

1. NAME OF THE MEDICINAL PRODUCT

Septolete® total eucalyptus 3 mg/1 mg pastilles

2. QUALITATIVE AND QUANTITATIVE COMPOSITION

Each pastille contains 3 mg benzydamine hydrochloride and 1 mg cetylpyridinium chloride.

Excipient with known effect:

- isomalt (E953): 2471.285 mg/pastille

For the full list of excipients, see section 6.1.

3. PHARMACEUTICAL FORM

Pastille

Round pastilles with beveled edges and rough surface from light blue to blue colour.

Allowed white patches, uneven coloring, the presence of air bubbles in the “hard candy” mass and small jagged edges.

4. CLINICAL PARTICULARS

4.1 Therapeutic indications

Septolete total eucalyptus pastilles are indicated in adults and children over 6 years of age for anti-inflammatory, analgesic and antiseptic treatment of irritations in the throat, mouth and gums, in gingivitis, pharyngitis and laryngitis and before and after tooth extractions.

4.2 Posology and method of administration

Posology

Adults: The recommended dosage is 3–4 pastilles a day. The pastille should be slowly dissolved in the mouth every 3 to 6 hours.

Elderly patients: The recommended dose is the same as for adults.

Paediatric population

Children over 12 years of age: The recommended dosage is 3–4 pastilles a day. The pastille should be slowly dissolved in the mouth every 3 to 6 hours.

Children aged from 6 to 12 years of age: The recommended dosage is 3 pastilles a day. The pastille should be slowly dissolved in the mouth every 3 to 6 hours.

Children less than 6 years of age: Septolete total eucalyptus is contraindicated in children less than 6 years of age.

For optimal effect, it is not recommended to use the product immediately before or after cleaning teeth.

The stated dose should not be exceeded.

Septolete total eucalyptus can be used for up to 7 days.

Method of administration

The pastille should be slowly dissolved in the mouth every 3 to 6 hours.

4.3 Contraindications

Hypersensitivity to the active substances or to any of the excipients listed in section 6.1.
Children aged less than 6 years since the pharmaceutical form is not appropriate for this age group.

4.4 Special warnings and precautions for use

Septolete total eucalyptus should not be used for more than 7 days. If there are no noticeable results after 3 days, a doctor should be consulted.

The use of topical preparations, especially over a long period of time, may lead to sensitisation, in which case treatment must be suspended and a suitable therapy instated.

Septolete total eucalyptus must not be used in combination with anionic compounds, such as those present in toothpastes, therefore it is not recommended to use the product immediately before or after cleaning teeth.

Septolete total eucalyptus contains isomalt (E953). Patients with rare hereditary problems of fructose intolerance should not take this medicine.

4.5 Interaction with other medicinal products and other forms of interaction

Septolete total eucalyptus should not be used at the same time as other antiseptics.
The pastilles should not be taken together with milk because milk reduces the antimicrobial efficacy of cetylpyridinium chloride.

4.6 Fertility, pregnancy and lactation

Pregnancy

There are no or limited amount of data from the use of benzydamine hydrochloride and cetylpyridinium chloride in pregnant women. Septolete total eucalyptus is not recommended during pregnancy.

Breast-feeding

It is unknown whether benzydamine hydrochloride/metabolites are excreted in human milk.
A risk to the newborns/infants cannot be excluded. A decision must be made whether to discontinue breast-feeding or to discontinue/abstain from Septolete total eucalyptus therapy taking into account the benefit of breast feeding for the child and the benefit of therapy for the woman.

4.7 Effects on ability to drive and use machines

Septolete total eucalyptus has no or negligible influence on the ability to drive and use machines.

4.8 Undesirable effects

- 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 $< 1/1,000$)
- Very rare ($< 1/10,000$)
- Not known (cannot be estimated from the available data)

Tabulated list of adverse reactions

	Rare	Very rare	Not known
Immune system disorders			Anaphylactic reactions Hypersensitivity reactions
Nervous system disorders			Burning mucosa Anaesthesia of oral mucosa
Respiratory, thoracic and mediastinal disorders	Bronchospasm		
Gastrointestinal disorders		Oral mucosal irritation Burning oral sensation	
Skin and subcutaneous tissue disorders	Urticaria Photosensitivity		

4.9 Overdose

Symptoms

Toxic manifestations of benzydamine overdose consist of excitement, convulsions, sweating, ataxia, shivering and vomiting. Since there is no specific antidote, the treatment of acute benzydamine intoxication is purely symptomatic.

