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النشرة مطابقة لنشرة المستحضر المرجعي
على W.H.O مع مطابقة ظروف التخزين
لل W.H.O policy

د. عاتق سامح
٢٠١٧/٧/٢١

ORAL BIVALENT TYPES 1 and 3 POLIOMYELITIS VACCINE

**Oral suspension in
multidose container**



Read all of this leaflet carefully before vaccination.

- Keep this leaflet. You may need to read it again.
- If you have any further questions, if you have a doubt, please ask your doctor or pharmacist for more information.
- If any of the side effects gets serious, or if you notice any side effects not listed in this leaflet, please tell your doctor or pharmacist. See section 4.

In this leaflet:

1. What ORAL BIVALENT TYPES 1 and 3 POLIOMYELITIS VACCINE is and what it is used for
2. What you need to know before you use ORAL BIVALENT TYPES 1 and 3 POLIOMYELITIS VACCINE
3. How to use ORAL BIVALENT TYPES 1 and 3 POLIOMYELITIS VACCINE
4. Possible side effects
5. How to store ORAL BIVALENT TYPES 1 and 3 POLIOMYELITIS VACCINE
6. Further information

1. WHAT ORAL BIVALENT TYPES 1 and 3 POLIOMYELITIS VACCINE IS AND WHAT IS USED FOR

This medicinal product is a vaccine. Vaccines are used to protect against infectious diseases. When this vaccine is injected, the body's natural defenses develop a protection against those diseases.

ORAL BIVALENT TYPES 1 and 3 POLIOMYELITIS VACCINE is indicated in all age groups for primary vaccination and reinforcement of the immunity against poliomyelitis caused by types 1 and 3 polioviruses.

The use of this vaccine should be in accordance with official recommendations.

2. WHAT YOU NEED TO KNOW BEFORE YOU USE ORAL BIVALENT TYPES 1 and 3 POLIOMYELITIS VACCINE

Do not use ORAL BIVALENT TYPES 1 and 3 POLIOMYELITIS VACCINE in case of:

- allergy (hypersensitivity)
 - to any component of the vaccine (listed in Section 6 – Further information),
 - to neomycin, streptomycin or polymyxin B (used during manufacturing and be present as traces)
- severe reactions after previous administration of an oral poliomyelitis vaccine.
- close contact with patients having immune deficiency.
- primary immune deficiency or immune deficiency subsequent to treatment (leukemia, lymphoma or advanced malignancy).
- Patients with asymptomatic human immunodeficiency virus (HIV) infection should be vaccinated according to the WHO official recommendations.

Warnings and precautions for use

- In the event of vomiting after administration of a dose, a second dose may be given after the symptoms have disappeared.
- In the event of fever or acute disease, it may be recommended to postpone vaccination according to national policy.
- After vaccination, polioviruses are excreted by vaccinees and may contaminate contact persons, including pregnant or breast-feeding women. The safety of the ORAL BIVALENT TYPE 1 and 3 POLIOMYELITIS VACCINE in pregnant or breast-feeding women is not known. Clinical and epidemiological studies have not revealed any congenital malformations or foetotoxic effects related to the oral poliomyelitis vaccine in exposed pregnant women.
- In premature or low birth weight infants, vaccination must be performed at chronological age, without correction related to duration of pregnancy (gestational age) or birth weight.

This vaccine must not be injected.

Other medicines and ORAL BIVALENT TYPES 1 and 3 POLIOMYELITIS VACCINE

ORAL BIVALENT TYPES 1 and 3 POLIOMYELITIS VACCINE may be given concomitantly during the same vaccination session with injectable inactivated vaccines such as diphtheria, tetanus, pertussis (acellular whole cell) vaccines, the inactivated poliomyelitis vaccine, the Haemophilus influenzae type b conjugate vaccine, hepatitis A vaccines and hepatitis B vaccines, pneumococcal conjugate vaccines and with live attenuated vaccines such as measles, rubella, mumps and yellow fever vaccines.

Concomitant administration of the oral poliomyelitis vaccine decreases the immune response to the rotavirus vaccine. However, there is currently no evidence that clinical protection against severe gastroenteritis is modified.

Pregnancy and breast-feeding

Data on the use of this vaccine in pregnant women are limited.

ORAL BIVALENT TYPES 1 and 3 POLIOMYELITIS VACCINE should be given to pregnant women only if clearly needed and following an assessment of the risks and benefits.

Breast-feeding is not a contraindication.

Driving and using machines

The ORAL BIVALENT TYPES 1 and 3 POLIOMYELITIS VACCINE is not expected to have influence on the ability to drive and use machines.

3. HOW TO USE ORAL BIVALENT TYPES 1 and 3 POLIOMYELITIS VACCINE

This vaccine will be administered by a healthcare professional.

Dosage

The vaccine dose is 2 drops (0.1 mL) measured using a multi-dose dropper.

The vaccinating dose can be administered directly in the mouth or on a sugar lump.

If a dropper is used, care must be taken not to contaminate the dropper with the saliva of the vaccinee.

