

IRISH MEDICINES BOARD ACTS 1995 AND 2006

MEDICINAL PRODUCTS(CONTROL OF PLACING ON THE MARKET)REGULATIONS,2007

(S.I. No.540 of 2007)

PA1410/055/002

Case No: 2055535

The Irish Medicines Board in exercise of the powers conferred on it by the above mentioned Regulations hereby grants to

Bayer Limited

The Atrium, Blackthorn Road, Dublin 18, Ireland

an authorisation, subject to the provisions of the said Regulations, in respect of the product

Transipeg 5.9g powder for oral solution in sachet

The particulars of which are set out in Part I and Part II of the attached Schedule. The authorisation is also subject to the general conditions as may be specified in the said Regulations as listed on the reverse of this document.

This authorisation, unless previously revoked, shall continue in force from **30/01/2009**.

Signed on behalf of the Irish Medicines Board this

A person authorised in that behalf by the said Board.

Part II

Summary of Product Characteristics

1 NAME OF THE MEDICINAL PRODUCT

Transipeg 5.9g powder for oral solution in sachet

2 QUALITATIVE AND QUANTITATIVE COMPOSITION

Each sachet contains 5.9g of Macrogol 3350.

Excipients: Transipeg 5.9 g contains 290 mg of sodium and 40 mg of potassium per sachet as well as aspartame (E591) and sucrose.

For a full list of excipients, see section 6.1.

3 PHARMACEUTICAL FORM

Powder for oral solution in sachet.

White or almost white powder.

4 CLINICAL PARTICULARS

4.1 Therapeutic Indications

Symptomatic treatment of constipation in adults.

4.2 Posology and method of administration

The posology is from 1 to 2 sachets daily in one intake, taken in the morning preferably.

Each sachet must be dissolved in 100 ml of water, i.e. the equivalent of a glass of water. The liquid should be taken shortly after reconstitution.

The effect of Transipeg becomes apparent within 24 to 48 hours after its administration.

No dose change is necessary for treatment of renally impaired patients and elderly patients.

The treatment should be kept as short as possible.

4.3 Contraindications

- Hypersensitivity to the active substance or to any of the excipients of the product;
- Severe inflammatory bowel conditions (such as ulcerative colitis, Crohn's disease) and toxic megacolon;
- perforation/risk of perforation;
- Ileus or suspicion of intestinal obstruction, symptomatic stenosis;
- Painful abdominal symptoms of indeterminate cause;
- Phenylketonuria.

4.4 Special warnings and precautions for use

Warning

The treatment of constipation:

- is only an adjuvant to sensible hygiene and diet on the part of the patient (increased intake of liquids and plant fibres; advice concerning physical activity and rehabilitation of defecation);

For patients using this preparation for the first time, if there is no improvement after two weeks, they should seek medical advice.

Transipeg contains a source of phenylalanine and, therefore, may be harmful to people with phenylketonuria.

Patients with rare hereditary problems of fructose intolerance, glucose-galactose malabsorption or sucrase-isomaltase insufficiency should not take this medicine.

Precautions

The drug contains polyethylene glycol. Some rare allergy manifestations and very exceptional cases of anaphylactic reactions have been reported solely with high doses of polyethylene glycol used in the preparation of colonic diagnostic procedures.

Patients on sodium restricted diet (heart failure, hypertensive patients...) should take into account the sodium content (290 mg per sachet).

The medicinal product contains 1 mmol (40 mg per sachet) potassium per dose. To be taken into consideration by patients with reduced kidney function or patients on a controlled potassium diet.

4.5 Interaction with other medicinal products and other forms of interaction

The sum of available data provided by clinical trials and clinical experience have shown the absence of clinically relevant interactions between Transipeg and other drugs.

4.6 Pregnancy and lactation

Pregnancy

For Macrogol 3350, no clinical data on exposed pregnancies are available.

Animal studies have shown no teratogenic effects.

Therefore, considering the absence of absorption of macrogol 3350, the use of Transipeg 5.9g in pregnant women may be considered when necessary.

