To: CN=Keiichi Enomoto/OU=AP/O=LLY@Lilly; CN=Yasushi Ito/OU=AP/O=LLY@Lilly; CN=Yumi Kinoshta/OU=AP/O=LLY@Lilly; CN=Yasuko Kojima/OU=AP/O=LLY@Lilly; CN=Sachiko Konaka/OU=AP/O=LLY@Lilly; JP_Zyprexa_Safety; US_Zyprexa_Japan Safety List; CN=Hiromasa Tara/OU=AP/O=LLY@Lilly; CN=Andrew J Wood/OU=AP/O=LLY@Lilly
CC: CN=Mayumi Hagiwara/OU=AP/O=LLY@Lilly; CN=Namie Hara/OU=AP/O=LLY@Lilly; CN=Tetsu Kawade/OU=AP/O=LLY@Lilly; CN=Mikihito Kosuge/OU=AP/O=LLY@Lilly; CN=Rie Nagashiro/OU=AP/O=LLY@Lilly; CN=Kenji Nobuhara/OU=AP/O=LLY@Lilly; CN=Yukari Ohno/OU=AP/O=LLY@Lilly; CN=Fumiko Sakakibara/OU=AP/O=LLY@Lilly; CN=Takashi Taniguchi/OU=AP/O=LLY@Lilly; CN=Koji Yamaguchi/OU=AP/O=LLY@Lilly
Date: 03/25/2002 10:13:12 AM
From: CN=Noriko Akagi/OU=AP/O=LLY
Subject: The result of the meeting with the MHLW today

Dear all,

I would like to let you know the result of the meeting today.

From the beginning of the meeting, the officers strongly suggested we take safety actions, such as 'doctor letters' or the revision of 'contraindications' section in the JP package insert.

We, of course, did say we thought no safety actions were necessary now because of the following reasons:

- The JP package insert already mentions 'to pay attention to the treatment for the patients with diabetes risk factors,' and 'diabetic coma and ketoacidosis'.
- Patients with schizophrenia have diabetes mellitus higher than the general population
- The incidence of diabetes between olanzapine v.s. haloperidol, or olanzapine v.s. risperidone were not different in studies.
- Incidences of diabetes are not different among antipsychotic agents
- According to a study, olanzapine does not effect insulin secretion
- Based on the result of the clinical trials, a 'doctor letter' or 'contraindications' are too strict.

The officers, however, said that they already know or understood what we have said. But the about 10 cases, especially including 2 death cases, for olanzapine have been reported in a only half years. Therefore, they called us to request some safety actions, including distribution of a 'Doctor letters' ASAP. If we do not take actions, they would strongly indicate safety actions, such as a 'doctor letters', or mentioning the patients with the risk factors in the 'contraindication' section.

The officers also said that the actions taken by the authorities of EU or US are usually too late, so the MHLW would like to take the action appropriately.
So, we should make draft of the revision as soon as possible within a couple days and fax to the MHLW. Ito-sensei and I will talk with Wood-san tomorrow morning. We are planning that the draft will be made and sent to Indy tomorrow, and discussed at the tel conference in the evening of March 26 (Indy time) /morning of March 27 (Japan time).

with best regards,
Noriko Akagi