

PROFESSIONAL INFORMATION

SCHEDULING STATUS

Schedule 4

PROPRIETARY NAME AND DOSAGE FORM

EVOREL® CONTI

Patch

COMPOSITION

EVOREL® CONTI contains 3.1 mg oestradiol, formulated as 0.2 mg of oestradiol hemisuccinate and 0.82 mg norethisterone, formulated as 11.2 mg of norethisterone acetate. The patch delivers 50 µg of oestradiol and 170 µg of norethisterone acetate per 24 hours.

EVOREL® CONTI is a matrix type transdermal patch.

The following are the inactive ingredients of EVOREL CONTI:

Adhesive: acrylate vinylacetate copolymer

Gum: guar gum

Backing film: polyethylene terephthalate foil

Release liner: siliconised polyethylene terephthalate foil which is removed before application.

EVOREL® CONTI contains no sugar.

PHARMACOLOGICAL CLASSIFICATION

A 21.8.2 Progestogens with oestrogenic properties

EVOREL CONTI contains oestradiol hemisuccinate (17 β -oestradiol), which is a synthetically prepared oestrogen and norethisterone acetate, the acetate ester of norethisterone, a synthetic progestin.

Oestradiol (E₂)

Oestradiol is delivered to the skin by the patch delivers 17 β -oestradiol, a physiological hormone, transdermally into the systemic circulation and consequently, the 17 β -oestradiol does not undergo first pass liver metabolism. In postmenopausal women, EVOREL CONTI raises the oestradiol concentrations to levels similar to those in the early follicular phase and maintain these levels over the application period of 3 – 4 days.

The oestradiol/oestrene ratio in the plasma of post-menopausal women is between 0.2 to 0.5 which increases after the transdermal application of oestradiol to approximately 1.0 from pre-menopausal levels, early follicular phase.

Norethisterone acetate (NETA)

Norethisterone acetate in the EVOREL CONTI, is hydrolysed to norethisterone, a synthetic 19-nortestosterone derivative of the 13-methyl gonane group with potent progestational activity.

Transdermal norethisterone acetate administration prevents oestrogen related endometrial proliferation.

Pharmacokinetic Properties

Oestradiol is widely distributed in the body tissues and is bound to albumin (about 60 – 65 %) and sex-hormone-binding globulin (about 35 – 45 %) in serum. Serum protein binding fractions remain unaltered following transdermal delivery of oestradiol and are promptly eliminated from the systemic circulation.

Oestradiol is metabolised principally into the less pharmacologically active oestrene and its conjugates.

Oestradiol, oestrene and oestrene sulphate are interconverted to each other and are excreted as glucuronides and sulphates. The skin metabolises oestradiol only to a small extent.

Norethisterone

Norethisterone acetate is hydrolysed to the active progestogen, norethisterone. Transdermal delivery of norethisterone acetate produces a sustained level of norethisterone in the systemic circulation.

Norethisterone is mainly bound to albumin with about 60 % bound to body tissues and is bound to albumin (about 61 %) and sex-hormone binding globulin (about 36 %) in serum.

Norethisterone is primarily metabolised by the liver by reduction of the α , β unsaturated ketone structure in ring A of the molecule.

Among the metabolites observed, the 16 α -hydroxy and 16 β -hydroxy metabolites, the 5 β -, 3 α -hydroxy derivative appears to be the predominant metabolite. These compounds are primarily excreted in urine and faeces as sulphates and glucuronides.

E₂/NETA combination

Oestradiol in a single and multiple application study in post-menopausal women, serum oestradiol concentrations increased rapidly from pre treatment levels (about 5 pg/ml) after application of an EVOREL CONTI.

At four hours after application, the mean serum oestradiol concentration was about 10 pg/ml. A mean peak serum oestradiol concentration of about 41 pg/ml above pre treatment levels was observed at about 23 hours following application.

Serum oestradiol concentrations remained elevated for the 3.5 day application period. Concentrations returned rapidly to pre-treatment levels within 24 hours following removal of the patch.

A serum half-life of about 6.6 hours was determined following removal of the patch. Multiple application of the patch resulted in little or no accumulation of oestradiol in the systemic circulation.

During use of EVOREL CONTI, the E₂/NETA ratios increased rapidly and were maintained at physiological levels at approximately 1. The E₂/E₁ ratios returned to pretreatment levels within 24 hours after removal of the patch.

