Public Health Link

From the Chief Medical Officer for Wales

Distribution:	As Appendix 1
From:	Andrew Evans, Directorate of Health Policy
Date:	19 April 2018
Reference:	CEM/CPhA/2018/7
Category:	Class 4: For Information
Title:	Drug Alert Class 4 - Techdow Europe Ab, Inhixa Solution For Injection In Pre-Filled Syringe, Product Licence Eu/1/16/1132/012; Eu/1/16/1132/014; Eu/1/16/1132/016; Eu/1/16/1132/018; Eu/1/16/1132/020
What is this about:	
Full details are set out bel	ow.
Why has it been sent:	For your information and to pass on to Colleagues

Issue:

Full details of the drug alert are included in the attached PDF file. Please forward to listed recipients. This information is also published on the MHRA website https://www.gov.uk/drug-device-alerts

To: NHS Wales Shared Services Partnership to forward to:

All General practitioners - please ensure this message is seen by all practice nurses and non-principals working in your practice and retain a copy in your 'locum information pack'.

All Community Pharmacists

Deputising services

HB Chief Pharmacists

HB Prescribing Advisers

Independent/Private clinics and Hospitals and Hospices throughout

Wales

To: Chief Executives of Health Boards

To: Medical Directors of Health Boards

To: Nurse Directors Health Boards

To: Directors of Public Health

To: Hospital Principals and Chief Pharmacists to action as per alert

cc: Public Health Wales

Consultants in Pharmaceutical Public Health

Chief Executives, NHS Trusts

Principal Pharmacist Welsh Quality Control Principal Pharmacist Continuing Care Services

Principal Pharmacist Welsh Medicines Information Centre

CSSIW NHS Direct





DRUG ALERT CLASS 4 MEDICINES DEFECT INFORMATION

Caution in Use Distribute to Pharmacy and Clinic Level

Date: 18 April 2018

EL (18)A/07

Our Ref: MDR 049-12/17

Dear Healthcare Professional.

Techdow Europe AB

Inhixa solution for injection in pre-filled syringe 2,000 IU (20 mg) in 0.2 mL; 4,000 IU (40 mg) in 0.4 mL; 6,000 IU (60 mg) in 0.6 mL; 8,000 IU (80 mg) in 0.8 mL; 10,000 IU (100 mg) in 1.0 mL

EU/1/16/1132/012

EU/1/16/1132/014

EU/1/16/1132/016

EU/1/16/1132/018

EU/1/16/1132/020

(Enoxaparin Sodium)

Brief description of the problem

Techdow Europe AB has issued the Direct Healthcare Professional Communication (DHCP) attached due to rare cases of premature self-activation of the safety device in unused, unopened pre-filled Inhixa syringes as shown in the DHCP diagrams. When premature activation has occurred, administration is not possible.

Advice for healthcare professionals

To minimise the risk of missed doses:

- Pharmacists should visually check all Inhixa syringes before dispensing to check if they are affected by the self-activation defect as shown in the DHCP diagrams. Do not open the syringe blisters.
- Individual syringes that are affected by the self-activation defect should not be dispensed to patients.
- Pharmacists should make sure they have sufficient stock of Inhixa available as replacements.

Company contact information

Techdow Pharma England Limited can be contacted on 01271 334 609.

Recipients of this Drug Alert should bring it to the attention of relevant contacts by copy of this letter. NHS Regional Teams are asked to forward this to community pharmacists, hospital pharmacists,





relevant clinics and dispensing general practitioners (GPs). It is not necessary to forward this notice to non-dispensing GPs.

Yours faithfully

Defective Medicines Report Centre 151 Buckingham Palace Road London SW1W 9SZ Telephone +44 (0)20 3080 6574



Direct Healthcare Professional Communication

▼Inhixa (enoxaparin sodium) solution for injection: rare cases of self-activation of safety device in unopened, unused pre-filled syringes.

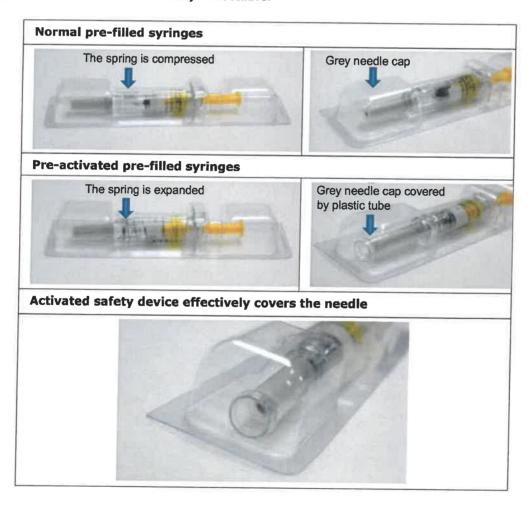
Dear Healthcare professional,

Techdow Europe AB in agreement with the European Medicines Agency and relevant local Competent Authorities would like to inform you of the following:

Summary

- In very rare cases, premature self-activation of the safety device has been observed in unused, unopened pre-filled Inhixa syringes (see Figure 1 below); when premature activation has occurred, medicine administration is not possible.
- Pharmacists should visually check all devices before dispensing Inhixa and make sure they have sufficient stock of Inhixa available as replacements.
- There is negligible risk of needle stick injury when handling these pre-filled syringes, since
 the safety device ensures full coverage of the needle; the risk of a patient missing a dose
 can be minimised by the above checks and advice to patients.

Figure 1. Pre-activation is easily detectable:



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Background on the safety concern

Self-activation of the safety device has been observed rarely in unused, unopened blisters containing Inhixa pre-filled syringes. An analysis has shown that the incidence of self-activation is 0.001%. To date, the issue has not been associated with any adverse event or risk to public health.

The possibility of needle stick injury is negligible as the safety device ensures full coverage of the needle. With regard to the potential risk of missing a dose, this is easily manageable: as the product is presented in transparent blisters, self-activation is visually apparent and easily detectable before dispensing and use. Moreover it is not necessary for pharmacists to open the blister packs to perform a visual check of syringes blisters before dispensing.

Detailed investigation by the manufacturer has pinpointed the root cause, corrective and preventive actions have been implemented to prevent recurrence of the issue.

Call for reporting

We kindly ask you to notify the manufacturer or local representative of the Marketing Authorization Holder of any pre-activation events. In your notification, we would be grateful if you could provide your contact details (specifically your name, postal address, phone number, email address). Please do not forget to include the product name, strength and batch details (e.g., batch number and expiry date).

Inhixa is subject to additional monitoring. Please report any suspected adverse reactions.

Company contact point

To access to further information, please contact:

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