Part II

Summary of Product Characteristics

1 NAME OF THE MEDICINAL PRODUCT

Psorimed 10 % cutaneous solution

2 QUALITATIVE AND QUANTITATIVE COMPOSITION

100 g solution contains: 10 g Salicylic acid.

For excipients, see 6.1.

3 PHARMACEUTICAL FORM

Cutaneous solution
Clear, colourless or slightly yellow oily solution.

4 CLINICAL PARTICULARS

4.1 Therapeutic Indications

Initial treatment of mild to moderately severe psoriasis of the scalp.

4.2 Posology and method of administration

8 – 10 ml Psorimed are applied in a thin layer on the dry scalp by using the applicator.

The duration of the application is 10 to 30 minutes; thereafter the solution is removed by rinsing with warm water.

Psorimed is applied two to three times a week on not-consecutive days. The therapy will usually last 3 to 4 weeks. The duration of the treatment is decided by the doctor.
The maximum dose of 2 g Salicylic acid per day must not be applied for longer than one week.

The solution is applied by using the applicator which is screwed on the bottle. Care has to be taken that the Psorimed solution does not come into contact with eyes, nose and mucous membranes. In addition care should be taken that no solution trickles past the hairline.

After treatment the solution is removed by rinsing with warm water. Then the hair should be washed with a mild shampoo. To avoid remnants of the solution to come in contact with eyes, either the eyes must be closed or the head must be leaned right back.

4.3 Contraindications

- Sensitivity to salicylic acid and salicylates or any of the excipients of Psorimed.
- Third trimester of pregnancy.
- Neonates, infants and children under 12 years.
- Patients with reduced renal capacity (in patients with reduced renal capacity a preparation with a reduced content of active ingredient must be used) and hepatic insufficiency.
- Psorimed should not be used in unstable and inflammatory/acute forms of psoriasis, where the skin is hot to touch, itchy and deteriorates in the sun.

4.4 Special warnings and precautions for use

The maximum daily adult dose of 2 g salicylic acid must not be used for more than one week.
Contact with eyes, nose, mucous membranes and healthy skin should be avoided.
Special care should be taken in the treatment of the elderly to avoid systemic effects of salicylic acid.
This medicinal product contains propylene glycol and therefore may cause skin irritation.

4.5 Interaction with other medicinal products and other forms of interaction

Salicylic acid can enhance the permeation of other topical applied medication and should not be combined with other topical medicinal products on the scalp.
Systemically absorbed salicylic acid can increase the toxicity of methotrexate, and can enhance the hypoglycaemic effect of sulphonylureas.
Salicylic acid is incompatible with various active and inactive ingredients which can affect the release of active ingredients.
The following substances are included: acriflavine salts, lead salts, camphor, chloral hydrate, iron salts, ethacridine salts, gelatin, iodine, iodide, iodoform, beta-naphthol, polyethylene glycol, resorcinol, zinkoxide.

4.6 Pregnancy and lactation

Pregnancy
<u>During the first and second trimester:</u>
The safety of Psorimed in pregnant women has not been established. Therefore, use of Psorimed during the first and second trimester of pregnancy should be avoided.
<u>During the third trimester:</u>
During the third trimester of pregnancy, all prostaglandin synthetase inhibitors including salicylic acids may induce cardiopulmonary and renal toxicity in the fetus. At the end of the pregnancy, prolonged bleeding time in both mother and child may occur. Therefore, Psorimed is contra-indicated during the last trimester of pregnancy.

Lactation
After oral administration, salicylic acid appears in breast milk in low concentrations. However, Psorimed can be used during breast-feeding but should not be used in the breast area.

4.7 Effects on ability to drive and use machines

Not applicable.

4.8 Undesirable effects

(a) The most commonly reported ADRs are burning (40 %) and itching (16 %), followed by dryness (2 %) and feeling of tension (2 %) on the treated scalp.

(b) The incidence of local adverse reactions was examined in a 4-week randomised, double-blind, comparative, multicentre study in 1993, which was performed with 50 patients receiving Psorimed and 51 patients receiving a reference with 10% salicylic acid.
<u>Very common (> 1/10)</u>
Burning (stinging), itching.