Norethisterone: In a single and multiple application study in postmenopausal women, serum norethisterone concentrations increased by about 1 day after application of an EVOREL CONTI to a steady-state level of about 14 ng/ml. Mean steady state serum norethisterone concentrations ranging between about 141 – 224 pg/ml were maintained for the entire 3.5 day application period following multiple applications. Mean concentrations declined rapidly to the lower limit of assay quantitation at 24 hours after removal of the patch.

The serum half-life of about 15 hours was determined following removal of the patch, indicative of its skin depot effect. As expected from the transdermal delivery of a transient and limited increase in serum norethisterone concentrations was observed following multiple application of the patch.

INDICATIONS

Hormone replacement therapy (HRT) for the relief of menopausal symptoms (vasomotor symptoms such as hot flushes and atrophic vaginitis/vulvitis for women with an intact uterus).

CONtraindications

- Known hypersensitivity to oestradiol, norethisterone acetate or any other component of this product.
- Known current or past or suspected breast cancer.
- Family history of breast cancer.
- Known or suspected oestrogen dependent malignant tumours (e.g. endometrial carcinoma, extra-malignant tumours (e.g. untreated atypical endometrial hyperplasia)).
- Undiagnosed genital bleeding.
- Previous or current pregnancy (PREGNANCY AND LACTATION)
- Active liver disease or a history of liver disease as long as liver function tests have failed to return to normal.
- Previous or current venous thromboembolism (deep venous thrombosis, pulmonary embolism).
- Known thrombophilic conditions.
- Inherited thrombophilia.
- Active or past arterial thromboembolic disease (e.g. cerebrovascular accident, myocardial infarction).
- Porphyria.
- Patients known to inherit genetic mutations: BRCA 1 and BRCA 2 genes.
- Endometrial periods (before age 21 years).
- History of non-cancerous breast diseases (atypical hyperplasia or lobular carcinoma in situ).
- Previous treatment with diethylstilbestrol (DES).
- Depression not well controlled with treatment.
- A history of depression with the use of oestrogen and/or progesterone/progestogen containing medicines irrespective of the indication, dosage formulation and route of administration.

WARNINGS AND SPECIAL PRECAUTIONS

Prior to commencing hormone replacement therapy, it is recommended that the patient be given a thorough physical and gynaecological examination. A complete medical and family history of thromboembolic or thromboembolic disorders should be taken.

Report any breakthrough bleeding, unexplained vaginal bleeding, and changes noticed during breast examination require further evaluation.

A careful appraisal of the risk/benefit ratio should be undertaken before the initiation of treatment.

Conditions which need supervision

If any of the following conditions are present, have occurred previously, and/or have been reported in the medical history or previous hormone treatment, these conditions should be closely supervised. It should be taken into account that these conditions may recur or be aggravated during treatment with EVOREL CONTI, in particular:

- Leiomyoma (uterine fibroids) or endometriosis
- Risk of thromboembolic disorders (see below)
- Risk factors for oestrogen dependent tumours, e.g. first degree relative with breast cancer
- Hypertension
- Liver disorders
- Diabetes mellitus
- Cholelithiasis
- Migraine or severe headache
- Systemic lupus erythematosus
- A history of endometrial hyperplasia (see below)
- Epilepsy
- Mastopathy.

Conditions which require monitoring while on EVOREL CONTI therapy:

Oestrogens such as in EVOREL CONTI may cause fluid retention. Cardiac or renal dysfunction should be carefully observed

Disturbances of liver function

• Risk of cholesterol and triglyceride elevation

• Pre-existing hypertension. Cases of large increases of plasma triglycerides leading to pancreatitis have been reported in this condition.

Reasons for immediate withdrawal of therapy:

Therapy should be discontinued in case a contraindication is discovered and in the following situations:

- Jaundice or deterioration in liver function
- Increase in blood pressure

- New onset of migraine-type headache
- Pregnancy.

Breast cancer:

EVOREL CONTI contains oestrogen only which, on prolonged use, may increase the risk of developing breast cancer. A meta-analysis of prospective epidemiological studies from 1973–1988 reported a significant increase in the risk of developing breast cancer in 55,570 women 40 – 59 years of age who used menopausal hormone therapy (MHT).

