1. Name of the Medicinal Product

(a) **Product Name** : Fexona Ketoconazole Cream

(b) Strength : 2% w/w (c) Pharmaceutical Dosage Form : Cream

2. Quality and Quantitative Composition

(a) Qualitative Declaration, the active substance should be declared by its recommended INN. Accompanied by its salt or hydrate form if relevant.

Composition:

Ketoconazole BP 2% w/w

Craem base q.s.

(b) Quantitative Declaration, the quantity of the active substance must be expressed per dosage unit

Sr. No.	Name of the Materials	Spec.	Label Claim	Overages (%)	Quantity (mg/gm)	Active/ Inactive
1	Ketoconazole	BP	2%w/w		20 mg	Active
2	Propylene glycol	BP				
3	Ceto-stearyl alcohol	BP				
4	Cetomacragol -1000	BP				
5	Chlorocresol	BP				
6	Liquid Paraffin	BP				
7	Methyl Paraben	BP				
8	Propyl Paraben	BP				
9	Di-sodium hydrogen ortho phosphate anhydrous	BP				
10	Purified Water	BP				

3. Pharmaceutical Form Visual description of the appearance of the product (colour, markings, etc.) e.g.:

White colour cream having characteristic odour.

4. Clinical Particulars,

4.1 Therapeutic Indications:

For topical application in the treatment of dermatophyte infections of the skin such as tinea corporis, tinea cruris, tinea manus and tinea pedis infections due to Trichophyton spp, Microsporon spp and Epidermophyton spp. Fexona Ketoconazole Cream is also indicated for the treatment of cutaneous candidosis (including vulvitis), tinea (pityriasis) versicolor and seborrhoeic dermatitis caused by Malassezia (previously called Pityrosporum) spp.

4.2 Posology and method of administration:

Ketoconazole cream is for use in adults.

Cutaneous candidosis, tinea corporis, tinea cruris, tinea manus, tinea pedis and tinea (pityriasis) versicolor: It is recommended that Fexona Ketoconazole Cream be applied once or twice daily to cover the affected and immediate surrounding area.

The usual duration of treatment is: tinea versicolor 2–3 weeks, yeast infections 2-3 weeks, tinea cruris 2-4 weeks, tinea corporis 3–4 weeks, tinea pedis 4-6 weeks.

Seborrheic dermatitis:

Fexona Ketoconazole Cream should be applied to the affected areas once or twice daily.

The usual initial duration of treatment in seborrheic dermatitis is 2 to 4 weeks. Maintenance therapy can be applied intermittently (once weekly) in seborrheic dermatitis.

Treatment should be continued until a few days after the disappearance of all symptoms. The diagnosis should be reconsidered if no clinical improvement is noted after 4 weeks of treatment. General measures in regard to hygiene should be observed to control sources of infection or reinfection.

Seborrhoeic dermatitis is a chronic condition and relapse is highly likely.

Method of administration: Cutaneous administration.

Paediatrics patients

The safety and efficacy of Fexona Ketoconazole Cream in children (17 years of age and younger) has not been established.

4.3 Contraindications:

Fexona Ketoconazole Cream is contra-indicated in patients with a known hypersensitivity to any of the ingredients or to ketoconazole itself

4.4 Special warning and precautions for use:

Fexona Ketoconazole Cream is not for ophthalmic use.

If co-administered with a topical corticosteroid, to prevent a rebound effect after stopping a prolonged treatment with topical corticosteroids it is recommended to continue applying a mild topical corticosteroid in the morning and to apply Fexona Ketoconazole Cream in the evening, and to subsequently and gradually withdraw the topical corticosteroid therapy over a period of 2-3 weeks.

4.5 Interaction with other medicinal products and other forms of interactions:

No interaction studies have been performed.

4.6 Fertility, pregnancy and lactation

There are no adequate and well-controlled studies in pregnant or lactating women. Data on a limited number of exposed pregnancies indicate no adverse effects of topical Ketoconazole on pregnancy or on the health of the foetus/newborn child. Animal studies have shown reproductive toxicity at doses that are not relevant to the topical administration of ketoconazole.

Plasma concentrations of ketoconazole are not detectable after topical application of Fexona Ketoconazole Cream to the skin of non-pregnant humans. There are no known risks associated with the use of Fexona Ketoconazole Cream in pregnancy or lactation.

4.7 Effects on ability to drive and use machine:

Fexona Ketoconazole Cream has no influence on the ability to drive and use machines.

