EGYPTIAN DRUG AUTHORITY

هيئة الدواء المصرية

IN THIS ISSUE

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EPVC
The Egyptian Pharmaceutical Vigilance center
مركز اليقظة الصيدلية المصري

EPVC Mission

Pharmaceutical Vigilance administration is the way through which the processes for authorizing, regulating, monitoring and evaluating the safety of any pharmaceutical product or medical device take place, in addition to disseminating any safety information for public health programs, healthcare professionals, and the Egyptian citizen.

The Pharmaceutical vigilance administration is an integral part of the Central Administration of Pharmaceutical Care that works on the enhancement of the pharmaceutical services to guarantee safe and effective use of medications in Egypt, under the patronage of the Egyptian Drug Authority.

Newsletter

October 2025

Volume 19 Issue 10

Safety Reminder: Systemic fluoroquinolone antibiotics

Systemically acting fluoroquinolone antibiotics currently available include ciprofloxacin, moxifloxacin and norfloxacin. All fluoroquinolones have been associated with disabling and potentially irreversible serious adverse reactions and antibiotic resistance.
Reports of serious, prolonged, disabling and potentially irreversible adverse reactions include (but are not limited to) tendonitis/tendon rupture, peripheral neuropathy and psychiatric reactions.
Patients of any age and without pre-existing risk factors have experienced these adverse reactions. These reactions can occur shortly after initiation of treatment, or in the case of tendon rupture, may occur months after stopping therapy.[1,3,4] Remind patients to seek medical attention if they experience signs/symptoms during or following treatment.

Table 1: Safety concerns with systemic fluoroquinolone antibiotics

Body system	Adverse reactions
Cardiac	QT prolongation Aortic aneurysm and dissection Kounis syndrome
Hepatobiliary	Fulminant hepatitis leading to liver failure
Musculoskeletal	Tendonitis Tendon rupture Exacerbation of symptoms of myasthenia gravis
Nervous system	Peripheral neuropathy Seizures
Psychiatric	Anxiety reactions Depression* Psychotic reactions* *which may progress to suicidal ideation
Skin/subcutaneous tissue	Photosensitivity reactions Toxic epidermal necrolysis Stevens-Johnson syndrome Acute generalised exanthematous pustulosis Drug reaction with eosinophilia and systemic symptoms

Clinical Advice

1. Fluoroquinolones should only be prescribed when no suitable alternative exists.
2. Monitor for early signs of adverse reactions, especially tendon pain, neuropathy, psychiatric symptoms, or cardiac events.
3. Discontinue the drug at the first signs of a serious reaction.
4. Use cautiously in patients with risk factors (e.g., elderly, transplant recipients, corticosteroid use).

References

1. Med safe: (click here)

Local Case Safety Report: Case of Two Case Reports from Cairo Regional Center of Premature Rupture of Membranes and Oligohydramnios Following Administration of a Drug Containing a Combination of Caffeine Anhydrous, Drotaverine Hydrochloride, and Paracetamol

Reason for publishing

On July 23, 2025, Cairo Regional Pharmacovigilance Center received 2 reports concerning the adverse drug reaction to a combination product containing Caffeine anhydrous/ Drotaverine Hydrochloride/ Paracetamol as follows:

First case:

Adult Female patient of 19 years old on her second gestation with unmentioned medical history or previous medications.

During her pregnancy in 2025, the patient was administered tablets containing Paracetamol and Caffeine anhydrous/ Drotaverine Hydrochloride/ Paracetamol orally as needed for uterine Spasm.

On July 19, 2025, she developed Premature rupture of membranes on her 37 gestational weeks and also medication error was reported, stating the patient should have delivered normally without caesarean section. However, the patient underwent a caesarean section on the same day because of premature rupture of membrane and delivered a normal full-term baby.

Second case:

Adult Female patient of 24 years old in her 1st gestation with medical history of Myomectomy and not mentioned previous medications.

During pregnancy in December 2024, patient administered Caffeine anhydrous/ Drotaverine Hydrochloride/ Paracetamol tablet orally as needed for uterine Spasm.

On July 19, 2025, patient developed Oligohydramnios on her 33rd gestational week and also medication error was reported. However, the patient underwent a caesarean section on the same day because of oligohydramnios.

The baby was delivered with abdominal distress and failed lactation, requiring admission to the Neonatal Intensive Care Unit (NICU) and high-flow oxygen, but the condition recovered after that.

Background

Premature Rupture of membrane

Prelabor rupture of the membranes (PROM) refers to rupture of the fetal membranes prior to the onset of regular uterine contractions.

