יולי 2024

הנדון: BOOSTRIX / בוסטריקס
Suspension for injection

רופא/ה נכבד/ה
רוקח/ת נכבד/ה,

חברת גלקסוסמיתקליין ישראל בע"מ (GSK) מבקשת להודיע על עדכון בעלונים לרופא ולצרכן של התכשיר BOOSTRIX / בוסטריקס.

לתשומת ליבכם העדכונים כוללים:

- **תוספת התוויה , עדכון משטר מינון וסעיף אזהרות מיוחדות**
- **עדכון טכני במזרק ה Pre filled syringe של החיסון בוסטריקס ובעקבותיו עודכן הסעיף Instructions for the pre-filled syringe**
  שימו לב - לגבי ה Instructions for the pre-filled – יש להתייחס להוראות בעלון שנמצא באריזה (בשלב הראשון יהיו קיימים בשוק שני סוגי המזרקים)

חומרים פעילים:

DIPHTHERIA TOXOID	2 IU / 0.5 ML
TETANUS TOXOID	20 IU / 0.5 ML
FILAMENTOUS HAEMAGGLUTININ (FHA)	8 MCG / 0.5 ML
PERTUSSIS TOXOID (PT)	8 MCG / 0.5 ML
PERTACTIN (PRN OR 69 KDA OMP)	2.5 MCG / 0.5 ML

התוויה רשומה לפני העדכון:

For Booster vaccination against diphtheria, tetanus and pertussis of individuals from the age of four years onwards.
The administration of Boostrix should be based on official recommendations.

ההתוויה העדכנית המאושרת לתכשיר בישראל:

For Booster vaccination against diphtheria, tetanus and pertussis of individuals from the age of four years onwards.
Boostrix is also indicated for passive protection against pertussis in early infancy following maternal immunisation during pregnancy.
The administration of Boostrix should be based on official recommendations.

בהודעה זו כלולים השינויים המהותיים בלבד. בעלונים ישנם שינויים נוספים.

מקרא לעדכונים המסומנים:

- מידע שהוסר – מסומן בקו אדום חוצה ~~XXX~~
- תוספת – כתב כחול
- תוספת החמרה - כתב כחול – מסומן בצהוב מרקר

עדכונים מהותיים נעשו בסעיפים הבאים בעלון לרופא:

4.1 Therapeutic indications

Boostrix is indicated for booster vaccination against diphtheria, tetanus and pertussis of individuals from the age of four years onwards (see section 4.2).

Boostrix is also indicated for passive protection against pertussis in early infancy following maternal immunisation during pregnancy (see sections 4.2, 4.6 and 5.1).

The administration of Boostrix should be based on official recommendations.

4.2 Posology and Method of Administration

Posology

A single 0.5 ml dose of the vaccine is recommended.

Boostrix may be administered from the age of four years onwards.

~~The use of Boostrix may be considered during the third trimester of pregnancy. For the use of the vaccine before the third trimester of pregnancy, see section 4.6.~~

Boostrix should be administered in accordance with official recommendations and/or local practice regarding the use of vaccines with reduced content of diphtheria, tetanus and pertussis antigens.

Boostrix can be administered to pregnant women during the second or the third trimester in accordance with official recommendations (see sections 4.1, 4.6 and 5.1).

Boostrix may also be administered to adolescents and adults with unknown vaccination status or incomplete vaccination against diphtheria, tetanus and pertussis as part of an immunisation series against diphtheria, tetanus and pertussis. Based on data in adults, two additional doses of a diphtheria and tetanus containing vaccine are recommended one and six months after the first dose to maximize the vaccine response against diphtheria and tetanus (see section 5.1).

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4.4 Special warnings and precautions for use

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Boostrix should be administered with caution to subjects with thrombocytopenia (see section 4.3) or a bleeding disorder since bleeding may occur following an intramuscular administration to these subjects. If in accordance with official recommendations, the vaccine may be administered subcutaneously to these subjects. With both routes of administration, firm pressure should be applied to the injection site (without rubbing) for at least two minutes.

