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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

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Local Alert: Sub-standardized and Falsified (SF) Product

Egyptian Drug Authority Alert Regarding Averzolid 600mg Counterfeit

The Egyptian Drug Authority (EDA) through the Central Administration of Operations announced an alert regarding presence of counterfeited Averzolid 600mg 10 film coated tablets in the market with batch number 221217. EDA is quarantining the counterfeited batches.

EDA distributed and published circular with all data concerning the counterfeited product and how to differentiate between the original and counterfeit packs on EDA's website <u>(Click here)</u>.

The Egyptian Pharmaceutical Vigilance Center is encouraging public to report any detected packs through <u>(*Click here*)</u>.

Original



Counterfeit



Egyptian Drug Authority Alert Regarding Restylane Lyft Lidocaine Counterfeit

The Egyptian Drug Authority (EDA) through the Central Administration of Operations announced an alert regarding presence of counterfeited Restylane Lyft Lidocaine in the market. EDA is quarantining the counterfeited batches with Lot numbers 16787-9.

EDA distributed and published circular with all data concerning the counterfeited product and how to differentiate between the original and counterfeit packs on EDA's website <u>(Click here)</u>.

The Egyptian Pharmaceutical Vigilance Center is encouraging public to report any detected packs through <u>(Click here)</u>.

Original



Counterfeit







Local Alert: Sub-standardized and Falsified (SF) Product

Egyptian Drug Authority Alert Regarding Fortum 1gm Counterfeit

The Egyptian Drug Authority (EDA) through the Central Administration of Operations announced an alert regarding presence of counterfeited Fortum 1gm in the market. EDA is quarantining the counterfeited batch number TW7T.

EDA distributed and published circular with all data concerning the counterfeited product and how to differentiate between the original and counterfeit packs on EDA's website <u>(Click here)</u>.

The Egyptian Pharmaceutical Vigilance Center is encouraging public to report any detected packs through <u>(*Click here*)</u>.

Original



Counterfeit

Egyptian Drug Authority Decisions

Cancellation of Registration of Gemifloxacin Containing Products

The technical committee of the Egyptian Drug Authority (EDA) decided to cease the marketing of products containing Gemifloxacin as the risk-benefit balance is no more favorable and there are safer quinolone products present in the Egyptian market since it was found that Gemifloxacin may be more genotoxic (harmful to the DNA, the genetic material in cells) and that it may therefore cause more damage to the DNA than other fluoroquinolones.

Refer to Technical committee decision dated 28/07/2022.





Direct Healthcare Professional Communication (DHPC): Ceftriaxone and Cefotaxime – Reminder of Precautions to Minimize Severe Hypersensitivity Reactions and Life-threatening Adverse Events

EPVC in agreement with marketing authorization holders (MAH) of products containing Ceftriaxone and Cefotaxime would like to inform you of the following:

Summary:

- * EPVC has received recently some reports of hypersensitivity, anaphylaxis and life-threatening adverse events which may be linked with Cefotaxime and Ceftriaxone improper administration or administration without doing sensitivity testing.
- * As with all beta-lactam antibacterial agents, serious and occasionally fatal hypersensitivity reactions have been reported. In case of severe hypersensitivity reactions, treatment with cefotaxime and ceftriaxone must be discontinued immediately and adequate emergency measures must be initiated.
- * Before therapy with cefotaxime and ceftriaxone is instituted, careful inquiry should be made to determine whether the patient has had previous hypersensitivity reactions to cefotaxime sodium, ceftriaxone, cephalosporins, penicillin, or other drugs.
- * Cefotaxime and ceftriaxone are strictly contraindicated in subjects with history of immediatetype hypersensitivity to cephalosporins. These products should be given with caution to patients with type 1 hypersensitivity reactions to penicillin. Antibiotics should be administered with caution to any patient who has demonstrated some form of allergy, particularly to drugs.
- * EPVC is reminding Health care professionals (HCPs) with the current precautions; and meth-



od of administration for Cefotaxime and ceftriaxone antibiotics.

* EPVC is reminding HCPs to follow international guidelines for rational and safe use of antibiotics.

Background on safety concern:

Regarding the method of administration take in your consideration the following precautions:

Before beginning treatment, it should be established whether the patient has a history of hypersensitivity reactions to Cefotaxime, ceftriaxone, to other cephaloporins or to any other type of beta-lactam agent (penicillins, monobactams and carbapenems).Caution should be used if they are given to patients with a history of non-severe hypersensitivity to other beta-lactam agents and penicillinsensitive subjects.

Before beginning treatment, Sensitivity test should





Direct Healthcare Professional Communication (DHPC): Ceftriaxone and Cefotaxime – Reminder of Precautions to Minimize Severe Hypersensitivity Reactions and Life-threatening Adverse Events Continued

be done; to ceftriaxone, to other cephalosporins or to any other type of beta-lactam agent, however take in your consideration the followings:

- \Rightarrow The Sensitivity test should be done before each Ceftriaxone dose.
- ⇒ The negative result for Ceftriaxone sensitivity test doesn't guarantee negative hypersensitivity reaction as the ceftriaxone sensitivity test has low sensitivity, however it is useful as it exclude those develop positive sensitivity test result.
- \Rightarrow It is recommended to be administrated in hospital settings for emergency measures.