4.8 Undesirable effects:

The safety of ketoconazole cream was evaluated in 1079 subjects who participated in 30 clinical trials. Ketoconazole cream was applied topically to the skin. Based on pooled safety data from these clinical trials, the most commonly reported (\geq 1% incidence) adverse reactions were (with % incidence): application site pruritus (2%), skin burning sensation (1.9%), and application site erythema (1%). Including the above-mentioned adverse reactions, the following table displays adverse reactions that have been reported with the use of ketoconazole cream from either clinical

trial or postmarketing experiences. The displayed frequency categories use the following convention:

- \triangleright Very common ($\ge 1/10$)
- \triangleright Common ($\ge 1/100$ to < 1/10)
- \triangleright Uncommon ($\ge 1/1,000$ to < 1/100)
- \triangleright Rare ($\ge 1/10,000$ to < 1/1,000)
- \triangleright Very rare (<1/10,000)

Not Known (cannot be estimated from the available clinical trial data).

	Adverse Reactions					
	Frequency Category					
System Organ Class	Common (≥1/100 to <1/10)	Uncommon (≥1/1,000 to <1/100)	Not Known			
Immune System Disorders		Hypersensitivity				
Skin and Subcutaneous Tissue Disorders	Skin burning sensation	Bullous eruption Dermatitis contact Rash Skin exfoliation Sticky skin	Urticaria			
General Disorders and Administration Site Conditions	Application site erythema Application site pruritus	Application site bleeding Application site discomfort Application site dryness Application site inflammation Application site irritation Application site paresthesia Application site reaction				

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: Yellow Card Scheme

4.9 Overdose:

Topical Application

Excessive topical application may lead to erythema, oedema and a burning sensation, which will disappear upon discontinuation of the treatment.

Ingestion

In the event of accidental ingestion, supportive and symptomatic measures should be carried out.

5. Pharmacological Properties

5.1 Pharmacodynamic Properties:

Pharmacotherapeutic group: Antifungals for Topical Use, Imidazole derivatives

ATC Code: D01AC08

Usually, Ketoconazole cream acts rapidly on pruritus, which is commonly seen in dermatophyte and yeast infections, as well as skin conditions associated with the presence of Malassezia spp. This symptomatic improvement is observed before the first signs of healing are observed.

Ketoconazole, a synthetic imidazole dioxolane derivative, has a potent antimycotic activity against dermatophytes such as Trichophyton spp., Epidermophyton floccosum and Microsporum spp. and against yeasts, including Malassezia spp. and Candida spp. The effect on Malassezia spp. is particularly pronounced.

A study in 250 patients has shown that application twice daily for 7 days of Ketoconazole 2% cream vs Clotrimazole 1% cream for 4 weeks on both feet demonstrated efficacy in patients with tinea pedis (athlete's foot) presenting lesions between the toes. The primary efficacy endpoint was negative microscopic KOH examination at 4 weeks. Ketoconazole 2% treatment showed equivalent efficacy to 4 weeks clotrimazole 1% treatment. There was no evidence of relapse following treatment with Ketoconazole cream at 8 weeks.

5.2 Pharmacokinetic Properties:

Plasma concentrations of Ketoconazole were not detectable after topical administration of Fexona Ketoconazole Cream am in adults on the skin. In one study in infants with seborrhoeic dermatitis (n = 19), where approximately 40 g of Fexona Ketoconazole Cream was applied daily on 40% of the body surface area, plasma levels of ketoconazole were detected in 5 infants, ranging from 32 to 133 ng/mL.

5.3 Preclinical Safety Data:

Effects in non-clinical studies were observed only at exposures considered sufficiently in excess of the maximum human exposure indicating little relevance to clinical use.

6.0 Pharmaceutical Particulars

6.1 List of excipients:

Propylene glycol	BP
Ceto-stearyl alcohol	BP
Cetomacragol -1000	BP
Chlorocresol	BP
Liquid paraffin heavy	BP
Methyl paraben plain	BP
Propyl paraben plain	BP
Di-sodium hydrogen ortho phosphate anhydrous	ВР

6.2 Incompatibilities:

Not applicable

6.3 Shelf life: 36 Months

6.4 Special precautions for storage:

Store protected from light and moisture, below 30°C.

6.5 Nature and contents of container:

Tube made of 99.7% aluminum, lined on inner side with heat polymerised epoxyphenol resin with a latex coldseal ring at the end of the tube. The cap is made of 60% polypropylene, 30% calcium carbonate and 10% glyceryl monostearate. Printed Laminated Tube of 30g.

6.6 Instructions for use and handling

No special requirements.

7.0 Marketing Authorization Holder

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