Medicines & Healthcare products
Regulatory Agency

Public Assessment Report

National Procedure

Dapagliflozin 5 mg film-coated tablets
Dapagliflozin 10 mg film-coated tablets

dapagliflozin

PL 25258/0457-0458

Glenmark Pharmaceuticals Europe Limited

LAY SUMMARY
Dapagliflozin 5 mg and 10 mg film-coated tablets
dapagliflozin

This is a summary of the Public Assessment Report (PAR) for Dapagliflozin 5 mg and 10 mg film-coated tablets. It explains how these products were assessed and their authorisation recommended, as well as their conditions of use. It is not intended to provide practical advice on how to use these products.

These products will be referred to as Dapagliflozin tablets in this lay summary for ease of reading.

This application was approved under International Recognition procedure (IRP). The Reference Regulator (RR) was the EU/EEA, with the procedure number (IS/H/0558/001-002/DC). The procedure followed route A.

These applications were approved under Regulation 51B of the Human Medicines Regulation 2012, as amended (previously Article 10.1 of Directive 2001/83/EC, as amended).

For practical information about using Dapagliflozin tablets, patients should read the Patient Information Leaflet (PIL) or contact their doctor or pharmacist.

What are Dapagliflozin tablets and what are they used for?
Because Dapagliflozin tablets are generic medicines, studies in healthy volunteers have been limited to tests to determine that it is bioequivalent to the reference medicine. Two medicines are bioequivalent when they produce the same levels of the active substance in the body.

Dapagliflozin tablets are used to treat:
• **Type 2 diabetes**
- in adults and children aged 10 years and older.
- if your type 2 diabetes cannot be controlled with diet and exercise.
- Dapagliflozin can be used on its own or together with other medicines to treat diabetes.
- It is important to continue to follow the advice on diet and exercise given to you by your doctor, pharmacist or nurse.
• **Heart failure**
- in adults (aged 18 years and older) when the heart does not pump blood as well as it should.
• **Chronic kidney disease**
- in adults with reduced kidney function.

What is type 2 diabetes and how does Dapagliflozin help?
• In type 2 diabetes the patient's body does not make enough insulin or is not able to use the insulin it makes properly. This leads to a high level of sugar in the blood. This can lead to serious problems like heart or kidney disease, blindness, and poor circulation in the arms and legs. Dapagliflozin works by removing excess sugar from the patient's body. It can also help prevent heart disease.

What is heart failure and how does Dapagliflozin help?

• This type of heart failure occurs when the heart does not pump blood to the lungs and the rest of the body as well as it should. This can lead to serious medical problems and need for hospital care.
• The most common symptoms of heart failure are feeling breathless, feeling tired or very tired all the time, and ankle swelling.
• Dapagliflozin helps protect the patient's heart from getting worse and improves the symptoms. It can lower the need to go to hospital and can help some patients to live longer.

What is chronic kidney disease and how does Dapagliflozin help?

• When the patient has chronic kidney disease, the kidneys may gradually lose their function. This means they would not be able to clean and filter the patient's blood the way they should. Loss of kidney function can lead to serious medical problems and need for hospital care.
• Dapagliflozin helps protect the patient's kidneys from losing their function. That can help some patients to live longer.

How do Dapagliflozin tablets work?

Dapagliflozin film-coated tablet contains the active substance dapagliflozin. It belongs to a group of medicines called "sodium glucose co-transporter-2 (SGLT2) inhibitors". They work by blocking the SGLT2 protein in your kidney. By blocking this protein, blood sugar (glucose), salt (sodium) and water are removed from your body via the urine.

How are Dapagliflozin tablets used?

The pharmaceutical form of these medicines is film-coated tablets, and the route of administration is oral (by mouth).
The recommended dose is one 10 mg tablet each day.
• The patient's doctor may start the patient on a 5 mg dose if has a liver problem.
• The patient's doctor will prescribe the strength that is right for the patient.

Taking this medicine:

• The tablet should be swallowed whole with half a glass of water.
• The patient can take the tablet with or without food.
• The patient can take the tablet at any time of the day. However, they should try to take it at the same time each day. This will help the patient to remember to take it.

The patient's doctor may prescribe Dapagliflozin together with other medicine(s).

For further information on how Dapagliflozin tablets are used, refer to the PIL and Summaries of Product Characteristics (SmPCs) available on the Medicines and Healthcare products Regulatory Agency (MHRA) website.

These medicines can only be obtained with a prescription.

The patient should always take the medicine exactly as their doctor/pharmacist has told them. The patient should check with their doctor or pharmacist if they are not sure.

What benefits of Dapagliflozin tablets have been shown in studies?