Oligohydramnios

Oligohydramnios refers to amniotic fluid volume (AFV) that is less than the minimum expected for gestational age. It is clinically diagnosed by ultrasound examination, preferably based on an objective measurement such as amniotic fluid index (AFI) ≤5 cm or single deepest pocket (SDP) <2 cm, but a subjective assessment of reduced AFV is also acceptable.

Caffeine anhydrous/ Drotaverine Hydrochloride/ Paracetamol combination drug is a mild analgesic, antipyretic and antispasmodic formulated to give extra pain relief.

The tablets are recommended for the treatment of most painful and febrile conditions, for example, headache, including migraine, backache, toothache, rheumatic pain and dysmenorrhea, and the relief of the symptoms of colds, influenza and sore throat. It Is used as an antispasmodic in the management of gastrointestinal spasm.

Mechanism of action:

According to summary of product characteristic (SmPC) of products, Drotaverine is an iso quinoline derivative that exerts its spasmolytic effect directly on smooth muscle. Inhibition of the phosphodiesterase enzyme and the consequent increase in cAMP levels, which lead to smooth muscle relaxation through inactivation of the myosin light chain kinase enzyme (MLCK), are decisive in its mechanism of DrotaverineAccording FDA labelling, the precise mechanism of the analgesic and antipyretic properties of acetaminophen is not established but is thought to primarily involve central actions.

Pregnancy and lactation:

Caffeine has been reported to be an animal teratogen; however, only with doses high enough to cause toxicity in the mother.

Caffeine crosses the placenta. Both human and animal studies have failed to reveal evidence of significant mutagenic or carcinogenic effects.

Acetaminophen is routinely used for short-term pain relief and fever in all stages of pregnancy. It is believed to be safe in pregnancy when used intermittently for short durations.

Drotaverine should not be used in pregnancy

Local Case Safety Report: Case of Two Case Reports from Cairo Regional Center of Premature Rupture of Membranes and Oligohydramnios Following Administration of a Drug Containing a Combination of Caffeine Anhydrous, Drotaverine Hydrochloride, and Paracetamol

Maternal and fetal kinetics

Caffeine and its metabolites readily cross the placenta and can be found in substantial quantities in the amniotic fluid and fetal blood. Maternal caffeine metabolism declines significantly during pregnancy; the half-life increases threefold in the third trimester, reaching a t1/2 of 11.5 to 18 hours. The fetus metabolizes caffeine very slowly, mainly due to immaturity of caffeine-metabolizing hepatic microsome enzymes and lack of CYP 1A2 activity in the placenta (the placenta does not metabolize caffeine). Therefore, even low maternal caffeine consumption can be expected to lead to prolonged fetal caffeine exposure, particularly when the mother is a genetically slow caffeine metabolizer. Infants of smokers have lower umbilical cord blood caffeine concentrations and higher concentrations of caffeine metabolites than infants of nonsmokers, reflecting faster caffeine metabolism in smokers.

Caffeine consumption may increase release of circulating catecholamines, which could cause uteroplacental vasoconstriction leading to fetal hypoxia, but an increase in catecholamines has not been reported consistently. Increases in maternal homocysteine, cholesterol, and cellular cyclic adenosine monophosphate (cAMP) concentrations and changes in maternal reproductive hormone levels have also been reported, and potential adverse effects on pregnancy outcome have been hypothesized but have not been proven.

Labeled information:

According to Summary of product Characteristics (SmPC), it was stated under section of pregnancy and lactation stated that: "it is not recommended for use during pregnancy due to possible increased risk of lower birth weight and spontaneous abortion associated with caffeine consumption and a large amount of data on pregnant women concerning paracetamol indicate neither malformative, nor fetal/neonatal toxicity.

Epidemiological studies on neurodevelopment in children exposed to paracetamol in utero show inconclusive results, If clinically needed, paracetamol can be used during pregnancy however it should be used at the lowest effective dose for the shortest possible time and at lowest possible frequency but due to the caffeine content of this product it should not be used if you are pregnant or breast feeding.

Recommendations for healthcare professionals:

- Educate patients to read the medication leaflet carefully and to avoid self-medicating with combination analgesic or antispasmodic products without prior medical consultation, particularly during pregnancy and lactation.
- Avoid prescribing or recommending combination products containing caffeine anhydrous, drotaverine hydrochloride, and paracetamol during pregnancy, due to the caffeine content and the lack of safety data on drotaverine use in pregnant women.
- Advise pregnant females to use paracetamol alone for short-term pain or fever management, at the lowest effective dose and for the shortest duration possible, when clinically necessary.
- Reinforce the importance of pharmacovigilance reporting by ensuring that any suspected drug-related adverse events in pregnant women are promptly documented and submitted to the Pharmaceutical Vigilance General Administration (PVGA (formerly known as EPVC)) for continuous safety monitoring.

