# ANNEX I

# SUMMARY OF PRODUCT CHARACTERISTICS

#### 1. NAME OF THE MEDICINAL PRODUCT

Dukoral suspension and effervescent powder for oral suspension Cholera vaccine (inactivated, oral)

# 2. QUALITATIVE AND QUANTITATIVE COMPOSITION

Each dose of vaccine suspension (3 ml) contains:

- A total of 1.25x10<sup>11</sup> bacteria of the following strains:

Vibrio cholerae O1 Inaba, classical biotype (heat inactivated)

31.25x10<sup>9</sup> bacteria\*

Vibrio cholerae O1 Inaba, El Tor biotype (formalin inactivated)

31.25x10<sup>9</sup> bacteria\*

Vibrio cholerae O1 Ogawa, classical biotype (heat inactivated)

31.25x10<sup>9</sup> bacteria\*

Vibrio cholerae O1 Ogawa, classical biotype (formalin inactivated)

31.25x10<sup>9</sup> bacteria\*

Recombinant cholera toxin B subunit (rCTB) 1 mg
 (produced in *V. cholerae* O1 Inaba, classical biotype strain 213.)

#### **Excipients:**

Sodium dihydrogen phosphate dihydrate 2.0 mg, disodium hydrogen phosphate dihydrate 9.4 mg, sodium chloride 26 mg, sodium hydrogen carbonate 3600 mg, sodium carbonate anhydrous 400 mg, saccharin sodium 30 mg, sodium citrate 6 mg.

One dose contains approximately 1.1 g sodium.

For a full list of excipients, see section 6.1.

# 3. PHARMACEUTICAL FORM

Suspension and effervescent powder for oral suspension:

- Suspension for oral suspension
- Powder for oral suspension in a sachet.

#### 4. CLINICAL PARTICULARS

# 4.1 Therapeutic indications

Dukoral is indicated for active immunisation against disease caused by *Vibrio cholerae* serogroup O1 in adults and children from 2 years of age who will be visiting endemic/epidemic areas.

The use of Dukoral should be determined on the basis of official recommendations taking into consideration the variability of epidemiology and the risk of contracting disease in different geographical areas and travelling conditions.

Dukoral should not replace standard protective measures. In the event of diarrhoea measures of rehydration should be instituted.

<sup>\*</sup> Bacterial count before inactivation.

# 4.2 Posology and method of administration

#### Posology

Primary vaccination schedule

The standard primary course of vaccination with Dukoral against cholera consists of 2 doses for adults and children from 6 years of age. Children 2 to below 6 years of age should receive 3 doses. Doses are to be administered at intervals of at least one week. If more than 6 weeks have elapsed between doses, the primary immunisation course should be re-started.

Immunisation should be completed at least 1 week prior to potential exposure to *V. cholerae* O1.

#### Booster dose

For continuous protection against cholera a single booster dose is recommended within 2 years for adults and children from 6 years of age, and within 6 months for children aged 2 to below 6 years. No clinical efficacy data has been generated on repeat booster dosing. However, immunological and duration of protection data suggest that if up to 2 years have elapsed since the last vaccination for adults and up to 6 months for children aged 2 to below 6 years a single booster dose should be given. If more than 2 years have elapsed since the last vaccination (more than 6 months for children aged 2 to below 6 years) the primary course should be repeated.

#### Children less than 2 years

Dukoral has been given to children between 1 and 2 years of age in safety and immunogenicity studies, but the protective efficacy has not been studied in this age group. Therefore, Dukoral is not recommended to be used in children less than 2 years of age.

#### Elderly

There are only very limited data on protective efficacy of the vaccine in subjects aged 65 years and more.

#### Method of administration

The vaccine is intended for oral use. Before ingestion, the suspension should be mixed with the buffer (sodium hydrogen carbonate) solution. The sodium hydrogen carbonate is supplied as effervescent powder, which should be dissolved in a glass of cool water (approx. 150 ml). Chlorinated water can be used. The suspension should then be mixed with the buffer solution and drunk within 2 hours. Food and drink should be avoided 1 hour before and 1 hour after vaccination. Oral administration of other medicinal products should be avoided within 1 hour before and 1 hour after administration of Dukoral.

Children 2 to below 6 years of age: half of the buffer solution is poured away and the remaining part (approx. 75 ml) is mixed with the entire contents of the vial.

# 4.3 Contraindications

Hypersensitivity to the active substances or to any of the excipients listed in section 6.1 or to formaldehyde.

Administration of Dukoral should be postponed for subjects suffering from acute gastrointestinal illness or acute febrile illness.

# 4.4 Special warnings and precautions for use

#### Traceability

In order to improve the traceability of biological medicinal products, the name and the batch number of the administered product should be clearly recorded.

No clinical data on protective efficacy of Dukoral against cholera after administration of booster doses are available.

Dukoral confers protection specific to *Vibrio cholerae* serogroup O1. Immunisation does not protect against *V. cholerae* serogroup O139 or other species of Vibrio.

