL of cipaglucosidase alfa. Do not use a pneumatic tube to transport the infusion bag.
- Administer the diluted solution at room temperature without delay.[2]

For further safety information please refer to the Summary of Product Characteristics for POMBILITI® + OPFOLDA® .

How should I store POMBILITI®?

Please store in a refrigerator (2°C - 8°C) and in original packaging to protect from light.[2]

Do I need to let POMBILITI® come to room temperature prior to reconstitution or infusion?

Yes, the infusion should be administered at room temperature. Please remove vials from the refrigerator approximately 30 minutes prior to reconstitution.[2]

How long will a typical infusion last?

The typical infusion is administered over approximately 4 hours. The total volume of the infusion is determined by the patient’s body weight.[2]

Dietary Requirements

What can my patient eat and drink during the fast?

During this 4-hour fasting period patients can consume water, fat-free (skimmed) cow’s milk, and tea or coffee with no cream, sugars, or sweeteners.[1]

What can my patient eat and drink during the infusion?

Patients can resume normal eating and drinking 2 hours after taking OPFOLDA®. Typically this would be about an hour after the infusion starts.[1]

What if a patient does not properly fast prior to taking OPFOLDA®?

Patients should not take OPFOLDA® unless they have adhered to the fasting guidelines for 2 hours prior to administration.[1]

FREQUENTLY ASKED QUESTIONS

Potential Adverse Events

What are the side effects of POMBILITI® + OPFOLDA®?

The most common adverse reaction in patients treated with POMBILITI® and OPFOLDA® (≥ 1/10) was headache. The following adverse reactions were common (≥ 1/100 to < 1/10): anaphylactic reaction, dizziness, tremor, somnolence, dysgeusia, tachnycardia, flushing, dyspnoea, cough, diarrhoea, nausea, abdominal pain, flatulence, abdominal distension, vomiting, urticaria, rash, pruritus, hyperhidrosis, muscle spasms, myalgia, muscular weakness, fatigue, pyrexia, chills, chest discomfort, infusion site swelling and pain.

The most commonly reported adverse reactions only attributable to POMBILITI® were chills (4.0%), dizziness (2.6%), flushing (2.0%), somnolence (2.0%), chest discomfort (1.3%), cough, (1.3%), infusion site swelling (1.3%), and pain (1.3%).

The most commonly reported adverse reaction only attributable to OPFOLDA® was constipation (1.3%).

Are there any premedications required?

Please consult the prescriber to coordinate appropriate premedications.

Patients who have switched from another ERT to POMBILITI® + OPFOLDA® should be advised to continue with any premedications used with the previous ERT therapy to minimize IARs. Depending on tolerability, premedications may be modified. Premedication and/or treatment during infusion with corticosteroids, antihistamines, and antipyretics may be administered to assist with signs and symptoms related to IARs.[2]

Are there any considerations when providing this medication to special populations such as children or elderly patients?

This medicine should not be given to patients under the age of 18 years old. The safety and effectiveness have not been established in children. There is limited experience in patients above the age of 65 years old but there is currently no evidence for special consideration.[2]

Are there any contraindications with POMBILITI® + OPFOLDA®?

POMBILITI® in combination with OPFOLDA® is contraindicated in individuals with a hypersensitivity to the active substance or to any of the excipients listed in the full Summary of Product Characteristics. Treatment is also not recommended during pregnancy.[2]

Are POMBILITI® + OPFOLDA® contraindicated in pregnancy?

Contraception in females: Reliable contraceptive measures must be used by women of childbearing potential during treatment with POMBILITI® in combination with OPFOLDA®, and for 4 weeks after discontinuing treatment. The medicinal product is not recommended in women of childbearing potential not using reliable contraception.

Pregnancy: There are no clinical data from the use of POMBILITI® in combination with OPFOLDA® in pregnant women. POMBILITI® in combination with OPFOLDA® therapy is not recommended during pregnancy.

