

## Summary of Product Characteristics

### **1. Name of the Medicinal Product**

Efavirenz Tablets 200mg & 600mg

### **2. International Non-proprietary Name**

Efavirenz

### **3. Pharmaceutical Form, Strength and Pack sizes**

Form – Tablet

Strength – 200mg & 600mg

### **4. Composition: active ingredient(s) and excipients Efavirenz**

#### **Tablets 200mg**

Each film coated Tablet contains: Efavirenz USP 200mg Efavirenz

#### **Tablets 600mg**

Each film coated Tablet contains: Efavirenz USP 600mg

### **5. Therapeutic properties** In the treatment

of HIV-1 infected patients.

### **6. Pharmacology**

#### **Pharmacodynamics:**

Efavirenz is a Non-nucleoside Reverse Transcriptase Inhibitor (NNRTI) of HIV-1. Efavirenz is a non-competitive inhibitor of HIV-1 reverse transcriptase (RT) and does not significantly inhibit HIV-2 RT or cellular DNA polymerases ( $\alpha$ ,  $\beta$ ,  $\gamma$  or  $\delta$ ).

### **7. Therapeutic Indications**

Efavirenz in combination with other antiretrovirals is indicated in the treatment of HIV-1 infected patients.

### **8. Dosage & Administration**

Efavirenz is recommended to be administered concomitantly along with other antiretrovirals. It should not be given as a single agent or added solely to a failing regimen. Efavirenz should be initiated in combination with at least one new antiretroviral agent to which the patient has not previously been exposed. Efavirenz should be administered on an empty stomach at bed time. Adults: The recommended dosage in combination with nucleoside analogue reverse transcriptase inhibitors (NRTIs) with or without a protease inhibitor is 600 mg orally, once daily.

Pediatric: The recommended dose of efavirenz for pediatric patients 3 years of age or older and weighing between 10 and 40 kg is given in Table 1. The recommended dosage of for pediatric patients weighing greater than 40 kg is 600 mg, once daily.

Table 1: Pediatric Dose to be administered once daily

Body Weight		Efavirenz Dose (mg)
Bkg	bs	
10 to <15	22 to <33	200
15 to <20	33 to <44	250
20 to <25	44 to <55	300
25 to <32.5	55 to <71.5	350
32.5 to <40	71.5 to <88	400
40	88	600
		200

Renal insufficiency: The pharmacokinetics of efavirenz have not been studied in patients with renal insufficiency; however, less than 1% of an efavirenz dose is excreted unchanged in the urine, so the impact of renal impairment on efavirenz elimination should be minimal. Liver disease: patients with mild to moderate liver disease may be treated with their normally recommended dose of efavirenz. Patients should be monitored carefully for dose-related adverse events, especially nervous system symptoms.

### 9. Adverse Reaction:

Rash, erythema multiforme, Steven-Johnson syndrome, hyper-sensitivity, psychiatric symptoms (severe depression, suicidal ideation, aggressive behaviour, paranoid reactions, manic), nervous system symptoms (dizziness, insomnia, somnolence, impaired concentration, abnormal dreaming), immune reactivation syndrome, lipodystrophy and metabolic abnormalities, elevation of hepatic enzymes (AST, ALT and amylase) and total cholesterol.

### 10. Contra-indications

Efavrienz is contraindicated in

Patients with clinically significant hypersensitivity to the active substance or to any of the excipients. Patients with severe hepatic impairment (Child Pugh Grade C).

Efavirenz must not be administered concurrently with terfenadine, astemizole, cisapride, midazolam, triazolam, pimozide, bepridil, or ergot alkaloids (for example, ergotamine, dihydroergotamine, ergonovine, and methylergonovine), St. John's wort (*Hypericum perforatum*) and voriconazole.

