

# Acylex-H Cream

(Aciclovir and Hydrocortisone Cream) 5% / 1% w/w

400003186

## Product Specifications: Innovator

### Acylex-H Cream 10 gm

|   |      |
|---|------|
| Each gram contains: Aciclovir B.P. .... | 50mg |
| Hydrocortisone U.S.P. ....              | 10mg |

## DESCRIPTION

Acylex-H contains acyclovir, a synthetic nucleoside analogue active against herpes viruses, and hydrocortisone, an anti-inflammatory corticosteroid, combined in a cream for topical administration.  
Acyclovir, 2-Amino-6-(2-hydroxyethoxymethyl)-1,9-dihydro-6H-purin-6-one, is a synthetic nucleoside analogue active against herpes viruses. Its empirical formula is C<sub>8</sub>H<sub>11</sub>N<sub>5</sub>O<sub>3</sub>.

## PHARMACEUTICAL FORM:

### CLINICAL PARTICULARS

#### Therapeutic indications:

ACYLEX-H, combination of acyclovir, a herpes simplex virus deoxynucleoside analog DNA polymerase inhibitor, and hydrocortisone, a corticosteroid, is indicated for the early treatment of recurrent herpes labialis (cold sores) to reduce the likelihood of ulcerative cold sores and to shorten the lesion healing time in adults and children (6 years of age and older).

#### Posology and method of administration

##### Posology

Typically apply ACYLEX-H (Acyclovir-hydrocortisone combination) cream 5 times per day for 5 days. Therapy should be initiated as early as possible after the first signs and symptoms (i.e., during the prodrome or when lesions appear).

For each dose, typically apply a quantity of ACYLEX-H (Acyclovir-hydrocortisone combination) cream sufficient to cover the affected area, including the outer margin. Avoid unnecessary rubbing of the affected area to avoid aggravating or transferring the infection. For children 6 years of age and older, the dosage is the same as in adults.

#### Contraindication: None.

#### Warnings and precautions

##### General

Acyclovir-Hydrocortisone combination cream is intended for cutaneous use only for herpes labialis of the lips and around the mouth. Acyclovir-Hydrocortisone should not be used in the eye, inside the mouth or nose, or on the genitalia.

There are other orofacial lesions, including bacterial and fungal infections, which may be difficult to distinguish from a cold sore. Patients should be encouraged to seek medical advice when a cold sore fails to heal within 2 weeks. Acyclovir-Hydrocortisone combination cream has a potential for irritation and contact sensitization.

#### Use in specific populations

##### Pregnancy

There are no available data on Acyclovir-Hydrocortisone combination cream use in pregnant women. However, published observational studies over decades of use of topical acyclovir and low and medium-potency topical corticosteroids during pregnancy have not established any association between the use of these products and major birth defects, miscarriage, or adverse maternal or fetal outcomes.

Available studies have methodological limitations including whether women who filled a prescription actually took the medication, non-randomized design, retrospective data collection, and the inability to control for confounders such as underlying maternal disease and use of concomitant medications.

##### Lactation

There is no data on the presence of acyclovir or hydrocortisone in human milk following topical administration. There are no data on the effects of acyclovir or hydrocortisone on the breastfed infant or milk production. Systemic exposure following topical administration of either drug is expected to be minimal. The developmental and health benefits of breastfeeding should be considered along with the mother's clinical need for Acyclovir-Hydrocortisone combination cream and any potential adverse effects on the breastfed child from Acyclovir-Hydrocortisone combination cream or the underlying maternal condition.

##### Immunocompromised Patients:

Even though the safety of Acyclovir-Hydrocortisone combination cream has been studied in immunocompromised subjects, data are insufficient to support use in this population. Immunocompromised subjects should be encouraged to consult a physician concerning the treatment of any infection.

##### Geriatric population:

In clinical studies, there were insufficient subjects above 65 years of age to reach a firm conclusion regarding the safety and efficacy of Acyclovir-Hydrocortisone combination cream in this group, although the available results were similar to lower age subjects.

##### Paediatric population:

Safety and effectiveness in pediatric subjects less than 6 years of age have not been established.