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4.6 Fertility, pregnancy and lactation

Pregnancy

~~The use of~~ Boostrix ~~may~~ can be ~~considered~~ used during the second or third trimester of pregnancy in accordance with official recommendations.

For data relating to the prevention of pertussis disease in infants born to women vaccinated during pregnancy, see section 5.1.

Safety data from a randomised controlled clinical trial (341 pregnancy outcomes) and from a prospective observational study (793 pregnancy outcomes), where Boostrix was administered to pregnant women during the third trimester ~~(793 pregnancy outcomes) as well as data from passive surveillance where pregnant women were exposed to Boostrix or to Boostrix IPV (dTpa-IPV vaccine) in the 3rd and 2nd trimester~~, have shown no vaccine related adverse effect on pregnancy or on the health of the foetus/newborn child.

~~Human~~Safety data from prospective clinical studies on the use of Boostrix or Boostrix Polio during the first and second trimester of pregnancy are not available. ~~However, as~~

Data from passive surveillance where pregnant women were exposed to Boostrix or to Boostrix Polio (dTpa-IPV vaccine) in the 3rd or 2nd trimester have shown no vaccine-related adverse effect on pregnancy or on the health of the foetus/newborn child.

As with other inactivated vaccines, it is not expected that vaccination with Boostrix harms the foetus at any trimester of pregnancy. ~~The benefits versus the risks of administering Boostrix during pregnancy should be carefully evaluated.~~

Animal studies do not indicate direct or indirect harmful effects with respect to pregnancy, embryonal/foetal development, parturition or post-natal development (see section 5.3).

~~Limited data indicate that maternal antibodies may reduce the magnitude of the immune response to some vaccines in infants born from mothers vaccinated with Boostrix during pregnancy. The clinical relevance of this observation is unknown.~~

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5. PHARMACOLOGICAL PROPERTIES

5.1 Pharmacodynamic properties

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Efficacy in protecting against pertussis

The pertussis antigens contained in Boostrix are an integral part of the paediatric acellular pertussis combination vaccine (Infanrix), for which efficacy after primary vaccination has been demonstrated in a household contact efficacy study. The antibody titres to all three pertussis components following vaccination with Boostrix are higher than those observed during the household contact efficacy trial. Based on these comparisons, Boostrix would provide protection against pertussis, however the degree and duration of protection afforded by the vaccine are undetermined.

Passive protection against pertussis in infants (below 3 months of age) born to mothers vaccinated during pregnancy

In a randomised, cross-over, placebo-controlled study, higher pertussis antibody concentrations were demonstrated at delivery in the cord blood of babies born to mothers vaccinated with Boostrix (dTpa group; N=291) versus placebo (control group; N=292) at 27-36 weeks of pregnancy. The cord blood geometric mean concentrations of antibodies against the pertussis antigens PT, FHA and PRN were 46.9, 366.1 and 301.8 IU/ml in the dTpa group, and 5.5, 22.7 and 14.6 IU/ml in the control group. This corresponds to antibody titres that are 8, 16 and 21 times higher in the cord blood of babies born to vaccinated mothers versus controls. These antibody titres may provide passive protection against pertussis as shown by observational effectiveness studies.

Immunogenicity in infants and toddlers born to mothers vaccinated during pregnancy

The immunogenicity of Infanrix hexa (diphtheria, tetanus, pertussis, hepatitis B, inactivated poliovirus, Haemophilus influenzae type b conjugate vaccine) in infants and toddlers born to healthy mothers vaccinated with Boostrix at 27-36 weeks of pregnancy was evaluated in two clinical studies.

Infanrix hexa was co-administered with a 13-valent pneumococcal conjugate vaccine to infants for primary vaccination (n=268); and to the same infants/toddlers from 11 to 18 months as booster dose (n=229).

