PRODUCT INFORMATION

PHENERGAN®

NAME OF THE MEDICINE
Phenergan Tablets
Phenergan Elixir

Non-proprietary Name
Promethazine hydrochloride

Chemical Structure
Promethazine hydrochloride has the following structural formula:

\[
\begin{align*}
\text{N} & \quad \text{Me} \\
\text{Me} & \quad \text{NMe}_2 \\
\text{S} & \\
\end{align*}
\]

CAS Number
Chemical Abstracts Number: [58–33-3]

DESCRIPTION
Promethazine hydrochloride is a white or faintly yellow, practically odourless, crystalline powder. It is very soluble in water, freely soluble in alcohol and in chloroform, and practically insoluble in ether.

Phenergan Elixir contains promethazine hydrochloride 5 mg / 5 mL.
Phenergan Elixir also contains maltitol solution, acesulfame potassium, sodium benzoate, sodium citrate, citric acid, sodium sulfite, sodium metabisulfite, ascorbic acid, caramel and orange juice flavour.
Phenergan tablets contain 10 mg or 25 mg of promethazine hydrochloride.
Phenergan Tablets also contain lactose, starch maize, povidone, magnesium stearate, hypromellose, macrogol 200 and blue opaspray.

PHARMACOLOGY
Promethazine, a phenothiazine derivative, is a long acting antihistamine with mild atropine-like anticholinergic effects and some antiserotonin effects, and because of its marked effect on the central nervous system (CNS), it acts as an antiemetic, hypnotic, tranquilliser, and a potentiator of anaesthetics, hypnotics, sedatives and analgesics.

Pharmacokinetics
Promethazine is well absorbed after oral administration. Peak plasma concentrations are reached 2 to 3 hours after administration by this route, although there is low systemic bioavailability after oral administration, due to high first-pass metabolism in the liver. Promethazine crosses the blood-brain barrier and the placenta, and is distributed into breast milk. It is highly bound to plasma proteins (76-93%). Promethazine undergoes extensive metabolism, predominantly to promethazine sulfoxide, and also to N-desmethylpromethazine. It is excreted slowly via the urine.
and bile, mainly as metabolites. Elimination half-lives of 5 to 14 hours have been reported. The antihistamine action has been reported to be between 4 and 12 hours.

INDICATIONS

**Allergies:** Treatment of allergic conditions including some allergic reactions to drugs, urticaria and allergic contact dermatitis, and allergic reactions to insect bites and stings.

**Upper respiratory tract:** Relief of excessive secretion in the upper respiratory tract as a result of hayfever and allergic rhinitis.

**Nausea and vomiting:** Antiemetic for vomiting from various causes, including postoperative vomiting, irradiation sickness, drug induced nausea and motion sickness.

**Sedation:** For short term use under the advice of a doctor or pharmacist. Do not use for more than 7 to 10 consecutive days.

**Other:** Promethazine has sedative effects and can be used in the symptomatic management of measles and chicken pox. Promethazine can be used as a preanaesthetic medication for the prevention and control of post operative vomiting.

CONTRAINDICATIONS

Promethazine is contraindicated for use in patients with a history of hypersensitivity to the drug substance, substances of similar chemical structure or hypersensitivity to the other ingredients. Phenergan Sugar Free (orange flavour) Elixir should not be given to patients with allergies to sodium metabisulfite, sodium sulfite or sodium benzoate.

Promethazine is contraindicated for use in:

- newborns or premature infants
- children under 2 years of age (see Precautions)
- lactating women
- patients taking monoamine oxidase inhibitors (MAOIs) (see Interactions with Other Medicines)
- jaundice induced by other phenothiazine derivatives
- patients who have received high doses of other CNS depressants and/or are comatose.

Refer to 'Interactions with Other Medicines' for additional information.

PRECAUTIONS

Caution is advised in patients with:

- cardiovascular disease
- impaired hepatic function
- renal - failure or impairment
- acute or chronic respiratory impairment
- epilepsy
- hypertensive crisis
- narrow-angle glaucoma
- stenosing peptic ulcer
- symptomatic prostatic hypertrophy
- bladder neck obstruction
- pyloroduodenal obstruction

Promethazine may cause drowsiness and may increase the effects of alcohol. Drowsiness may continue the following day. Those affected should not drive or operate machinery; alcohol should be avoided.

QT interval prolongation has been reported with phenothiazines.