Signs and symptoms of intoxication as a result of the ingestion of significant quantities of cetylpyridinium chloride include nausea, vomiting, dyspnoea, cyanosis, asphyxia, following paralysis of the respiratory muscles, depression of the CNS, hypotension and coma. The lethal dose in humans is approximately 1-3 grams.

Management

Since there is no specific antidote, the treatment of acute overdose is purely symptomatic.

5. PHARMACOLOGICAL PROPERTIES

5.1 Pharmacodynamic properties

Pharmacotherapeutic group: throat preparations; ATC code: R02AX03

Mechanism of action

Benzydamine hydrochloride is a molecule with a nonsteroidal chemical structure with anti-inflammatory and analgesic properties. The mechanism of action seems attributable to the inhibition of prostaglandin synthesis and by this to the reduction of local signs of inflammation (such as pain, redness, swelling, heat and impaired function). Benzydamine hydrochloride possesses also a moderate local anaesthetic effect.

Cetylpyridinium chloride is a cation antiseptic of the quarternary ammonium salts group.

Clinical efficacy and safety

Benzydamine is used predominantly in the treatment of disorders of the oropharyngeal cavity. Cetylpyridinium chloride is active against gram-positive bacteria and less active against gram-negative bacteria, and therefore performs an optimum antiseptic and germicidal action. It also has antifungal properties.

In a placebo controlled clinical trial with Septolete total eucalyptus the onset of pain relief (reduction in throat soreness and reduction in throat swelling) was observed 15 minutes after taking a pastille and duration of action extended up to 3 hours.

5.2 Pharmacokinetic properties

Absorption

Of the two active substances, cetylpyridinium and benzydamine, only benzydamine is absorbed. Therefore cetylpyridinium does not give rise to pharmacokinetic interactions with benzydamine at a systemic level.

The absorption of benzydamine through the oropharyngeal mucosa is demonstrated by the discovery of detectable quantities of the active substance in the serum, nevertheless insufficient to produce systemic effects.

Benzydamine is absorbed, however, when administered systemically. Therefore the absorption of benzydamine is higher with pharmaceutical forms which dissolve in the mouth, compared with the topical route (like oromucosal spray).

Distribution

The distribution volume is the same in all pharmaceutical forms.

Elimination

Excretion takes place principally through the urine and, for the most part, in the form of inactive metabolites. The half-life and the systemic clearance are similar results in all pharmaceutical forms.

5.3 Preclinical safety data

Non-clinical data reveal no special hazard for humans based on conventional studies of safety pharmacology, repeated dose toxicity, genotoxicity, carcinogenic potential, toxicity to reproduction and development.

It has emerged from a study on the rationale of the combination of the two active substances that the product has optimal tolerability and no toxicity. The tolerability tests on animals with the combination of benzydamine hydrochloride and cetylpyridinium chloride have allowed a good tolerability profile to be shown. Benzydamine hydrochloride and cetylpyridinium chloride in combination have not led to changes in the intestinal bacterial flora.

Benzydamine hydrochloride and cetylpyridinium chloride in pastille has proven to be optimally tolerated in patients since it has not caused toxic effects, locally or systemically.

6. PHARMACEUTICAL PARTICULARS

6.1 List of excipients

Eucalyptus oil
 Levomenthol
 Citric acid (E330)

Sucralose (E955)
Isomalt (E953)
Brilliant blue FCF (E133)

6.2 Incompatibilities

Not applicable.

6.3 Shelf life

4 years

6.4 Special precautions for storage

Store in the original package in order to protect from light.
This medicinal product does not require any special temperature storage conditions.

6.5 Nature and contents of container

Blister: 8, 16, 24 or 32 pastilles (1, 2, 3 or 4 blister packs of 8 pastilles), in a box.

Not all pack sizes may be marketed.

6.6 Special precautions for disposal

No special requirements.

7. MARKETING AUTHORISATION HOLDER

KRKA, d.d., Novo mesto, Šmarješka cesta 6, 8501 Novo mesto, Slovenia

8. MARKETING AUTHORISATION NUMBER(S)

9. DATE OF FIRST AUTHORISATION/RENEWAL OF THE AUTHORISATION

10. DATE OF REVISION OF THE TEXT