Influvac Tetra 2020/21

1. NAME OF THE MEDICINAL PRODUCT

Influvac Tetra, suspension for injection in pre-filled syringe
(influenza vaccine, surface antigen, inactivated).

2. QUALITATIVE AND QUANTITATIVE COMPOSITION

Influenza virus surface antigens (inactivated) (haemagglutinin and neuraminidase) of the following strains*:

- A/Guangdong-Maonan/SWL1536/2019 (H1N1)pdm09-like strain (A/Guangdong-Maonan/SWL1536/2019, CNIC-1909)	15 micrograms HA **
- A/Hong Kong/2671/2019 (H3N2)-like strain (A/Hong Kong/2671/2019, IVR-208)	15 micrograms HA **
- B/Washington/02/2019 -like strain (B/Washington/02/2019, wild type)	15 micrograms HA **
- B/Phuket/3073/2013-like strain (B/Phuket/3073/2013, wild type)	15 micrograms HA ** per 0.5 ml dose

* propagated in fertilised hens' eggs from healthy chicken flocks
** haemagglutinin.

This vaccine complies with the World Health Organisation (WHO) recommendation (northern hemisphere) and EU recommendation for the 2020/2021 season.

For a full list of excipients see section 6.1.

Influvac Tetra may contain traces of eggs (such as ovalbumin, chicken proteins), formaldehyde, cetyltrimethylammonium bromide, polysorbate 80 or gentamicin, which are used during the manufacturing process (see section 4.3).

3. PHARMACEUTICAL FORM

Suspension for injection in pre-filled syringe.
A colourless clear liquid, filled in single-dose syringes.

4. CLINICAL PARTICULARS

4.1 Therapeutic indications

Prophylaxis of influenza, especially those who run an increased risk of associated

complications.

Influvac Tetra is indicated in adults (18 years of age and older).
The use of Influvac Tetra should be based on official recommendations

4.2 Posology and method of administration

Posology
Adults: 0.5 ml.

Paediatric population

Children and adolescents: the safety and efficacy of Influvac Tetra in children and adolescents below 18 years of age have not been established.

Method of Administration
Immunisation should be carried out by intramuscular or deep subcutaneous injection.

Precautions to be taken before handling or administrating the medicinal product:

For instructions for preparation of the medicinal product before administration, see section 6.6.

4.3 Contraindications

Hypersensitivity to the active substances, to any of the excipients listed in section 6.1 or to any component that may be present as traces such as eggs (ovalbumin, chicken proteins), formaldehyde, cetyltrimethylammonium bromide, polysorbate 80 or gentamicin.

Immunisation shall be postponed in patients with febrile illness or acute infection.

4.4. Special warnings and precautions for use

As with all injectable vaccines, appropriate medical treatment and supervision should always be readily available in case of an anaphylactic event following the administration of the vaccine.

Influvac Tetra should under no circumstances be administered intravascularly.

As with other vaccines administered intramuscularly, Influvac Tetra should be given with caution to individuals with thrombocytopenia or any coagulation disorder since bleeding may occur following an intramuscular administration to these subjects.

Anxiety-related reactions, including vasovagal reactions (syncope), hyperventilation or stress-related reactions can occur following, or even before, any vaccination as a psychogenic response to the needle injection. This can be accompanied by several neurological signs such as transient visual disturbance, paraesthesia and tonic-clonic limb movements during recovery. It is important that procedures are in place to avoid injury from faints.

Influvac Tetra is not effective against all possible strains of influenza virus. Influvac Tetra is intended to provide protection against those strains of virus from which the vaccine is prepared and to closely related strains.

As with any vaccine, a protective response may not be elicited in all vaccines.

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

Interference with serological testing: see section 4.5.
This medicine contains less than 1 mmol sodium (23 mg) per dose, i.e. essentially 'sodium-free'.
This medicine contains potassium, less than 1 mmol (39 mg) per dose, i.e. essentially 'potassium-free'.

4.5 Interaction with other medicinal products and other forms of interaction

No interaction studies have been performed. If Influvac Tetra is given at the same time as other vaccines, immunisation should be carried out on separate limbs. It should be noted that the adverse reactions may be intensified.

The immunological response may be diminished if the patient is undergoing immunosuppressant treatment.

Following influenza vaccination, false positive results in serology tests using the ELISA method to detect antibodies against HIV1, Hepatitis C and especially HTLV1 have been observed. The Western Blot technique disproves the false-positive ELISA test results. The transient false-positive reactions could be due to the IgM response by the vaccine.