(continued)

Breast-feeding: It is not known if POMBILITI® and OPFOLDA® are secreted in human breast milk. A decision must be made whether to discontinue breast-feeding or to discontinue/abstain from POMBILITI® in combination with OPFOLDA® therapy taking into account the benefit of breast-feeding for the child and the benefit of therapy for the woman.

Fertility: There are no clinical data on the effects of POMBILITI® in combination with OPFOLDA® on fertility. Please consult the SmPC for further information.

Infusion-Associated Reactions

What do I do in the event of an infusion-associated reaction?

If severe infusion-associated reactions occur, immediately pause the POMBILITI® infusion, initiate appropriate medical treatment, and carefully assess the benefits and risks of readministering POMBILITI® following severe IARs. Patients may be rechallenged using slower infusion rates. Once a patient tolerates the infusion, the infusion rate may be increased to reach the recommended infusion rate. If mild or moderate IARs occur regardless of pretreatment, decreasing the infusion rate or temporarily stopping the infusion may ameliorate the symptoms.[2]

What do I do in the event of a hypersensitivity reaction including anaphylaxis?

If a severe hypersensitivity reaction (e.g., anaphylaxis) occurs, POMBILITI® should be paused immediately, and appropriate medical treatment should be initiated. The risks and benefits of readministering POMBILITI® following severe hypersensitivity reaction (including anaphylaxis) should be considered. Patients may be rechallenged using slower infusion rates. In patients with severe hypersensitivity reaction, desensitization measures to POMBILITI® may be considered. If the decision is made to readminister POMBILITI®, ensure the patient tolerates the infusion. If the patient tolerates the infusion, the dosage (dose and/or the rate) may be increased to reach the approved recommended dosage. If a mild or moderate hypersensitivity reaction occurs, the infusion rate may be slowed or temporarily stopped.

Always consult the full SmPC and risk management materials before prescribing and administering POMBILITI® + OPFOLDA®.

STORAGE

How to Store POMBILITI®[2]

POMBILITI® is supplied as a sterile, nonpyrogenic, white to slightly yellowish lyophilised powder for reconstitution with sterile water for injection to yield a concentration of 15 mg/mL; then further diluted with 0.9% sodium chloride for injection for intravenous infusion. Single use vials are available in 105 mg dosage only.

- Store at 2 °C to 8 °C
- Do not freeze
- Store in the original packaging to protect from light

Storage for reconstituted and diluted solution

- Do not freeze the reconstituted vial or the diluted POMBILITI® solution in the infusion bag for infusion

Infusion Preparation	Infusion-use Stability	
	Refrigerated Storage 2 °C to 8 °C	**Room Temperature Storage** 20 °C to 25 °C
Once POMBILITI® vial is reconstituted with sterile water for injection	**24 hours**	**Not recommended**
Once reconstituted vial is diluted with sodium chloride 9 mg/mL (0.9%) solution for injection in the infusion bag	**24 hours**	**6 hours**

How to Store OPFOLDA®[1]

- OPFOLDA® is supplied as a hard gelatin capsule containing 65 mg of miglustat
- Store at 20 °C to 25 °C. Excursions are permitted between 15 °C to 30 °C
- Do not use if inner seal is missing or broken
- Keep out of reach of children
- Store in the original container or equivalent to protect from light

For further safety information please refer to the Summary of Product Characteristics for POMBILITI® + OPFOLDA® .

PRESCRIBING INFORMATION

Pombiliti® ▼ (cipaglucosidase alfa) 105 mg powder for concentrate for solution for infusion