In subjects infected with HIV, limited data are available on immunogenicity and safety of the vaccine. Vaccine protective efficacy has not been studied. Immunisation of HIV infected subjects could result in transient increases of viral load. Dukoral may not induce protective antibody levels in subjects with advanced HIV disease. However, an effectiveness study in a population with high HIV prevalence showed similar protection as in other populations.

Antibody response in vaccinees with endogenous or iatrogenic immunosuppression may be insufficient.

Formaldehyde is used during the manufacturing process and trace amounts may be present in the final product. Caution should be taken in subjects with known hypersensitivity to formaldehyde.

Dukoral contains approximately 1.1 g sodium per dose, which should be taken into consideration by patients on a controlled sodium diet.

The vaccine does not provide complete protection and it is important to adhere additionally to standard protective measures to avoid cholera.

# 4.5 Interaction with other medicinal products and other forms of interaction

The vaccine is acid labile. Food and/or drink will increase acid production in the stomach and the effect of the vaccine may be impaired. Consequently, food and drink should be avoided 1 hour before and 1 hour after vaccination.

Oral administration of other vaccines and medicinal products should be avoided 1 hour before and 1 hour after administration of Dukoral.

Preliminary results from a clinical study including a limited number of volunteers showed no interaction with the antibody response to Dukoral when a live oral vaccine (enterocapsules) against typhoid was given simultaneously with Dukoral. The immune response to live typhoid vaccine was not investigated in this study. Similarly, a yellow fever vaccine was given concomitantly with Dukoral, and there was no interaction observed with the immune response to the yellow fever vaccine. The immune responses to Dukoral were not studied. No other vaccines/ medicinal products, including oral polio vaccine and antimalarials, have been given simultaneously with Dukoral in clinical studies.

#### 4.6 Fertility, pregnancy and lactation

No animal data on reproduction toxicity are available. Following careful benefit/risk assessment the vaccine may be administered during pregnancy and to breast-feeding women although no specific clinical studies have been performed to address this issue.

During a mass-vaccination campaign conducted in Zanzibar, 196 pregnant women had received at least one dose of Dukoral. There was no statistically significant evidence of a harmful effect of Dukoral exposure during pregnancy.

#### 4.7 Effects on ability to drive and use machines

There is no evidence of an effect on the ability to drive and use machines.

#### 4.8 Undesirable effects

The safety of Dukoral was assessed in clinical trials, including both adults and children from 2 years of age, conducted in endemic and non-endemic countries for cholera and enterotoxigenic *Escherichia coli* (ETEC) producing heat-labile enterotoxin (LT). Over 94,000 doses of Dukoral were administered during the clinical trials. Evaluation of safety varied between trials with respect to mode of surveillance, definition of symptoms and time of follow-up. In the majority of studies adverse events were assessed by passive surveillance. The most frequently reported adverse reactions, such as gastrointestinal symptoms including abdominal pain, diarrhoea, loose stools, nausea and vomiting, occurred at similar frequencies in vaccine and placebo groups.

Frequency classification: Very common ( $\geq 1/10$ ); common ( $\geq 1/100$  to <1/10); uncommon ( $\geq$ 

1/1,000 to <1/100); rare ( $\geq 1/10,000$  to <1/1,000); very rare (<1/10,000), not known (cannot be estimated from the available data).

Within each frequency grouping, undesirable effects are presented in order of decreasing seriousness.

## Metabolism and nutrition disorder

Rare Loss of /or poor appetite

Very rare Dehydration

# Nervous system disorders

Uncommon Headache Rare Dizziness

Very rare Drowsiness, insomnia, fainting, reduced sense of taste

#### Respiratory, thoracic and mediastinal disorders

Rare Respiratory symptoms (including rhinitis and cough)

### Gastrointestinal disorders

Uncommon Diarrhoea, abdominal cramps, abdominal pain, stomach/abdominal gurgling (gas),

abdominal discomfort

Rare Vomiting, nausea Very rare Sore throat, dyspepsia

#### Skin and subcutaneous tissue disorders

Very rare Sweating, rash

# Musculoskeletal and connective tissue disorders

Very rare Joint pain

# General disorders and administration site conditions

Rare Fever, malaise Very rare Fatigue, shivers

Adverse reactions from post-marketing surveillance

Additional adverse reactions reported during post-marketing surveillance are listed below.

Infections and infestations: Gastroenteritis

Blood and lymphatic system disorders: Lymphadenitis

Nervous system disorders: Paraesthesia Vascular disorders: Hypertension

Respiratory, thoracic and mediastinal disorders: Dyspnoea, increased sputum

Gastrointestinal disorders: Flatulence

Skin and subcutaneous tissue disorders: Urticaria, angioedema, pruritus

General disorders and administration site conditions: Pain, flu-like syndrome, asthenia, chills

# Reporting of suspected adverse reactions

Reporting suspected adverse reactions after authorisation of the medicinal product is important. It allows continued monitoring of the benefit/risk balance of the medicinal product. Healthcare professionals are asked to report any suspected adverse reactions via the national reporting system listed in Appendix V.

