הודעה על החמרה (מידע בטיחות) בעלון לרופא (מעודכן 05.2013)

תאריך <u>11-2014</u>

שם תכשיר באנגלית ומספר הרישום: <u>Infanrix Hexa (Reg. No.:133-20-30676)</u> שם בעל הרישום : <u>GlaxoSmithKline (ISRAEL) Ltd</u>

טופס זה מיועד לפרוט ההחמרות בלבד !

בעלון לרופא

ההחמרות המבוקשות		
טקסט חדש	טקסט נוכחי	פרק בעלון
As for any vaccination, the risk- benefit of immunising with Infanrix hexa or deferring this vaccination should be weighed carefully in an infant or in a child suffering from a new onset or progression of a severe neurological disorder.		Special Warnings and Special Precautions for Use
The physician should be aware that the rate of febrile reactions is higher when Infanrix hexa is co- administered with a pneumococcal conjugate vaccine (PCV7, PCV10, PCV13), or with a measles-mumps-rubella- varicella (MMRV) vaccine, compared to that occurring following the administration of Infanrix hexa alone. These reactions were mostly moderate (less than or equal to 39°C) and transient (see sections 4.5 and 4.8).		
Increased reporting rates of convulsions (with or without fever) and hypotonic hyporesponsive episode (HHE) were observed with concomitant administration of Infanrix hexa and Prevenar 13 (see section 4.8).		
Infanrix hexa can be given concomitantly with pneumococcal conjugate vaccine (PCV7, PCV10 and PCV13), meningococcal serogroup C conjugate vaccine (CRM197 and TT conjugates), meningococcal serogroups A, C, W- 135 and Y conjugate vaccine (TT conjugate), oral rotavirus vaccine and measles-mumps-rubella-varicella (MMRV) vaccine.	There are insufficient data with regard to the efficacy and safety of simultaneous administration of Infanrix hexa and Measles- Mumps Rubella vaccine to allow any recommendation to be made. Data on concomitant administration of Infanrix hexa with Prevenar (pneumococcal saccharide conjugated vaccine,	Interaction with other medicinal products and other forms of interaction

Data have shown no clinically	adsorbed) have shown no	
relevant interference in the antibody	clinically relevant interference	
response to each of the individual	in the antibody response to each	
antigens, although inconsistent	of the individual antigens when	
antibody response to poliovirus type	given as a 3 dose primary	
2 in co-administration with Synflorix	vaccination (see section 4.4 for	
was observed (seroprotection ranging from 78% to 100%) and the immune	guidance on Prevenar and Prevenar 13).	
response rates to the PRP (Hib)	Plevenar 15).	
antigen of Infanrix hexa after 2 doses	As with other vaccines it may	
given at 2 and 4 months of age were	-	
higher if co-administered with a	be expected that in patients	
tetanus toxoid conjugate	receiving immunosuppressive	
pneumococcal or meningococcal	therapy, an adequate response	
vaccine (see section 5.1). The clinical	may not be achieved	
relevance of these observations		
remains unknown.		
Data from clinical studies indicate		
that, when Infanrix hexa is co-		
administered with pneumococcal		
conjugate vaccine, the rate of febrile		
reactions is higher compared to that		
occurring following the		
administration of Infanrix hexa		
alone. Data from one clinical study		
indicate that when Infanrix hexa is		
co-administered with measles-		
mumps-rubella-varicella (MMRV)		
vaccine, the rate of febrile reactions		
is higher compared to that occurring		
following the administration of		
Infanrix hexa alone and similar to		
that occurring following the		
administration of MMRV vaccine		
alone (see sections 4.4 and 4.8). The		
immune responses were unaffected.		
As with other vaccines it may be		
expected that in patients receiving immunosuppressive therapy, an		
adequate response may not be		
achieved.		
acilie ved.		
Infections and infestations:		Adverse events
Uncommon- Upper respiratory		
tract infection		
nuor mitorion		
Blood and lymphatic system		
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dicordare. Kara		
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Lymphadenopathy ² ,		
Lymphadenopathy ² ,		
Lymphadenopathy ² , thrombocytopenia ²		
Lymphadenopathy ² , thrombocytopenia ² Respiratory, thoracic and		
disorders: Rare- Lymphadenopathy ² , thrombocytopenia ² Respiratory, thoracic and mediastinal disorders: Rare-		
Lymphadenopathy ² , thrombocytopenia ² Respiratory, thoracic and mediastinal disorders: Rare- Bronchitis, Apnoea ² [see section		
Lymphadenopathy ² , thrombocytopenia ² Respiratory, thoracic and mediastinal disorders: Rare- Bronchitis, Apnoea ² [see section 4.4 for apnoea in very premature		
Lymphadenopathy ² , thrombocytopenia ² Respiratory, thoracic and		

Experience in co-administration:
Analysis of postmarketing
reporting rates suggests a
potential increased risk of
convulsions (with or without
fever) and HHE when comparing
groups which reported use of
Infanrix hexa with Prevenar 13 to
those which reported use of
Infanrix hexa alone.
• Experience with hepatitis B
vaccine:
In extremely rare cases, allergic
reactions mimicking serum sickness,
paralysis, neuropathy, neuritis,
hypotension, vasculitis, lichen
planus, erythema multiforme, arthritis, muscular weakness,
Guillain-Barré syndrome,
encephalopathy, encephalitis and
meningitis have been reported. The
causal relationship to the vaccine has
not been established.

מצ"ב העלון, שבו מסומנות ההחמרות המבוקשות על רקע צהוב ועל רקע ירוק. שינויים שאינם בגדר החמרות סומנו (בעלון) בצבע ירוק.

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