4.6 Fertility, pregnancy and lactation

Pregnancy
Inactivated influenza vaccines can be used in all stages of pregnancy. Larger datasets on safety are available for the second and third trimester, compared with the first trimester; however, data from worldwide use of influenza vaccine do not indicate any adverse foetal and maternal outcomes attributable to the vaccine.

Breast-feeding
Influvac Tetra may be used during breast-feeding.

Fertility
No fertility data are available.

4.7 Effects on ability to drive and use machines

Influvac Tetra has no or negligible influence on the ability to drive and use machines.

4.8 Undesirable effects

a. Summary of the safety profile

Safety data regarding the use of Influvac Tetra are based on a clinical study in healthy adults 18 years of age and older: Influvac Tetra was administered to 1535 subjects (768 adults aged 18 - 60 years of age and 767 elderly aged 61 years or older) and trivalent influenza vaccine Influvac to 442 subjects (222 adults aged 18 - 60 years of age and 220 elderly aged 61 years or older).
Similar rates of solicited adverse reactions were observed in recipients of Influvac Tetra and trivalent influenza vaccine Influvac.
The most frequently reported local adverse reaction after vaccination observed in the clinical study for Influvac Tetra was vaccination site pain (16.3%).
The most frequently reported general adverse reactions after vaccination observed in the clinical study for Influvac Tetra were fatigue (11.2%) and headache (10.3%).

b. Tabulated summary of adverse reactions

The following undesirable effects are considered at least possibly related to Influvac Tetra and have either been observed during the clinical trials with Influvac Tetra or are resulting from post-marketing experience with the trivalent influenza vaccine Influvac.

The following frequencies apply:
very common (≥1/10); common (≥1/100, <1/10); uncommon (≥1/1,000, <1/100); and not known (adverse reactions from post-marketing experience; cannot be estimated from the available data).

Adults and elderly

Adverse Reactions Reported with Influvac Tetra/Influvac				
MedDRA System Organ Class	**Very common ≥ 1/10**	**Common ≥ 1/100 to < 1/10**	**Uncommon ≥ 1/1,000 to < 1/100**	**Not Known[a] (cannot be estimated from the available data)**
Blood and lymphatic system				Transient thrombocytopenia, transient lymphadenopathy
Immune system disorders				Allergic reactions, in rare cases leading to shock, angioedema
Nervous system disorders	Headache[b]			Neuralgia, paraesthesia, febrile convulsions, neurological disorders, such as encephalomyelitis, neuritis and Guillain Barré syndrome
Vascular disorders				Vasculitis associated in very rare cases with transient renal involvement
Skin and subcutaneous tissue disorders		Sweating		Generalised skin reactions including pruritus, urticaria or non-specific rash
Musculoskeletal and connective tissue disorders		Myalgia, arthralgia		
General disorders and administration site conditions	Fatigue Local reaction: pain	Malaise, shivering Local reactions: redness, swelling, ecchymosis, induration	Fever	

[a] Because these reactions are reported voluntarily from a population of uncertain size, it is not possible to reliably estimate their frequency or establish a causal relationship to drug exposure.
[b] In elderly adults (≥ 61 years) reported as common

Reporting of suspected adverse reactions

Reporting suspected adverse reactions after authorization of the medicinal product is important. It allows continued monitoring of the benefit/risk balance of the medicinal product.

Any suspected adverse events should be reported to the Ministry of Health according to the National Regulation by using an online form

http://sideeffects.health.gov.il

4.9 Overdose

Overdosage is unlikely to have any untoward effect.

5. PHARMACOLOGICAL PROPERTIES

5.1. Pharmacodynamic properties

Pharmacotherapeutic group: Influenza vaccine, ATC Code: J07BB02.

Mechanism of action:
Influvac Tetra provides active immunisation against four influenza virus strains: an A/(H1N1) strain, an A/(H3N2) strain, and two B strains (one from each lineage; B/(Victoria) and B/(Yamagata)). Influvac Tetra, manufactured according to the same process as trivalent influenza vaccine Influvac, induces humoral antibodies against the haemagglutinins. These antibodies neutralise influenza viruses.
Specific levels of hemagglutination-inhibition (HI) antibody titer post-vaccination with inactivated influenza virus vaccines have not been correlated with protection from influenza illness but the HI antibody titers have been used as a measure of vaccine activity.
An immune response is generally obtained within 2 to 3 weeks. The duration of postvaccinal immunity to homologous strains or to strains closely related to the vaccine strains varies but is usually 6-12 months.