#### 4.9 Overdose

Data on overdose are limited. Adverse reactions reported are consistent with those seen after the recommended dosing.

## 5. PHARMACOLOGICAL PROPERTIES

# 5.1 Pharmacodynamic properties

Pharmacotherapeutic group: Bacterial vaccines, ATC-code: J07AE01

# Mechanism of action

The vaccine contains killed whole *V. cholerae* O1 bacteria and the recombinant non-toxic B-subunit of the cholera toxin (CTB). Bacterial strains of both Inaba and Ogawa serotypes and of El Tor and Classical biotypes are included in the vaccine. Dukoral is taken orally with bicarbonate buffer, which protects the antigens from the gastric acid. The vaccine acts by inducing antibodies against both the bacterial components and CTB. The antibacterial intestinal antibodies prevent the bacteria from attaching to the intestinal wall thereby impeding colonisation of *V. cholerae* O1. The anti-toxin intestinal antibodies prevent the cholera toxin from binding to the intestinal mucosal surface thereby preventing the toxin-mediated diarrhoeal symptoms.

The heat-labile toxin (LT) of enterotoxigenic *E. coli* (ETEC) is structurally, functionally and immunologically similar to CTB. The two toxins cross-react immunologically.

# Efficacy against cholera

Efficacy against cholera was assessed in three randomised double-blind placebo-controlled clinical trials conducted in Bangladesh (endemic region) and in Peru (non-endemic region). The number of patients enrolled, dosage regimens and follow-up periods are shown in the following table.

Study	Year	Dosage regimen	Number	Follow up
location			(Age groups)	
		Cholera		
Bangladesh	1985-88	3 doses at 6 week intervals	89,152	6 months-5 years
			(2-65 years)	
Peru,	1994	2 doses 7-11 days apart	1,563	5 months
military			(18-65 years)	
Peru,	1993-95	2 doses 2 weeks apart with a booster	21,924	2 years
Pampas		dose 1 year later	(2-65 years)	

In the Bangladesh field trial, protective efficacy of Dukoral in the overall population was 85% (95%CI: 56, 95, per-protocol analysis) for the initial 6 months of follow-up. Duration of vaccine protection differed by age, lasting for 6 months in children and for 2 years in adults (see table below). An exploratory analysis suggested that 2 vaccine doses seemed as effective as 3 doses in adults.

Table: Protective efficacy against cholera in the Bangladesh study (per-protocol analysis)

	Protective efficacy, % (95% CI)	
	Adults and children >6	Children 2-6
	year	years
6 months	<b>76</b> (30, 92)	100
1st year	<b>76</b> (60, 85)	<b>44</b> (10, 65)
2 <sup>nd</sup> year	<b>60</b> (36, 76)	<b>33</b> (-23, 64)

In the second trial, conducted in Peru and enrolling military recruits, the short-term protective efficacy against cholera after 2 vaccine doses was 85% (95%CI: 36, 97, per-protocol analysis). The third study, a field trial conducted in Peru, failed to show any protective efficacy against cholera during the first year. Following a booster dose 10-12 months after primary immunisation, the protective efficacy during the second year was 60.5% (95%CI: 28,79).

Protective effectiveness against cholera was evaluated during two mass-vaccination campaigns conducted in Mozambique (December 2003 – January 2004) and Zanzibar (February 2009 – May 2010).

In the case-control study conducted during the mass vaccination campaign in Mozambique, protective effectiveness of 2 doses of Dukoral was 84% (95% CI: 43, 95, per-protocol analysis; p=0.005) for the initial 5 months of follow-up.

In the longitudinal cohort-analysis conducted during the mass-vaccination campaign in Zanzibar, protective effectiveness after 2 doses of Dukoral was 79% (95% CI, 47, 92) for a follow-up period of 15 months. In addition to the direct protection, it was shown that Dukoral provides significant indirect (herd) protection in the studied setting.

Protective efficacy of Dukoral against cholera has not been studied following repeated booster vaccination.

# **Immunogenicity**

No established immunological correlates of protection against cholera after oral vaccination have been identified. There is a poor correlation between serum antibody responses, including vibriocidal antibody response, and protection. Locally produced secretory IgA antibodies in the intestine probably mediate protective immunity.

The vaccine induced intestinal antitoxin IgA responses in 70-100% of vaccinated subjects. Serum vibriocidal antibodies against the bacterial components were seen in 35-55% of vaccinated subjects and antitoxic antibodies in 78-87% of vaccinated subjects. A booster dose elicited an anamnestic response indicative of an immune memory. The duration of the immunological memory was estimated to last for at least 2 years in adults.

# 5.2 Pharmacokinetic properties

Not applicable.

# 5.3 Preclinical safety data

No preclinical safety testing with the vaccine has been conducted.

