SUMMARY OF PRODUCT CHARACTERISTICS

SUMMARY OF PRODUCT CHARACTERISTICS (PRODUCT DATA SHEET)

1. Name of the Medicinal Product:

1.1 Product Name :

MUPIRICOR OINTMENT

Mupirocin Ointment USP 2% w/w

1.2 Strength:

Mupirocin USP.....2% w/w

Ointment base.....q.s.

1.3 Pharmaceutical Dosage Form :

White colour smooth Ointment

2. Quality and Quantitative Composition

Mupirocin USP : 2% w/w

Water Soluble Base : q.s.

2.1 Qualitative Declaration:

For Excipients see section 6.1

2.2 Quantitative Declaration:

Mupirocin USP : 2% w/w

Water Soluble Base : q.s.

For Excipients see section 6.1

2. QUALITATIVE AND QUANTITATIVE COMPOSITION

3. Pharmaceutical Form:

Ointment for Topical use.

4. Clinical Particulars

4.1. Therapeutic indications:

Mupirocin is indicated in adults and children.

Mupirocin is a topical antibacterial agent, active against those organisms responsible for the majority of skin infections, e.g. Staphylococcus aureus, including methicillin-resistant strains, other staphylococci, streptococci. It is also active against Gram-negative organisms such as Escherichia coli and Haemophilus influenzae. Mupirocin Ointment is used for skin infections, e.g. impetigo, folliculitis, furunculosis.

4.2. Posology and method of administration :

<u>Posology:</u>

Adults (including elderly) and Paediatric population:

MUPIRICOR Ointment should be applied to the affected area up to three times a day for up to 10 days. The area may be covered with a dressing or occluded if desired.

Method of administration:

Topical.

Do not mix with other preparations as there is a risk of dilution, resulting in a reduction of the antibacterial activity and potential loss of stability of the mupirocin in the ointment.

4.3. Contraindications

Hypersensitivity to the active substance(s) or to any of the excipients

This Mupirocin Ointment formulation is not suitable for ophthalmic or intranasal use.

4.4. Special warning and precautions for use:

Should a possible sensitisation reaction or severe local irritation occur with the use of Mupirocin Ointment, treatment should be discontinued, the product should be washed off and appropriate therapy instituted.

As with other antibacterial products, prolonged use may result in overgrowth of non-susceptible organisms. Pseudomembranous colitis has been reported with the use of antibiotics and may range in severity from mild to life-threatening. Therefore, it is important to consider its diagnosis in patients who develop diarrhoea during or after antibiotic use. Although this is less likely to occur with topically applied mupirocin, if prolonged or significant diarrhoea occurs or the patient experiences abdominal cramps, treatment should be discontinued immediately and the patient investigated further.

Renal Impairment

Polyethylene glycol can be absorbed from open wounds and damaged skin and is excreted by the kidneys. In common with other polyethylene glycol-based ointments, Mupirocin Ointment should not be used in conditions where absorption of large quantities of polyethylene glycol is possible, especially if there is evidence of moderate or severe renal impairment.

Mupirocin Ointment is not suitable for:

- ophthalmic use;

- intranasal use (in neonates or infants);

- use in conjunction with cannulae;

- at the site of central venous cannulation.

Avoid contact with the eyes. If contaminated, the eyes should be thoroughly irrigated with water until the ointment residues have been removed.

4.5. Interaction with other medicinal products and other forms of Interactions

No interaction studies have been performed.

4.6. Fertility, Pregnancy and lactation:

Pregnancy: Reproduction studies on mupirocin in animals have revealed no evidence of harm to the foetus. As there is no clinical experience on its use during pregnancy, Mupirocin Ointment should only be used in pregnancy when the potential benefits outweigh the possible risks of treatment.

Breast-feeding: It is unknown whether mupirocin is excreted in human milk. If a cracked nipple is to be treated, it should be thoroughly washed prior to breast-feeding.

Fertility: There are no data on the effects of mupirocin on human fertility. Studies in rats showed no effects on fertility

4.7. Effects on ability to drive and use Machines:

Mupirocin Ointment has no or negligible influence on the ability to drive and use machines.

4.8. Side effects :

Adverse reactions are listed below by system organ class and frequency. Frequencies are defined as: very common (≥1/10), common (≥1/100 to <1/10), uncommon (≥1/1,000 to <1/100), rare (≥1/10,000 to <1/1,000), very rare (<1/10,000), including isolated reports.

Common and uncommon adverse reactions were determined from pooled safety data from a clinical trial population of 1573 treated patients encompassing 12 clinical studies. Very rare adverse reactions were primarily determined from post-marketing experience data and therefore refer to reporting rate rather than true frequency.