Method of administration

The vaccine must only be administered orally.

Frequency of administration

Primary vaccination or booster doses should be given in accordance with official recommendations.

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If you use more **ORAL BIVALENT TYPES 1 and 3 POLIOMYELITIS VACCINE** than you should:

Few cases of overdose have been reported. No particular actions are to be put in place in case of overdose because the side effects are those described in Section 4.

4. POSSIBLE SIDE EFFECTS

Like all medicine, this vaccine can cause side effects although not everybody gets them.

Since **ORAL BIVALENT TYPES 1 and 3 POLIOMYELITIS VACCINE** contains two of the three components of the oral trivalent poliomyelitis vaccine, its safety profile is close to the oral trivalent poliomyelitis vaccine safety profile.

* In exceptional cases, Vaccine Associated Paralytic Poliomyelitis (VAPP) due to the reversion of the vaccine virus to neurovirulence may be observed. VAPP may exceptionally present as transverse myelitis. These VAPP cases occur within 4 to 8 weeks following the vaccination. The majority of VAPP cases occur after the first dose.

The overall incidence of this type of event varies from one case per 1.4 to 2.8 million vaccinees with the use of an oral trivalent poliomyelitis vaccine. As most cases of VAPP are due to type 2 vaccine poliovirus, the frequency expected with **ORAL BIVALENT TYPES 1 and 3 POLIOMYELITIS VACCINE** is lower.

* Myalgia (muscle pain) and arthralgia (joint pain).

* General reactions: fever, rigors, asthenia (tiredness)

Reporting of side effects

If you or your child (who was vaccinated) get any side effects, talk to your doctor, pharmacist or nurse. This includes any side effects not listed in this leaflet. By reporting side effects, you can help provide more information on the safety of this medicine.

5. HOW TO STORE **ORAL BIVALENT TYPES 1 and 3 POLIOMYELITIS VACCINE**

Keep this medicine out of the sight and reach of children.

Do not use **ORAL BIVALENT TYPES 1 and 3 POLIOMYELITIS VACCINE** after the expiry date which is stated on the label, the box.

The expiry date refers to the last day of that month.

Store in a freezer (-20°C).

After thawing, the product can be stored for 6 months in a refrigerator (between 2°C and 8°C).

The Vaccine Vial Monitors (VVM) are on the label of **ORAL BIVALENT TYPES 1 and 3 POLIOMYELITIS VACCINE**. The colour dot which appears on the label of the vial is a VVM. This is a time-temperature sensitive dot that provides an indication of the cumulative heat to which the vial has been exposed. It warns the end user when exposure to heat is likely to have degraded the vaccine beyond an acceptable level.



✓ Inner square lighter than outer circle.
If the expiry date has not been passed,
USE the vaccine.



✗ Discard point:
inner square matches colour of outer circle.
DO NOT USE the vaccine.



✗ Beyond the discard point:
inner square darker than outer circle.
DO NOT USE the vaccine.

The interpretation of the VVM is simple. Focus on the central square. Its colour will change progressively. As long as the colour of this square is lighter than the colour of the circle, then the vaccine can be used. As soon as the colour of the central square is the same colour as the circle or of a darker colour than the circle, then the vial should be discarded.

6. FURTHER INFORMATION

What **ORAL BIVALENT TYPES 1 and 3 POLIOMYELITIS VACCINE** contains

* The active substance is:

Poliomyelitis virus type 1*, LS - c2ab strain, (live, attenuated) at least 6.0 log₁₀ CCID₅₀†

Poliomyelitis virus type 3*, Leon - 12a1b strain, (live, attenuated) at least 5.8 log₁₀ CCID₅₀†

For each 0.1-mL dose (2 drops)

* Produced in Vero cells

† Previously expressed as "at least 10⁶ CCID₅₀"

‡ CCID₅₀: 50% Cell Culture Infective Doses (viral infectious units).

* The other ingredients are:

Human albumin, HEPES buffer solution, magnesium chloride solution (containing polysorbate 80 and phenol red).

The vaccine fulfils the WHO requirements.

What **ORAL BIVALENT TYPES 1 and 3 POLIOMYELITIS VACCINE** looks like and contents of the pack

This vaccine is an oral suspension in a multidose vial (2-mL vial – 20 doses of 0.1 mL) – Box of 10 vials.

Marketing Authorisation Holder

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This leaflet was last revised on 08/2015.

The following information is intended for healthcare professionals only:

The vial must be shaken gently to avoid any foaming, but sufficiently to obtain a homogenous mixture of the contents.

Obtaining one or several vaccine doses out of one multidose vial essentially depends on the care of handling.

After first and any subsequent opening, the multidose vial should be kept between 2°C and 8°C.

Multi-dose vials from which one or more doses of vaccine have been removed during an immunization session may be used in subsequent immunization sessions in compliance with the WHO Multi-Dose Vial Policy.

The vaccine must be administered exclusively by the oral route.

After use, remaining vaccine, vials and also spoons should be disposed of safely, preferably by heat inactivation or incineration, according to locally agreed procedures.