Note: Please refer to Summary of Product Characteristics (SmPC) before prescribing. Pombiliti (cipaglucosidase alfa) must be used in combination with Opfolda (miglustat) 65 mg hard capsules. Because of this, the summary of product characteristics (SmPC) for Opfolda should be consulted in relation to its safety profile before taking Pombiliti. **Presentation:** One vial contains 105 mg of cipaglucosidase alfa. After reconstitution of each vial, the concentrated solution contains 15 mg of cipaglucosidase alfa* per mL. * Human acid α-glucosidase with bis-phosphorylated N-glycans (bis-M6P) is produced in Chinese hamster ovary cells (CHO) by recombinant DNA technology. **Indication:** Pombiliti is a long-term enzyme replacement therapy used in combination with the enzyme stabilizer Opfolda for the treatment of adults with late-onset Pompe disease (acid α-glucosidase [GAA] deficiency). **Posology and administration:** Treatment should be supervised by a physician experienced in the management of patients with Pompe disease or other inherited metabolic or neuromuscular diseases. Pombiliti must be used in combination with Opfolda 65 mg hard capsules. Posology: The recommended dose of Pombiliti is 20 mg/kg of body weight every other week. The Pombiliti infusion should start 1 hour after taking Opfolda capsules. In the event of infusion delay, the start of infusion should not exceed 3 hours from taking Opfolda. **Switching patients from another enzyme replacement therapy (ERT):** If the patient is switching from another ERT to Pombiliti in combination with Opfolda therapy, the patient can be started with Pombiliti-Opfolda therapy at the next scheduled dosing time (i.e., approximately 2 weeks after the last ERT administration). Patients who have switched from another ERT to Pombiliti in combination with Opfolda therapy should be advised to continue with any premedications used with the previous ERT therapy to minimise infusion-associated reactions (IARs). Depending on tolerability, premedication may be modified. **Missed dose:** If the Pombiliti infusion cannot be started within 3 hours of oral administration of Opfolda, reschedule treatment of Pombiliti and Opfolda at least 24 hours after taking Opfolda. If Pombiliti and Opfolda are both missed, treatment should occur as soon as possible. **Special populations:** Renal and hepatic impairment: The safety and efficacy of Pombiliti in combination with Opfolda therapy have not been evaluated in patients with renal and/or hepatic impairment. No dose adjustment is required in patients with renal impairment. Elderly: There is limited experience with the use of Pombiliti in combination with Opfolda therapy in patients above the age of 65 years old. There is no dose adjustment required in elderly patients. Paediatric population: The safety and efficacy of Pombiliti in combination with Opfolda therapy in paediatric patients less than 18 years old have not yet been established. No data are available. **Method of administration:** Pombiliti should be infused in a stepwise manner. Please consult SmPC for further details. **Contraindications:** Life-threatening hypersensitivity to the active substance, or to any of the excipients. Contraindication to Opfolda. **Special warnings and precautions for use:** Pombiliti must be used in combination with Opfolda 65 mg hard capsules. Anaphylaxis and infusion-associated reactions: Serious anaphylaxis and IARs have occurred in some patients during infusion and following infusion with Pombiliti. Reduction of the infusion rate, temporary interruption of the infusion, symptomatic treatment with oral antihistamine, or antipyretics, and appropriate resuscitation measures should be considered to manage serious IARs. If anaphylaxis or severe allergic reactions occur, infusion should be immediately paused, and appropriate medical treatment