Part II

Summary of Product Characteristics

1 NAME OF THE MEDICINAL PRODUCT

Codafen Continus Tablets.

2 QUALITATIVE AND QUANTITATIVE COMPOSITION

Ibuprofen 300 mg (prolonged release)
Codeine Phosphate 20 mg.

For excipients see 6.1.

3 PHARMACEUTICAL FORM

Prolonged release tablets.
Biconvex capsule-shaped tablets, consisting of a dark pink layer and a white layer of approximately equal thickness with ‘IBC3’ marked on the white layer.

4 CLINICAL PARTICULARS

4.1 Therapeutic Indications

Arthritic pain

Short to medium term use in acute and chronic painful arthroses and rheumatoid 'flare', including relief from severe pain in osteoarthritis, rheumatoid arthritis, ankylosing spondylitis and sero-negative arthropathies.

Other inflammatory disorders

Short term relief from severe pain associated with inflammatory disorders such as bursitis, capsulitis of the shoulder, tendinitis, tenosynovitis.

Cancer pain

For use in patients where the pain may be controlled by this combination prior to the administration of morphine.

Dysmenorrhoea

Short term treatment of severe pain associated with dysmenorrhoea.

Severe pain in other clinical conditions

Short term treatment of severe pain in clinical conditions such as dental extraction, post-operative pain (including post-episiotomy), migraine, sprains, strains and low back pain.

4.2 Posology and method of adminstration

Route of Administration

Oral: The tablets should be swallowed whole and not chewed.

Adults:

The starting dose is two tablets taken twelve hourly. This may be increased to three tablets twelve hourly. The maintenance dose is one to three tablets twelve hourly.

Children under 12 years:

Not recommended.

Elderly:

No special dosage modifications are required for elderly patients unless renal or hepatic function is impaired, in which case dosage should be assessed individually.

4.3 Contraindications

Respiratory depression, hypersensitivity to ibuprofen, codeine or any other constituents of the tablets, a history of peptic ulceration or chronic constipation.

4.4 Special warnings and special precautions for use

CODAFEN CONTINUS tablets should be used with caution in patients with gastro-intestinal disease. If given to patients receiving anti-coagulant therapy, prothrombin time should be monitored daily for the first few days of combined treatment.

CODAFEN CONTINUS tablets should be used with caution in those with hypotension, hypothyroidism, hepatic and/or renal impairment (GFR < 20 $ml.min^{-1}$).

CODAFEN CONTINUS tablets should be given with care to patients with a history of heart failure or hypertension since oedema has been reported in association with ibuprofen administration.

NSAIDs have been reported to cause nephrotoxicity in various forms: interstitial nephritis, nephrotic syndrome and renal failure. In patients with renal, cardiac or hepatic impairment, caution is required since the use of NSAIDs may result in the deterioration of renal function. The dose should be kept as low as possible and renal function should be monitored in these patients.

The tablets should be used with caution in patients with raised intracranial pressure or head injury. Bronchospasm may be precipitated in patients suffering from or with a history of bronchial asthma or allergic disease. The possibility of cross-sensitivity with aspirin and other non-steroidal anti-inflammatory agents should be considered.

4.5 Interaction with other medicinal products and other forms of interaction

Care should be exercised in patients taking monoamine oxidase inhibitors, thiazide diuretics, oral anticoagulants, antihypertensives, cardiac glycosides, lithium, methotrexate, cyclosporin, mifepristone, other NSAIDs, corticosteroids, quinolone antibiotics.

4.6 Pregnancy and lactation

Based on animal studies and clinical experience there is no evidence to suggest foetal abnormalities associated with the use of ibuprofen or codeine. However, as with all drugs, CODAFEN CONTINUS tablets should be avoided during pregnancy, unless essential. Ibuprofen and codeine are excreted in breast milk.

4.7 Effects on ability to drive and use machines

None known.