The risk increased steadily with duration of use and was slightly greater for users of combined oestrogen-progestogen preparations, and the risk persisted for more than 10 years after stopping the treatment.

The relative risk (RR) to develop breast cancer for oestrogen-progestogen preparation was 1.60 at 1 – 4 years and RR = 2.05 at 5 – 14 years. The risk for developing breast cancer in women 15 – 19 years of age was 1.60 at 5 – 14 years. There was no risk to develop breast cancer in women who started MHT at 60 years of age.

All women on EVOREL CONTI should receive yearly breast examinations by a healthcare provider and perform monthly breast self-examinations. Mammography evaluations should be done on patient age, risk factors and prior mammogram results.

Combined oestrogen/progestogen therapy:

The randomised placebo-controlled trial of the Women's Health Initiative study (WHI), and epidemiological studies are consistent in finding an increased risk of breast cancer in women taking combined oestrogen/progestogen for HRT that becomes apparent after about 3 years.

Oestrogen-only therapy:

The WHI trial found no increase in the risk of breast cancer in hysterectomised women using oestrogen-only HRT. The excess risk becomes apparent within a few years of use and returns to baseline within a few (at most) years after stopping treatment. HRT, especially oestrogen/progestogen combined treatment, increases the risk of breast cancer. Radiological imaging studies, including mammography, ultrasound and magnetic resonance imaging which may adversely affect the radiological detection of breast cancer.

Ovarian Cancer:

Long term (at least 5 years) use of oestrogen only HRT products in hysterectomised women has been associated with an increased risk of ovarian cancer in some epidemiological studies.

Personal or a strong family history of recurrent thromboembolism or recurrent spontaneous abortions should be investigated in order to exclude a thrombophilic predisposition. Until a full evaluation of thromboembolic factors has been made or a thrombophilic condition is identified, the use of EVOREL CONTI in such patients should be viewed as contraindicated.

Those women already on anticoagulant treatment require careful consideration of the benefit/risk of use of EVOREL CONTI.

The risk of thromboembolism is increased with prolonged immobilisation, major surgery, Scrutinous attention should be given to prophylactic measures to prevent VTE following surgery. Where prolonged immobilisation is liable to follow surgery, the patch should be discontinued four to six weeks, and earlier if possible ahead of surgery. Treatment should not be restarted until after the woman is completely mobilised.

If VTE develops after initiating therapy, EVOREL CONTI should be discontinued.

Patients should be told to contact their doctors immediately when they become aware of a potential thromboembolic symptom (e.g., painful swelling of a leg, sudden pain in the chest, dyspnoea).

Coronary artery disease (CAD):

Randomised controlled studies found no protective effect for the risk of CAD in hysterectomised women using oestrogen only therapy for the risk of CAD.

Combined oestrogen/progestogen therapy such as EVOREL CONTI:

The relative risk of CAD during use of combined oestrogen/progestogen HRT is increased.

Stroke:

There is an increased risk of stroke in healthy women during treatment with HRT.

Combined oestrogen/progestogen and oestrogen only therapy are associated with an increased risk of ischaemic stroke.

Dementia:

HRT use does not improve cognitive function. There is evidence of increased risk of dementia in women using continuous combined HRT such as EVOREL CONTI or oestrogen only HRT.

Depressed mood, depression and the risk of suicidality:

Most cases of depression and despair are side effects reported with the use of hormonal containing products including EVOREL CONTI. There is some evidence that use of oestrogen and/or progesterone/progestogen containing medicines may be associated with severe depression and a higher risk of suicidal thoughts/behavior (e.g. talk of suicide, threats of suicide, self-harm, mood swings, being preoccupied with death or violence, feeling hopeless about a situation, increasing use of alcohol/drugs, doing self-destructive things, personality changes) and suicide. Prescribers should inform their patients to contact their doctor for advice if they experience mood changes and depression whilst on treatment with EVOREL CONTI.

EVOREL CONTI should be kept away from children.

INTERACTIONS

Medicines which induce microsomal liver enzyme activity may alter oestrogen and progestogen metabolism resulting in reduced efficacy of EVOREL CONTI. The induction of these enzymes by barbiturates, hydantoins, phenytoin, meprobamate, phenothiazines, rifampicin, rifabutin, bosentan and certain non steroidal reverse transcriptase inhibitors (e.g. nevirapine and efavirenz) used in the treatment of HIV/AIDS infections.

