เอกสารกำกับยาภาษาอังกฤษ

Summary of Product Characteristics (SPC)

1. Trade name of the drug product (finished product)

Eupenta™ Inj. (Adsorbed Diphtheria-Tetanus-Pertussis-Hepatitis B (rDNA) and *Haemophilus influenzae* type b conjugate vaccine).

2. Qualitative and quantitative composition

Each 0.5 mL of Eupenta™ Inj. contains 15 Lf of diphtheria toxoid, 10 Lf of tetanus toxoid, not less than 4 IU of inactivated pertussis suspension, 10 µg of purified hepatitis B surface antigen (HBsAg) and 30~50 µg of Purified capsular polysaccharide (PRP) of Hib conjugated to the Tetanus toxoid (PRP-T) (as PRP, 10 µg) as active ingredients.

3. Pharmaceutical form

Slightly opaque white suspension for injection.

4. Clinical particulars

4.1 Therapeutic Indications

For active primary immunization against diphtheria, tetanus, pertussis, hepatitis B and *Haemophilus influenzae* type b disease in infants from 6 weeks of age.

4.2 Dosage and Administration

Eupenta™ Inj. is for intramuscular use only.

Recommended for administration of 3 doses (1 dose = 0.5 mL) at 6, 10, 14 weeks of age by intramuscular injection.

(According to EMA guideline, this challenging schedule (6, 10 and 14weeks of age) can be extrapolated to less condensed schedule (for example, 2, 3 and 4 months of age)

The liquid vaccine vial should be shaken before use to homogenize the suspension. The vaccine should be injected intramuscularly. The anterolateral aspect of the upper thigh is the preferred site of injection. An injection into a child's buttocks may cause injury to the sciatic nerve and is not recommended. It must not be injected into the skin as this may give

rise to local reaction. One pediatric dose is 0.5 mL. A sterile syringe and sterile needle must be used for each injection.

4.3 Contraindications

Known hypersensitivity to any component of the vaccine, or a severe reaction to a previous dose of the combination vaccine or any of its constituents is an absolute contraindication to subsequent doses of the combination vaccine or the specific vaccine knows to have provoked an adverse reaction.

There are few contraindications to the first dose of DTwP – fits or abnormal cerebral signs in the newborn period or other serious neurological abnormality are contraindications to the pertussis component. In this case, the vaccines should not be given as a combination vaccine but DT should be given instead of DTwP and HepB and Hib vaccines given separately. The vaccine will not harm individuals currently or previously infected with the hepatitis B virus.

Immune deficiency

Individuals infected with the human immune-deficiency virus (HIV), both asymptomatic and symptomatic, should be immunized with combined vaccine according to standard schedules.

4.4 Special warnings and special precautions for use

It is not recommended to administer EupentaTM Inj. in the gluteal region and it must not be administered intravenously.

Thimerosal (an organomercuric compound) has been used in the manufacturing process of this medicinal product and residues of it are present in the final product. Therefore, sensitization reactions may occur.

As with any injectable vaccine, appropriate medical supervision and treatment should always be readily available in case of immediate allergic reactions, such as anaphylactic shock or anaphylactic reaction, following administration of the vaccine. Before administering the vaccine, precautions should be taken to avoid undesirable reactions.

These precautions include: review of the individual's medical history, particularly regarding hypersensitivity reactions to previous administration of any type of vaccine, as well as the individual's history of recent health disorders and any previous vaccinations.

The administration of any subsequent dose of a vaccine containing the whole-cell pertussis component should be carefully considered if, in connection with the administration of DTP vaccine, one or more of the following effects have been observed:

- 40.0℃ temperature within 48 hours following vaccination (not due to other identifiable causes);
- collapse or shock (hypotonic hyporesponsive episodes) within 48 hours following vaccination;
- persistent crying lasting more than 3 hours during the 48 hours following vaccination;
- convulsions, with or without fever, within 3 days following vaccination.

There may be circumstances, such as high incidence of pertussis, when potential benefits outweigh possible risks.

HIV seropositivity does not represent a contraindication to vaccination. Patients with an immunodeficiency disorder or receiving immunosuppressive therapy may have a reduced immunological response. Individuals infected with the human immuno-deficiency virus (HIV), both asymptomatic and symptomatic, should be immunized with combined vaccine according to standard schedules.

The vaccine must not be injected into a blood vessel.

Eupenta™ inj. (DTwP-HepB-Hib fully liquid combined vaccine) should be administered with caution to subjects with thrombocytopenia or a bleeding disorder since bleeding may occur following an intramuscular administration to these subjects. A fine needle should be used for the vaccination and firm pressure applied to the site (without rubbing) for at least two minutes following administration.

4.5 Interaction with other medicaments and other forms of interaction

As with other intramuscular injections, use with caution in patients on anticoagulant therapy.

Immunosuppressive therapies, including irradiation, antimetabolites, alkylating agents, cytotoxic drugs, and corticosteroids (used in greater than physiologic doses) may reduce the

immune response to vaccines. Short-term (not more than 2 weeks) corticosteroid therapy should not be immunosuppressive.

Immunoglobulins and blood products should be prohibited.

4.6 Pregnancy and lactation

Not applicable. This vaccine is intended only for paediatric use.