Refer to ‘Interactions with Other Medicines’ for additional information.
There have been case reports of drug abuse with promethazine. The risk of abuse is greater in patients with a history of drug abuse.

As with neuroleptics, Neuroleptic Malignant Syndrome (NMS) characterised by hyperthermia, extrapyramidal disorders, muscle rigidity, altered mental status, autonomic nervous instability and elevated CPK, may occur. As this syndrome is potentially fatal, promethazine must be discontinued immediately and intensive clinical monitoring and symptomatic treatment should be initiated.

**Use in Pregnancy (Category C)**

Promethazine, owing to its pharmacological effects, has caused or may be suspected of causing, harmful effects on the human foetus or neonate without causing malformations. These effects may be reversible.

When promethazine has been given in high doses during late pregnancy, promethazine has caused prolonged neurological disturbances in the infant.

Promethazine should be used in pregnancy only if the potential benefits to the patient are weighed against the possible risk to the foetus.

**Use in Lactation**

Promethazine is excreted in breast milk. Therefore, it should not be used for breastfeeding women.

**Paediatric Use**

Children may experience paradoxical excitation with promethazine.

The use of promethazine should be avoided in children and adolescents with signs and symptoms suggestive of Reye’s Syndrome.

This product should not be used in children under 2 years of age, due to the potential for fatal respiratory depression.

Caution should be exercised when administering promethazine to children as there is potential for central and obstructive apnoea and reduced arousal. Excessive dosages of antihistamines in children may cause hallucinations, convulsions and sudden death.

**Use in the Elderly**

The elderly may experience paradoxical excitation with promethazine. The elderly are more likely to have CNS depressive side effects, including confusion and are more susceptible to the antimuscarinic effects of antihistamines, including hypotension (see Contraindications).

**Warnings**

*Hypertensive crisis:* Promethazine should be used with caution, if at all, in these patients.

Solar dermatitis has been reported following oral doses of Phenergan in patients with eczema or a tendency to rheumatism.

*Epilepsy:* Epileptic patients may experience increased severity of convulsions.

**INTERACTIONS WITH OTHER MEDICINES**

Promethazine may cause drowsiness and may enhance the sedative effects of CNS depressants (including alcohol, barbiturates, hypnotics, opioid analgesics, anxiolytic sedatives and neuroleptics), and have additive antimuscarinic actions with other antimuscarinic drugs (atropine, tricyclic antidepressants). Interactions between promethazine and monoamine oxidase inhibitors and tricyclic antidepressants (TCAs) may prolong and intensify the anticholinergic and CNS depressive effects.

**ADVERSE EFFECTS**

**CNS Effects**

CNS depressive effects of promethazine include sedation and impaired performance (impaired driving performance, poor work performance, incoordination, reduced motor skills, and impaired information processing). Performance may be impaired in the absence of sedation and may persist the morning after a night-time dose.
The CNS stimulatory effects of promethazine may include anxiety, hallucinations, appetite stimulation, muscle dyskinesias and activation of epileptogenic foci. High doses of promethazine may cause nervousness, tremor, insomnia, agitation, and irritability.

**Anticholinergic Effects**

Side effects of promethazine associated with cholinergic blockage include dryness of the eyes, mouth and nose, blurred vision, urinary hesitancy and retention, constipation and tachycardia.

**More common reactions**

- **Gastrointestinal:** Dry mouth, epigastric distress, loss of appetite, nausea, vomiting, constipation, diarrhoea
- **Nervous system:** Sedation, restlessness, dizziness, lassitude, incoordination, fatigue
- **Ocular:** Blurred vision

**Less common reactions**

- **Cardiovascular:** Tachycardia, bradycardia, faintness
- **Dermatological:** Contact dermatitis (topical), photosensitization, urticaria, angioneurotic oedema, pruritus
- **Haematological:** Leucopenia, agranulocytosis, aplastic anaemia, thrombocytopenic purpura.
- **Hepatic:** Jaundice
- **Musculoskeletal:** Extrapiramidal symptoms
- **Nervous-system:** Tinnitus, euphoria, nervousness, insomnia, convulsive seizures, oculogyric crises, excitation, catatonic-like states, hysteria, extrapyramidal symptoms, tardive dyskinesia, Neuroleptic Malignant Syndrome
- **Respiratory:** Marked irregular respiration
- **Immunological:** Very rare cases of allergic reactions, including urticaria, rash and pruritus have been reported

**Severe or life-threatening reactions**

Agranulocytosis, anaphylaxis.