These inducers may reduce the effectiveness of EVOREL CONTI by contrast exhibiting properties when used concomitantly with steroid hormones. Metabolism may be affected by St. John's wort preparations (Hypericum perforatum), which contain cytochrome P450 isoenzymes in the liver (e.g. CY3A44) and P450 3A4.

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PREGNANCY AND LACTATION:

The use of EVOREL CONTI is contraindicated in pregnancy and lactation.

If pregnancy occurs during medication with EVOREL CONTI, treatment should be withdrawn immediately.

DOSAGE AND DIRECTIONS FOR USE

Dosage

ADULTS: EVOREL CONTI should be applied twice weekly, without interruption to the trunk below the waist.

In insufficient cases to allow dose adjustments for patients with severe liver or kidney function impairment.

EVOREL CONTI should not be continued for longer than 5 years.

Should a patch fall off, it should be replaced immediately with a new patch.

Replace a patch if there is a change in colour or texture of the patch.

Report any breakthrough bleeding, unexplained vaginal bleeding, and changes noticed during breast examination require further evaluation.

A careful appraisal of the risk/benefit ratio should be undertaken before the initiation of treatment.

Directions for use/handling

The EVOREL CONTI should be placed on a clean, dry, healthy, intact area of skin, on the trunk of the body below the waist.

Creams, lotions or powders may interfere with the adhesive part of the patch.

The patch should not be applied on or near the breasts.

The area of application should be changed, with an interval of at least one week allowed between applications to a particular site.

The waistline should not be used because excessive rubbing of the patch may occur.

The patch should be used immediately after opening the sachet. Remove one part of the protective foil. Apply the exposed part of adhesive to the application site from the edge to the middle; avoid wrinkling of the patch.

Mental impairment
There is some evidence of mental deterioration in women using continuous combined HRT, such as EVOREL CONTI.

- EVOREL CONTI should not be used by children.
- EVOREL CONTI should not be used for contraception.

Pregnancy and breastfeeding
If you are pregnant or breastfeeding your baby, please consult your doctor, pharmacist or other healthcare professional for advice before taking this medicine. Tell your doctor if you are pregnant, or are pregnant. You should not use EVOREL CONTI during pregnancy. You should not breastfeed whilst using EVOREL CONTI. If you develop skin rashes or irritation where you applied the patch, remove the patch and ask your doctor for advice. If you notice any other symptoms not listed above, stop using the patch, please tell your doctor about them.

Not all side effects reported for EVOREL CONTI are included in this leaflet. Should your general health worsen or if you experience any other untoward effects while

taking this medicine, please consult your doctor, pharmacist or other healthcare professional for advice.

6. STORING AND DISPOSING OF EVOREL CONTI

STOP USING THIS OUT OF REACH OF CHILDREN.
Store at or below 25 °C. Do not freeze.
Do not dispose unused medicine in drains or sewerage systems (e.g. toilets).

Other important information:
Do not use the patches:

- After the expiry date shown on the label
- If the protective sachet/pouch is open

7. PRESENTATION OF EVOREL CONTI

EVOREL CONTI comes in a carton pack containing eight patches in protective sealed foil-lined pouches.

8. IDENTIFICATION OF EVOREL CONTI

EVOREL CONTI patches are square shaped, transparent patches with a self-adhesive backing, which can be stuck to the skin. EVOREL CONTI is marked CEN1 and has a surface area of 16 cm². In each patch the active ingredients are spread evenly in the adhesive and pass slowly through the skin into the body.

9. REGISTRATION NUMBER

EVOREL CONTI: 31/21.8.2/0244

Veneuse tromboëmbolisme (bloedklont)

Dit is belangrik dat jy 'n volledige en deeglike fisiese en ginekologiese ondersoek doen en dat die mediese geskiedenis van jou en jou familie betreklike trombose (bloedklont) in ag geneem word voordat jy met EVOREL CONTI begin.