Because Dapagliflozin tablets are generic medicines, studies in healthy volunteers have been limited to tests to determine that they are bioequivalent to the reference medicines Forxiga 5mg and 10 mg film-coated tablets. Two medicines are bioequivalent when they produce the same levels of the active substance in the body.

What are the possible side effects of Dapagliflozin tablets?
For the full list of all side effects reported with these medicines, see Section 4 of the PIL or the SmPCs available on the MHRA website.

If a patient gets any side effects, they should talk to their doctor, pharmacist or nurse. This includes any possible side effects not listed in the product information or the PIL that comes with the medicine. Patients can also report suspected side effects themselves, or a report can be made on their behalf by someone else who cares for them, directly via the Yellow Card scheme at https://yellowcard.mhra.gov.uk or search for 'MHRA Yellow Card' online. By reporting side effects, patients can help provide more information on the safety of this medicine.

Because Dapagliflozin tablets are generic medicines and are bioequivalent to the reference medicines, its benefits and possible side effects are considered to be the same as the reference medicines.

Why were Dapagliflozin tablets approved?
MHRA decided that the benefits are greater than the risks and recommended that these medicines can be approved for use.

What measures are being taken to ensure the safe and effective use of Dapagliflozin tablets?
As for all newly-authorised medicines, an Risk Management Plan (RMP) has been developed for Dapagliflozin tablets. The RMP details the important risks of Dapagliflozin tablets, how these risks can be minimised, any uncertainties about Dapagliflozin tablets (missing information), and how more information will be obtained about the important risks and uncertainties.

The following safety concerns have been recognised for Dapagliflozin tablets:

Summary of safety concerns	
Important identified risks	• Diabetic Ketoacidosis including events with atypical presentation
Important potential risks	• Bladder cancer • Breast cancer • Prostate cancer • Lower limb amputation
Missing information	• Use in patients with NYHA class IV • Long-term safety in the paediatric population (aged 10 years and above)

The information included in the SmPC and the PIL is compiled based on the available quality, non-clinical and clinical data, and includes appropriate precautions to be followed by healthcare professionals and patients. Side effects of Dapagliflozin tablets are continuously monitored and reviewed including all reports of suspected side-effects from patients, their carers, and healthcare professionals.

An RMP and a summary of the pharmacovigilance system have been provided with these applications and are satisfactory.

Other information about Dapagliflozin tablets

Marketing authorisations were granted in the United Kingdom on 23 December 2024. A subsequent change of ownership procedure took place on 7th of March 2025 from the original marketing authorisation holder (MAH); Adalvo Limited Malta (PL 25258/0457-0458) to the current MAH, Glenmark Pharmaceuticals Europe Limited (PL 25258/0457-0458).

The full PAR for Dapagliflozin tablets follows this summary.

This summary was last updated in May 2025.

TABLE OF CONTENTS

I. INTRODUCTION

Based on the review of the data on quality, safety and efficacy, the Medicines and Healthcare products Regulatory Agency (MHRA) considered that the applications for Dapagliflozin 5 mg and 10 mg film-coated tablets (PL 25258/0457-0458) could be approved.

The products are approved for the following indications:

Type 2 diabetes mellitus

Dapagliflozin 5 mg film-coated tablets is indicated in adults and children aged 10 years and above for the treatment of insufficiently controlled type 2 diabetes mellitus as an adjunct to diet and exercise.

- as monotherapy when metformin is considered inappropriate due to intolerance.
- in addition to other medicinal products for the treatment of type 2 diabetes.

For study results with respect to combination of therapies, effects on glycaemic control, cardiovascular and renal events, and the populations studied, see sections 4.4, 4.5 and 5.1.of the SmPC.

Heart failure

Dapagliflozin 5 mg film-coated tablets is indicated in adults for the treatment of symptomatic chronic heart failure.

Chronic kidney disease

Dapagliflozin 5 mg film-coated tablets is indicated in adults for the treatment of chronic kidney disease.

The name of the cative substance is dapagliflozin which belongs to the Pharmacotherapeutic group of drugs used in diabetes, sodium-glucose co-transporter 2 (SGLT2) inhibitors.

Mechanism of action

Dapagliflozin is a highly potent (K_i: 0.55 nM), selective and reversible inhibitor of SGLT2.

Inhibition of SGLT2 by dapagliflozin reduces reabsorption of glucose from the glomerular filtrate in the proximal renal tubule with a concomitant reduction in sodium reabsorption leading to urinary excretion of glucose and osmotic diuresis. Dapagliflozin therefore increases the delivery of sodium to the distal tubule which increases tubuloglomerular feedback and reduces intraglomerular pressure. This combined with osmotic diuresis leads to a reduction in volume overload, reduced blood pressure, and lower preload and afterload, which may have beneficial effects on cardiac remodelling and diastolic function and preserve renal function. The cardiac and renal benefits of dapagliflozin go beyond the blood glucose-lowering effect and not limited to patients with diabetes as demonstrated in the DAPA-HF, DELIVER and DAPA-CKD studies. Other effects include an increase in haematocrit and reduction in body weight.

