25th March 2009

Direct Healthcare Professional Communication on Rocephin® (ceftriaxone) Important Safety Information Regarding Method of Administration

Summary

- Ceftriaxone is a beta-lactam third-generation cephalosporin antibiotic used to treat infections known or likely to be due to one or more susceptible micro-organisms and when parenteral therapy is needed.
- The potential for confusion related to the method of administration using 'Rocephin 1g powder and solvent for IM injection only' has been highlighted as an issue, however, to date no adverse reactions have been reported in association with inadvertent IV administration of the IM preparation.
- Accordingly, amendments have been made to the SmPC for 'Rocephin 1g powder and solvent for IM injection only' to reinforce intramuscular administration in the *Posology and Method of Administration* and *Instructions for Use and Handling* sections.
- The communication of this information to hospital pharmacists and physicians has been agreed by the Irish Medicines Board.

Further information on the safety concern

The potential for safety concerns arising from possible medication errors associated with the method of administration of 'Rocephin 1g powder and solvent for IM injection only' have been expressed by healthcare professionals. There are particular concerns regarding the possible risk of inappropriate intravenous administration of the lidocaine solvent when reconstituted with Rocephin powder. The inappropriate administration of this product via the intravenous route may have detrimental clinical consequences for the patient. In order to attempt to address the risk of administration errors, the product information has been amended to remove any reference to intravenous injection/infusion for 'Rocephin 1g powder and solvent for IM injection only'. This product may only be administered by IM injection, as indicated in the product name.

To reduce the risk of confusion, the SmPC for 'Rocephin 1g powder and solvent for IM injection only' has been amended to emphasise that the method of administration with the lidocaine solvent contained in the pack, is by intramuscular injection only.

The amended text in SmPC sections 4.2 (Posology and Method of Administration) and 6.6 (Instructions for Use and Handling), is provided in Annex 1.

This wording has been agreed by the Irish Medicines Board.

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Call for reporting

Healthcare professionals are reminded to continue to report suspected adverse reactions to the Drug Surveillance Centre at Roche Products (Ireland) Limited, 3004 Lake Drive, Citywest, Naas Road Dublin 24, Tel: 01-4690700; Fax: 01-4690793, E-mail: Ireland.drug_surveillance_centre@roche.com or to the pharmacovigilance section of the Irish Medicines Board in the usual manner.

Communication information

Should you have any questions or require additional information regarding on this issue, please contact Medical Information at Roche Products (Ireland) Limited, 3004 Lake Drive, Citywest, Naas Road, Dublin 24, Tel: 01-4690700; Fax: 01-4690791; Email: Ireland.druginfo@roche.com.

Please note: For IV use Rocephin 1g powder, PA 50/62/5, is available.

Yours sincerely,

Edwin Carr, PhD
Director of Medical Affairs

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ANNEX 1: REVISED SPC TEXT

Section 4.2 (Posology and Method of Administration)

Rocephin may be administered by deep intramuscular injection only after reconstitution of the solution according to the directions given below. For instructions on reconstitution of the product before administration, see section 6.6.

Dosage and mode of administration should be determined by the severity of the infection, susceptibility of the causative organism and the patient's condition. Under most circumstances a once-daily dose - or, in the specified indications, a single dose - will give satisfactory therapeutic results.

Adults and children 12 years and over

Standard therapeutic dosage: 1g once daily.

Severe infections: 2 - 4g daily, normally as a single dose every 24 hours.

The duration of therapy varies according to the course of the disease. As with antibiotic therapy in general, administration of Rocephin should be continued for a minimum of 48 to 72 hours after the patient has become afebrile or evidence of bacterial eradication has been obtained.

Acute, uncomplicated gonorrhoea: A single dose of 250mg intramuscularly should be administered. Simultaneous administration of probenecid is not indicated.

Peri-operative prophylaxis: Usually 1g as a single intramuscular dose 30-90 minutes prior to surgery. In colorectal surgery, 2g should be given intramuscularly, in conjunction with a suitable agent against anaerobic bacteria.

Elderly

These dosages do not require modification in elderly patients provided that renal and hepatic function are satisfactory (see below).

Children under 12 years

Standard therapeutic dosage: 20 - 50mg/kg body-weight once daily.

Up to 80mg/kg body-weight daily may be given in severe infections, except in neonates where a daily dosage of 50mg/kg should not be exceeded. For children with body weights of 50 kg or more, the usual adult dosage should be used.

Renal and hepatic impairment

In patients with impaired renal function, there is no need to reduce the dosage of Rocephin provided liver function is intact. Only in cases of pre-terminal renal failure (creatinine clearance < 10ml per minute) should the daily dosage be limited to 2g or less.

In patients with liver damage there is no need for the dosage to be reduced provided renal

function is intact.

In severe renal impairment accompanied by hepatic insufficiency, the plasma concentration of Rocephin should be determined at regular intervals in order to ensure that the plasma level is in excess of the minimum inhibitory concentration of the causative organism(s), assuming this is sensitive, and dosage adjusted so that accumulation of Rocephin does not occur.

In patients undergoing dialysis, no additional supplementary dosing is required following the dialysis. Serum concentrations should be monitored, however, to determine whether dosage adjustments are necessary, since the elimination rate in these patients may be reduced.

Section 6.6 (Instructions for Use and Handling)

Preparation of solutions for injection

The use of freshly prepared solutions is recommended.

For single use only. Discard any unused content.

When reconstituted for intramuscular injection, the white to yellowish-orange crystalline powder gives a pale yellow to amber solution. The displacement value of 250 mg of Rocephin is 0.194 ml.

Each gram of Rocephin contains approximately 3.6 mmol sodium.

Intramuscular injection: 1g Rocephin should be dissolved in 3.5ml of 1.06% Lidocaine Injection, provided in the package. The solution should be administered by deep intramuscular injection. Dosages greater than 1g should be divided and injected at more than one site.

Solutions in Lidocaine should not be administered intravenously.