1.3.1.1 PROFESSIONAL INFORMATION FOR MEDICINES FOR HUMAN USE

SCHEDULING STATUS

S2

1. NAME OF THE MEDICINE

ACTINCYPRO 4 mg tablets

2. QUALITATIVE AND QUANTITATIVE COMPOSITION

Each tablet of ACTINCYPRO contains 4 mg cyproheptadine hydrochloride.

Contains sugar: Lactose monohydrate 128,57 mg

For full list of excipients, see section 6.1.

3. PHARMACEUTICAL FORM

Tablets

ACTINCYPRO is a round, white to off-white, flat, bevelled edge bisected tablet, debossed with "F" in upper half and "43" on lower half on one side and plain on other side.

The tablet can be divided into equal halves.

4. CLINICAL PARTICULARS

4.1. Therapeutic indications

ACTINCYPRO is indicated as an antiallergic-antipruritic:

- In the symptomatic treatment of seasonal and perennial rhinitis,
- For the symptomatic relief of pruritus.

4.2. Posology and method of administration

Posology

Dosage must be individualised. Since the antiallergic effect of a single dose usually lasts four to six hours, the daily requirement should be given in divided doses three times a day or as often as necessary to provide continuous relief.

Adults

The therapeutic range is from 4 to 20 mg a day, the majority of patients requiring 12 mg to 16 mg a day. It is suggested that dosage be initiated with 4 mg (1 tablet) three times a day and adjusted according to the size and response of the patient.

Paediatric population

Children aged 7 to 14 years

The usual dosage is 4 mg (1 tablet) 2 or 3 times a day. This dosage may be adjusted as necessary according to the size and response of the patient. If an additional dose is required, it should be taken preferably at bedtime. The dosage is not to exceed 16 mg a day.

Children aged 2 to 6 years

It is suggested that dosage be initiated with 2 mg (half a tablet) 2 or 3 times a day and adjusted as necessary according to the size and response of the patient. If an additional dose is required, it should be taken at bedtime. The total dosage is not to exceed 8 mg a day (see sections 4.3 and 4.4)

Method of administration

For oral administration.

4.3. Contraindications

ACTINCYPRO is contraindicated in:

- Patients with hypersensitivity to cyproheptadine hydrochloride or to any excipients in ACTINCYPRO (see section 6.1).
- Monoamine oxidase inhibitor therapy.
- Closed angle glaucoma.
- Stenosing peptic ulcer.
- Symptomatic prostatic hypertrophy.
- Bladder neck obstruction.
- Pyloroduodenal obstruction.
- Elderly, debilitated patients.
- Children under the age of 2 years. ACTINCYPRO should not be used in new-born or premature infants (see section 4.4).
- Breastfeeding mothers (see section 4.6).

ACTINCYPRO should not be used for therapy of an acute asthmatic attack.

4.4. Special warnings and precautions for use

ACTINCYPRO may lead to drowsiness and impaired concentration that may be aggravated by the simultaneous intake of alcohol or other central nervous system depressants. Patients should be advised, particularly at the initiation of therapy, against

taking charge of vehicles or machinery or performing potentially hazardous tasks where loss of concentration could lead to accidents (see section 4.8).

Lower respiratory tract

Antihistamines should not be used to treat lower respiratory tract symptoms including those of acute asthma (see section 4.3).

Other

Prolonged therapy with antihistamines may cause blood dyscrasias.

ACTINCYPRO has an atropine-like action and, therefore, should be used with caution in patients with:

- History of bronchial asthma,
- increased intraocular pressure
- hyperthyroidism,
- cardiovascular disease,
- hypertension.

Use in the elderly

Cyproheptadine as contained in ACTINCYPRO is more likely to cause dizziness, sedation and hypotension in elderly patients (see section 4.3).

Paediatric population

The safety and efficacy in children below the age of two years have not been established.

Overdose of antihistamines, particularly in infants and children, may produce hallucinations, central nervous system depression, convulsions, respiratory and cardiac arrest, apnoea, cyanosis, and respiratory difficulty and death.

Antihistamines may diminish mental alertness; conversely, particularly in young children, they may produce excitation (see section 4.3).

Excipients

Lactose monohydrate

Patients with rare hereditary problems of galactose intolerance, total lactase deficiency or glucose galactose malabsorption should not take ACTINCYPRO.

4.5. Interaction with other medicines and other forms of interaction

- Monoamine oxidase inhibitors (MAOIs) prolong and intensify the anticholinergic effects of ACTINCYPRO (see section 4.3).
- ACTINCYPRO may have additive effects with alcohol and other Central Nervous System (CNS) depressants, (e.g. hypnotics, sedatives, tranquilizers and anti-anxiety medicines) (see section 4.4).
- Medicines with anti-serotonin activity, such as ACTINCYPRO, may interfere with serotonin-enhancing antidepressant medicine.
- ACTINCYPRO may cause a false positive test result for tricyclic anti-depressant medicine when evaluating a urine drug screen.

4.6. Fertility, pregnancy and lactation

Pregnancy

The safety of ACTINCYPRO in pregnancy has not been established.

Breastfeeding

The safety of ACTINCYPRO during breastfeeding has not been established. It is not known whether ACTINCYPRO is excreted in human breast milk.

Because of the higher risk of antihistamines for infants generally, and for new-born and premature babies in particular, ACTINCYPRO is contraindicated in nursing mothers (see section 4.3).

Fertility

There are no clinical data on the effects of cyproheptadine on fertility in humans. Cyproheptadine as contained in ACTINCYPRO at about 10 times the human dose had no effect on fertility in a two-litter study in rats or a two-generation study in mice.

