

For the use of a Registered Medical Practitioner or a Hospital or a Laboratory

INACTIVATED INFLUENZA VACCINE (SPLIT VIRION) I.P

VAXIGRIP®

Pediatric use

Suspension for Injection in prefilled syringe

NH 2020-2021 strains

1. NAME OF THE MEDICINAL PRODUCT

VAXIGRIP , suspension for injection in prefilled syringe.

Influenza vaccine (split virion, inactivated).

2. QUALITATIVE AND QUANTITATIVE COMPOSITION

Influenza virus (inactivated, split) of the following strains*:

Each 0.25 ml dose contains:

A/Guangdong-Maonan/SWL1536/2019 (H1N1)pdm09 - like strain (A/Guangdong-Maonan/SWL1536/2019, CNIC-1909)7.5 micrograms HA**

A/Hong Kong/2671/2019 (H3N2) - like strain (A/Hong Kong/2671/2019, IVR-208)7.5 micrograms HA**

B/Washington/02/2019-like strain (B/Washington/02/2019, wild type).....7.5 micrograms HA**

* propagated in fertilised hens' eggs from healthy chicken flocks

** haemagglutinin

This vaccine complies with the WHO recommendations (Northern Hemisphere) and EU decision for the 2020-2021 season.

For the full list of excipients, see Section 6.1.

VAXIGRIP may contain traces of eggs, such as ovalbumin, and of neomycin, formaldehyde and octoxinol-9, which are used during the manufacturing process (see Section 4.3).

3. PHARMACEUTICAL FORM

Suspension for injection in prefilled syringe.

The vaccine, after shaking gently, is a slightly whitish and opalescent liquid.

4. CLINICAL PARTICULARS

4.1 Therapeutic indications

Prophylaxis of influenza.

VAXIGRIP is indicated in children from 6 to 35 months of age. The use of VAXIGRIP should be based on official recommendations.

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4.2 Posology and method of administration

Posology

Children from 6 months to 35 months: 0.25 ml. Clinical data are limited. For children who have not previously been vaccinated, a second dose should be given after an interval of at least 4 weeks.

Children less than 6 months: the safety and efficacy of VAXIGRIP in children less than 6 months have not been established. No data are available.

Method of administration

Immunisation should be carried out by intramuscular or deep subcutaneous injection.

For children from 6 to 11 months of age: the preferred site for intramuscular injection is the anterolateral aspect of the thigh.

For children from 12 to 35 months of age: the preferred site for intramuscular injection is the anterolateral aspect of the thigh (or the deltoid muscle if muscle mass is adequate).

Precautions to be taken before handling or administering the medicinal product

For instructions on preparation of the medicinal product before administration, see Section 6.6.

4.3 Contraindications

Hypersensitivity to the active substances, to any of the excipients listed in Section 3.1 or to any component that may be present as traces such as eggs (ovalbumin, chicken proteins), neomycin, formaldehyde and octoxinol-9.

Vaccination should be postponed in case of moderate or severe febrile disease or acute disease.

4.4 Special warnings and precautions for use

As with all injectable vaccines, appropriate medical treatment and supervision should always be readily available in case of an anaphylactic event following the administration of the vaccine.

VAXIGRIP should under no circumstances be administered intravascularly.

As with other vaccines administered intramuscularly, the vaccine should be administered with caution to subjects with thrombocytopenia or a bleeding disorder since bleeding may occur following an intramuscular administration to these subjects.

Syncope (fainting) can occur following, or even before, any vaccination as a psychogenic response to the needle injection. Procedures should be in place to prevent injury from fainting and manage syncopal reactions.

As with any vaccine, vaccination with VAXIGRIP may not protect 100% of susceptible individuals.

Antibody response in children with endogenous or iatrogenic immunosuppression may be insufficient.

Interference with serological testing

See Section 4.5.

4.5 Interaction with other medicinal products and other forms of interaction

VAXIGRIP may be given at the same time as other vaccines. Immunisation should be carried out on separate limbs. It should be noted that the adverse reactions may be intensified.

The immunological response may be diminished if the child is undergoing immunosuppressant treatment.

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Following influenza vaccination, false positive results in serology tests using the ELISA method to detect antibodies against HIV1, Hepatitis C and especially HTLV1 have been observed. The Western Blot technique disproves the false-positive ELISA test results. The transient false positive reactions could be due to the IgM response by the vaccine.

4.6 Fertility, pregnancy and lactation

Not applicable.

4.7 Effects on ability to drive and use machines

Not applicable.

4.8 Undesirable effects

a. Summary of the safety profile

In clinical trials, 101 children from 6 to 35 months of age received VAXIGRIP.

Depending on immunization history, children from 6 to 35 months of age received one or two doses of VAXIGRIP.

Most of adverse reactions usually occurred within the first 3 days following injection of VAXIGRIP, resolved spontaneously within 3 days after onset. The intensity of these reactions was mild to moderate.

The most frequently reported reactions within 7 days following injection of VAXIGRIP were irritability (50.9%), injection site tenderness (36.6%), injection site erythema (34.0%), abnormal crying (34.0%), fever (29.0%) and appetite lost (28.3%).

b. Tabulated list of adverse reactions

The safety profile is based on data recorded in 101 children from 6 to 35 months following one or two 0.25 ml doses of VAXIGRIP during clinical trials and worldwide post-marketing experience (*).