Lactation

There is no human data on the excretion of macrogol 3350 in milk. However, as macrogol 3350 is poorly absorbed and when necessary, the prescription of Transipeg 5.9g to breast-feeding women may be considered.

4.7 Effects on ability to drive and use machines

No effects on the ability to drive and use machines have been observed.

4.8 Undesirable effects

Gastrointestinal disorders:

Mild diarrhoea and liquid stools are very common (>**1/10**) undesirable effects, in particular if the dose is too high.

These effects usually disappear within 24 to 48 hours after the discontinuation of treatment. Treatment may then be continued at a lower dose.

In controlled clinical trials with Transipeg 5.9g, up to 40% of patients reported at least once an episode of diarrhoea or liquid stools.

Abdominal pain and bloating are also commonly reported ($\geq 1/100 \rightarrow 1/10$) adverse reactions, particularly in subjects with irritable bowel syndrome.

Skin and subcutaneous tissue disorders:

Very rare cases ($< 1/10,000$) of anaphylactic and allergic reactions like urticaria, eruption, pruritus or oedema have been reported.

4.9 Overdose

Overdose leads to diarrhoea which subsides when treatment is temporarily interrupted or the dosage is reduced. Extensive fluid loss by diarrhoea may require correction of electrolyte disturbances.

5 PHARMACOLOGICAL PROPERTIES

5.1 Pharmacodynamic properties

Pharmacotherapeutic group: Osmotically acting laxatives, ATC code: A06A D65.

Transipeg is an iso-osmotic laxative consisting of a mixture of Macrogol 3350 and electrolytes.

High molecular weight macrogols (3350) are long linear polymers which retain water molecules by means of hydrogen bonds. When administered by the oral route, they lead to an increase in volume of intestinal fluids. Transipeg is a mixture of macrogol 3350 and electrolytes and maintains iso-osmotic liquid flow throughout the length of the gastrointestinal tract.

The volume of unabsorbed intestinal fluid accounts for the laxative properties of the solution.

5.2 Pharmacokinetic properties

The electrolyte concentration of the reconstituted solution is such that it may be assumed that no electrolyte exchanges occur between the intestines and plasma.

Pharmacokinetic data have confirmed that macrogol 3350 undergoes neither gastrointestinal resorption nor biotransformation following oral ingestion.

5.3 Preclinical safety data

Two teratogenicity studies were performed, one in rats and one in rabbits. Macrogol 3350 was administered by oral route at doses up to 2000 mg/kg/day between D6 and D17 of gestation in rats and between day D6 and D18 of gestation in rabbits. Results of both studies did not show any evidence of maternotoxic nor teratogenic effects up to 2000 mg/kg/day.

6 PHARMACEUTICAL PARTICULARS

6.1 List of excipients

Sodium chloride

Sodium sulphate anhydrous (E 514)

Potassium chloride (E 508)

Sodium hydrogen carbonate (E 500)

Aspartame (E 951)

Potassium acesulfame (E 950)

Synthetic lemon flavour

(containing maltodextrin, sucrose, lemon aroma, gum arabic (E 414), lecithin (E 322) and silicone dioxide (E 551)).

6.2 Incompatibilities

Not applicable.

6.3 Shelf Life

3 years.

6.4 Special precautions for storage

No special precaution for storage.

6.5 Nature and contents of container

Sachet (Paper - PE - Aluminium - PE).

Package sizes : 10, 20, 30,50, 60, 200 sachets.

Not all pack sizes may be marketed.

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

No special requirements.

7 MARKETING AUTHORISATION HOLDER

Bayer Ltd
The Atrium
Blackthorn Road
Dublin 18
Ireland

8 MARKETING AUTHORISATION NUMBER

PA1410/55/2

9 DATE OF FIRST AUTHORISATION/RENEWAL OF THE AUTHORISATION

Date of first authorisation: 26th January 2004

Date of last renewal: 3rd December 2007

10 DATE OF REVISION OF THE TEXT

January 2009