should be initiated. The current medical standards for emergency treatment of anaphylactic reactions are to be observed and cardiopulmonary resuscitation equipment should be readily available. The risks and benefits of re-administering Pombiliti following anaphylaxis or severe allergic reaction should be carefully considered, and appropriate resuscitation measures made available if the decision is made to readminister the medicinal product. Risk of acute cardiorespiratory failure in susceptible patients: Patients with acute underlying respiratory illness or compromised cardiac and/or respiratory function may be at risk of serious exacerbation of their cardiac or respiratory compromise during infusions. Appropriate medical support and monitoring measures should be readily available during Pombiliti infusions. Immune complex-related reactions: Immune complex-related reactions have been reported with other ERTs in patients who had high IgG antibody titres, including severe cutaneous reactions and nephrotic syndrome. If immune complex-related reactions occur, discontinuation of the administration of Pombiliti should be considered and appropriate medical treatment should be initiated. The risks and benefits of re-administering Pombiliti following an immune complex-related reaction should be reconsidered for each individual patient. Sodium: This medicinal product contains 10.5 mg sodium per vial. This is equivalent of 0.52% of the WHO recommended maximum daily intake of 2 g sodium for an adult. **Interactions:** No interaction studies have been performed. As Pombiliti is a recombinant human protein, it is an unlikely candidate for cytochrome P450 or P-gP mediated interactions with other medicinal products. **Fertility, pregnancy and lactation:** Contraception in females: Reliable contraceptive measures must be used by women of childbearing potential during treatment with Pombiliti in combination with Opfolda, and for 4 weeks after discontinuing treatment. The medicinal product is not recommended in women of childbearing potential not using reliable contraception. Pregnancy: There are no clinical data from the use of Pombiliti in combination with Opfolda in pregnant women. Pombiliti in combination with Opfolda therapy is not recommended during pregnancy. Breast-feeding: It is not known if Pombiliti and Opfolda are secreted in human breast milk. A decision must be made whether to discontinue breast-feeding or to discontinue/abstain from Pombiliti in combination with Opfolda therapy taking into account the benefit of breast-feeding for the child and the benefit of therapy for the woman. Fertility: There are no clinical data on the effects of Pombiliti on fertility. **Undesirable effects:** Very Common (≥1/10): Headache. Common (≥1/100): Anaphylactic reaction, dizziness, tremor, somnolence, dysgeusia, tachycardia, flushing, dyspnoea, cough, diarrhoea, nausea, abdominal pain, flatulence, abdominal distension, vomiting, urticaria, rash, pruritus, hyperhidrosis, muscle spasms, myalgia, muscular weakness, fatigue, pyrexia, chills, chest discomfort, infusion site swelling, pain, blood pressure increased. IARs reported in the phase 3 study during or within 2 hours of infusion with Pombiliti included: abdominal distension, chills, pyrexia, dizziness, dysgeusia, dyspnoea, pruritis, rash and flushing. 0.7% of patients experienced anaphylaxis during the phase 3 trial receiving Pombiliti. See SmPC for complete list of adverse reactions. **List price:** 1 vial £987.00 **Legal Category:** POM. **Marketing Authorisation Number:** PLGB 25823/0003. **Marketing Authorisation Holder:** Amicus Therapeutics UK Limited, One Globeside, Fieldhouse Lane, Marlow, Buckinghamshire, SL7 1HZ. **Date of Preparation:** August 2023 **Document Number:** PP-AT-UK-0007-0823. Further information is available from: Amicus Therapeutics UK Ltd.