4.7. Effects on ability to drive and use machines

ACTINCYPRO may lead to drowsiness and impaired concentration which may be aggravated by simultaneous intake of alcohol or other CNS depressant medicines. Drowsiness may continue the following day. Patients should not drive, use machinery or perform any tasks that require concentration, until they are certain that ACTINCYPRO does not adversely affect their ability to do so (see section 4.4 and 4.8).

4.8. Undesirable effects

a) Summary of the safety profile

The side effects that appear frequently are drowsiness and somnolence.

b) Tabulated list of adverse reactions

System organ class	**Frequency unknown** (cannot be estimated from the available data)
Blood and the lymphatic system disorders	Agranulocytosis, leukopenia, haemolytic anaemia,
	thrombocytopenia
Immune system disorders	Allergic oedema,
	anaphylactic shock
Endocrine disorders	Early menses
Metabolism and nutrition disorders	Anorexia, increased appetite,
	weight gain
Psychiatric disorders	Confusion, hallucinations, restlessness, insomnia, irritability, nervousness, excitation, aggressive behaviour, euphoria,
	hysteria
Nervous system disorders	Convulsions, dizziness, headache, sedation, sleepiness (often transient), tremor, disturbed coordination, faintness, paraesthesias,
	neuritis,
	vertigo
Eye disorders	Blurred vision, diplopia

Ear and labyrinth disorders	Tinnitus,
	acute labyrinthitis
Cardiac disorders	Tachycardia, palpitation, tightness of chest,
	extrasystoles
Vascular disorders	Hypotension
Respiratory, thoracic and mediastinal disorders	Nasal stuffiness, wheezing, thickening of bronchial secretions, dryness of the nose, mouth and throat,
	epistaxis
Gastrointestinal disorders	Constipation, epigastric distress, nausea, vomiting, diarrhoea
Hepatobiliary disorders	Jaundice, cholestasis, hepatic failure, hepatitis, hepatic function abnormality
Skin and subcutaneous tissue disorders	Photosensitivity, allergic rash,
	oedema, excessive perspiration, urticaria
Renal and urinary disorders	Frequency of micturition, difficult micturition,
	urinary retention
General disorders and administrative site conditions	Fatigue,
	chills

c) *Description of selected adverse reactions*

Mental alertness

Cyproheptadine as contained in ACTINCYPRO may diminish mental alertness; conversely, particularly in the young child, they may occasionally produce excitation.

Blood dyscrasias

Prolonged therapy with ACTINCYPRO may cause blood dyscrasias.

Reporting of suspected adverse reactions

Reporting suspected adverse reactions after authorisation of the medicine is important. It allows continued monitoring of the benefit/risk balance of the medicine. Healthcare providers are asked to report any suspected adverse reactions to SAHPRA via the Med Safety APP (Medsafety X SAHPRA) and eReporting platform (who-umc.org) found on SAHPRA website

Aspen Pharmacare:

E-mail: Drugsafety@aspenpharma.com

Tel: 0800 118 088

4.9. Overdose

Symptoms

Cyproheptadine overdosage reactions may vary from hallucinations, central nervous system depression or stimulation to convulsions respiratory and cardiac arrest, and death especially in infants and children. Also, atropine-like signs and symptoms (dry mouth; fixed, dilated pupils; flushing, etc.) as well as gastrointestinal symptoms may occur.

Treatment

Treatment should be supportive and symptomatic.

Activated charcoal may reduce absorption of the medicine if given within one or two hours after ingestion. In patients who are not fully conscious or have impaired gag reflex, consideration should be given to administering activated charcoal via a nasogastric tube, once the airway is protected.

Stimulants should not be used. Vasopressors may be used to treat hypotension

Precautions against aspiration must be taken especially in infants and children.

5. PHARMACOLOGICAL PROPERTIES

5.1. Pharmacodynamic properties

Category and Class: A 5.7.1 Antihistaminics

Pharmacotherapeutic group: Other antihistamines for systemic use

ATC code: R06AX02

Mechanism of action

Cyproheptadine hydrochloride, is a serotonin and histamine antagonist with anticholinergic and sedative effects.

Anti-serotonin and antihistamine medicines appear to compete with serotonin and histamine, respectively for receptor sites.

5.2. Pharmacokinetic properties

Elimination

After a single 4 mg oral dose of ^{14}C-labelled cyproheptadine HCl in normal subjects, 2 to 20 % of the radioactivity was excreted in the stools. Only about 34 % of the stool radioactivity was unchanged medicine, corresponding to less than 5,7 % of the dose. At least 40 % of the administered radioactivity was excreted in the urine. The principal metabolite found in human urine has been identified as a quaternary ammonium glucuronide conjugate of cyproheptadine. Elimination is diminished in renal insufficiency.

6. PHARMACEUTICAL PARTICULARS

6.1. List of excipients

Calcium hydrogen phosphate anhydrous, lactose monohydrate, magnesium stearate, maize starch, pregelatinised maize starch.

6.2. Incompatibilities

Not applicable.

6.3. Shelf life

24 months.

6.4. Special precautions for storage

Store at or below 25 °C.

6.5. Nature and contents of container

10 tablets are packed in PVC/PVdC/aluminium foil blister strips. 30 tablets are packed into an outer cardboard carton.

6.6. Special precautions for disposal and other handling

No special requirements.

7. HOLDER OF CERTIFICATE OF REGISTRATION

PHARMACARE LIMITED

Healthcare Park

Woodlands Drive

Woodmead 2191

8. REGISTRATION NUMBER

57/5.7.1/0019

9. DATE OF FIRST AUTHORISATION

29 January 2025

10. DATE OF REVISION OF TEXT

29 January 2025

Die Afrikaanse Professionele Inligting is op versoek beskikbaar. Mediese Blitslyn: 0800 118 088.

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