Summary of Product Characteristics for Pharmaceutical Products

1. Name of the medicinal product

CETZAN -10 MG TABLET

2. Qualitative and Quantitative Composition

Each film-coated tablet contains 10 mg of Cetirizine Hydrochloride BP

Excipients with potential clinical effect:

Each tablet contains lactose monohydrate BP

For the full list of excipients see section 6.1

3. Pharmaceutical form

Film-coated Tablet

4. Clinical particulars

4.1 Therapeutic indications

In adults and paediatric patients 6 years and above:

- Cetirizine is indicated for the relief of nasal and ocular symptoms of seasonal and perennial allergic rhinitis.
- Cetirizine is indicated for the relief of symptoms of chronic idiopathic urticaria.

4.2 Posology and method of administration

Posology:

Children aged from 6 to 12 years: 5mg twice daily (a half tablet twice daily). *Adults and adolescents over 12 years of age:* 10mg once daily (1 tablet)

The tablets need to be swallowed with a glass of liquid.

Elderly subjects: data do not suggest that the dose needs to be reduced in elderly subjects provided that the renal function is normal.

Patients with moderate to severe renal impairment: there are no data to document the efficacy/safety ratio patients with renal impairment. Since cetirizine is mainly excreted via renal route (see section 5.2), in cases where no alternative treatment can be used, the dosing intervals must be individualized according to renal function. Refer to the following table and adjust the dose as indicated.

Group	**Creatinine clearance (mL/min)**	**Dosage and frequency**
Normal	≥80	10 mg once daily
Mild	50-79	10 mg once daily
Moderate	30-49	5 mg once daily
Severe	< 30	5 mg once every 2 days
End-stage renal disease - Patients undergoing dialysis	< 10	Contra-indicated

In paediatric patients suffering from renal impairment, the dose will have to be adjusted on an individual basis taking into account the renal clearance of the patient, their age and body weight. Patients with hepatic

impairment: no dose adjustment is needed in patients with solely hepatic impairment.
Patients with hepatic impairment and renal impairment: dose adjustment is recommended (see Patients with moderate to severe renal impairment above).
Method of administration: Oral

4.3 Contraindications

- Hypersensitivity to cetirizine hydrochloride, to any of the excipients listed in section 6.1, to hydroxyzine or to any piperazine derivatives.
- Patients with severe renal impairment at less than 10 ml/min creatinine clearance. Idiopathic thrombocytopenic purpura

4.4 Special warnings and precautions for use

- At therapeutic doses, no clinically significant interactions have been demonstrated with alcohol (for a blood alcohol level of 0.5 g/L). Nevertheless, precaution is recommended if alcohol is taken concomitantly.
- Caution should be taken in patients with predisposition factors or urinary retention (e.g. spinal cord lesion, prostatic hyperplasia) as cetirizine may increase the risk of urinary retention.
- Caution in epileptic patients and patients who are at risk of convulsions is recommended.
- Response to allergy skin tests are inhibited by antihistamines and a wash-out period (of 3 days) is required before performing them.
- Patients with rare hereditary problems of galactose intolerance, the Lapp lactase deficiency or glucose-galactose malabsorption should not take this medicine.
- Pruritus and/or urticaria may occur when cetirizine is stopped, even if those symptoms were not present before treatment initiation. In some cases, the symptoms may be intense and may require treatment to be restarted. the symptoms should resolve when the treatment is restarted.

<u>Paediatric population</u>

- The use of the film-coated tablet formulation is not recommended in children aged less than 6 years since this formulation does not allow for appropriate dose adaptation. It is recommended to use a paediatric formulation of cetirizine.

4.5 Interaction with other medicinal products and other forms of interaction

Due to pharmacokinetic, pharmacodynamic and tolerance profile of cetirizine, no interactions are expected with this antihistamine. Actually, neither pharmacodynamic nor significant pharmacokinetic interaction was reported in drug-drug interactions studies performed, notably with pseudoephedrine or theophylline (400 mg/day).
The extent of absorption of cetirizine is not reduced with food, although the rate of absorption is decreased.

