**SCHEDULING STATUS:**

S1

## 1. NAME OF THE MEDICINE:

**SUTHAREX CREAM**, 2 g per 100 g, Cream

## 2. QUALITATIVE AND QUANTITATIVE COMPOSITION:

Each 1 gram of cream contains 20 mg miconazole nitrate.

Excipient(s) with known effect:

*Preservatives:*

| | |
|---|---|
| Imidurea: | 0,2 % *m/m* |
| Methyl paraben: | 0,15 % *m/m* |
| Sodium propyl paraben: | 0,15 % *m/m* |

*Antioxidant:*

| | |
|---|---|
| Butylated Hydroxytoluene: | 0,02 % *m/m* |

For full list of excipients, see section 6.1.

## 3. PHARMACEUTICAL FORM:

Cream.

A smooth white to off-white cream.

No lumps or flocculation.

## 4. CLINICAL PARTICULARS:

### 4.1 Therapeutic indications

A topical fungicidal preparation used for the treatment of:

Dermatomycose, e.g:

- *Tinea pedis* (Athlete's foot)
- *Tinea corporis* (Tinea circinata)
- *Tinea manuum*

Tinea cruris due to:

- *Trichophyton mentagrophytes,*

- *Trichophyton rubrum,*
- *Epidermophyton floccosum,*
- *Microsporum audouinii.*

Candidal infections:

- Skin infections (e.g. intertrigo)
- Perianal infections
- Stomatitis angularis (e.g. cheilitis, perlèche)
- Balanoposthitis.

## 4.2 Posology and method of administration

**Posology**

SUTHAREX CREAM should be applied to the lesion twice daily and thoroughly rubbed into the skin with a finger. When all lesions have disappeared (usually after 2 to 5 weeks), treatment should be continued for a further 10 to 14 days to prevent relapse.

**Paediatric population**

No data are available.

Avoid any occlusive dressing or towelling nappies when this medication is used as it provides conditions that favour growth of yeast and release of its irritating endotoxins.

**Method of administration**

For external use only.

*Instructions for use and handling*

To open the tube, unscrew the cap.

## 4.3 Contraindications

Hypersensitivity to the miconazole nitrate, any other azole in this family, or to any of the excipients listed in section 6.1.

## 4.4 Special warnings and precautions for use

For external use only.

Severe hypersensitivity reactions, including anaphylaxis and angioedema, have been reported during treatment with miconazole topical formulations (as in SUTHAREX CREAM) (see section 4.8).

If a reaction suggestive of sensitivity or irritation occurs, the use of SUTHAREX CREAM should be discontinued.

If SUTHAREX CREAM comes into contact with eyes, flush out thoroughly with water at once.

Continue to apply SUTHAREX CREAM for the full period of treatment as indicated in section 4.2.

## 4.5 Interactions with other medicines and other forms of interaction

When administered systematically, miconazole is known to inhibit CYP3A4/2C9. Miconazole has limited systemic absorption following topical application, therefore clinically significant interactions are rare.

However, caution should be exercised when SUTHAREX CREAM is used in patients concurrently using oral anticoagulants (such as warfarin). Close monitoring of the anticoagulant effect is advised.

There may be an increase in the effects and side-effects of certain medicines (for example, oral hypoglycaemic medicines and phenytoin), when used in combination with SUTHAREX CREAM.

## 4.6 Fertility, pregnancy and lactation

### *Pregnancy*

Safety in pregnancy has not been established and should be used with caution during pregnancy.

### *Breastfeeding*

Safety in lactation has not been established. It is not known if miconazole is excreted in human breast milk.

### *Fertility*

No data on male and female fertility is available.

## 4.7 Effects on ability to drive and use machines

If used as directed, SUTHAREX CREAM has no effect on the ability to drive and operate machines.

## 4.8 Undesirable effects

### *a. Summary of the safety profile*

Adverse reactions reported among patients who received miconazole 2 % cream base in 21 double-blind clinical trials are presented in the table A below.

Based on pooled safety data from these clinical trials, the most commonly reported adverse reaction was application site irritation (0,7 %).

Including the above-mentioned adverse reaction, the table below displays adverse reactions that have been reported with the use of topical, non-gynaecological, miconazole nitrate/miconazole from either clinical trial or post-marketing experiences.

### *b. Tabulated summary of adverse reactions*

| System Organ Class | Frequency | Undesirable effect |
|---|---|---|
| **Immune System Disorders** | Frequency not known | Anaphylactic reaction, angioneurotic oedema, hypersensitivity. |
| **Skin and Subcutaneous Tissue Disorders** | Less frequent | Skin burning sensation, skin inflammation. |
| | Frequency not known | Angioedema, blistering, urticaria, contact dermatitis, rash, erythema, pruritus. |
| **General Disorders and Administration Site Conditions** | Less frequent | Application site reactions (including application site irritation, burning, pruritus, reaction NOS and warmth) |

### *c. Description of selected adverse reactions*

*Refer above.*

### *d. Paediatric population*

Frequency, type and severity of adverse reactions in children are expected to be the same as in adults.