Post-primary and post-booster vaccination, immunological data did not show clinically relevant interference of maternal vaccination with Boostrix on the infant's and toddler's responses to diphtheria, tetanus, hepatitis B, inactivated poliovirus, Haemophilus influenzae type b or pneumococcal antigens.

Lower antibody concentrations against pertussis antigens post-primary (PT, FHA and PRN) and post-booster (PT, FHA) vaccination were observed in infants and toddlers born to mothers vaccinated with Boostrix during pregnancy. The fold-increases of anti-pertussis antibody concentrations from the pre-booster to the 1-month post-booster time point were in the same range for infants and toddlers born to mothers vaccinated with Boostrix or with placebo, demonstrating effective priming of the immune system. In the absence of correlates of protection for pertussis, the clinical relevance of these observations remains to be fully understood. However, current epidemiological data on pertussis disease following the implementation of dTpa maternal immunisation do not suggest any clinical relevance of this immune interference.

6.5 Nature and contents of container

Pre-filled syringe:
0.5 ml of suspension in pre-filled syringe (Type I glass) with a
plunger stopper (butyl rubber) and with a rubber tip cap.
Pack sizes of 1 and 10, with or without needles.
~~Stopper (butyl rubber) with or without needles in pack size of 10.~~

Vial:
0.5 ml of suspension in a vial (type I glass) with a stopper (butyl rubber).
Pack sizes of 1 and 10.
~~0.5 ml suspension in vials (Type I glass) with stopper (butyl rubber) in pack size of 10.~~

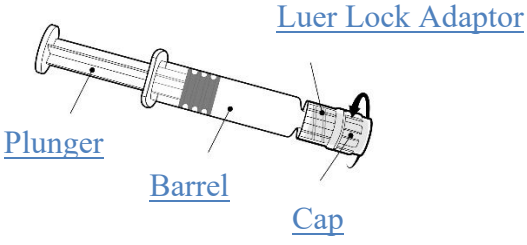
The tip cap and rubber plunger stopper of the pre-filled syringe and the stopper of the vial are made with synthetic rubber.

Not all packs may be marketed.

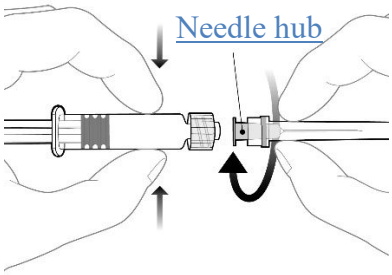
6.6 Special precautions for disposal and other handling

Prior to use, the vaccine should be at room temperature, and well shaken in order to obtain a homogeneous turbid white suspension. Prior to administration, the vaccine should be visually inspected for any foreign particulate matter and/or variation of physical aspect. In the event of either being observed, do not administer the vaccine.

Instructions for the pre-filled syringe



Hold the syringe by the barrel, not by the plunger.
Unscrew the syringe cap by twisting it anticlockwise.



To attach the needle, connect the hub to the Luer Lock Adaptor and rotate a quarter turn clockwise until you feel it lock.
Do not pull the syringe plunger out of the barrel. If it happens, do not administer the vaccine.

Disposal:

Any unused medicinal product or waste material should be disposed of in accordance with local requirements.

עדכונים מהותיים נעשו בסעיפים הבאים בעלון לצרכן:

עדכונים מהותיים נעשו בסעיפים הבאים בעלון לצרכן:

1. למה מיועדת התרופה?

- לחיסון דחף כנגד דיפתריה (קרמת), טטנוס (פלצת) ושעלת של יחידים הניתן החל מגיל ארבע שנים.
- להגנה פסיבית כנגד שעלת בינקות המוקדמת לאחר חיסון אימהי במהלך ההיריון.

המתן צריך להתבסס על ההמלצות הרשמיות.

קבוצה תרפויטית: חיסונים חיידקיים, חיסוני שעלת (bacterial vaccines, pertussis vaccines)

כיצד החיסון עובד?