# 6. PHARMACEUTICAL PARTICULARS

# 6.1 List of excipients

- suspension for oral suspension:

Sodium dihydrogen phosphate dihydrate Disodium hydrogen phosphate dihydrate Sodium chloride Water for injections

- powder for oral suspension in a sachet:

Sodium hydrogen carbonate Citric acid Sodium carbonate, anhydrous Saccharin sodium Sodium citrate Raspberry flavour

# 6.2 Incompatibilities

In the absence of compatibility studies, this medicinal product must not be mixed with other medicinal products.

#### 6.3 Shelf life

3 years.

After the effervescent powder has been dissolved in water and the vaccine suspension has been added, the mixture should be drunk within 2 hours.

# 6.4 Special precautions for storage

Store in a refrigerator  $(2^{\circ}C - 8^{\circ}C)$ . Do not freeze.

Product in the unopened vial and sachet, stored in the outer carton, is stable at temperatures up to 25°C for a period of 14 days. At the end of this period the product should be used or discarded.

For storage conditions after first opening of the medicinal product, see section 6.3.

#### 6.5 Nature and contents of container

The vaccine suspension is filled in a volume of 3 ml in vials (type I glass) with a rubber stopper (bromobutyl rubber) and a screw cap.

The effervescent powder is filled in an amount of 5.6 g in sachets with an inner layer of polyester/LD-polyethylene and an outer layer of aluminium/LD-polyethylene.

Each dose of vaccine is supplied as one vial of suspension together with one sachet of effervescent powder.

Pack sizes: 1x1 dose, 2x1 dose, 20x1 dose Not all pack sizes may be marketed.

# 6.6 Special precautions for disposal and other handling

The effervescent powder should be dissolved in approximately 150 ml of cool water to get the buffer solution. The vaccine vial should be shaken gently and the vaccine suspension should then be added to the buffer solution and mixed well to get the colourless slightly opalescent oral suspension.

Children 2 to below 6 years of age: half of the buffer solution is poured away and the remaining part (approx. 75 ml) is mixed with the entire contents of the vaccine vial.

Any unused medicinal product or waste material should be disposed of in accordance with local requirements.

# 7. MARKETING AUTHORISATION HOLDER

Valneva Sweden AB S-105 21 Stockholm Sweden +46 (0)8 735 1000 infodukoral@valneva.com

# 8. MARKETING AUTHORISATION NUMBER(S)

EU/1/03/263/001-003

#### 9. DATE OF FIRST AUTHORISATION/RENEWAL OF THE AUTHORISATION

Date of first authorisation: 28 April 2004 Date of latest renewal: 25 March 2009

# 10. DATE OF REVISION OF THE TEXT

MM/YYYY

Detailed information on this medicinal product is available on the website of the European Medicines Agency (EMA) <a href="http://www.ema.europa.eu/">http://www.ema.europa.eu/</a>.

#### **ANNEX II**

- A. MANUFACTURERS OF THE BIOLOGICAL ACTIVE SUBSTANCES AND MANUFACTURER RESPONSIBLE FOR BATCH RELEASE
- B. CONDITIONS OR RESTRICTIONS REGARDING SUPPLY AND USE
- C. OTHER CONDITIONS AND REQUIREMENTS OF THE MARKETING AUTHORISATION
- D. CONDITIONS OR RESTRICTIONS WITH REGARD TO THE SAFE AND EFFECTIVE USE OF THE MEDICINAL PRODUCT

# A. MANUFACTURERS OF THE BIOLOGICAL ACTIVE SUBSTANCES AND MANUFACTURER RESPONSIBLE FOR BATCH RELEASE

Name and address of the manufacturers of the biological active substances

Valneva Sweden AB Gunnar Asplunds allé 16 SE-171 69 Solna Sweden

Name and address of the manufacturer responsible for batch release

Valneva Sweden AB Gunnar Asplunds allé 16 SE-171 69 Solna Sweden

#### B. CONDITIONS OR RESTRICTIONS REGARDING SUPPLY AND USE

Medicinal product subject to medical prescription.

#### • Official batch release

In accordance with Article 114 of Directive 2001/83/EC, the official batch release will be undertaken by a state laboratory or a laboratory designated for that purpose

# C. OTHER CONDITIONS AND REQUIREMENTS OF THE MARKETING AUTHORISATION

The holder of this marketing authorisation must inform the European Commission about the marketing plans for the medicinal product authorised by this decision.

# • Periodic Safety Update Reports (PSURs)

The requirements for submission of periodic safety update reports for this medicinal product are set out in the list of Union reference dates (EURD list) provided for under Article 107c(7) of Directive 2001/83/EC and any subsequent updates published on the European medicines web-portal.

# D. CONDITIONS OR RESTRICTIONS WITH REGARD TO THE SAFE AND EFFECTIVE USE OF THE MEDICINAL PRODUCT

# • Risk Management Plan (RMP)

Not applicable.

