Part II

Summary of Product Characteristics

1 NAME OF THE MEDICINAL PRODUCT

Curatoderm Ointment 4 mcg/g

2 QUALITATIVE AND QUANTITATIVE COMPOSITION

The ointment contains tacalcitol monohydrate 4.17 mcg/g equivalent to tacalcitol 4 mcg/g.

For excipients, see 6.1.

3 PHARMACEUTICAL FORM

Ointment
Homogeneous, glossy, translucent, white odourless ointment.

4 CLINICAL PARTICULARS

4.1 Therapeutic Indications

Psoriasis vulgaris

4.2 Posology and method of adminstration

Adults and Elderly: Apply sparingly, once daily to the affected areas, preferably at bedtime. The amount applied should not exceed 5g of ointment/day. Normally duration of treatment depends on the severity of the lesions and should be decided by the physician. Experience shows that treatment will not usually need to exceed 2 periods of 12 weeks each year.

Children: Not recommended. There is no clinical experience in children.

4.3 Contraindications

Hypersensitivity to constituents; in patients with hypercalcaemia or other known disorders of calcium metabolism.

4.4 Special warnings and special precautions for use

In patients at risk of hypercalcaemia, albumin corrected serum calcium levels should be closely monitored. Treatment should be stopped if hypercalcaemia occurs. Serum calcium levels should also be monitored in patients with renal impairment. Curatoderm is not recommended for use on the scalp.
Care should be exercised in patients with generalised pustular or erythrodermic exfoliative psoriasis as the risk of hypercalcaemia may be enhanced.

When applying to the face avoid contact with the eyes. Patients should be advised to wash their hands after applying the ointment to avoid inadvertent transfer to other parts of the body.

4.5 Interaction with other medicinal products and other forms of interaction

No interactions are likely in patients using multivitamin preparations with up to 500 IU vitamin D.

Ultraviolet light including sunlight may degrade tacalcitol. When combining UV-treatment with tacalcitol topical therapy, UV-light should be given in the morning and tacalcitol at bedtime.
When patients are likely to be exposed to sunlight, tacalcitol should be applied at bedtime.

4.6 Pregnancy and lactation

The safety of this medicinal product for use in human pregnancy has not been established. Evaluation of experimental animal studies does not indicate direct or indirect harmful effects with respect to the development of the embryo or foetus, the course of gestation or peri- or postnatal development.
Avoid use in pregnancy unless there are no safer alternatives.
During lactation the breast area should not be treated. It is not known whether tacalcitol is excreted in human breast milk.

4.7 Effects on ability to drive and use machines

Curatoderm is unlikely to produce any effect on the ability to drive and use machines.

4.8 Undesirable effects

Local skin reactions (itching, erythema, burning, paraesthesia) have been reported in 1% of the patients. Other local reactions may occur.

4.9 Overdose

Overdosing by ingestion of an ointment is very unlikely. It cannot be excluded that topical application of excessive amounts may lead to hypercalcaemia.
In this case Curatoderm treatment and other possible vitamin D or calcium supplement intakes must be stopped until serum calcium returns to normal.

5 PHARMACOLOGICAL PROPERTIES

5.1 Pharmacodynamic properties

Pharmacotherapeutic group: D05A X02

Tacalcitol is a vitamin D_3 derivative, which inhibits keratinocyte hyper-proliferation and induces differentiation of these cells. The normalisation of these mechanisms is the basis for the efficacy in the treatment of psoriasis.

In biopsies from patients treated with tacalcitol specific indicators for inflammation were improved.

Tacalcitol binds to the keratinocyte vitamin D receptor to the same extent as natural active vitamin D_3.

5.2 Pharmacokinetic properties

Single or repeated application of tacalcitol ointment in humans results in less than 0.5% of the drug being systemically absorbed through psoriatic skin.

Tacalcitol is completely bound to plasma proteins (vitamin D binding protein).
The main metabolite is 1α, 24, 25 $(OH)_3$ vitamin D_3, metabolite shared with the natural active vitamin, with 5-10 times less vitamin D activity. Tacalcitol and metabolites are excreted mainly in the faeces in rat and dog studies with excretion in urine in man. It cannot therefore be excluded that if there is sufficient systemic absorption accumulation may occur in patients with renal failure.

5.3 Preclinical safety data

Tacalcitol is effective at very low concentrations. The no-effect-level following cutaneous application for 12 months in rats was 4 ng/kg daily. Toxicity is typically that of the calciferols.

Teratogenicity studies in mice and rats showed no teratogenic effects of tacalcitol.

The results of mutagenicity studies (Ames test, chromosomal aberration test and micronucleus test) indicate no genotoxic potential.

6 PHARMACEUTICAL PARTICULARS

6.1 List of excipients

White soft paraffin
Liquid paraffin
Di-isopropyl adipate

6.2 Incompatibilities

Not applicable.

6.3 Shelf Life

Unopened: 3 years
Opened: 6 months after date of first opening.

6.4 Special precautions for storage

Do not store above 30°C.

6.5 Nature and contents of container

Aluminium tubes with internal lacquer, membrane-sealed opening and plastic screw cap, containing 20 g, 30 g, or 60 g.

6.6 Instructions for use and handling

No special requirements.

7 MARKETING AUTHORISATION HOLDER

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8 MARKETING AUTHORISATION NUMBER

PA 43/27/1

9 DATE OF FIRST AUTHORISATION/RENEWAL OF THE AUTHORISATION

Date of first authorisation: 13th November 1998

Date of last renewal: 13th November 2003

10 DATE OF REVISION OF THE TEXT

April 2004