An anaphylactic reaction (also called anaphylaxis) is a sudden, severe allergic reaction triggered by the body's disease-fighting system (immune system). It is a potentially fatal condition that must be treated immediately. The following are symptoms of anaphylaxis which require immediate medical care:

- \Rightarrow A feeling of warmth in the face (flare) that may include redness.
- \Rightarrow Itching, redness, and swelling of areas of the skin (urticaria).
- \Rightarrow Swelling of the eyes, lips, face, mouth, tongue, or throat.
- \Rightarrow Difficulty breathing, speaking or swallowing.
- \Rightarrow High-pitched whistling sounds when breathing in, often when exhaling (wheezing).
- \Rightarrow Feeling dizzy, lightheaded or fainting.
- \Rightarrow Abdominal pain or cramps.
- \Rightarrow Vomiting or diarrhea.

Sensitivity testing Method:

The diagnosis of beta-lactam allergic reaction can be determined using the standardized diagnostic procedures of the European Network for Drug Allergy (ENDA). Intradermal testing is done by the injection of 0.02–0.05 ml of the hapten solution, raising a small bleb that is marked initially. It should be performed on the volar forearm, although other skin areas can be used.

Particular caution and testing, starting with 1000fold dilutions of the stock reagents, should be used in patients who have experienced severe or lifethreatening reactions such as anaphylaxis.

Skin testing with beta-lactams should be performed under controlled conditions with emergency treatment available, as systemic side-effects may occur up to 10% of the patients being tested for drug allergy.

For full text of Ceftriaxone and Cefotaxime DHPCs please click on the following links:

Ceftriaxone <u>(Click here)</u> Cefotaxime <u>(Click here)</u>

References:

- 1. Ceftriaxone SmPC EMC (Click here)
- 2. Cefotaxime SmPC EMC (Click here)
- 3. Ceftriaxone SmPC FDA (Click here)
- 4. Cefotaxime SmPC FDA (Click here)
- 5. Blackwell Munksgaard Journal (Click here)







Case Report from Cairo: Fexofenadine Hydrochloride 60 mg/ Pseudoephedrine Hydrochloride 120 mg - Ghost Pill Phenomenon with Extended-Release Formulations

The regional center in Cairo received a case of 64year-old female patient weighing 105 kg suffering cough, sneezing, and throat soreness.

Fexofenadine hydrochloride 60 mg/ Pseudoephedrine hydrochloride 120 mg tablets were given to the patient orally on November 24, 2022, as recommended by a pharmacist in a Community Pharmacy.

The patient visited her doctor, who discovered that her blood pressure was elevated (180/100mmHg). He advised stopping Olmesartan and prescribing Valsartan/Hydrochlorothiazide 160/12.5mg pills.

When her blood pressure reached 110/70mmHg, she stopped Valsartan/Hydrochlorothiazide 160/12.5 mg pills and went back to using Olmesartan. Not knowing whether that was upon her doctor's advice or not.

After two days, she had voice hoarseness and cough. Her doctor prescribed her Fexofenadine Hydrochloride 60 mg/ Pseudoephedrine Hydrochloride 120 mg tab.and a mucolytic for two weeks. The dose was not mentioned and the mucolytic name was not mentioned too.

The patient's daughter 35 years and son 27 years used Fexofenadine Hydrochloride 60 mg; Pseudoephedrine Hydrochloride 120 mg and they noticed the tablet residuals as a whole in the stool. The patient observed that too after she knew from her daughter and son.

The patient contacted her doctor who advised her to stop the medication. A pharmacist told her that could be a product quality issue.



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Background:

Fexofenadine : the predominant human and animal active metabolite of terfenadine, is a selective histamine H1 - receptor antagonist. Fexofenadine hydrochloride inhibits histamine induced skin wheal and flare responses. Following single and twice daily oral dose administration, antihistaminic effects occur within one hour, achieve a maximum at two to three hours, and last a minimum of 12 hours. There is no evidence of tolerance to these effects after 28 days of dosing.^[1]

Pseudoephedrine: is a sympathomimetic drug belonging to the phenethylamine and amphetamine chemical classes. Its principal mechanism of action depends on its effects on the adrenergic receptor system, causing vasoconstriction. The most common indication for pseudoephedrine is as a decongestant, for conditions including nasal congestion, sinus congestion, and eustachian tube congestion, as it shrinks swollen nasal mucous membranes and reduces tissue hyperemia and edema.^[2]









Case Report from Cairo: Fexofenadine Hydrochloride 60 mg/ Pseudoephedrine Hydrochloride 120 mg - Ghost Pill Phenomenon with Extended-Release Formulations Continued