- Jy moet gereeld volledige mediese ondersoek ondergaan terwyl jy EVOREL CONTI gebruik.
- As jy 'n bloedklont in die been of long gehad het, 'n peronete of 'n hartaanval kry, of om diele van ander rede bediening is, soos 'n operasie, mag dit steeds moontlik wees dat jy EVOREL CONTI sal gebruik, maar jou dokter moet daaroor besoek. Jy moet nie gebruik maak van hierdie mediese produk nie tenzij dit gebruik. As jy terwyl jy EVOREL CONTI gebruik, simptome of 'n bloedklont gebruik, soos onverklaarbare pyn in die bors, buik of bone, moet die plakker verwilder word en jou dokter dadelik gekontak word.

Hartslekte

- **Gekombineerde estrogen-progestagenbehandeling**, soos EVOREL CONTI: **Geen verhooging van hartslag tydens die gebruik van gekombineerde estrogen-progestagen-HVT is nodig.**

Beroerte

Daar is 'n verhoogde risiko vir beroerte by gesonde vrouens tydens behandeling met HVT, soos EVOREL CONTI.

Verstandelike belemmering

Daar is 'n mate van verstandelike uitvloeding van vroue wat gebruik maak van deurlopende gekombineerde HVT, soos EVOREL CONTI.

- EVOREL CONTI moet nie vir derde kinders gebruik nie.
- EVOREL CONTI moet nie as voorbereiding gebruik nie.

Swanger en borste

Swanger is of jy baie borwees, raadpleeg asseblief jou dokter, apoteker of ander gesondheidsoргундиеur voorbereid op hierdie medisine gebruik.

Lig jou dokter in as jy swanger is, of dink jy is swanger. Jy moet nie EVOREL CONTI tydens swangerskap gebruik nie. Jy moet na borsies terwyl jy EVOREL CONTI Hou op EVOREL CONTI te gebruik as jy swanger raak terwyl jy op hierdie medisynas.

Gebruik van ander medisyne

Jy moet nie ander gesondheidsoргундиеur in as jy enige ander medisyne neem. (Dit sluit in komplementêre of tradisionele medisyne in.)

Gebruik van ander gesondheidsoргундиеur van EVOREL CONTI verminder, soos antiepilepsiese medisyne (barbiturate, hidantoinate, karbaasenep, meprobamat), fenietilusason, rifampisone, rifabutolin, bosentan, produkte met Sint-Johanneskruid (*Hypericum perforatum*) en certere medisyne vir die behandeling van HIV-infeksies, sonas nevirapine en stavudine.

Gebruik van ander medisyne

As jy hierdie medisynes gebruik kan die gebruik van EVOREL CONTI lei tot meer onverwagte uitvloeding van die medisynas. Gevolglik moet jy hierdie medisynas gebruik, insluitende medisynas wat sonder voorvoorbly vertrek is, kan die gebruik van hierdie medisynes saam met EVOREL CONTI ongewenste interaksies veroorsaak. Raadpleeg asseblief jou dokter, apoteker of ander gesondheidsoргундиеur.

4. HOE OM EVOREL CONTI PLAKKERS TE GEBRUIK

Gebruik EVOREL CONTI netjies soos jou dokter of jou gesê het. Behandeling met EVOREL CONTI moet nie langer as 5 week volhou word nie.

Wanneer om die plakker te gebruik

Daar is geenkeer hormone in elke plakker om vir elke dae te hou, maar vir bestendige voorsering aan die liggaam moet die plakkars met 3 of 4 dag tussenposes vervang word.

Om dit makker te maak om te onthou wanneer dit gedoen moet word, bly by die tweede dae elke plakker op die volgende datum en 9:00 in die morgens gebruik. Elk plakker lewer 50 mikrogram estradiol en 170 mikrogram noretisteron ('n progestogenhornomeron) per 24 ur.

EVOREL CONTI plakkars bevat die volgende onaktiewe bestanddele: Akraal-insetlasat-kopolimer (kleefmiddel), guar gum (absorbeerder) en polietilen-tetrafaatfoet (stenaalg).

5. WAT EVOREL CONTI BEVAT

6. NAAM EN BESIGHEIDSADRES VAN DIE REGISTRASIEHOUER

7. AANBIEDING VAN EVOREL CONTI

8. IDENTIFIKASIE VAN EVOREL CONTI

9. REGISTRASIONOMMER

10. DATUM VAN PUBLIKASIE

11. DATUM VAN PUBLIKASIE

12. AANBIEDER VAN HET

13. GEbruiksaanweisings

14. VERBODS

15. VERANTWORTELING

16. VERANTWORTELING

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