# SUMMARY OF PRODUCT CHARACTERISTICS

## 1. Name of the medicinal product

ESTROZOLE (Miconazole Nitrate Cream USP 2.0% w/w)

# 2. Qualitative and quantitative composition

Composition:

Miconazole Nitrate USP2.0 % w/wIn a cream baseq.s

# 3. Pharmaceutical form

Topical cream A smooth white to off white cream

# 4. Clinical particulars

# 4.1 Therapeutic indications

For the treatment of mycotic infections of the skin and nails and superinfections due to Grampositive bacteria.

# 4.2 Posology and method of administration

Route of administration: Cutaneous use.

Recommended dosage:

For all ages:

Fungal infections of the skin: Apply some cream to the lesions two times daily. Rub the cream into the skin with your finger until it has fully penetrated. If the powder is used with the cream, a once daily application of both formulations is recommended. The duration of therapy varies from 2 to 6 weeks depending on the localisation and the severity of the lesion. Treatment should be continued at least one week after disappearance of all signs and symptoms.

Nail infections: Apply the cream once or twice daily to the lesions. Treatment should be prolonged for 10 days after all lesions have disappeared to prevent relapse.

## 4.3 Contraindications

Estrozole cream is contraindicated in individuals with a known hypersensitivity to miconazole/miconazole nitrate, other imidazole derivatives or to any of the excipients listed in section 6.1.

## 4.4 Special warnings and precautions for use

Severe hypersensitivity reactions, including anaphylaxis and angioedema, have been reported during treatment with Estrozole Cream and with other miconazole topical formulations (see section 4.8). If a reaction suggesting hypersensitivity or irritation should occur, the treatment

should be discontinued. Estrozole cream must not come into contact with the mucosa of the eyes.

Excipients:

This medicine contains 2 mg benzoic acid in each gram of cream. Benzoic acid may cause local irritation and may increase jaundice in new-born babies (up to 4 weeks old).

Butylated hydroxyanisole: May cause local skin reactions (e.g. contact dermatitis), or irritation to the eyes and mucous membranes.

## 4.5 Interaction with other medicinal products and other forms of interaction

Miconazole administered systemically is known to inhibit CYP3A4/2C9. Due to the limited systemic availability after topical application, clinically relevant interactions are rare. However, in patients on oral anticoagulants, such as warfarin, caution should be exercised and anticoagulant effect should be monitored.

#### 4.6 Fertility, pregnancy and lactation

Pregnancy

In animals miconazole nitrate has shown no teratogenic effects but is foetotoxic at high oral doses. Only small amounts of miconazole nitrate are absorbed following topical administration. However, as with other imidazoles, miconazole nitrate should be used with caution during pregnancy.

Lactation

Topically applied miconazole is minimally absorbed into the systemic circulation, and it is not known whether miconazole is excreted in human breast milk. Caution should be exercised when using topically applied miconazole products during lactation.

## 4.7 Effects on ability to drive and use machines

Not applicable.

## 4.8 Undesirable effects

Adverse reactions reported among 426 patients who received miconazole 2% cream base in 21 double-blind clinical trials are presented in Table A below.

Based on pooled safety data from these clinical trials, the most commonly reported adverse reaction was Application site irritation (0.7%).

Including the above-mentioned adverse reaction, Table A displays adverse reactions that have been reported with the use of topical, non-gynaecological, miconazole nitrate/miconazole from either clinical trial or postmarketing experiences.

The displayed frequency categories use the following convention: very common ( $\geq 1/10$ ); common ( $\geq 1/100$  to <1/10); uncommon ( $\geq 1/1,000$  to <1/100); rare ( $\geq 1/10,000$  to <1/1,000); and very rare (<1/10,000, including isolated reports) and Not Known (cannot be estimated from the available data).