References

1. ***Caffeine anhydrous/ Drotaverine Hydrochloride/***
2. ***Paracetamol SmPC (click here)***
3. ***Drotaverine SmPC (click here)***
4. ***Drugs.com Acetaminophen / caffeine Pregnancy Warnings (click here).***
5. ***FDA label of paracetamol (click here).***
6. ***Caffeine Maternal and fetal kinetics (click here).***
7. ***Premature Rupture of membrane (click here).***
8. ***Oligohydramnios (click here).***

BE-Vigilant Initiative News:

EPVC is pleased to welcome the General Organization for Teaching Hospitals and Institutions (GOTHI) as a valued participant in the BE-Vigilant Initiative – Cohort 1. A total of 54 focal points from various hospitals and institutions have been nominated, reflecting GOTHI's active participation in this learning initiative underscores its strong commitment to advancing pharmacovigilance by improving the efficiency and consistency of collecting and reporting adverse drug reactions (ADRs).

EPVC would like to extend sincere appreciation to the secretariat of specialized medical centers (SMC), for improving pharmacovigilance practices by developing and using various patient education tools to raise awareness of its importance. They provided different sessions and campaigns through the celebration of world patient safety day and world pharmacist day:

Dar Al-Shifa hospital: The PV coordinator provided an awareness session through World Pharmacist Day for 42 of beneficiaries.

Qena Oncology Center: The PV coordinator and quality department provided an awareness session through World Patient Safety Day and World Pharmacist Day for 70 of beneficiaries.

Minya Oncology Center: The PV coordinator provided an awareness session through World Patient Safety Day for 28 of beneficiaries.

Qaleen Specialized Hospital: The PV coordinator provided an awareness session through World Patient Safety Day and World Pharmacist Day for 50 of beneficiaries.

El Alamein Hospital: The PV coordinator and clinical department provided an awareness session through World Patient Safety Day for 50 of beneficiaries.

Damanhour Oncology Center: The PV coordinator and pharmacy administration provided an awareness session through World Pharmacist Day and World Patient Safety Day for 5710 of beneficiaries.

Al-Helal Hospital: The PV coordinator and information center provided an awareness session through World Pharmacist Safety Day for 100 of beneficiaries

Together for Safer medicine Initiative News:

EPVC is extremely proud of the 7th wave participants of the initiative A total of 47 participants from governmental and community pharmacies across 16 governorates in Egypt successfully entered 128 ADR reports into the VigiFlow database.

The participants demonstrated outstanding commitment to spreading pharmacovigilance awareness through social media campaigns and educational lectures targeting both healthcare professionals and the public.

Vigitest Competition news

Healthcare heroes, the journey is far from over! The VigiTest competition returns, offering another opportunity to refine your pharmacovigilance expertise.

After witnessing exceptional participation and brilliant minds in the previous rounds, we're excited to keep the challenge alive for the fifth round. Each month, we'll continue to test your knowledge and skills in pharmacovigilance. Ready to stay on top of your game?

How to Join: It's simple. Scan the QR code provided in the newsletter or tap the link below to access the competition questions. Answer correctly with your knowledge and skill, and you could be one of our monthly winners. Monthly Winners: Every month, the top participants will be celebrated for their expertise.

Annual Winners: At the end of the year, the top consistent winners will be recognized for their brilliance throughout the year and win certificate of appreciation for their participation and outstanding performance. Follow the next release, and stay tuned for the results and winners

The next challenge is just ahead. Don't miss your chance to participate!

Scan the QR code or tap the link below, follow the instruction and answer the questions.

https://forms.gle/4qBri3RvimkhFiL86

Vigitest Competition Answers

We extend our heartfelt thanks to all participants in the Vigitest Competition for your active and dedicated involvement. Your commitment and efforts are truly appreciated.

We received impressive responses from various facilities, with remarkable scores that deserve special recognition. Your participation not only highlights your skills but also contributes to improving our processes.

A special congratulations to those who achieved a full score—your outstanding performance made this initiative a true success. Thank you once again for your valuable contribution, and we look forward to your continued engagement!