In sensitive patients, the concurrent use of alcohol or other CNS depressants may cause additional reductions in alertness and impairment of performance, although cetirizine does not potentiate the effect of alcohol (0.5 g/L blood levels).

4.6 Fertility, pregnancy and lactation

Pregnancy

For cetirizine prospectively collected data on pregnancy outcomes do not suggest potential for maternal or foetal/embryonic toxicity above background rates.

Animal studies do not indicate direct or indirect harmful effects with respect to pregnancy, embryonal/foetal development, parturition or post-natal development. Caution should be exercised when prescribing to pregnant women.

Breast-feeding

Cetirizine is excreted in human milk at concentrations representing 25% to 90% those measured in plasma, depending on sampling time after administration. Therefore, caution should be exercised when prescribing cetirizine to lactating women.

Fertility

Limited data is available on human fertility but no safety concern has been identified.

Animal data show no safety concern for human reproduction.

4.7 Effects on ability to drive and use machines

Objective measurements of driving ability, sleep latency and assembly line performance have not demonstrated any clinically relevant effects at the recommended dose of 10 mg.

However, patients who experience somnolence should refrain from driving, engaging in potentially hazardous activities or operating machinery. They should not exceed the recommended dose and should take their response to the medicinal product into account.

4.8 Undesirable effects

Blood and lymphatic disorders:

Very rare: thrombocytopenia

Immune system disorders:

Rare: hypersensitivity

Very rare: anaphylactic shock

Metabolism and nutrition disorders:

Not known: increased appetite

Psychiatric disorders:

Uncommon: agitation

Rare: aggression, confusion, depression, hallucinations, insomnia Very rare: tics

Not known: suicidal ideation, nightmare

Nervous system disorders:

Uncommon: paraesthesia Rare: convulsions

Very rare: dysgeusia, syncope, tremor, dystonia, dyskinesia

Not known: amnesia, memory impairment
Eye disorders:
Very rare: accommodation disorder, blurred vision, oculogyration Ear and labyrinth disorders:
Not known: vertigo
Cardiac disorders:
Rare: tachycardia
Gastro-intestinal disorders:
Uncommon: diarrhoea
Hepatobiliary disorders:
Rare: hepatic function abnormal (increased transaminases, alkaline phosphatises, γ-GT and bilirubin)
Not known: hepatitis
Skin and subcutaneous tissue disorders:
Uncommon: pruritis, rash
Rare: urticaria
Very rare: angioneurotic oedema, fixed drug eruption
Not known: acute generalized exanthematous pustulosis
Musculoskeletal and connective tissue disorders:
Not known: arthralgia
Renal and urinary disorders:
Very rare: dysuria, enuresis
Not known: urinary retention
General disorders and administration site conditions:
Uncommon: asthenia, malaise
Rare: oedema
Investigations:
Rare: weight increased
Description of selected adverse reactions
After discontinuation of cetirizine, pruritus (intense itching) and/or urticaria have been reported.
Reporting of suspected adverse reactions
Reporting suspected adverse reactions after authorization 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 Pharmacy and Poisons Board- Pharmacovigilance Electronic Reporting System (PvERS); https://pv.pharmacyboardkenya.org .

4.9 Overdose

Symptoms:
Symptoms observed after an overdose of cetirizine are mainly associated with CNS effects or with effects that could suggest an anticholinergic effect. Adverse events reported after an intake of at least 5 times the recommended daily dose are: confusion, diarrhoea, dizziness, fatigue, headache, malaise, mydriasis, pruritus, restlessness, sedation, somnolence, stupor, tachycardia, tremor, and urinary retention.