### *Reporting of suspected adverse reactions*

Reporting suspected adverse reactions after authorisation of the medicine is important. It allows continued monitoring of the benefit/risk balance of the medicine. Healthcare professionals are asked to report any suspected adverse reactions to SAHPRA via the "6.04 Adverse Drug Reaction Reporting Form", found online under SAHPRA's publications: https://www.sahpra.org.za/Publications/Index/8

### 4.9 Overdose

In overdose, side effects can be precipitated and/or be of increased severity (see section 4.8).

Symptoms

Skin irritation may occur with excessive use of SUTHAREX CREAM. This usually disappears with treatment discontinuation.

Treatment

*Accidental ingestion:* SUTHAREX CREAM is intended for cutaneous use, not for oral use. If accidental ingestion of large quantities of the product occurs, use appropriate supportive care.

## 5. PHARMACOLOGICAL PROPERTIES:

### 5.1 Pharmacodynamic properties

Pharmacotherapeutic group and ATC code: not yet assigned.

Pharmacological classification: A13.9.2 Dermatalogical Preparations: Fungicides.

#### *Mechanism of action*

Miconazole nitrate is fungistatic. It is a synthetic 1-phenethylimidazole derivative with broad-spectrum antifungal activity.

#### *Clinical efficacy and safety*

Low concentrations of miconazole nitrate are fungistatic and fungicidal against the following *in vitro*:

Fungistatic Activity:

Adelomycetes (for example Saprolegnia, Candida, Cryptococcus, Aspergillus, Dermatophytes, Phialophora and Sporotrichum), Ascomycetes, and Phycomycetes.

Fungicidal Activity:

*Trichophyton mentagrophytes,*

*Trichophyton rubrum,*

*Epidermophyton floccosum,*

*Trichophyton interdigitale, and*

*Microsporum canis.*

Miconazole nitrate exhibits some antibacterial activity against gram-positive organisms.

Additionally, miconazole nitrate is known to provide rapid relief of pruritus, which may accompany an infection.

In the treatment of cutaneous candidiasis caused by *Candida albicans* it inhibits transformation of blastospores into invasive mycelial form.

## 5.2 Pharmacokinetic properties

### *Absorption*

Following topical application of miconazole nitrate, systemic absorption of miconazole is limited, with a bioavailability of less than 1 %.

### *Distribution*

Majority of the absorbed miconazole is bound to plasma proteins (88,2 %) and 10,6 % is bound to red blood cells.

### *Biotransformation and Elimination*

Following administration, elimination takes place over 4 days. Excretion is predominantly in faeces, with smaller amounts in urine, as unchanged miconazole and metabolites.

## 5.3 Preclinical safety data

Preclinical data reveal no special hazard for humans based on conventional studies of local irritation, single and repeated dose toxicity, genotoxicity, and toxicity to reproduction.

# 6 PHARMACEUTICAL PARTICULARS:

## 6.1 List of excipients

Cetearyl octanoate,

Glycerine,

Glyceryl stearate,

Mineral oil (light),

Incromega E5015 [ethyl ester of eicosapentaenoic acid (EPA) (50 %) and docosahexaenoic acid (DHA) (15 %)],

PEG 100 stearate,

Polyoxyl 40 hydrogenated castor oil,

Polawax GP 200,

Purified water

Vitamin F ethyl ester.

### 6.2 Incompatibilities

None known.

### 6.3 Shelf life

24 months.

Store at or below 25 ºC in a well closed container and protected from light and freezing.

### 6.4 Special precautions for storage

Not applicable.

### 6.5 Nature and contents of container

White Aluminium Barrier Laminated Tubes (ABL) tubes with a white cap containing 25 g, 30 g, 40 g or 50 g of SUTHAREX CREAM, in a carton outer box. Not all pack sizes may be marketed.

### 6.6 Special precautions for disposal of a used medicine or waste materials derived from such medicine and other handling of the product

Any unused product or waste material should be disposed of in accordance with local requirements.

## 7. MARKETING AUTHORISATION HOLDER:

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## 8. MARKETING AUTHORISATION NUMBER(S):

36/13.9.2/0509

## 9. DATE OF FIRST AUTHORISATION/RENEWAL OF THE AUTHORISATION:

24 July 2020.

## 10. DATE OF REVISION OF THE TEXT:

24 July 2020.