# ANNEX III

# LABELLING AND PACKAGE LEAFLET

A. LABELLING

#### PARTICULARS TO APPEAR ON THE OUTER PACKAGING

DUKORAL – 1 dose package, 2x1 dose package, 20x1 dose package (outer sleeve)

# 1. NAME OF THE MEDICINAL PRODUCT

DUKORAL suspension and effervescent powder for oral suspension Cholera vaccine (inactivated, oral)

# 2. STATEMENT OF ACTIVE SUBSTANCES

Active substances: 1 dose contains

- 31.25x10<sup>9</sup> bacteria\* of each of the following *V. cholerae* O1 strains: Inaba classical biotype (heat inactivated), Inaba El Tor biotype (formalin inactivated), Ogawa classical biotype (heat inactivated), Ogawa classical biotype (formalin inactivated).
- Recombinant cholera toxin B subunit (rCTB) 1 mg.

#### 3. LIST OF EXCIPIENTS

Contains sodium. See the package leaflet for further information.

#### 4. PHARMACEUTICAL FORM AND CONTENTS

3 ml of suspension in a vial and 5.6 g of effervescent powder in a sachet.

1 dose

2x1 dose

20x1 dose

# 5. METHOD AND ROUTE(S) OF ADMINISTRATION

For oral use.

Mix suspension with buffer solution before drinking.

Read the package leaflet before use.

# 6. SPECIAL WARNING THAT THE MEDICINAL PRODUCT MUST BE STORED OUT OF THE REACH AND SIGHT OF CHILDREN

Keep out of the reach and sight of children.

# 7. OTHER SPECIAL WARNING(S), IF NECESSARY

#### 8. EXPIRY DATE

<sup>\*</sup>bacterial content prior to inactivation

9. SPECIAL STORAGE CONDITIONS

Store in a refrigerator. Do not freeze.
10. SPECIAL PRECAUTIONS FOR DISPOSAL OF UNUSED MEDICINAL PRODUCTS OR WASTE MATERIALS DERIVED FROM SUCH MEDICINAL PRODUCTS, IF APPROPRIATE
11. NAME AND ADDRESS OF THE MARKETING AUTHORISATION HOLDER
Valneva Sweden AB 105 21 Stockholm, Sweden
12. MARKETING AUTHORISATION NUMBER(S)
EU/1/03/263/001 1 dose EU/1/03/263/002 2x1 dose EU/1/03/263/003 20x1 dose
13. BATCH NUMBER
Lot
14. GENERAL CLASSIFICATION FOR SUPPLY
Medicinal product subject to medical prescription.
15. INSTRUCTIONS ON USE
16. INFORMATION IN BRAILLE
DUKORAL
17. UNIQUE IDENTIFIER
2D barcode carrying the unique identifier included.

# PC: SN: NN: PARTICULARS TO APPEAR ON THE IMMEDIATE PACKAGING DUKORAL – 20x1 dose package (inner carton for 20 vaccine vials) 1. NAME OF THE MEDICINAL PRODUCT DUKORAL suspension Cholera vaccine (inactivated, oral) 2. STATEMENT OF ACTIVE SUBSTANCES Active substances: 1 dose contains — 31.25x109 bacteria\* of each of the following V. cholerae O1 strains: Inaba classical biotype (heat

inactivated), Inaba El Tor biotype (formalin inactivated), Ogawa classical biotype (heat

UNIQUE IDENTIFIER - HUMAN READABLE DATA

# 3. LIST OF EXCIPIENTS

\*bacterial content prior to inactivation

Contains sodium. See the package leaflet for further information.

inactivated), Ogawa classical biotype (formalin inactivated).

Recombinant cholera toxin B subunit (rCTB) 1 mg.

# 4. PHARMACEUTICAL FORM AND CONTENTS

3 ml of suspension in a vial.

20x1 dose.

18.

# 5. METHOD AND ROUTE(S) OF ADMINISTRATION

For oral use.

Mix suspension with buffer solution before drinking.

Read the package leaflet before use.

# 6. SPECIAL WARNING THAT THE MEDICINAL PRODUCT MUST BE STORED OUT OF THE REACH AND SIGHT OF CHILDREN

Keep out of the reach and sight of children.