4.7 Undesirable effects

The type and rate of adverse reactions of the DTwP-HepB-Hib fully liquid combination vaccine do not differ significantly from the DTwP, HepB and Hib vaccine reactions described separately.

For DTwP, mild local or systemic reactions are common. Some temporary swelling, tenderness and redness at the site of injection together with fever occur in a large proportion of cases. Occasionally severe reactions of high fever, irritability and screaming develop within 24 hours of administration. Hypotonic-hyporesponsive episodes have been reported. Febrile convulsions have been reported at a rate of one per 12500 doses administered. Administration of acetaminophen at the time and 4-8 hours after immunization decreases the subsequent incidence of febrile reactions. The national childhood encephalopathy (Primarily seizures) following DTP immunization. However subsequent detailed reviews of all available studies by a number of groups, including the United States Institute of Medicine, the Advisory Committee on Immunization Practices, and the paediatric associations of Australia, Canada, the United Kingdom and the United States, concluded that the data did not demonstrate a causal relationship between DTwP and chronic nervous system dysfunction in children. Thus there is no scientific evidence that these reactions have any permanent consequences for the children.

Hepatitis B vaccine is very well tolerated. In placebo-controlled studies, with the exception of local pain, reported events such as myalgia and transient fever have not been more frequent than in the placebo group. Reports of severe anaphylactic reactions are very rare. Available date do not indicate a causal association between hepatitis B vaccine and Guillain-Barre syndrome, or demyelinating disorders including multiple sclerosis, nor is there any epidemiological data to support a causal association between hepatitis B vaccination and

chronic fatigue syndrome, arthritis, autoimmune disorders, asthma, sudden infant death syndrome, or diabetes.

Hib vaccine is very well tolerated. Localized reactions may occur within 24 hours of vaccination, when recipients may experience pain and tenderness at the injection site. These reactions are generally mind and transient. In most cases, they spontaneously resolve within two to three days and further medical attention is not required. Mild systemic reactions, including fever, rarely occur following administration of Hib vaccines. More serious reactions are very rare; a causal relationship between more serious reactions and the vaccine has not been established.

Data from clinical studies:

In the clinical trial, Eupenta™ Inj. has been administered as a primary vaccination in 489 subjects. Reported adverse reactions are listed below. Frequencies are based on: Very common: ≥ 1/10, Common: ≥ 1/100 and < 1/10, Uncommon: ≥1/1000 and < 1/100, Rare: ≥ 1/10000 and < 1/1000, Very rare: < 1/10000

Gastrointestinal disorders

Common: Diarrhoea, Vomiting

Uncommon: Infantile colic

General disorders and administration site conditions

Very common: Pyrexia, Injection site erythema, Injection site pain, Injection site edema/swelling/induration

Uncommon: Decreased activity, Injection site reaction

Immune system disorders

Uncommon: Hypersensitivity

Infections and infestations

Uncommon: Gastroenteritis, Nasopharyngitis, Upper respiratory tract infection

Metabolism and nutrition disorders

Very common: Loss of appetite

Neoplasms benign, malignant and unspecified (including cysts and polyps)

Uncommon: Haemangioma

Nervous system disorders

Very common: Sleepiness

Uncommon: Generalised tonic-clonic seizure

Psychiatric disorders

Very common: Irritability/Restlessness

Skin and subcutaneous tissue disorders

Common: Rash

5. Pharmacological properties

5.1 Pharmacodynamic properties (Immunological Data)

The clinical trial performed to assess Immunogenicity and reactogenicity of the vaccine and proved that the vaccine is efficacious.

5.2 Pharmacokinetic properties

Not applicable

6. Pharmaceutical particulars

6.1 List of excipient(s)

Adjuvant	: Aluminum Hydroxide Gel (as aluminum ion) ---------- 0.39 mg
Buffering agent	: Sodium hydrogen Phosphate Heptahydrate ---------- 0.080 mg
	: Monobasic Sodium Phosphate Dihydrate---------- 0.733 mg
Tonicity agent	: Sodium Chloride ---------- 4.25 mg
Stabilizer	: Polysorbate 80 ---------- 5 µg
Preservative	: Thimerosal ---------- 0.01w/v%
Diluent	: Water for injection ---------- q.s.

6.2 Incompatibilities

None known

6.3 Shelf-life

36 months

6.4 Special precautions for storage

Eupenta™ is stable for 36 months at 2-8°C. It can be used safely for 36 months when stored at 2-8°C in a refrigerator. It should not be frozen.

6.5 Nature and contents of container

Elastomeric closures and glass container (vial) for Injections

The containers are colorless and transparent, and have no bubbles.

Packs contain:

- Vial of 1 dose (0.5 mL) x 10 vials
- Vial of 10 dose (5.0 mL) x 10 vials

6.6 Instruction for use/handling

It should be well shaken before use.

And it must be administered by intramuscular injection.

7. Marketing authorization holder

LG Chem Life Sciences (Thailand), Ltd.

87/2 CRC Tower, All seasons Place, Floor 19th, Wireless Road, Lumpini, Pathumwan, Bangkok, 10330

8. Marketing authorization number

2C 9/62 (NBC)

9. Date of first authorization / renewal of authorization

26 December 2019

10. Date of revision of the text

September, 2019.

Manufactured by
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