החיסון עובד על ידי כך שהוא גורם לגוף לייצר הגנה משלו (נוגדנים) כנגד מחלות אלה (דיפתריה, טטנוס ושעלת).

אף אחד ממרכיבי החיסון אינו יכול לגרום למחלות אלה.

השימוש בבוסטריקס במהלך הריון יעזור להגן על תינוקך מפני שעלת בחודשים הראשונים לחייו לפני שהוא\היא יקבלו את החיסון הראשוני.

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היריון והנקה

~~הרופא ישוחח עימך לגבי הסיכונים והיתרונות האפשריים בקבלת בוסטריקס בזמן ההריון.~~

אם את בהיריון או מניקה, חושבת שייתכן שאת בהיריון או אם את מתכננת להרות, התייעצי עם הרופא או הרוקח לפני התחסנות בתרופה זו.

לא ידוע אם בוסטריקס עובר לחלב האם. הרופא ישוחח עימך לגבי הסיכונים והיתרונות האפשריים בקבלת בוסטריקס במהלך הנקה.

6. מידע נוסף

• נוסף על המרכיבים הפעילים, התרופה מכילה גם:

Sodium chloride, aluminium (as aluminium salts), water for injection

ראה גם סעיף 2 בעלון – "מידע חשוב על חלק מהמרכיבים של התרופה".

• כיצד נראית התרופה ומה תוכן האריזה:

בוסטריקס ~~לאחר ניעור הינו נוזל עכור עם משקעים לבנים ששוקעים לאט. לאחר משקע הנוזל העליון חסר צבע.~~ הינו נוזל לבן, מעט חלבי.

בוסטריקס מגיע במזרק מוכן לשימוש (0.5 מ"ל) או בבקבוקון.

~~סוגי אריזה:~~ גדלי אריזה:

אריזה הכוללת 1 או 10 מזרקים. ייתכן שהאריזה תכיל גם מחט/מחטים.

אריזה הכוללת 1 או 10 בקבוקונים.

ייתכן שלא כל ~~סוגי~~גדלי האריזות משווקים.

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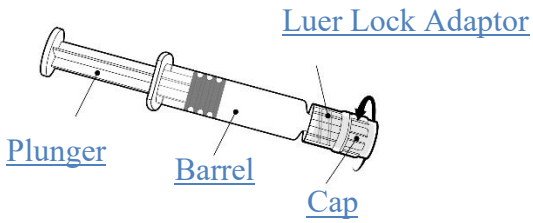
The following information is intended for healthcare professionals only:

Boostrix is for deep intramuscular injection preferably in the deltoid region.

Prior to use, the vaccine should be at room temperature, and well shaken in order to obtain a homogeneous turbid white suspension. Prior to administration, the vaccine should be visually inspected for any foreign particulate matter and/or variation of physical aspect. In the event of either being observed, do not administer the vaccine.

Instructions for the pre-filled syringe



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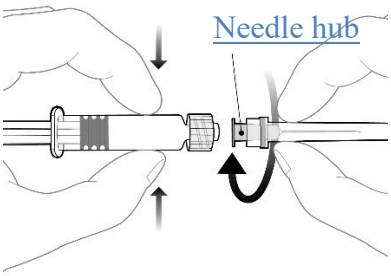

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Do not pull the syringe plunger out of the barrel. If it happens, do not administer the vaccine.

Disposal:

Any unused medicinal product or waste material should be disposed of in accordance with local requirements.

קיימים עדכונים נוספים. למידע נוסף יש לעיין בעלון לרופא ולצרכן המעודכנים.
העלון לרופא והעלון לצרכן נשלחו לפרסום במאגר התרופות שבאתר משרד הבריאות:
מאגר התרופות(health.gov.il) וניתן לקבלם מודפסים על-ידי פניה לחברת גלקסוסמיתקליין רח' בזל 25 פתח תקוה בטלפון: 03-9297100.

בברכה,
מירי עזר שניידר
רוקחת ממונה