UCB reference No.: RXCE06E1662

Approved by UCB 28-Jan-2008

Clinical Study Summary (CSS)

DEV/SGE/00235.2008

CT Registry ID#: NCT00643500
Study No.: N01033

These results are supplied for informational purposes only. Prescribing decisions should be made based on the approved package insert.

Based on Clinical Study Report document reference code: RRCE03J0301

Proprietary Drug Name	**INN**	**Therapeutic area and indication(s)**
Keppra® Tablets	Levetiracetam	Partial Onset Seizures

Name of Sponsor/Company: UCB Pharma SA

Title of Study:
A Phase IV-Pharmacovigilance Study of Keppra®. SPAIN – SKATE : Safety of Keppra® as Adjunctive Therapy in Epilepsy

Investigator(s) (number only): Not specified in the CSR

Study Center(s) (number only): 80

Length of Study:
Date first patient enrolled: 15-Jan-2002
Date last patient completed: 30-May-2003

Phase of Development: Phase IV (Therapeutic use)

Abstract:
The objectives of the study were to obtain further information about the optimal dose and the efficacy of levetiracetam (LEV) in daily clinical practice, and to confirm the favorable safety and tolerability profiles of the drug observed during clinical development. The primary efficacy parameters were the percentage reduction from historical baseline for partial and total seizure frequency per week over the 16-week treatment period, the retention rate at week 16, defined as the number of subjects continuing to take LEV at the end of the treatment period divided by the number of subjects who took at least one dose of study medication, the Patient-Weighted Quality of Life in Epilepsy Inventory-Form 10 (QOLIE-10-P) and the global Evaluation Scale (GES) at the end of the treatment period. Safety assessments included monitoring of adverse events (AE). Subjects were to be older than 16 years, experiencing epilepsy with partial seizures, whether or not secondarily generalized, and had taken at least 1 concomitant marketed anti-epileptic drug. The trial consisted of a 16-week treatment period with an initial dose of 1000 mg/day LEV. LEV could be increased to a maximum dose of 3000 mg/day. In case of withdrawal, a down-titration period of up to 4 weeks and a safety visit 2 weeks after last investigational drug intake was performed. The retention rate, QOLIE-10-P total score and GES were analyzed descriptively using summary statistics. The percent reduction from baseline in partial/total seizure frequency per week was presented by means of descriptive statistics.

Number of Subjects:	**LEV**
Planned, N:	400
Enrolled, N:	342
Completed, n (%):	296 (86.5)
Final status missing, n (%):	5 (1.5)
Number of Subjects Withdrawn, n (%):	41 (12.0)
Withdrawn due to Adverse Events, n (%):	14 (4.1)
Withdrawn for Lack of Efficacy, n (%):	15 (4.4)
Withdrawn for Other Reasons, n (%):	12 (3.5)

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Demography:	**LEV (N=342)**
Gender (Females/Males):	185/157
Age (years), mean (SD):	38.86 (13.50)
Race, n (%):	
Caucasian:	259 (75.7)
Hispanic:	83 (24.3)

Safety Outcomes:

- Summary of treatment emergent adverse events, deaths, other serious adverse events and certain other significant adverse events:

Treatment-emergent AEs (TEAEs) were experienced by 30.1% of the subjects during the trial. The most common TEAEs were nervous system disorders (21.1% of subjects) and psychiatric disorders (6.1% of subjects). TEAEs considered to be related to the study drug by the Investigator were reported for 26.6% of subjects.

There were no deaths in this trial. Six (1.8%) subjects reported serious AEs (SAEs) during the trial. For 4 (1.2%) subjects, these were considered to be drug-related. Fifteen (4.4%) subjects experienced an AE leading to permanent study drug discontinuation.

Treatment Emergent AEs (TEAE):	**LEV (N=342)**
Subjects with at least one TEAE, n (%):	103 (30.1)
MedDRA Primary System Organ Class with an incidence of ≥ 2%	*n (%) [n considered drug-related by the Investigator]*
Nervous system disorders	72 (21.1) [65]
Psychiatric disorders	21 (6.1) [20]
Gastrointestinal disorders	15 (4.4) [13]
General disorders and administration site conditions	12 (3.5) [11]
Death and Other SAEs:	**LEV (N=342)**
Subjects with SAEs, n (%):	6 (1.8)
MedDRA Primary System Organ Class	*n (%) [n considered drug-related by the Investigator]*
Nervous system disorders	2 (0.6) [2]
Psychiatric disorders	2 (0.6) [2]
Injury, poisoning and procedural complications	1 (0.3) [0]
Metabolism and nutrition disorders	1 (0.3) [0]

Primary Outcomes:

Of the 342 subjects enrolled, 296 (86.5%) subjects completed the 16-week treatment period. The median (Q1-Q3) percent reduction over the 16-week treatment period in the partial and total seizure frequency per week was 55% (10.52-88.10) and 55% (10.69-88.10), respectively. An increase in the QOLIE-10-P total score was observed (mean=10.15, sd=17.78), indicating a noticeable improvement of health-related quality of life at the 16-week treatment period. A total of 63.5% of the subjects were rated by the Investigator as having moderate or marked improvement in their disease severity since starting the study medication. Slight improvement in disease severity was reported for 16.3% of the subjects while no change was reported for 13.9% of the subjects. Worsening of the condition (slight, moderate or marked) was reported in 6.3% of the subjects.

Publication Reference(s) based on the study: None

Date of report: 28-Jan-2008