# 7. OTHER SPECIAL WARNING(S), IF NECESSARY

9. SPECIAL STORAGE CONDITIONS  Store in a refrigerator. Do not freeze.  10. SPECIAL PRECAUTIONS FOR DISPOSAL OF UNUSED MEDICINAL PRODUCTS OR WASTE MATERIALS DERIVED FROM SUCH MEDICINAL PRODUCTS, IF APPROPRIATE  11. NAME AND ADDRESS OF THE MARKETING AUTHORISATION HOLDER  Valneva Sweden AB 105 21 Stockholm, Sweden  12. MARKETING AUTHORISATION NUMBER(S)  EU/1/03/263/003  13. BATCH NUMBER  Lot  14. GENERAL CLASSIFICATION FOR SUPPLY  Medicinal product subject to medical prescription.  15. INSTRUCTIONS ON USE	8.	EXPIRY DATE
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Valneva Sweden AB 105 21 Stockholm, Sweden  12. MARKETING AUTHORISATION NUMBER(S)  EU/1/03/263/003  13. BATCH NUMBER  Lot  14. GENERAL CLASSIFICATION FOR SUPPLY  Medicinal product subject to medical prescription.  15. INSTRUCTIONS ON USE	10.	OR WASTE MATERIALS DERIVED FROM SUCH MEDICINAL PRODUCTS, IF
Valneva Sweden AB 105 21 Stockholm, Sweden  12. MARKETING AUTHORISATION NUMBER(S)  EU/1/03/263/003  13. BATCH NUMBER  Lot  14. GENERAL CLASSIFICATION FOR SUPPLY  Medicinal product subject to medical prescription.  15. INSTRUCTIONS ON USE		
12. MARKETING AUTHORISATION NUMBER(S)  EU/1/03/263/003  13. BATCH NUMBER  Lot  14. GENERAL CLASSIFICATION FOR SUPPLY  Medicinal product subject to medical prescription.  15. INSTRUCTIONS ON USE	11.	NAME AND ADDRESS OF THE MARKETING AUTHORISATION HOLDER
EU/1/03/263/003  13. BATCH NUMBER  Lot  14. GENERAL CLASSIFICATION FOR SUPPLY  Medicinal product subject to medical prescription.  15. INSTRUCTIONS ON USE		
13. BATCH NUMBER  Lot  14. GENERAL CLASSIFICATION FOR SUPPLY  Medicinal product subject to medical prescription.  15. INSTRUCTIONS ON USE	12.	MARKETING AUTHORISATION NUMBER(S)
14. GENERAL CLASSIFICATION FOR SUPPLY  Medicinal product subject to medical prescription.  15. INSTRUCTIONS ON USE	EU/	1/03/263/003
14. GENERAL CLASSIFICATION FOR SUPPLY  Medicinal product subject to medical prescription.  15. INSTRUCTIONS ON USE	13.	BATCH NUMBER
Medicinal product subject to medical prescription.  15. INSTRUCTIONS ON USE	Lot	
15. INSTRUCTIONS ON USE	14.	GENERAL CLASSIFICATION FOR SUPPLY
	Med	licinal product subject to medical prescription.
	15.	INSTRUCTIONS ON USE
16. INFORMATION IN BRAILLE		
	16.	INFORMATION IN BRAILLE

Justification for not including Braille accepted

PARTICULARS TO APPEAR ON THE IMMEDIATE PACKAGING	
DUKORAL – 20x1 dose package (inner carton for 20 sodium hydrogen carbonate sachets)	
1. NAME OF THE MEDICINAL PRODUCT	
Sodium hydrogen carbonate Effervescent powder	
2. STATEMENT OF ACTIVE SUBSTANCES	
3. LIST OF EXCIPIENTS	
Contains sodium. See the package leaflet for further information.	
4. PHARMACEUTICAL FORM AND CONTENTS	
20 x 5.6 g	
5. METHOD AND ROUTE(S) OF ADMINISTRATION	
To be used with DUKORAL. For oral use. Read the package leaflet before use.	
6. SPECIAL WARNING THAT THE MEDICINAL PRODUCT MUST BE STORED OUT OF THE REACH AND SIGHT OF CHILDREN	
Keep out of the reach and sight of children.	
7. OTHER SPECIAL WARNING(S), IF NECESSARY	
8. EXPIRY DATE	
EXP MM/YYYY	
9. SPECIAL STORAGE CONDITIONS	

APPROPRIATE

SPECIAL PRECAUTIONS FOR DISPOSAL OF UNUSED MEDICINAL PRODUCTS OR WASTE MATERIALS DERIVED FROM SUCH MEDICINAL PRODUCTS, IF

11. NAME AND ADDRESS OF THE MARKETING AUTHORISATION HOLDER
Valneva Sweden AB 105 21 Stockholm, Sweden
12. MARKETING AUTHORISATION NUMBER(S)
EU/1/03/263/003
13. BATCH NUMBER
Lot
14. GENERAL CLASSIFICATION FOR SUPPLY
15. INSTRUCTIONS ON USE
16. INFORMATION IN BRAILLE
Justification for not including Braille accepted.

MINIMUM PARTICULARS TO APPEAR ON SMALL IMMEDIATE PACKAGING UNITS		
DUKORAL, vial label 1 dose		
1. NAME OF THE MEDICINAL PRODUCT AND ROUTE(S) OF ADMINISTRATION		
DUKORAL suspension Oral use.		
2. METHOD OF ADMINISTRATION		
Read the package leaflet before use.		
3. EXPIRY DATE		
EXP MM/YYYY		
4. BATCH NUMBER		
Lot		
5. CONTENTS BY WEIGHT, BY VOLUME OR BY UNIT		
1 dose (3 ml)		
6. OTHER		

MINIMUM PARTICULARS TO APPEAR ON SMALL IMMEDIATE PACKAGING UNITS		
Sodium hydrogen carbonate 5.6 g, sachet		
1. NAME OF THE MEDICINAL PRODUCT AND ROUTE(S) OF ADMINISTRATION		
Sodium hydrogen carbonate effervescent powder Oral use.		
2. METHOD OF ADMINISTRATION		
To be used with DUKORAL. Read the package leaflet before use.		
3. EXPIRY DATE		
EXP MM/YYYY		
4. BATCH NUMBER		
Lot		
5. CONTENTS BY WEIGHT, BY VOLUME OR BY UNIT		
5.6 g		
6. OTHER		
Valneva Sweden AB, Sweden		

**B. PACKAGE LEAFLET** 

#### PACKAGE LEAFLET: INFORMATION FOR THE USER

### **DUKORAL** suspension and effervescent powder for oral suspension

Cholera vaccine (inactivated, oral)

# Read all of this leaflet carefully before you start using this vaccine because it contains important information for you.