Ghost Pill Phenomenon *:* For certain ER (extended release) dosage forms, pharmaceutical scientists have been familiar with the passage of intact tablet-like objects in patients' feces after administration of ER tablets or capsules based on water-insoluble or slowly dissolving excipients. Nevertheless, because of lack of awareness of the "ghost pill" phenomenon, anxiety has ensued among some patients and clinicians, who have less understanding of how drugs are released from these tablets once ingested. ^[3]

As controlled release pill formulations are released slowly, the outer capsule shell may be seen undigested in the stool. It is important to review the medication list for extended release formulations and note that the outer shell can be excreted whole in the stool. ^[4]

Labeled information:

According to Fexofenadine Hydrochloride 60 mg/ Pseudoephedrine Hydrochloride 120 mg SmPC section "Special warnings and Precautions for use":

Patients should be informed that the inactive ingredients of Fexofenadine Hydrochloride 60 mg; Pseudoephedrine Hydrochloride 120 mg may be eliminated in the faeces in a form that may resemble the original tablet. ^[5]

Recommendations for Healthcare Professionals :

1. Patients should be informed that the inactive ingredients of Fexofenadine Hydrochloride 60 mg; Pseudoephedrine Hydrochloride 120 mg may be eliminated in the faeces in a form that may resemble the original tablet^[5]

- 2. It is important to review the medication list for extended-release formulations and note that the outer shell can be excreted whole in the stool. ^[4]
- 3. Extended-release products contain a higher drug load and thus any loss of integrity of the release characteristics of the dosage form has potential problems. While some extended-release products can be divided to provide half-doses, others should only be taken whole. ^[6]
- 4. Patients should be counseled not to crush or chew the extended-release formulations as the efficacy of the medications will be lost or toxicity may result.
- 5. When prescribing such medicines, make sure patients are aware that remnants of the medicine can appear in their stools and provide reassurance that the active medicine will be released. However, if a patient reports a lack of medicine efficacy, further investigations may be required.

References:

- 1. Health Canada (Click here)
- 2. Pharmacy times (Click here)
- 3. Pubmed <u>(Click here)</u>
- 4. NCBI (Click here)
- 5. TGA <u>(Click here)</u>
- *NPS* <u>(Click here)</u>
 Medsafe (Click here)







EPVC News

Together for Safe Medicine Initiative Progress

The pharmacists sharing in the 3rd wave of the Initiative "Together for Safe Medicine " made a lot of valuable activities including posts on social media, banners, videos and training materials (PowerPoint, word, and PDF) aiming to improve their role in applying, practicing, and spreading the science of Pharmacovigilance between healthcare professionals in the hospital pharmacies and public. They succeeded in spreading the meaning and aim of Pharmacovigilance to children and adults by making creative, attractive and simplified videos and by good communication with the public through their community pharmacies.

Acknowledgment

The Egyptian pharmacovigilance center is extremely thankful to all participating pharmacists in the 3rd wave of the Initiative for their important role in increasing the ADRs reporting rate as they have sent 795 adverse drug reaction reports with continuous improvement in reports quality to the Pharmacovigilance national database starting from 20 September 2022 till now.



Egyptian Pharmaceutical Vigilance Center (EPVC) Decentralization Trainings for Raising Reporting Awareness

The Egyptian Pharmaceutical Vigilance Center (EPVC) is pleased to continue the decentralization Program. As a result of the awareness program; the number of cases received through the national database has increased significantly. We are pleased to revise the received cases and provide feedback to the coordinating organizations inquiring any additional training in the effort to improve the quality of the cases filed through the national database.

The Expanded Programme of Immunization (EPI) and Specialized Medical Centers (SMCegy) are two of the most cooperative organizations, and EPVC wishes to convey its thanks and gratefulness for their efforts.







On Pharmacovígílance

Safe Disposal of Needles, Sharps and Vials

Proper disposal of waste is an important step that should always be planned. Particularly; disposal of vials, ampoules, syringes and needles after use.

Place all needles and other sharps in a sharps disposal container immediately after they have been used. This will reduce the risk of needle sticks, cuts, and punctures from loose sharps which may spread infections that cause serious health conditions.

Make sure to destroy used vials to prevent re-filling them by unauthorized personnel for the purpose of counterfeiting and reselling them.





Visit EDA website to find all any medicine- related news, updates and alerts <u>Click here</u> You will find all EPVC Newsletters and DHPCs <u>here</u> You will also find all alerts regarding counterfeited and falsified products released by Central Administration of Operations <u>here</u>







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

One report counts A call for reporting

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

Communication information

The Egyptian Drug Authority (EDA) Pharmaceutical Care Administration The Egyptian Pharmaceutical Vigilance Center (EPVC)



Address: 21 Abd El Aziz AlSoud Street. El-Manial, Cairo, Egypt, PO Box: 11451 Hotline: 15301 Fax: +202 – 23610497 Email: pv@edaegypt.gov.eg, pv.followup@edaegypt.gov.eg Reporting link: www.edaegypt.gov.eg https://sites.google.com/view/epvc-reporting/healthcare-professional-publicadverse-drug-event-reporting/reporting-other-adverse-drug-event-cases



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