

EUROPEAN PUBLIC ASSESSMENT REPORT (EPAR)**POSACONAZOLE SP****EPAR summary for the public**

This document is a summary of the European Public Assessment Report (EPAR). It explains how the Committee for Medicinal Products for Human Use (CHMP) assessed the studies performed, to reach their recommendations on how to use the medicine.

If you need more information about your medical condition or your treatment, read the Package Leaflet (also part of the EPAR) or contact your doctor or pharmacist. If you want more information on the basis of the CHMP recommendations, read the Scientific Discussion (also part of the EPAR).

What is Posaconazole SP?

Posaconazole SP is an oral suspension that contains the active substance posaconazole (40 mg/ml).

What is Posaconazole SP used for?

Posaconazole SP is an antifungal medicine. It is used to treat patients with the following diseases, when they cannot tolerate other antifungal medicines (amphotericin B, itraconazole or fluconazole) or have not improved after at least 7 days of treatment with other antifungal medicines:

- invasive aspergillosis (a type of fungal infection due to *Aspergillus*),
- fusariosis (another type of fungal infection due to *Fusarium*),
- chromoblastomycosis and mycetoma (long-term fungal infections of the skin or the tissue just below the skin, usually caused by fungal spores infecting wounds due to thorns or splinters),
- coccidioidomycosis (fungal infection of the lungs caused by breathing in spores).

Posaconazole SP is also used to treat patients with oropharyngeal candidiasis or 'thrush', a fungal infection of the mouth and throat due to *Candida*. It is used in patients who have not been treated for this disease before. Posaconazole SP is used if the disease is severe, or if the patient is immunocompromised (with a weakened immune system).

Posaconazole SP can be used to prevent invasive fungal infections in patients whose immune system is weakened. This can be either because they have cancer in the blood or bone marrow and have received chemotherapy, or because they have had a haematopoietic stem cell transplant (a transplant of cells that make blood cells) and are receiving high doses of immunosuppressant medicines.

The medicine can only be obtained with a prescription.

How is Posaconazole SP used?

Posaconazole SP treatment should be started by a doctor who has experience in the management of fungal infections or of treating patients at high risk of invasive fungal infections.

In the treatment of fungal infections except candidiasis, Posaconazole SP is given at a dose of 400 mg (10 ml) twice a day, or 200 mg (5 ml) four times a day in patients who cannot tolerate a meal. The duration of treatment depends on the severity of the disease and the patient's response. For candidiasis, Posaconazole SP is given as 200 mg (5 ml) on the first day followed by 100 mg (2.5 ml) once a day for the following 13 days.

In the prevention of invasive fungal infections, Posaconazole SP is given as 200 mg (5 ml) three times a day. The duration of treatment depends on the patient's condition.

Posaconazole SP is given with a meal or nutritional supplement. The oral suspension must be shaken well before use.

How does Posaconazole SP work?

The active substance in Posaconazole SP, posaconazole, is an antifungal medicine that belongs to the triazoles group. It works by preventing the formation of ergosterol, which is an important part of fungal cell walls. Without ergosterol, the fungus is killed or prevented from spreading. The list of fungi against which Posaconazole SP is active can be found in the Summary of Product Characteristics (also part of the EPAR).

How has Posaconazole SP been studied?

Posaconazole SP was studied in 238 patients with invasive fungal infections that did not respond to standard antifungal treatment. The study included 107 patients with aspergillosis, 18 patients with fusariosis, 11 with chromoblastomycosis or mycetoma, and 16 with coccidioidomycosis. The results obtained with Posaconazole SP were compared with the records of 218 patients who were treated with other antifungal medicines.

Posaconazole SP has also been studied in 350 HIV-infected patients with oropharyngeal candidiasis, where its effectiveness was compared with that of fluconazole. In all studies, the main measure of effectiveness was the number of patients with a complete or partial response to treatment.

In the prevention of invasive fungal infections, the effectiveness of Posaconazole SP has been studied in 600 stem cell transplant patients with fluconazole as a comparator and 602 patients with blood or bone marrow cancer, comparing it to fluconazole or itraconazole. The effectiveness was measured by looking at how many patients developed an invasive fungal infection, either proven or probable, during the studies.

What benefit has Posaconazole SP shown during the studies?

In invasive aspergillosis, a successful response at the end of treatment was seen in 42% of the patients taking Posaconazole SP, compared with 26% of the comparison group. Posaconazole SP also successfully treated 11 of 24 patients who had proven or probable fusariosis, 9 of 11 patients with chromoblastomycosis or mycetoma, and 11 of 16 patients with coccidioidomycosis.

In oropharyngeal candidiasis, Posaconazole SP was as effective as fluconazole. After 14 days of treatment, both medicines had been successful in curing or improving about 92% of patients.

In the prevention studies, Posaconazole SP was as effective as fluconazole in stem cell transplant patients, with 5% of patients developing an infection in the Posaconazole SP group, and 9% in the comparator group. The medicine was more effective than fluconazole or itraconazole in cancer patients, with 2% of patients developing an infection in the Posaconazole SP group, and 8% in the comparator group.

What is the risk associated with Posaconazole SP?

The most commonly reported side effects are nausea (feeling sick, 6%) and headache (6%). Other common side effects (seen in between 1 and 10 patients in 100) are neutropenia (low white blood cell count), electrolyte imbalance, anorexia (lack of appetite), dizziness, paresthesia (pins and needles), somnolence (sleepiness), vomiting, abdominal (tummy) pain, diarrhoea, dyspepsia (indigestion), dry mouth, flatulence (gas), signs of liver damage in the blood, rash, asthenia (weakness), fatigue (tiredness) and pyrexia (fever). For the full list of all side effects reported with Posaconazole SP, see the Package Leaflet.

Posaconazole SP should not be used in people who may be hypersensitive (allergic) to posaconazole or any of the other ingredients. Posaconazole SP should not be used in patients who are taking any of the following drugs:

- Ergotamine or dihydroergotamine (used to treat migraine),
- Terfenadine, astemizole (used for allergy),
- Cisapride (used for stomach problems),
- Pimozide (used for treating mental illness),
- Quinidine (used for irregular heart beat),
- Halofantrine (used to treat malaria),
- Simvastatin, lovastatin or atorvastatin (used to lower cholesterol).

Caution is also needed when Posaconazole SP is taken at the same time as other medicines. See the Package Leaflet for full details.

Why has Posaconazole SP been approved?

The Committee for Medicinal products for Human Use (CHMP) concluded that, although the main study lacked a control group, the effectiveness of Posaconazole SP in fungal infections refractory to other antifungal medicines had been shown. The Committee decided that Posaconazole SP's benefits are greater than its risks for treatment of invasive aspergillosis, fusariosis, coccidioidomycosis, chromoblastomycosis and mycetoma in patients who cannot tolerate other antifungal drugs or have not improved after at least 7 days of treatment. It also decided that Posaconazole SP's effectiveness had been shown as first-line therapy in oropharyngeal candidiasis and in the prophylaxis of invasive fungal infections in patients receiving chemotherapy for acute myelogenous leukaemia (AML) or myelodysplastic syndromes (MDS), and haematopoietic stem cell transplant (HSCT) recipients who are undergoing high-dose immunosuppressive therapy for graft versus host disease. They recommended that Posaconazole SP be given marketing authorisation.

Other information about Posaconazole SP:

The European Commission granted a marketing authorisation valid throughout the European Union, for Posaconazole SP to SP Europe on 25 October 2005.

The full EPAR for Posaconazole SP is available [here](#).

This summary was last updated in 11-2006.

Medicinal product no longer authorised