Rifampicin, Isoniazid, Pyrazinamide Ethambutol hydrochloride 150 mg/75 mg/400 mg/275 mg Tablets (Sandoz) TB090

## WHO Prequalification Programme WHO PUBLIC ASSESSMENT REPORT (WHOPAR)

## Product name Rimstar<sup>1</sup>

International Nonproprietary Name (INN): Rifampicin, Isoniazid, Pyrazinamide, Ethambutol hydrochloride 150 mg/75 mg/400 mg/275 mg Tablets

## Abstract

Rimstar, manufactured at Sandoz was submitted to be considered for prequalification in 2002 when the product was licensed / registered in Sweden and subsequently accepted for the WHO list of prequalified products for the treatment of tuberculosis on 14 September 2004.

The "Procedure for prequalification of pharmaceutical products<sup>2</sup>" defines specific evaluation mechanisms for products approved by regulatory authorities, which apply similar stringent standards for quality, safety and efficacy as those required by WHO.

The prequalification of this product by the WHO Prequalification of Medicines Programme (PQP) is based on the approval by a stringent regulatory authority (SRA), namely the Swedish Medical Products Agency "Lakemedelsverket" <u>https://www.lakemedelsverket.se/en</u> in line with the "Guidelines on submission of documentation for prequalification of finished pharmaceutical products approved by stringent regulatory authorities"<sup>3</sup>.

Hence, no assessment of the data underlying this approval has been undertaken within the WHO Prequalification Programme.

This WHOPAR refers to the information available at the approving stringent regulatory authority in terms of the assessment of the quality, efficacy and safety as well as steps taken after the prequalification

(https://www.lakemedelsverket.se/sv/sok-lakemedelsfakta/lakemedel?id=20020823000036).

Parts 2a, 2b and 7 of the WHOPAR for Rimstar are included here.

Rimstar contains rifampicin, isoniazid, pyrazinamide and ethambutol. Its recommended use is for the treatment of tuberculosis.

The most frequent adverse events observed during treatment with rifampicin, isoniazid pyrazinamide and ethambutol were peripheral neuropathy, transient increases of serum transaminases, hyperuricaemia, flushing and arthralgia.

The most important adverse reactions of rifampicin are hepatotoxicity, particularly cholestatic reactions and skin reactions. It can also potentiate the hepatotoxicity of the other anti-tuberculosis medications.

<sup>&</sup>lt;sup>1</sup> Trade names are not prequalified by WHO. This is the National Medicines Regulatory Authority's responsibility. Throughout this WHOPAR the proprietary name is given as an example only.

<sup>&</sup>lt;sup>2</sup> <u>http://www.who.int/medicines/areas/quality\_safety/quality\_assurance/TRS961\_Annex10.pdf</u>
<sup>3</sup> <u>http://apps.who.int/prequal/info\_general/documents/TRS986/TRS986\_ANNEX-5\_SRA-Guide.pdf</u>
<u>https://extranet.who.int/prequal/sites/default/files/documents/75%20SRA%20clarification\_February20</u>
17\_0.pdf

The most important adverse effects of isoniazid are peripheral and central neurotoxic effects, as well as severe and sometimes fatal hepatitis.

The most important adverse effect of pyrazinamide is liver damage, ranging from asymptomatic increase of serum transaminases to symptomatic liver dysfunction, and in rare cases also fatal liver failure.

The most important adverse effect of ethambutol is retrobulbar neuritis with a reduction in visual acuity.

The efficacy and safety profile of rifampicin, isoniazid, pyrazinamide and ethambutol is well established based on the extensive clinical experience in the treatment of tuberculosis.

## **Summary of Prequalification Status for Rimstar**

	Initial Acceptance			
	Date	Outcome	Date	Outcome
Status on PQ list,	14 Sept 2004	listed		

MR: meets requirements

The table represents the status of relevant completed activities only.