

Module I Administrative Information

Product Name: JRANEAL (Clotrimazole, Clobetasol Cream)

1.3 Product Information

1.3.1 Summary of Product Characteristics (SmPC)

Enclosed.

Module I Administrative Information**Product Name: JRANEAL (Clotrimazole, Clobetasol Cream)**

Summary Product Characteristics**1. Name of the proprietary product: JRANEAL****Name of the nonproprietary International Product:** Clotrimazole, Clobetasol Cream**Route of Administration:** Topical Cream**2. Qualitative and Quantitative composition:**

Sr. No.	Ingredients	Specification	Label Claim	Qty/ tube (in gm)	Over ages	Reason for inclusion
1.	Clotrimazole	USP	10.0 mg	0.306	2%	Active
2.	Clobetasol Propionate	USP	0.25 mg	0.0078	5%	Active
3.	Cetamacrogol -1000	IH	--	0.6	--	Emulsifier
4.	Cetosteryl Alcohol	BP	--	2.16	--	Emollient
5.	Light Liquid Paraffin	BP	--	1.5	--	Emollient
6.	Propylene Glycol	BP	--	1.5	--	Solvent
7.	White Soft Paraffin	BP	--	4.5	--	Emollient
8.	Disodium EDTA	BP	--	0.006	--	Chelating agent
9.	Methyl Paraben	BP	--	0.03	--	Preservative
10.	Propyl Paraben	BP	--	0.015	--	Preservative
11.	Para Chloro Meta Cresol	BP	--	0.03	--	Preservative
12.	Perfume Lavender	IH	--	0.09	--	Fragrant
13.	Cream Base	BP	--	qs	--	Vehicle

Where, USP: United State Pharmacopoeia, BP: British Pharmacopoeia, IH: In-House

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3. Pharmaceutical Form: Topical Cream.

4. Clinical Particulars:

4.1 Therapeutic Indications:

JRANEAL is used in short courses to treat severe inflammatory skin conditions such as eczema, dermatitis or psoriasis that are infected or likely to become infected.

Clotrimazole is an antifungal which stops the growth of fungi by preventing them from forming their own protective covering.

Clobetasol is a topical corticosteroid. It works by reducing skin inflammation (redness, swelling, itching, and irritation).

4.2 Posology and method of administration:

Gently massage sufficient cream into the affected and surrounding skin areas twice a day, in the morning and evening. OR As directed by Physicians.

4.3 Contraindications

JRANEAL is contraindicated in individuals sensitive to its components. If have inflammatory skin disorders infected with pseudomonas or proteus species of bacteria; If have viral skin infections such as chickenpox, shingles, cold sores or herpes simplex.

4.4 Special warnings and precautions for use

WARNING: JRANEAL is not for ophthalmic use.

PRECAUTIONS: General: If irritation or sensitivity develops with the use of this cream, treatment should be discontinued and appropriate therapy instituted.

Information for Patients:

The patient should be advised to:

Do NOT use JRANEAL if,

If You have inflammatory skin disorders infected with pseudomonas or proteus species of bacteria; If You have viral skin infections such as chickenpox, shingles, cold sores or herpes simplex.

JRANEAL topical creams are created for cutaneous use only and should not be used in the eye nose, mouth and ear.

1. Use the medication for the full treatment time even though the symptoms may have improved. Notify the physician if there is no improvement after four weeks of treatment.
2. Inform the physician if the area of application shows signs of increased irritation (redness, itching, burning, blistering, swelling, oozing) indicative of possible sensitization.
3. Avoid the use of occlusive wrappings or dressings.
4. Avoid sources of infection or reinfection.

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4.5 Interaction with other medicinal products and other forms of interaction

Laboratory tests have suggested that, when used together, this product may cause damage to latex contraceptives. Consequently the effectiveness of such contraceptives may be reduced. Patients should be advised to use alternative precautions for at least five days after using this product.

Synergism or antagonism between nystatin or amphotericin B, or flucytosine against strains of *C. albicans* has not been reported.

4.6 Pregnancy and Lactation:

Fertility: No human studies of the effects of JRANEAL on fertility have been performed; however, animal studies have not demonstrated any effects of the drug on fertility.

Pregnancy: There is a limited amount of data from the use of JRANEAL in pregnant women. Animal studies with this cream have shown reproductive toxicity at high oral doses. At the low systemic exposures of JRANEAL following topical treatment, harmful effects with respect to reproductive toxicity are not predicted.

JRANEAL can be used during pregnancy, but only under the supervision of a physician or midwife

Lactation: Available pharmacodynamic/toxicological data in animals have shown excretion of Clotrimazole + Clobetasol /metabolites in milk after intravenous administration. A risk to the suckling child cannot be excluded. A decision must be made whether to discontinue breast-feeding or to discontinue/abstain from cream therapy taking into account the benefit of breast-feeding for the child and the benefit of therapy for the woman.

