

GlaxoSmithKline
Scientific Office
Saudi Arabia
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جلاكسوسميث كلاين
المكتب العلمي المكتب العلمي المكتب العلمي المنافقة العربية السعودية المرابع خيص 01-0090761.
ترخيص 04-01-0004

Date: 17/8/2016

Title: Navidoxine ® (meclozine hydrochloride/pyridoxine hydrochloride) - Labelling Deficiencies

Dear Healthcare Professional,

Navidoxine ® is indicated for the treatment of pregnancy nausea and vomiting. The current label has been found to have some deficiencies that need to be corrected upon permission from the SFDA.

Action Being Taken by GlaxoSmithKline

Revised Labeling: Local prescribing information to be updated to reflect the updated safety data after obtaining the approval from the Saudi Food and Drug Authority. This letter is sent in agreement with the Saudi Food and Drug Authority.

Missing Information in current leaflet:

Dosage and administration: This product should be used in pregnant women only if absolutely necessary, and duration should be as short as possible and dosage should not exceed 50 mg of meclozine per day.

Contraindications: 1. Hypersensitivity to the active substances, to any of the excipients or to piperazine derivatives. 2. Patients with hepatic impairment.

Warnings and Precautions: 1. Due to meclozine hydrochloride anticholinergic properties, this product should be used with caution in patients suffering from: bladder outflow obstruction, glaucoma, pyloric stenosis, impaired gastric and intestinal motility, myasthenia gravis, dementia, asthma.

2. Patients suffering from epilepsy and patients with severe renal impairment should use this product with caution. 3. The concomitant use of alcohol and meclozine hydrochloride should be avoided. 4. The potentiating action of meclozine hydrochloride must be considered when it is used simultaneously with other central nervous system depressant drugs, with drugs having anticholinergic properties, or with MAO inhibitors. 5. Meclozine hydrochloride treatment should be stopped four days before allergy testing to avoid effects on the test results. 6. Long-term use of large doses of pyridoxine is associated with the development of severe peripheral neuropathies; the dose at which these occur is controversial. 7. Because this product contains lactose, patients with rare hereditary problems of galactose intolerance, the Lapp lactase deficiency or glucose-galactose malabsorption should not take this medicine.

Interactions: 1. Dosage adjustments may be necessary, in case of concomitant use of alcohol and CNS depressants with meclozine hydrochloride as the depressant action of these drugs or of meclozine may increase. 2. The potentiating action of meclozine hydrochloride must be considered, and dosage should be adapted on an individual basis, while meclozine is co-administered with anticholinergics, other drugs with anticholinergic effects or MAO inhibitors. 3. Although, no in vitro and no in vivo interaction studies have been performed with meclozine, there is a potential risk for interaction when meclozine is administered to patients on drugs known to be inducers or inhibitors of liver enzymes. 4. Pyridoxine reduces the effects of levodopa. This effect does not occur if a dopa decarboxylase inhibitor is also given. 5. Pyridoxine reduces the activity of altretamine. It has also been reported to decrease serum concentrations of phenobarbital and phenytoin.

Pregnancy and Lactation: This product should be used in pregnant women only if absolutely necessary. Treatment duration should be the shortest possible and dosage should not exceed two tablets (50) mg per day. Epidemiological studies on a large number of women who used meclozine for nausea and vomiting

during pregnancy have not shown that meclozine increases the risk of malformations. Meclozine hydrochloride is probably excreted in breast milk. Therefore this medicinal product should not be used during breast-feeding.

Ability To Perform Tasks That Require Judgement, Motor or Cognitive Skills: Meclozine may impair the ability to react and to concentrate. Patients should be warned of this and cautioned against driving a car or operating machinery. Concomitant use of this product with alcohol or other sedative drugs should be avoided as it aggravates these effects.

Adverse Reactions: Undesirable effects are mostly related to CNS depressant or paradoxical CNS stimulation effects, to anticholinergic properties, or to hypersensitivity reactions of meclozine hydrochloride. The most common adverse effect of meclozine hydrochloride is drowsiness or sedation. Dry mouth is a frequent adverse effect. Blurred vision, nausea and vomiting occur rarely. Others include: anaphylactic shock, anorexia, appetite increased, anxiety, euphoric mood, excitability, hallucinations, insomnia, psychotic disorder, dizziness, sedation, somnolence, headache, paraesthesia, movement disorders (including Parkinsonism), peripheral neuropathy, diplopia, vision blurred, tinnitus, vertigo, palpitations, tachycardia, hypotension, dry throat, nasal dryness, dry mouth, nausea, vomiting, abdominal pain, constipation, diarrhoea, rash, urticaria, dysuria, polyuria, fatigue, weakness, weight increased after long-term use of large doses of pyridoxine.

Overdosage: As with other antihistaminic drugs, overdosage of meclozine hydrochloride may result in CNS depression and/or stimulation. Effects of anticholinergic overload are also observed such as fixed and dilated pupils, flushed face, dry mouth, excitation, hallucinations, and tonic-clonic seizures. Extrapyramidal syndrome has been reported. Other events such as ataxia, tremors, psychoses, hyperthermia, hypotension, hypertension, tachycardia, and arrhythmias have also been reported with antihistaminic drug overdoses. Overdosage in adults may cause CNS depression with drowsiness, coma or excitement, seizures, and postictal depression. In young children, CNS stimulation is predominant. Severe toxicity in children and adults may result in cerebral edema, deep coma, respiratory depression, cardiorespiratory collapse, and death. There is no specific antidote. Treating poisoning by meclozine is basically supportive and symptomatic.

Call for reporting

GlaxoSmithKline will continue to monitor the safety of Navidoxine ® (*meclozine hydrochloride/pyridoxine hydrochloride*) and inform SFDA of any serious adverse event for evaluation. You can assist us in monitoring the safety of Navidoxine ® (*meclozine hydrochloride/pyridoxine hydrochloride*) by reporting adverse reactions:

to GlaxoSmithKline: fax: +966 12 6536660 or by email to faisal.m.shujrah@gsk.com or

SFDA (The National Pharmacovigilance and Drug Safety Center)

Email: npc.drug@sfda.gov.sa Fax: +966-11-2057662 Online: http://ade.sfda.gov.sa/ Toll free number: 8002490000

If you have any questions about the new information, please contact GSK Medical Information Department at GlaxoSmithKline Saudi Arabia by phone: +966 12 6536666 or fax: +966 12 6536660.

Dr Nauman Rashid Medical Director GlaxoSmithKline GCC