Adverse events are ranked under headings of frequency using the following convention:

Very common ($\geq 1/10$);

Common ($\geq 1/100$ to $< 1/10$);

Uncommon ($\geq 1/1,000$ to $< 1/100$);

Rare ($\geq 1/10,000$ to $< 1/1,000$);

Very rare ($< 1/10,000$),

Not known (cannot be estimated from available data).

| ADVERSE REACTIONS | FREQUENCY |
|---|-------------|
| <i>Blood and Lymphatic System Disorders</i> | |
| Transient thrombocytopenia, lymphadenopathy | Not known* |
| <i>Immune System Disorders</i> | |
| Allergic reactions such as pruritus, rash erythematous, urticaria, dyspnea, angioedema, shock | Not known* |
| <i>Metabolism and nutrition Disorders</i> | |
| Appetite lost ⁽¹⁾ | Very common |
| <i>Psychiatric Disorders</i> | |
| Crying abnormal ⁽¹⁾ , irritability ⁽¹⁾ | Very Common |

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| <i>Nervous System Disorders</i> | |
|---|-------------|
| Headache ⁽²⁾ , drowsiness ⁽¹⁾ | Very common |
| Paresthesia, convulsions, encephalomyelitis | Not known* |
| <i>Vascular disorders</i> | |
| Vasculitis such as Henoch-Schonlein purpura, with transient renal involvement in certain cases | Not known* |
| <i>Gastrointestinal Disorders</i> | |
| Diarrhea, vomiting ⁽¹⁾ | Common |
| <i>Musculoskeletal and Connective Tissue Disorders</i> | |
| Myalgia ⁽²⁾ | Very common |
| <i>General Disorders and Administration Site Conditions</i> | |
| Injection site tenderness, injection site erythema, injection site induration, injection site ecchymosis, injection site swelling/oedema, fever | Very common |
| Shivering ⁽²⁾ | Common |

⁽¹⁾Reported in children from 6 to 23 months old

⁽²⁾Reported in children from 24 to 35 months old

c. Other special populations

Although only a limited number of subjects with co-morbidities were enrolled, studies conducted in children from 6 months to 3 years of age with medical conditions being at especially high risk of developing serious flu-related complications showed no major differences in terms of safety profile of VAXIGRIP in this population.

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 the national reporting system.

4.9 Overdose

Cases of administration of more than the recommended dose (overdose) have been reported with VAXIGRIP. When adverse reactions were reported, the information was consistent with the known safety profile of VAXIGRIP described in Section 4.8.

5. PHARMACOLOGICAL PROPERTIES

5.1 Pharmacodynamic properties

Pharmacotherapeutic group: Influenza vaccine, ATC code: J07BB02

An antibody immune response is generally induced within 2 to 3 weeks. The duration of postvaccinal induced immunity varies but is usually 6-12 months.

5.2 Pharmacokinetic properties

Not applicable.

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5.3 Preclinical safety data

Not applicable.

6 PHARMACEUTICAL PARTICULARS

6.1 List of excipients

Buffer solution: q.s 0.25 ml

- Sodium chloride 8g/L
- Potassium chloride 0.2g/L
- Disodium phosphate dihydrate 1.15g/L
- Potassium dihydrogen phosphate 0.2g/L
- Water for injections...q.s

6.2 Incompatibilities

In the absence of compatibility studies, this medicinal product must not be mixed with other medicinal products.

6.3 Shelf life

1 year.

6.4 Special precautions for storage

Store in a refrigerator (2°C – 8°C). Do not freeze. Keep the syringe in the outer carton in order to protect from light.

6.5 Nature and contents of container

0.25 ml of suspension in prefilled syringe (type I glass) with attached needle, equipped with a plunger stopper (elastomer chlorobromobutyl or chlorobutyl or bromobutyl) – pack size of 1, 10 or 20.

0.25 ml of suspension in prefilled syringe (type I glass) without needle, equipped with a plunger stopper (elastomer chlorobromobutyl or chlorobutyl or bromobutyl) – pack size of 1, 10 or 20.

Not all pack sizes may be marketed.

6.6 Special precautions for disposal and other handling

The vaccine should be allowed to reach room temperature before use.

Shake before use. Inspect visually prior to administration.

The vaccine should not be used if foreign particles are present in the suspension.

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

Vaxigrip® is the registered trademark of Sanofi Pasteur-Lyon-France.

7. Manufactured by:

Sanofi Pasteur
Parc Industriel d'Incarville
27100 Val de Reuil- France.

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OR

Sanofi Pasteur

1541, Avenue Marcel Merieux,
69280, Marcy L E'toile, France.

8. Imported and marketed by:

Sanofi Pasteur India Private Limited

EL-223, T.T.C. Industrial Area, Mahape, Navi Mumbai
Dist. Thane 400710.

For further information please contact:

Sanofi Pasteur India Private Limited

Sanofi House, C.T.S No.-117-B, L & T Business Park,
Saki Vihar Road, Powai, Mumbai 400 072-India.

Registered medical practitioners can refer to the company website www.sanofi.in for the latest prescribing information."

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