4.7 Effects on the ability to drive and use machines

Cream has no or negligible influence on the ability to drive or use machines.

4.8 Undesirable effects:

The following side-effects have been reported in connection with the use of this product: Erythema, Stinging, blistering, peeling, edema, pruritis, urticaria, burning and general irritation of the skin.

4.9 Overdose:

Overdosage, application frequency, and treatment duration of JRANEAL should not be exceeded.

No risk of acute intoxication is seen as it is unlikely to occur following a single dermal application of an overdose (application over a large area under conditions favourable to absorption) or inadvertent oral ingestion. There is no specific antidote.

5. Pharmacological Particulars:

5.1 Pharmacodynamic properties

Pharmacotherapeutic group:

Clotrimazole: Antifungals for topical use – Imidazole and triazole derivatives.

Clobetasol Propionate: Corticosteroid; Anti-Inflammatory

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ATC code:

Clotrimazole: D01AC01

Clobetasol Propionate: D07AD01

Mechanism of Action

Clotrimazole: Clotrimazole acts against fungi by inhibiting ergosterol synthesis. Inhibition of ergosterol synthesis leads to structural and functional impairment of the fungal cytoplasmic membrane.

Clotrimazole has a broad antimycotic spectrum of action in vitro and in vivo, which includes dermatophytes, yeasts, moulds, etc.

Under appropriate test conditions, the MIC values for these types of fungi are in the region of less than 0.062-8.0 µg/ml substrate. The mode of action of clotrimazole is primarily fungistatic or fungicidal depending on the concentration of clotrimazole at the site of infection. In vitro activity is limited to proliferating fungal elements; fungal spores are only slightly sensitive.

In addition to its antimycotic action, clotrimazole also acts on gram-positive microorganisms (Streptococci / Staphylococci / Gardnerella vaginalis), and gram-negative microorganisms (Bacteroides).

In vitro clotrimazole inhibits the multiplication of Corynebacteria and gram-positive cocci - with the exception of Enterococci - in concentrations of 0.5-10 µg/ml substrate.

Primarily resistant variants of sensitive fungal species are very rare; the development of secondary resistance by sensitive fungi has so far only been observed in very isolated cases under therapeutic conditions.

Clobetasol Propionate: The precise mechanism of the antiinflammatory activity of topical steroids in the treatment of steroid-responsive dermatoses, in general, is uncertain. However, corticosteroids are thought to act by the induction of phospholipase A2 inhibitory proteins, collectively called lipocortins. It is postulated that these proteins control the biosynthesis of potent mediators of inflammation such as prostaglandins and leukotrienes by inhibiting the release of their common precursor arachidonic acid. Arachidonic acid is released from membrane phospholipids by phospholipase A2. Initially, however, clobetasol, like other corticosteroids, bind to the glucocorticoid receptor, which complexes, enters the cell nucleus and modifies genetic transcription (transrepression/transactivation)

5.2 Pharmacokinetic properties

Clotrimazole: Pharmacokinetic investigations after dermal application have shown that clotrimazole is minimally absorbed from the intact or inflamed skin into the human blood circulation. The resulting peak serum concentrations of clotrimazole were below the detection limit of 0.001 mcg/ml, suggesting that clotrimazole applied topically is unlikely to lead to measurable systemic effects or side effects.

Clobetasol Propionate: Topical corticosteroids can be absorbed from intact healthy skin. The extent of percutaneous absorption of topical corticosteroids is determined by many factors, including the vehicle and the integrity of the epidermal barrier. Occlusion, inflammation and/or other disease processes in the skin may also increase percutaneous absorption.

Metabolized, primarily in the liver, and then excreted by the kidneys.

Corticosteroids are metabolized primarily in the liver and are then excreted by the kidneys. Some of the topical corticosteroids, including clobetasol propionate and its metabolites, are also excreted into the bile.

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5.3 Pre-clinical Safety:

Non-clinical data reveal no special hazard for humans based on studies of repeated dose toxicity, genotoxicity and carcinogenicity.

6. Pharmaceutical Particulars:

6.1 List of Excipients:

Cetamacrogol -1000	IH
Cetosteryl Alcohol	BP
Light Liquid Paraffin	BP
Propylene Glycol	BP
White Soft Paraffin	BP
Disodium EDTA	BP
Methyl Paraben	BP
Propyl Paraben	BP
Para Chloro Meta Cresol	BP
Perfume Lavender	IH

6.2 Incompatibilities: Nil

6.3 Shelf life: 36 months

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6.4 Special Precautions for storage:

Store below 30°C. Do not Freeze.

6.5 Nature and contents of container:

A Lami tube containing 30 gm cream is packed in a primary carton along with the pack insert.

6.6 Special precautions for disposal and other handling

No special requirements.

7. Marketing Authorization Holder: LESANTO LABORATORIES**8. Marketing Authorization Number: --****9. Date of first Authorization /renewal of the authorization: Apr. 2024****10. Date of Revision of text: --**