Dapagliflozin improves both fasting and post-prandial plasma glucose levels by reducing renal glucose reabsorption leading to urinary glucose excretion. This glucose excretion (glucuretic effect) is observed after the first dose, is continuous over the 24-hour dosing interval and is sustained for the duration of treatment. The amount of glucose removed by the kidney through this mechanism is dependent upon the blood glucose concentration and GFR. Thus, in subjects with normal blood glucose and/or low GFR, dapagliflozin has a low propensity to cause hypoglycaemia, as the amount of filtrated glucose is small and can be reabsorbed by SGLT1 and unblocked SGLT2 transporters. Dapagliflozin does not impair normal endogenous glucose production in response to hypoglycaemia. Dapagliflozin acts independently of insulin secretion and insulin action. Improvement in homeostasis model assessment for beta cell function (HOMA beta-cell) has been observed in clinical studies with dapagliflozin.

The SGLT2 is selectively expressed in the kidney. Dapagliflozin does not inhibit other glucose transporters important for glucose transport into peripheral tissues and is > 1 400 times more selective for SGLT2 versus SGLT1, the major transporter in the gut responsible for glucose absorption.

This application was approved under International Recognition procedure (IRP). The Reference Regulator (RR) was the EU/EEA, with the procedure number (IS/H/0558/001-002/DC). For the scientific discussion of the quality, non-clinical and clinical assessment conducted by the reference regulator, please refer to the public assessment report on the relevant competent authority's website.

These applications were approved under Regulation 51B of the Human Medicines Regulation 2012, as amended (previously Article 10.1 of Directive 2001/83/EC, as amended).

The MHRA has been assured that acceptable standards of Good Manufacturing Practice (GMP) are in place for these products at all sites responsible for the manufacture, assembly and batch release of these products.

A Risk Management Plan (RMP) and a summary of the pharmacovigilance system have been provided with these applications and are satisfactory.

Marketing authorisations were granted on 23 December 2024.

II. PRODUCT INFORMATION

SUMMARY OF PRODUCT CHARACTERISTICS (SmPC)

The SmPCs are in line with current guidelines and is/are satisfactory.

PATIENT INFORMATION LEAFLET (PIL)

The PIL is in line with current guidelines and is satisfactory.

LABEL

The labelling is in line with current guidelines and is satisfactory.

III. QUALITY ASPECTS

MHRA considered that the quality data submitted for these applications is satisfactory.

The grant of marketing authorisations was recommended.

IV. NON-CLINICAL ASPECTS

MHRA considered that the non-clinical data submitted for these applications is satisfactory.

The grant of (marketing authorisations was recommended.

V. CLINICAL ASPECTS

MHRA considered that the clinical data submitted for these applications is satisfactory.

The grant of marketing authorisations was recommended.

VI. RISK MANAGEMENT PLAN (RMP)

The applicant has submitted an RMP, in accordance with the requirements of Regulation 182 of The Human Medicines Regulation 2012, as amended. The applicant proposes only routine pharmacovigilance and routine risk minimisation measures for all safety concerns. This is acceptable.

VII. USER CONSULTATION

A full colour mock-up of the Patient Information Leaflet (PIL) was provided with the application in accordance with legal requirements, including user consultation.

VIII. OVERALL CONCLUSION, BENEFIT/RISK AND RECOMMENDATION

The quality of the products is acceptable, and no new non-clinical or clinical safety concerns have been identified. The benefit/risk balance is, therefore, considered to be positive.

The Summaries of Product Characteristics (SmPCs), Patient Information Leaflet (PIL) and labelling are satisfactory.

In accordance with legal requirements, the current approved UK versions of the SmPCs and PIL for these products are available on the MHRA website.

IX. TABLE OF CONTENT OF THE PAR UPDATE

Steps taken after the initial procedure with an influence on the Public Assessment Report (non-safety variations of clinical significance).

Please note that only non-safety variations of clinical significance are recorded below and in the annexes to this PAR. The assessment of safety variations, where significant changes are made, are recorded on the MHRA website or European Medicines Agency (EMA) website. Minor changes to the marketing authorisation are recorded in the current SmPCs and/or PIL available on the MHRA website.

Application type	**Scope**	**Product information affected**	**Date of grant**	**Outcome**	**Assessment report attached Y/N**