Name	Affiliation	Title
Nourhan Mahrous Fetoh	Kafr Elsheikh University Hospital, SCOUH	PV specialist
Soha Tawfik Abde-Hameed	Tanta General Hospital	PV specialist
Omnia Shaban Elshehawy	Pharmacure	PV specialist
Reem Khalil Mohammed	Qena Oncology Center, SMC	PV specialist
Nada Talaat Abdelzaher		PV specialist

Vigitest Competition Answers

Once again, we sincerely thank you for your valuable contribution. Your dedication and hard work are greatly appreciated, and we encourage you to keep up the excellent efforts you've shown. Your commitment and professionalism play a crucial role in the success of our team, and we are excited to witness your continued growth and achievements in the future.

The answers are:

1. **In the context of pharmacovigilance, which of the following is true about the "WHO Global Individual Case Safety Reports (ICSRs)"?**

The Answer is: **They are used to track spontaneous ADRs reported globally**. ICSRs are used globally to track and evaluate spontaneous reports of ADRs. These reports help build safety profiles of drugs and identify potential signals for new risks. They are not limited to clinical trial participants but come from healthcare professionals, patients, and other stakeholders worldwide.

2. Which phase of a clinical trial most directly contributes to identifying long-term adverse effects?

The Answer is: **Phase IV**. Phase IV (post-marketing surveillance) studies involve real-world use and longer durations, which are critical for identifying rare or long-term ADRs.

3. **Which organization coordinates international pharmacovigilance efforts and maintains the global ICSR database?**

The Answer is: **WHO Uppsala Monitoring Centre (UMC).** The UMC, located in Sweden, collaborates with the WHO to manage the global database of Individual Case Safety Reports (ICSRs), known as VigiBase.

4. T/F: Does the signal detection process in pharmacovigilance rely exclusively on data collected from clinical trials?
The Answer is: **False**. Signal detection in PV relies on multiple data sources, including spontaneous reports, scientific literature, EHR, and epidemiological studies, in addition to clinical trial data.

5. T/F: Are "Risk minimization strategies" only implemented for newly marketed drugs with known safety concerns?
The Answer is: **False**. RMMs are implemented with pre-market, post-market and lifetime on the market.

EPVC Tips

On Pharmacovigilance
Cosmetovigilance

Cosmetovigilance means monitoring the safety of cosmetic products after they're sold in the market. If you get a reaction from using a cosmetic product — like redness, itching, swelling, or burning — your report can help protect others.

What You Should Do if You Have a Reaction

1. Stop using the product immediately.
2. Take a clear photo of the reaction and the product (including the batch number if possible).
3. Write down important details like:
4. When the reaction started
5. Where you applied the product
6. How long you used it
7. Any other products used at the same time
8. Seek medical advice if needed (especially for swelling, difficulty breathing, or severe irritation).
9. Report the Reaction

You can report any undesirable effect or serious reaction to the Egyptian Drug Authority (EDA)
Email: pv.cosmetics@edaegypt.gov.eg
Hotline: 15301
Or report through your pharmacy / product distributor / company hotline — they are required to forward it to EDA.

Why Your Report Matters

- Helps the authorities detect unsafe products quickly
- Protects other consumers
- May lead to product recalls or warning labels if needed.

⚠ Even if the reaction seems small, reporting it is important — many small reports together can reveal bigger safety issues.

Visit EDA website to find all medicine- related news, updates and alerts *Click here*

You will find all EPVC Newsletters and DHPCs here

You will also find all alerts regarding counterfeited and falsified products released by Central Administration of Operations *here*

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One report counts

A call for reporting

Please remember that you can report safety information of medicines to EPVC using the following communication information:

What is Pharmacovigilance

Pharmacovigilance (PV) is defined as the science and activities relating to the detection, assessment, understanding and prevention of adverse effects or any other drug- related problem.

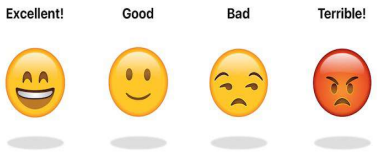
What is the Egyptian Pharmaceutical Vigilance Center?

With the increasing demand for patient's safety which is becoming more stringent, . The Egyptian Pharmaceutical Vigilance Center was established to be responsible for the safety monitoring of the pharmaceutical products throughout its lifecycle and it is the regulatory authority regarding Pharmacovigilance and its applications .

EPVC monitors the safety of all types of pharmaceutical products, including human medicines, biological products, supplements, cosmetics, veterinary medicines, medical devices, Biocides and pesticides

Participate with us

We invite you to take a quick survey on how much our communication with you is effective
We value your feedback! Help us enhance our communication by taking a quick survey. Your insights are crucial in ensuring we meet your expectations.
Survey Link: (Click Here)



Thank you for your valuable input

Communication information

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