- Keep this leaflet. You may need to read it again.
- If you have any further questions, ask your doctor, nurse or pharmacist.
- This vaccine has been prescribed for you only. Do not pass it on to others.
- If you get any side effects, talk to your doctor, pharmacist or nurse. This includes any possible side effects not listed in this leaflet. See Section 4.
- Make sure to mix the vaccine with buffer solution as described in this leaflet. See Section 3.

#### What is in this leaflet:

- 1. What Dukoral is and what it is used for
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#### 1. What Dukoral is and what it is used for

Dukoral is an oral vaccine against cholera that stimulates the immunological defence in the gut. The vaccine protects adults and children from 2 years of age against cholera.

Dukoral causes your body to produce its own protection against cholera. After getting the vaccine, your body will make substances called antibodies, which fight the cholera bacteria and toxin that cause diarrhoea.

# 2. What you need to know before you use Dukoral

#### Do not use Dukoral

- if you are allergic to any ingredient of the vaccine or to formaldehyde.
- if you have an acute stomach disorder or infection with fever (vaccination should be delayed).

# Warnings and precautions

Talk to your doctor before taking Dukoral

- if you take a medical treatment that affects the immune system
- if you have a disease of the immune system (including HIV infection).

The vaccine may provide you with a lower level of protection than it does for people with healthy immune systems.

The vaccine does not provide complete protection and it is important to adhere to dietary and hygiene advice to avoid diarrhoeal diseases.

#### Children

Do not give this vaccine to children younger than 2 years since the protection has not been studied in this group.

#### Other medicines and Dukoral

Please tell your doctor if you are taking or have recently taken any other medicines.

Do not take other medicine starting 1 hour before until 1 hour after taking the vaccine.

## Using Dukoral with food and drink

Avoid food and drink starting 1 hour before until 1 hour after the vaccination.

# Pregnancy and breast-feeding

If you are pregnant, think you may be pregnant or are planning to have a baby or are breast-feeding, ask your doctor before taking the vaccine.

#### **Driving and using machines**

There are no reasons to suspect that Dukoral will affect your ability to drive or handle machines

#### **Dukoral contains sodium**

Dukoral contains approximately 1.1 g sodium per dose. Please take this into consideration if you are on a controlled sodium diet.

#### 3. How to use Dukoral

Always use this medicine exactly as described in this leaflet or as your doctor has told you. Check with your doctor if you are not sure.

Adults and children from 6 years of age: The primary vaccination is 2 doses taken orally (by mouth) at least 1 week (up to 6 weeks) apart.

- Take the 1<sup>st</sup> dose no later than 2 weeks before you leave for your trip.
- Take the 2<sup>nd</sup> dose at least 1 week after the 1<sup>st</sup> dose and at least 1 week before your trip.

It takes about 1 week after the last dose for protection to begin.

For continuous protection, re-vaccination is recommended within 2 years. If you had your last dose of vaccine less than 2 years ago a single dose will renew your protection. If more than 2 years have passed since you had the last vaccine dose, the primary vaccination (2 doses) should be repeated.

Children of 2 to below 6 years of age: The primary vaccination is 3 doses taken orally (by mouth) at least 1 week (up to 6 weeks) apart. Only half of the amount of the buffer solution should be mixed with the vaccine.

- Give the 1<sup>st</sup> dose to the child no later than 3 weeks before you leave for your trip.
- Give the 2<sup>nd</sup> dose to the child at least 1 week after the 1<sup>st</sup> dose.
- Give the 3<sup>rd</sup> dose at least one week after the 2<sup>nd</sup> dose and at least one week before your trip.

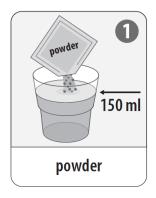
It takes about 1 week after the last dose for protection to begin.

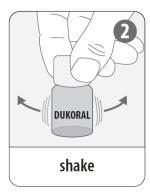
For continuous protection, re-vaccination is recommended within 6 months. If less than 6 months have passed since the last vaccination a single dose will renew the protection. If more than 6 months have passed since the last vaccination, the primary vaccination (3 doses) should be repeated.

The suspensionsupplied in a single-dose glass vial is a whitish suspension. Each vial comes with one sachet package that contains a white effervescent powder of sodium hydrogen carbonate. The effervescent powder should be dissolved in a glass of cool water, and the resulting buffer solution should be mixed with the suspension. It is important to use the buffer solution, as it protects the vaccine from the gastric acid.