**DOSAGE AND ADMINISTRATION**

This product should not be used in children under 2 years of age (see Precautions). This product is not suitable for children aged 2 – 12 years unless on pharmacist or medical advice (see Precautions). Dosage varies according to the condition being treated and the individual’s response.

**Tablets**

The tablets are not recommended for children under 6 years of age.

**Allergic disorder**

- **Adults:** 25 to 75 mg as a single dose at night, or 10 to 20 mg two to three times daily
- **Children:** 6 – 12 years: 10 to 25 mg as a single dose at night, or 10 mg two to three times daily

**Sedation**

- **Adults:** 25 to 75 mg as a single dose at night
- **Children:** 6 – 12 years: 10 to 25 mg as a single dose at night

**Travel sickness**

- **Adults:** 25 mg
- **Children:** 6 – 12 years: 10 mg

To be taken the night before travel and repeated after 6 to 8 hours on the following day if required.
Nausea and vomiting

Adults: 25 mg every 4 to 6 hours to a maximum daily dose of 100 mg
Children: 6 – 12 years: 10 mg every 4 to 6 hours to a maximum daily dose of 25 mg

Elixir

Allergic disorder

Children: 6 - 12 years: 10 to 25 mL as a single dose at night, or 10 mL two to three times daily
Children: 2 – 5 years: 5 to 15 mL as a single dose at night, or 5 mL two to three times daily

Sedation

Children: 6 - 12 years: 10 to 25 mL as a single dose at night
Children: 2 – 5 years: 5 to 15 mL as a single dose at night

Travel sickness

Children: 6 -12 years: 10 mL.
Children: 2 - 5 years: 5 mL.
To be taken the night before travel and repeated after 6-8 hours on the following day if required.

Nausea and vomiting

Children: 6 – 12 years: 10 mL every 4 to 6 hours to a maximum daily dose of 25 mL
Children: 2 – 5 years: 5 mL every 4 to 6 hours to a maximum daily dose of 15 mL

OVERDOSAGE

In case of overdose, immediately contact the Poisons Information Centre (in Australia, call 13 11 26) for advice.

The chief sign of acute poisoning from ingestion of an overdose of Phenergan is unconsciousness, which is commonly delayed. In addition, convulsions, hallucinations, delirium, acute anxiety, psychotic reactions, extreme hyperaesthesia and hyperalgesia with extensor plantar responses may occur. Anticholinergic action may cause tachycardia, flushed skin, dry mouth and sometimes mydriasis and urinary retention.

In adults, CNS depression is more common, with drowsiness, coma, convulsions, progressing to respiratory failure or cardiovascular collapse.

In infants and children, CNS stimulation predominates over CNS depression causing ataxia, excitement, tremors, psychoses, hallucinations, convulsions and possibly hyperpyrexia, which may be followed by deepening coma and cardiorespiratory collapse.

Treatment

Similar to that of other phenothiazines. For information on the management of overdose, contact the Poisons Information Centre (in Australia call 13 11 26).

Symptomatic supportive therapy is indicated and maintenance of adequate ventilation should be instituted if necessary.

PRESENTATION AND STORAGE CONDITIONS

Elixir : 5 mg/5 mL
Sugar free, alcohol free, orange flavoured
100 mL
Store below 25°C. Protect from light.

Tablets : 10 mg
Circular, film-coated biconvex tablets with bevelled edges, pale blue in colour, one face impressed 'PN' above '10', the reverse face plain.
10 mg tablets are available in packs of 50 tablets.
Store below 30°C. Protect from light.

25 mg
Circular, film-coated biconvex tablets with bevelled edges, pale blue in colour, one face impressed 'PN' above '25', the reverse face plain.
25 mg tablets are available in packs of 50 tablets.
Store below 30°C. Protect from light.

NAME AND ADDRESS OF THE SPONSOR
sanofi–aventis australia pty ltd
12-24 Talavera Rd
Macquarie Park NSW 2113
Australia

POISON SCHEDULE OF THE MEDICINE
Elixir, Tablets: Pharmacist Only Medicine (Schedule 3)

DATE OF FIRST INCLUSION IN THE ARTG
24 October 1997

DATE OF MOST RECENT AMENDMENT
2 April 2015