System organ class	Frequency	Undesirable effects
Immune system disorders	Very rare	Systemic allergic reactions including anaphylaxis, generalised rash, urticaria and angioedema have been reported with Mupirocin Ointment.
Skin and subcutaneous tissue disorders	Common Uncommon	Burning localised to the area of application

Reporting of suspected adverse reactions: Healthcare professionals are requested to report any suspected adverse reactions to report any suspected adverse reactions to the National Regulatory Agents.

Reporting of suspected adverse reactions

Health care professionals are asked to report any suspected adverse reactions via the https://pv.pharmacyboardkenya.org

4.9. OVERDOSAGE

Symptoms

There is currently limited experience with overdosage of mupirocin.

Management

The toxicity of mupirocin is very low. In the event of accidental ingestion of the ointment, symptomatic treatment should be given.

In case of erroneous oral intake of large quantities of the ointment, renal function should be closely monitored in patients with renal insufficiency because of the possible side effects of polyethylene glycol.

There is no specific treatment for an overdose of mupirocin. In the event of overdose, the patient should be treated supportively with appropriate monitoring as necessary. Further management should be as clinically indicated or as recommended by the national poisons centre, where available.

5. Pharmacological Properties :

5.1. Pharmacodynamic Properties :

Pharmacotherapeutic group: Antibiotics and chemotherapeutics for topical use, ATC code:

D06AX09

Mechanism of action

Mupirocin is a novel antibiotic produced through fermentation by *Pseudomonas fluorescens*. Mupirocin inhibits isoleucyl transfer-RNA synthetase, thereby arresting bacterial protein synthesis. Mupirocin has bacteriostatic properties at minimum inhibitory concentrations and bactericidal properties at the higher concentrations reached when applied locally.

After topical application of Mupirocin Ointment, mupirocin is only very minimally absorbed systemically and that which is absorbed is rapidly metabolised to the antimicrobially inactive metabolite, monic acid. Penetration of mupirocin into the deeper epidermal and dermal layers of the skin is enhanced in traumatised skin and under occlusive dressings.

Mechanism of Resistance

Low-level resistance in staphylococci is thought to result from point mutations within the usual staphylococcal chromosomal gene (ileS) for the target isoleucyl tRNA synthetase enzyme. Highlevel resistance in staphylococci has been shown to be due to a distinct, plasmid encoded isoleucyl tRNA synthetase enzyme.

Intrinsic resistance in Gram negative organisms such as the *Enterobacteriaceae* could be due to poor penetration of the outer membrane of the Gram-negative bacterial cell wall.

Due to its particular mode of action, and its unique chemical structure, mupirocin does not show any cross-resistance with other clinically available antibiotics.

Microbiological Susceptibility

The prevalence of acquired resistance may vary geographically and with time for selected species, and local information on resistance is desirable, particularly when treating severe infections. As necessary, expert advice should be sought when the local prevalence of resistance is such that the utility of the agent in at least some types of infection is questionable.

Commonly susceptible species

*Staphylococcus aureus**

*Streptococcus pyogenes**

Streptococcus spp. (β-haemolytic, other than *S. pyogenes*)

Species for which acquired resistance may be a problem

Staphylococcus spp., coagulase negative

Inherently resistant organisms

Corynebacterium spp.

Micrococcus spp.

* Activity has been satisfactorily demonstrated in clinical studies

5.2. Pharmacokinetic Properties

After topical application of Mupirocin Ointment, mupirocin is only very minimally absorbed systemically and that which is absorbed is rapidly metabolised to the antimicrobially inactive metabolite, monic acid. Penetration of mupirocin into the deeper epidermal and dermal layers of the skin is enhanced in traumatised skin and under occlusive dressings.

Elderly:

No restrictions unless there is evidence of moderate or severe renal impairment

5.3. Preclinical safety Data:

Pre-clinical effects were seen only at exposures which are extremely unlikely to cause concern for humans under normal conditions of use. Mutagenicity studies revealed no risks to man.

6. Pharmaceutical Particulars :

6.1. List of excipients:

1. Macrogol 400 BP
2. Macrogol 4000 BP
3. Propylene Glycol BP
4. Disodium Edetate BP
5. Butylated Hydroxytoluene BP

6.2 Incompatibilities: Not known

6.3 Shelf life: 24 Months

6.4 Special precautions for storage: Store below 30°C. Protect from light.

Do not freeze.

Keep medicine out of reach of children.

6.5. Nature and contents of container:

15 gm collapsible aluminum tube. Such 1 tube to be packed in a carton along with pack insert.

6.6. Special Precaution for Disposal and other handling : None

7. MARKETING AUTHORISATION HOLDER

SIGNATURE HEALTHCARE LIMITED

Cape Business Park, Along Thika Super Highway,

P.O. Box 66172-00800, Nairobi

8. MARKETING AUTHORISATION NUMBER(S)

H2025/CTD9676/20534

9. DATE OF FIRST AUTHORISATION / RENEWAL OF THE AUTHORISATION

Date of first authorisation: 08.07.2025

10. DATE OF REVISION OF THE TEXT

08.07.2025