<u>Common (> 1/100, < 1/10)</u>
Dryness, feeling of tension.

(c) Burning and itching almost start within 10 minutes after application of psorimed and last normally about 1-2 hours. Usually these reactions are mild, but in 4 % they are severe and long lasting.

If there is a prolonged or severe burning sensation, the contact time should be reduced. Normally this sensation resolves within a few days and the full treatment can be resumed. In extreme cases it may be necessary to stop treatment.

In rare cases contact allergies to be manifest as itching, erythema and vesicles also beyond the contact area (disseminated reactions) might develop due to salicylic acid or to any of the excipients.

4.9 Overdose

In topical applications of salicylic acid, serum levels rarely exceed concentrations of 5 microg/ml, and there is normally no salicylate toxicity expected. Resorption with serum concentrations in excess of 300 microg/ml are required to induce toxic symptoms.
Early symptoms are ringing in the ear, tinnitus with deafness, epistaxis, nausea, vomiting, sensitivity and dryness of mucous membranes. If this occurs the treatment must be stopped immediately.

5 PHARMACOLOGICAL PROPERTIES

5.1 Pharmacodynamic properties

ATC code: D 05 AX 06.
Pharmacotherapeutic group: Antipsoriaticum for topical use.

When applied locally, salicylic acid preparations have keratolytic and anti-inflammatory effects.
Keratolytic effects are based on the direct action on the intercellular desmosomes.

5.2 Pharmacokinetic properties

Salicylic acid is metabolized by conjugation with glycine to form salicyluric acid, with glucuronic acid at the phenolic OH-group to form glucuronoic-ether, or by hydroxylation to form gentisinic acid or di-hydroxy-benzoic acid. The half life of a normal dose of salicylic acid is about 2-3 hours; with very high doses this may be prolonged to 15 to 30 hours due to the livers limited capacity for conjugation of salicylic acid.

5.3 Preclinical safety data

a) Acute toxicity
Results from animal experiments and pharmacokinetic studies in humans have shown that salicylic acid penetrates skin quickly, depending on the carrier substance and other factors, such as skin condition. Therefore rare intoxication from topical application depends on the pharmaceutical preparation, the amount of salicylic acid used, the size of the treated area, treatment duration and frequency and the dermatological symptoms. Toxic symptoms are only expected with serum concentrations in excess of 300 microg/ml.

b) Chronic toxicity
There are no animal studies available concerning long term topical application (see: Acute toxicity).

c) Mutagenic potential and tumorigenicity
There is no indication of any mutagenic effects of salicylic acid in the extensive literature.
Long term studies of carcinogenicity of salicylic acid in animals are not available.

d) Reproductive toxicity
Salicylates have shown teratogenic effects in several animal species in systemic applications.
Disruption of implantation, embryo-toxic and foeto-toxic effects and learning disability of the offspring after prenatal exposure have been described.
With correct application toxic effects are not expected, as toxicologically necessary serum concentrations are not achieved with in normal use (see: Acute toxicity).

e) Local tolerance
Frequently there is local sensitivity (burning and reddening). Occasionally there are contact allergies.

6 PHARMACEUTICAL PARTICULARS

6.1 List of excipients

Propylene glycol
Propylene glycol octanoate decanoate

6.2 Incompatibilities

Not applicable.

6.3 Shelf Life

3 years.

6.4 Special precautions for storage

Do not store above 25 °C. Do not refrigerate or freeze.

6.5 Nature and contents of container

Polyethylene (HDPE) bottle with 100 ml solution and an applicator cap of polypropylene.

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

Dr. August Wolff GmbH & Co Arzneimittel
Sudbrackstraße 56
33611 Bielefeld
Germany

8 MARKETING AUTHORISATION NUMBER

PA 988/1/1

9 DATE OF FIRST AUTHORISATION/RENEWAL OF THE AUTHORISATION

Date of first authorisation: 06 April 2001

Date of last renewal: 02 June 2005

10 DATE OF REVISION OF THE TEXT

August 2005