Management:
There is no known specific antidote to cetirizine. Should overdose occur symptomatic or supportive treatment is recommended. Gastric lavage should be considered following ingestion of a short occurrence. Alternatively consider activated charcoal.
Cetirizine is not effectively removed by dialysis.

5. Pharmacological properties

5.1 Pharmacodynamic properties

Pharmacotherapeutic group: antihistamine for systemic use, piperazine derivatives. ATC code: R06A E07
Mechanism of action:
Cetirizine, a human metabolite of hydroxyzine, is a potent and selective antagonist of peripheral H1-receptors. In vitro receptor binding studies have shown no measurable affinity for other than H1-receptors.
Pharmacodynamics effects: In addition to its anti-H1 effect, cetirizine was shown to display anti-allergic activities: at a dose of 10 mg once or twice daily, it inhibits the late phase recruitment of eosinophils, in the skin and conjunctiva of atopic subjects submitted to allergen challenge.
Clinical efficacy and safety: Studies in healthy volunteers show that cetirizine, at doses of 5 and 10 mg strongly inhibits the wheal and flare reactions induced by very high concentrations of histamine into the skin, but the correlation with efficacy is not established.
In a six-week, placebo-controlled study of 186 patients with allergic rhinitis and concomitant mild to moderate asthma, cetirizine 10mg once daily improved rhinitis symptoms and did not alter pulmonary function. This study supports the safety of administering cetirizine to allergic patients with mild to moderate asthma.
In a placebo-controlled study, cetirizine given at the high daily dose of 60 mg for seven days did not cause statistically significant prolongation of QT interval.
At the recommended dosage, cetirizine has demonstrated that it improves the quality of life of patients with perennial and seasonal allergic rhinitis.
Paediatric population:
In a 35-day study in children aged 5 to 12, no tolerance to the antihistamine effect (suppression of wheal and flare) of cetirizine was found. When a treatment with cetirizine is stopped after repeated administration, the skin recovers its normal reactivity to histamine within 3 days.

5.2 Pharmacokinetic properties

Absorption
The steady-state peak plasma concentrations is approximately 300 ng/ml and is achieved within 1.0 ± 0.5 h. The distribution of pharmacokinetic parameters such as peak plasma concentration (Cmax) and area under curve (AUC) is unimodal.

The extent of absorption of cetirizine is not reduced with food, although the rate of absorption is decreased. The extent of bioavailability is similar when cetirizine is given as solutions, capsules or tablets.

Distribution

The apparent volume of distribution is 0.50 l/kg. Plasma protein binding of cetirizine is 93 ± 0.3%. Cetirizine does not modify the protein binding of warfarin.

Biotransformation

Cetirizine does not undergo extensive first pass metabolism.

Elimination

The terminal half-life is approximately 10 hours and no accumulation is observed for cetirizine following daily doses of 10 mg for 10 days. About two thirds of the dose are excreted unchanged in urine.

5.3 Preclinical safety data

No Data Found.

6. Pharmaceutical particulars

6.1 List of excipients

Cetirizine Hydrochloride BP
Di-Basic Calcium Phosphate BP
Microcrystalline Cellulose BP
Lactose BP
Maize Starch BP
PVP K-30 BP
Sodium Methyl Paraben BP
Sodium Propyl Paraben BP
Colloidal Anhydrous Silica BP
Sodium Starch Glycolate BP
Purified Talc BP
Magnesium Stearate BP

6.2 Incompatibilities

Not applicable

6.3 Shelf life

36 months

6.4 Special precautions for storage

Store at temperature not exceeding 30°C. Protect from light.

6.5 Nature and contents of container

10 tablets in one ALU-PVC Blister then 10 blisters in one carton with insert

6.6 Special precautions for disposal and other handling

Not applicable

7. Marketing Authorization Holder

ZAIN PHARMA LIMITED

8. Marketing Authorization Number(s)

H2025/CTD9416/21379

9. Date of first Authorization/renewal of the Authorization

2025 January 19

10. Date of revision of the text

2025 January 19