Table A: Adverse Reactions Reported in Clinical Trials and Post-marketing Experience

System Organ Class	Adverse Drug Reactions		
	Frequency Category		
	<b>Uncommon</b> (≥1/1,000 to <1/100)	Not Known	
Immune System Disorders		Anaphylactic reaction, Hypersensitivity	
Skin and Subcutaneous Tissue	Skin burning sensation	Angioedema	
Disorders	Skin inflammation	Urticaria	
		Contact dermatitis	
		Rash	
		Erythema	
		Pruritus	
General Disorders and	Application site reactions		
Administration Site Conditions	(including application site		
	irritation, burning, pruritus,		
	reaction NOS and warmth)		

#### **Reporting of suspected adverse reactions**

Reporting suspected adverse reactions after authorisation of the medicinal product is important. It allows continued monitoring of the benefit/risk balance of the medicinal product. Healthcare professionals are asked to report any suspected adverse reactions via the Yellow Card Scheme at: www.mhra.gov.uk/yellowcard or search for MHRA Yellow Card in the Google Play or Apple App Store

#### 4.9 Overdose

Symptoms:

Cutaneous use: Excessive use can result in skin irritation, which usually disappears after discontinuation of therapy.

Accidental ingestion: Stomach irritation may occur.

Treatment:

Estrozole cream is intended for cutaneous use, not for oral use. If accidental ingestion of large quantities of the product occurs, use appropriate supportive care.

## **5.** Pharmacological properties

#### **5.1 Pharmacodynamic properties**

Pharmacotherapeutic classification: (Antifungals for dermatological/topical use; imidazole derivative)

ATC code: D01A C02.

Miconazole nitrate is an imidazole antifungal agent and may act by interfering with the permeability of the fungal cell membrane. It possesses a wide antifungal spectrum and has some antibacterial activity.

#### 5.2 Pharmacokinetic properties

#### **Absorption:**

There is little absorption through skin or mucous membranes when miconazole nitrate is applied topically.

## **Distribution:**

Absorbed miconazole is bound to plasma proteins (88.2%) and red blood cells (10.6%)

## **Metabolism and Excretion:**

The small amount of miconazole that is absorbed is eliminated predominantly in faeces as both unchanged drug and metabolites.

# 5.3 Preclinical safety data

Preclinical data reveal no special hazard for humans based on conventional studies of local irritation, single and repeated dose toxicity, genotoxicity, and toxicity to reproduction.

# **6.** Pharmaceutical particulars

#### 6.1 List of excipients

Sr.	Raw Material	Pharmacopoeia
No.		
1.	Chlorocresol	BP
2.	Cetomacrogol 1000	IHS
3.	Cetostearyl Alcohol	BP
4.	White soft paraffin	BP
5.	Light Liquid Paraffin	BP
6.	Propylene Glycol	BP
7.	Butylated Hydroxyanisole	BP
8.	Butylated Hydroxytoluene	BP
9.	Disodium Edetate	BP
10.	Sodium Dihydrogen Phosphate Dihydrate	BP
11.	Disodium Hydrogen phosphate Dihydrate	BP
12.	Simethicone (100%)	USP
13.	Purified Water	BP

## **6.2 Incompatibilities**

None known.

## 6.3 Shelf life

36 months

## 6.4 Special precautions for storage

Store below 30°C in dry and dark place. Do not freeze.

# 6.5 Nature and contents of container

30 g cream filled in aluminium tube packed in a carton.

## 6.6 Special precautions for disposal and other handling

No special requirements

7. Marketing authorisation holder

Kilitch Drugs (India) Limited 37, Ujagar Industrial Estate, W.T Patil Marg, Deonar, Mumbai 400 088,Maharashtra, India. Website- <u>www.kilitch.com</u>

# 8. Marketing authorisation number(s) issued by Ethiopian FDA

06985/07963/NMR/2019

## 9. Date of first authorisation/renewal of the authorisation

28-12-2021

## **10. Date of revision of the text**

06/07/2023