### 11. Drugs Interactions

Efavirenz is an inducer of CYP3A4 and an inhibitor of some CYP isozymes including CYP3A4. Other compounds that are substrates of CYP3A4 may have decreased plasma concentrations when co-administered with efavirenz. Efavirenz exposure may also be altered when given with

medicinal products or food (for example, grapefruit juice) which affect CYP3A4 activity. Efavirenz has potential interaction with antihistamines, amprenavir, indinavir, nelfinavir, ritonavir, saquinavir, rifampicin, clarithromycin, voriconazole, ethinyloestradiol, methadone, St. John's wort, lorezapam etc.

## **12. Pregnancy and Lactation**

Pregnancy should be avoided. Barrier contraception should be used in combination with oral contraceptives. Efavirenz should not be used in pregnancy. HIV infected mother should not breast feed their infants.

## **13. Warnings and precautions for use**

Efavirenz must not be used as a single agent to treat HIV or added on as a sole agent to a failing regimen. Patients should be advised to employ appropriate precautions to prevent the risk of transmission of HIV to others through sexual contact or blood contamination. If any intolerance due to any antiretroviral in a combination regimen reported serious consideration should be given to simultaneous discontinuation of all antiretroviral medicinal products. Efavirenz must be discontinued in patients developing severe rash associated with blistering, desquamation, mucosal involvement or fever. Patients with a prior history of psychiatric disorders appear to be at greater risk of these serious psychiatric adverse experiences. Patients should be informed that if they experience symptoms likely dizziness, insomnia, somnolence, impaired concentration and abnormal dreaming not to stop the treatment as it will improve with continued therapy. Efavirenz should not be administered with food.

Monitoring of cholesterol should be considered in patients treated with efavirenz. Any signs of inflammatory reaction should be considered seriously measurement of fasting serum lipids and blood glucose should be performed. Efavirenz film-coated tablets are unsuitable for individuals with the rare hereditary disorders of galactosaemia or glucose/galactose malabsorption syndrome. Patients who are receiving concomitant anticonvulsants that are primarily metabolised by the liver, such as phenytoin, carbamazepine and phenobarbital, may require periodic monitoring of plasma levels. Caution must be taken in any patient with a history of seizures. Elderly: Insufficient numbers of elderly patients have been evaluated in clinical studies to determine whether they respond differently than younger patients. Children: Efavirenz has not been evaluated in children below 3 years of age or who weigh less than 13 kg.

## 14. Overdose

Accidental administration of 600 mg twice daily has reported increased nervous system symptoms and involuntary muscle contractions. Treatment of overdose with efavirenz should consist of general supportive measures, including monitoring of vital signs and observation of the patient's clinical status. Administration of activated charcoal may be used to aid removal of unabsorbed efavirenz. There is no specific antidote for overdose with efavirenz. Since efavirenz is highly protein bound, dialysis is unlikely to remove significant quantities of it from blood.

## 15. Pharmaceutical Particulars 15.1

### List of Excipients

Material Name
Microcrystalline Cellulose
Lactose / Lactose Monohydrate
Croscarmellose Sodium (AC-DI-SOL, FMC)
Sodium Lauryl Sulfate
Hydroxypropyl Cellulose [Klucel-LF Agualon]
Magnesium Stearate (Vegetable Ferro)
Croscarmellose Sodium (AC-DI-SOL, FMC)
Purified Water
Instacoat. Universal [ICG-U- 10275][Brown][Ideal Cures]
Purified Water

### 15.2 Incompatibilities

Not Applicable.

### 15.3 Shelf-life

36 months

### 15.4 Special precautions for storage

Store below 30°C. Protect from light. Keep in a well closed container. Keep all medicines away from reach of children.

**15.5 Nature and content of Container Efavirenz**

**Tablets 200mg**

90s pack

**Efavirenz Tablets 600mg**

30s pack

**16. Dispensation:**

With prescription

**17. Marketing Authorization holder**

Strides Pharma Science Limited

'Strides House' Bilekahalli,

Bannerghatta Road,

Bangalore - 560 076, INDIA.

**18. Name and Address of the Manufacturer**

Strides Pharma Science Limited

36/7, Suragajakkanahalli,

Indlavadi Cross,

Anekal Taluk,

Bangalore – 562 106 INDIA.