ADVERSE EVENTS SHOULD BE REPORTED

▼ This medicinal product is subject to additional monitoring. This will allow quick identification of new safety information. Healthcare professionals are asked to report any suspected adverse reactions. See section 4.8 of SmPC for how to report adverse reactions.

For the UK (including Northern Ireland), reporting forms and information can be found at **www.yellowcard.mhra.gov.uk**. Adverse events should also be reported to Amicus on 08082346864 or via email to **drugsafety@amicusrx.com**

Opfolda® (miglustat) 65 mg hard capsules

Note: Please refer to Summary of Product Characteristics (SmPC) before prescribing. Opfolda (miglustat) 65 mg hard capsules must be used in combination with Pombiliti ▼ (cipaglucosidase alfa). Because of this, the summary of product characteristics (SmPC) for Pombiliti should be consulted in relation to its safety profile before taking Opfolda. Name of product: Opfolda 65mg hard capsules. **Pharmaceutical form:** Each hard capsule contains 65 mg of miglustat. **Indication:** Opfolda is an enzyme stabiliser of Pombiliti long-term enzyme replacement therapy in adults with late-onset Pompe disease (acid α glucosidase [GAA] deficiency). **Posology and Administration:** Treatment should be supervised by a physician experienced in the management of patients with Pompe disease or other inherited metabolic or neuromuscular diseases. Opfolda 65 mg hard capsules must be used in combination with Pombiliti. Posology: The recommended dose is to be taken every other week in adults aged 18 years and older and is based on body weight: for patients weighing ≥ 50 kg, the recommended dose is 260 mg (4 capsules of 65 mg) and for patients weighing ≥ 40 kg to < 50 kg, the recommended dose is 195 mg (3 capsules of 65 mg). Opfolda 65 mg hard capsules should be taken orally approximately 1 hour but no more than 3 hours before the start of the Pombiliti infusion. Missed dose: If the Opfolda dose is missed, treatment should occur as soon as possible. If it is not taken, do not start the Pombiliti infusion. Pombiliti infusion can start 1 hour after Opfolda is taken. **Special populations:** Renal and hepatic impairment: The safety and efficacy of Opfolda in combination with Pombiliti therapy have not been evaluated in patients with renal and/or hepatic impairment. No dose adjustment is required in patients with renal or hepatic impairment. Elderly: There is limited experience with the use of Opfolda in combination with Pombiliti therapy in patients above the age of 65 years old. There is no dose adjustment required in elderly patients. Paediatric population: The safety and efficacy of Opfolda in combination with Pombiliti therapy in paediatric patients less than 18 years old have not yet been established. No data are available. **Method of administration:** For oral use. Should be swallowed whole on an empty stomach. Patients should fast 2 hours before and 2 hours after taking Opfolda 65 mg hard capsules. During this 4 hour fasting period, water, fat-free (skimmed) cow's milk, and tea or coffee with no cream, sugars, or sweeteners can be consumed. The patient can resume normal eating and drinking 2 hours after taking Opfolda. **Contraindications:** Hypersensitivity to the active substance or to any of the excipients. Contraindication to Pombiliti. **Special warnings and precautions for use:** Opfolda 65 mg hard capsules must be used in combination with Pombiliti. **Interactions:** Food Interaction: Patients should fast for 2 hours before and 2 hours after taking Opfolda. **Fertility, pregnancy, lactation:** Contraception in females: Reliable contraceptive measures must be used by women of childbearing potential during treatment with Opfolda in combination with Pombiliti, and for 4 weeks after discontinuing treatment. The medicinal product is not recommended in women of childbearing potential not using reliable contraception. Pregnancy: There are no clinical data from the use of Opfolda in combination with Pombiliti in pregnant women. Opfolda in combination with Pombiliti therapy is not recommended during pregnancy. Breast-feeding: It is not known if Opfolda and Pombiliti are secreted in human breast milk. A decision must be made whether to discontinue breast-feeding or to discontinue/abstain from Opfolda in combination with Pombiliti therapy taking into account the benefit of breast-feeding for the child and the benefit of therapy for the woman. Fertility: There are no clinical data on the effects of Opfolda in combination with Pombiliti therapy on fertility. **Undesirable effects:** Very Common (≥1/10): Headache. Common (≥1/100): Tremor, dysgeusia, tachycardia, dyspnoea, diarrhoea, nausea, abdominal pain, flatulence, abdominal distension, vomiting, constipation, urticaria, rash, pruritis, hyperhidrosis, muscle spasms, myalgia, muscular weakness, fatigue, pyrexia, chills, blood pressure increased. See SmPC for complete list of adverse reactions. **List price:** 24 capsule bottle £700.14. **Legal Category:** POM. **Marketing Authorisation Number:** PLGB 25823/0004. **Marketing Authorisation Holder:** Amicus Therapeutics UK Limited, One Globeside, Fieldhouse Lane, Marlow, Buckinghamshire, SL7 1HZ. **Date of Preparation:** August 2023 **Document Number:** PP-AT-UK-0008-0823. Further information is available from: Amicus Therapeutics UK Ltd.

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Pombiliti® (cipaglucosidase alfa) + Opfolda® (miglustat) 65 mg capsules

REFERENCES
1. OPFOLDA® Summary of Product Characteristics;
2. POMBILITI® Summary of Product Characteristics.

PP-AT-UK-0018-0623 | Date of preparation August 2023

Amicus Therapeutics®