4.8 Undesirable effects

Ibuprofen:

The most commonly-observed gastrointestinal effects are nausea, vomiting, diarrhoea, dyspepsia, abdominal pain, melaena, haematemesis, ulcerative stomatitis and gastrointestinal haemorrhage. Less frequently, gastritis, duodenal ulcer, gastric ulcer and gastrointestinal perforation have been observed.

Oedema has been reported in association with ibuprofen treatment.

Other adverse events reported less commonly for which causality has not necessarily been established include: nephrotoxicity including interstitial nephritis, nephrotic syndrome and renal failure; abnormal liver function, hepatitis and jaundice; visual disturbances, optic neuritis, headaches, paraesthesia, depression, confusion, hallucinations, tinnitus, vertigo, dizziness, malaise, fatigue and drowsiness, thrombocytopenia, neutropenia, agranulocytosis, aplastic anaemia and haemolytic anaemia, photosensitivity.

Hypersensitivity reactions have been reported following treatment with ibuprofen. These consist of (a) non-specific allergic reaction and anaphylaxis, (b) respiratory tract reactivity comprising asthma, aggravated asthma, bronchospasm or dyspnoea, or (c) assorted skin disorders including rashes of various types, pruritus, urticaria, purpura, angioedema and, less commonly, bullous dermatoses (including epidermal necrolysis and erythema multiforme).

Codeine:

Adverse events occurring with codeine include constipation, respiratory depression, cough suppression, nausea and drowsiness.

4.9 Overdose

Symptoms of overdose with ibuprofen could be expected to include the following; headache, vomiting, drowsiness, loss of consciousness and hypotension. Nausea and vomiting are prominent features of codeine overdosage. Respiratory depression may also occur with a large codeine overdose.

The stomach should be emptied.

Symptoms should be treated on appearance and any imbalance in electrolyte levels should be corrected. Monitoring of potassium levels should be considered.

If severe CNS depression has occurred, artificial respiration, oxygen and parenteral naloxone may be needed.

The physician should bear in mind that the tablets in the intestine may release ibuprofen for a period of hours.

5 PHARMACOLOGICAL PROPERTIES

5.1 Pharmacodynamic properties

Ibuprofen is a non-steroidal anti-inflammatory drug with potent analgesic properties. It inhibits prostaglandin synthetase and therefore the synthesis of prostaglandins which are known to be involved in the sensitisation of pain receptors and the inflammatory process.

Codeine is a narcotic analgesic and acts at opioid/opiate receptors in the CNS, particularly mu receptors which mediate analgesia.

The combination of a well tolerated peripheral analgesic with a centrally active analgesic provides optimum pain relief. Ibuprofen also provides anti-inflammatory activity.

5.2 Pharmacokinetic properties

CODAFEN CONTINUS tablets provide immediate release of codeine to achieve rapid pain relief whilst allowing controlled release of ibuprofen to achieve continuous relief from pain and inflammation.

The plasma half-life for ibuprofen is 2 hours whilst that for codeine is 2.5-3 hours. Both drugs are metabolised by the liver and excreted mainly in the urine.

5.3 Preclinical safety data

There are no pre-clinical data of relevance to the prescriber which are additional to that already included in other sections of the SPC.

6 PHARMACEUTICAL PARTICULARS

6.1 List of excipients

Microcrystalline Cellulose
Lactose (anhydrous)
Hydroxyethylcellulose
Hypromellose
Ponceau 4 R (E124)
Cetostearyl Alcohol
Talc
Pregelatinised Maize Starch
Povidone

6.2 Incompatibilities

None known.

6.3 Shelf Life

3 years.

6.4 Special precautions for storage

Do not store above 25°C.

6.5 Nature and contents of container

Polypropylene containers with polyethylene lids containing 10, 28, 56 or 112 tablets and PVdC coated PVC blister packs with aluminium backing foil containing 28 or 56 tablets.

6.6 Instructions for use and handling

None

7 MARKETING AUTHORISATION HOLDER

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8 MARKETING AUTHORISATION NUMBER

PA 913/9/1

9 DATE OF FIRST AUTHORISATION/RENEWAL OF THE AUTHORISATION

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