Drink the entire mixture within 2 hours after mixing with the buffer solution.

# Instructions for use:









1. To prepare the buffer solution, dissolve the effervescent powder in a glass of cool water (approx. 150 ml) by gently stirring.

Do not use any other liquid.

For children of 2 to below6 years: pour away half of the buffer solution.

- 2. Shake the Dukoral® suspension vial (1 vial = 1 dose).
- 3. Pour the content of the Dukoral® suspension vial into the glass of buffer solution (see 1). Mix by gently stirring.
- 4. Drink the entire mixture within 2 hours. Avoid food and drink starting 1 hour before until 1 hour after drinking the mixture.

# If you take more Dukoral than you should

If you take the doses less than one week apart, contact your doctor, pharmacist or nurse.

Because each vial of Dukoral contains only one dose, overdosage is unlikely.

If you have taken more than one dose at one time, please contact your doctor, pharmacist or nurse.

# If you forget to take Dukoral.

You can take the 2nd dose of Dukoral up to 6 weeks after the 1st dose (children of 2 to below 6 years have to take 3 doses). If more than 6 weeks have passed, contact your doctor, pharmacist or nurse.

If you have any further questions on the use of this vaccine, ask your doctor, pharmacist or nurse.

## 4. Possible side effects

Like all medicines, Dukoral can cause side effects, although not everybody gets them. Contact a doctor immediately if you experience the following serious side effects:

- severe diarrhoea with loss of water from the body
- serious allergic reactions causing swelling of the face or throat and breathlessness

#### Other side effects:

Uncommon side effects (may affect up to 1 in a 100 people)

- Diarrhoea, stomach pain, stomach cramps, gurgling stomach, bloated stomach, stomach gas and general stomach discomfort
- Headache

Rare side effects (may affect up to 1 in a 1,000 people)

- Fever
- Generally feeling unwell, feeling dizzy
- Nausea (feeling sick), vomiting, loss of /or poor appetite

• Swelling irritation inside the nose, and cough.

Very rare side effects (may affect up to 1 in a 10,000 people)

- Rash
- Sore throat, reduced sense of taste
- Fatigue/feeling tired
- Sweating, shivering
- Joint pain
- Difficulty in sleeping

Other side effects (frequency cannot be estimated from the available data)

- Flu -like symptoms, chestiness, chills, general pain, weakness
- Hives, itching
- Swelling of the lymph glands
- Numbness or pins and needles
- High blood pressure

# Reporting of side effects

If you get any side effects, talk to your doctor, nurse or pharmacist. This includes any possible side effects not listed in this leaflet. You can also report side effects directly via the national reporting system listed in Appendix  $V^*$ . By reporting side effects you can help provide more information on the safety of this medicine.

#### 5. How to store Dukoral

Keep this medicine out of the sight and reach of children.

Do not use Dukoral after the expiry date which is stated on the carton after EXP. The expiry date refers to the last day of that month.

Store in a refrigerator ( $2^{\circ}C - 8^{\circ}C$ ). Do not freeze.

Product in the unopened vial and sachet, stored in the outer carton, is stable at temperatures up to 25°C for a period of 14 days. At the end of this period the product should be used or discarded.

Do not throw away any medicines via wastewater or household waste. Ask your pharmacist how to throw away medicines you no longer use. These measures will help protect the environment.

# 6. Contents of the pack and other information

# What Dukoral contains

- The active substances are:
  - $31.25 \times 10^9$  bacteria\* of each of the following *V. cholerae* O1 strains: Inaba classical biotype (heat inactivated), Inaba El Tor biotype (formalin inactivated), Ogawa classical biotype (heat inactivated), Ogawa classical biotype (formalin inactivated).

Recombinant cholera toxin B subunit (rCTB) 1 mg.

- \*bacterial content prior to inactivation
- The other ingredients in the vaccine suspension are sodium dihydrogen phosphate, disodium hydrogen phosphate, sodium chloride and water for injections.
- The effervescent powder contains sodium hydrogen carbonate, citric acid, sodium carbonate, saccharin sodium, sodium citrate and raspberry flavour.

## What Dukoral looks like and contents of the pack

Dukoral is presented as a suspension and effervescent powder for oral suspension. The suspension is a whitish suspension supplied in a vial. The effervescent powder is white with a raspberry flavour and is supplied in a sachet.

Dukoral is available in packs of 1, 2 and 20 doses. Not all pack sizes may be marketed.

# **Marketing Authorisation Holder**

Valneva Sweden AB, 105 21 Stockholm, Sweden. infodukoral@valneva.com

#### Manufacturer

Valneva Sweden AB, Gunnar Asplunds allé 16, SE-171 69 Solna, Sweden.

#### This leaflet was last revised in MM/YYYY

#### Other sources of information

Detailed information on this medicine is available on the European Medicines Agency web site: <a href="http://www.ema.europa.eu">http://www.ema.europa.eu</a>

This leaflet is available in all EU/EEA languages on the European Medicines Agency website.