**Drug Interactions:** No drug interaction studies have been performed with acyclovir-hydrocortisone combination cream.

## Carcinogenesis, Mutagenesis, impairment of fertility

Systemic exposure following topical administration of acyclovir is minimal. Results from previous studies of carcinogenesis, mutagenesis and fertility for acyclovir and hydrocortisone are not included in the full prescribing information for the Acyclovir-Hydrocortisone combination cream due to the minimal exposures that result from dermal application. Information on these studies following systemic exposure is available in the full prescribing information for acyclovir and hydrocortisone products approved for oral or parenteral administration. Dermal carcinogenicity studies have not been conducted.

## Adverse Reactions

The most common adverse reactions (<1%) were local skin reactions, and occurred in the area of the application site, including:

- Drying or flaking of the skin; burning or tingling following application; erythema; pigmentation changes; application site reaction including signs and symptoms of inflammation.

**Contact dermatitis** following application has been observed when applied under occlusion in dermal safety trials. Where contact sensitivity tests have been conducted, the reactive substances were hydrocortisone or a component of the cream base.

**No photoallergic or phototoxicity potential** was identified for acyclovir-hydrocortisone.

## Overdosage

Overdosage by topical application of Acyclovir-Hydrocortisone combination cream is unlikely because of minimal systemic exposure.

## CLINICAL PHARMACOLOGY

### Pharmacodynamics

#### Mechanism of Action

Acyclovir is an antiviral drug active against  $\alpha$ -herpesviruses and hydrocortisone is an anti-inflammatory drug.

Acyclovir is a synthetic purine deoxynucleoside analogue with inhibitory activity against herpes simplex viruses type 1 (HSV-1) and type 2 (HSV-2) DNA polymerases. It inhibits HSV-1 and HSV-2 replication in cell culture and in vivo. The inhibitory activity of acyclovir is selective due to its affinity for the enzyme thymidine kinase (TK) encoded by HSV. This viral enzyme converts acyclovir into acyclovir monophosphate, a deoxynucleotide analogue. The monophosphate is further converted into diphosphate by cellular guanylate kinase and into triphosphate by a number of cellular enzymes. In biochemical assays, acyclovir triphosphate inhibits replication of  $\alpha$ -herpes viral DNA. This inhibition is accomplished in 3 ways: 1) competitive inhibition of viral DNA polymerase, 2) incorporation into and termination of the growing viral DNA chain, and 3) inactivation of the viral DNA polymerase.

**Hydrocortisone** is the main glucocorticoid secreted by the adrenal cortex. It is used topically for its anti-inflammatory effects which suppress the clinical manifestations of the disease in a wide range of disorders where inflammation is a prominent feature.

### Pharmacokinetics

The plasma concentrations of acyclovir and hydrocortisone were not measured following topical administration of Acyclovir-Hydrocortisone combination cream on cold sores.

The extent of percutaneous absorption of topical corticosteroids is determined by many factors including the vehicle, the integrity of the epidermal barrier, and the use of occlusive dressings.

Topical corticosteroids can be absorbed from normal intact skin and can have systemic side effects depending on both the potency of the corticosteroid and the surface area of application. Inflammation and/or other disease processes in the skin that disrupt the skin barrier can increase percutaneous absorption.

Once absorbed through the skin, topical corticosteroids are handled through pharmacokinetic pathways similar to systemically administered corticosteroids. Corticosteroids are bound to plasma proteins in varying degrees. They are metabolized primarily in the liver and are then excreted by the kidneys. Some of the topical corticosteroids and their metabolites are also excreted into the bile.

### HOW SUPPLIED

Acylex-H Cream 5% / 1% w/w Pack of 10 gram

### STORAGE

Do not store above 30°C.

The expiration date refers to the product correctly stored at the required condition.

### INSTRUCTIONS:

Keep away from heat, light and moisture.

Keep all medicines out of the reach of children.

To be sold on the prescription of a registered medical practitioner only.

FOR EXTERNAL USE ONLY.

DO NOT USE IN THE EYES.

Please read the contents cautiously before use.  
This package insert is regularly and timely updated.

Manufactured by:

**FEROZSONS**  
LABORATORIES LIMITED

P. O. Ferozsons, Nowshera-Pakistan

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