Pharmacodynamic effects:
Immunogenicity of Influvac Tetra compared to trivalent Influvac:
A clinical study performed in adults 18 years of age and older (INFQ3001) assessed the safety and immunogenicity of Influvac Tetra and its non-inferiority to trivalent influenza vaccine Influvac for HI Geometric mean antibody titer (GMT) at Day 22.
In the study the immune response elicited by Influvac Tetra against the three strains in common was non-inferior to trivalent influenza vaccine Influvac. Influvac Tetra elicited a superior immune response against the additional B strain included in Influvac Tetra compared to trivalent influenza vaccine Influvac.

Adults 18 years of age and older:
In clinical study INFQ3001, 1,535 adults of 18 years of age and older received a single dose of Influvac Tetra and 442 subjects received a single dose of trivalent Influvac:

Table: Post-vaccination GMT

Adults 18 – 60 years of age	Influvac Tetra N=768	Influvac[1] N=112	Influvac[2] N=110
	GMT (95% confidence interval)		
A/H1N1	272.2 (248.0 , 298.8)	304.4 (235.1 , 394.1)	316.0 (245.1 , 407.3)
A/H3N2	442.4 (407.6 , 480.2)	536.5 (421.7 , 682.6)	417.0 (323.7 , 537.1)
B (Yamagata)[3]	162.5 (147.8 , 178.7)	128.7 (100.3 , 165.2)	81.7 (60.7 , 109.9)
B (Victoria)[4]	214.0 (195.5 , 234.3)	85.1 (62.6 , 115.6)	184.7 (139.0 , 245.3)

Elderly 61 years of age and older	Influvac Tetra N=765	Influvac[1]	Influvac[2]

		N=108	N=110
	GMT (95% confidence interval)		
A/H1N1	127.2 (114.9 , 140.9)	142.4 (107.6 , 188.3)	174.2 (135.9 , 223.3)
A/H3N2	348.5 (316.8 , 383.5)	361.5 (278.3 , 469.6)	353.4 (280.7 , 445.0)
B (Yamagata)[3]	63.7 (57.7 , 70.4)	57.4 (43.6 , 75.7)	27.3 (20.7 , 36.0)
B (Victoria)[4]	109.4 (98.1 , 122.0)	48.0 (34.6 , 66.6)	106.6 (79.7 , 142.8)

N= number of subjects included in efficacy analysis

[1]containing A/H1N1, A/H3N2 and B (Yamagata lineage)

[2]containing A/H1N1, A/H3N2 and B (Victoria lineage)

[3]recommended B strain by WHO for the season 2014-2015 NH for trivalent vaccines

[4]additional recommended B strain by WHO for season 2014-2015 NH for quadrivalent vaccines

5.2 Pharmacokinetic properties

Not applicable.

5.3 Preclinical safety data

Non-clinical data revealed no special hazard for humans based on conventional studies of repeat dose and local toxicity, reproductive and developmental toxicity and safety pharmacology studies.

6. PHARMACEUTICAL PARTICULARS

6.1 List of excipients

Sodium chloride , disodium phosphate dihydrate, Potassium chloride, potassium dihydrogen phosphate, calcium chloride dihydrate, magnesium chloride hexahydrate and water for injections.

6.2 Incompatibilities

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

6.3 Shelf-life

The expiry date of the product is indicated on the packaging materials.

6.4 Special precautions for storage

Store in a refrigerator **(**2°C - 8°C**)**. Do not freeze.
Store in the original package in order to protect from light.

6.5 Nature and contents of container

0.5 ml suspension for injection in prefilled syringe with or without needle (glass, type I), pack of 1 or 10.
Not all pack sizes may be marketed.

6.6 Special precautions for disposal

The vaccine should be allowed to reach room temperature before use.
Shake before use. Inspect visually prior to administration.
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Any unused product or waste material should be disposed of in accordance with local requirements.

7 . MANUFACTURER

Abbott Biologicals B.V.
Veerweg 12
Olst
The Netherlands

8. LICENSE HOLDER

Abbott Medical Laboratories Ltd.,

Kiryat Atidim, POB 58099, Tel Aviv

9. REGISTRATION NUMBER

162-42-35667

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