Drug News
藥 物 情 報

Issue Number 175

This is a monthly digest of local and overseas drug safety news released by the Drug Office of the Department of Health in May 2024 with relevant information update before publish. For the latest news and information, please refer to public announcements or the website of the Drug Office of the Department of Health (http://www.drugoffice.gov.hk).

Safety Update

Australia: Updated warnings about persistent sexual dysfunction for antidepressants

On 23 May 2024, the Therapeutic Goods Administration (TGA) announced that the Product Information (PI) documents for all selective serotonin reuptake inhibitors (SSRIs) and serotonin and norepinephrine reuptake inhibitors (SNRIs) have been aligned to reflect the risk of sexual dysfunction persisting in some patients after drug cessation.

Sexual dysfunction is a known risk of SSRIs and SNRIs and these medicines already carry this warning. However, the caveat that this effect can persist even after patients stop treatment was not present in some of the PIs in this drug class.

Sexual dysfunction can refer to disorders of sexual drive (reduced or loss of libido), arousal and orgasm, and ejaculation. Patients may also report associated painful intercourse (dyspareunia), prolonged erection (priapism) or genital numbness. These effects can persist for weeks to years and can significantly harm patients' quality of life. Persistent sexual dysfunction after treatment is stopped is thought to be rare. However, these symptoms are likely to be underreported and their prevalence is not currently known.

Medicines in this class include:
- SSRIs – citalopram, escitalopram, fluoxetine, fluvoxamine, paroxetine and sertraline.
- SNRIs – desvenlafaxine, duloxetine and venlafaxine.

TGA has received 89 reports describing sexual dysfunction with an SSRI or SNRI in its Adverse Event Management System database (to April 2024). Of these, 4 described persistent sexual dysfunction after treatment was stopped. The 3 men and one woman ranged in age from 18 to 42. Reported symptoms included difficulty reaching orgasm, weakened orgasms, erectile dysfunction and reduced penile sensation. The effects persisted for 12 months to 3.5 years.

Cases of persistent sexual dysfunction have also been reported globally. One study of SSRIs, SNRIs, finasteride and isotretinoin identified 300 case reports. The majority were associated with SSRIs and SNRIs (218 of 300 cases) with escitalopram, citalopram, paroxetine, sertraline, and fluoxetine accounting for 62% (186 out of 300 cases). Patient ages ranged from 15 years to 66 years with most patients being male (170 males vs 49 females). Duration of treatment ranged from a single dose to more than 16 years. In many cases, sexual dysfunction only presented or became worse when treatment was stopped.

The PIs of all SSRIs and SNRIs already warn of the risk of sexual dysfunction during use of these medicines. Three products – desvenlafaxine, sertraline and venlafaxine – already carry warnings about persistent sexual dysfunction.

Updated warnings were needed for 6 products: citalopram, duloxetine, escitalopram, fluoxetine, fluvoxamine, and paroxetine, as follows:
4.4 Special warnings and precautions for use:
Sexual dysfunction
Selective serotonin reuptake inhibitors (SSRIs)/ serotonin norepinephrine reuptake inhibitors (SNRIs) may cause symptoms of sexual dysfunction (see section 4.8). There have been reports of long-lasting sexual dysfunction where the symptoms have continued despite discontinuation of SSRIs/SNRI.

Health professionals should be alert to this issue and consider if current or previous antidepressant use

could be a factor in patients reporting sexual dysfunction.

In Hong Kong, there are registered pharmaceutical products containing SSRIs and SNRIs, including citalopram (12 products), escitalopram (34 products), fluoxetine (21 products), fluvoxamine (4 products), paroxetine (8 products), sertraline (20 products), desvenlafaxine (5 products), duloxetine (18 products), and venlafaxine (27 products). All products are prescription-only medicines.

As of the end of May 2024, the Department of Health (DH) had received adverse drug reaction with regard to citalopram (2 cases), escitalopram (2 cases), fluoxetine (22 cases), sertraline (5 cases), desvenlafaxine (13 cases), duloxetine (2 cases) and venlafaxine (3 cases), but these cases are not related to sexual dysfunction. The DH had not received any case of adverse drug reaction related to fluvoxamine and paroxetine.

Related news was previously issued by Health Canada and was reported in Drug News Issue No.135. The DH issued letters to inform local healthcare professionals to draw their attention on 7 January 2021. In February 2022, the Registration Committee of the Pharmacy and Poisons Board discussed the matter, and decided that the sales pack labels and/or package inserts of locally registered pharmaceutical products containing SSRIs and SNRIs should include safety information about the risk of long-lasting sexual dysfunction. The DH will remain vigilant on any safety update of the drugs issued by other overseas drug regulatory authorities.

Canada: Summary Safety Review: Neulasta (pegfilgrastim): Assessing the potential risks of Stevens-Johnson Syndrome and Toxic Epidermal Necrolysis

On 30 May 2024, Health Canada announced that it has been monitoring the potential risks of Stevens-Johnson Syndrome (SJS) and Toxic Epidermal Necrolysis (TEN) with the use of Neulasta since the EMA's labelling update for pegfilgrastim-containing products in 2020. At that time, it was determined that Health Canada would continue to monitor the potential risks due to the small number of cases reported. In 2023, following additional cases of SJS or TEN reported by the manufacturer, Health Canada initiated a safety review.

SJS and TEN are rare severe skin hypersensitivity reactions characterized by painful blisters and lesions on the skin and mucous membranes that could result in hospitalisation and death.

Health Canada reviewed the available information provided by the manufacturer, and from searches of the Canada Vigilance database, international databases and the scientific literature. Health Canada reviewed 10 cases (1 Canadian and 9 international) of SJS and/or TEN in patients receiving pegfilgrastim. Of those 10 cases, 5 were found to be possibly linked to the use of pegfilgrastim, 3 were unlikely to be linked and 2 (1 Canadian) could not be assessed due to missing information. Health Canada's review of the 10 cases could not conclude whether pegfilgrastim played a role in the SJS and TEN because all cases reviewed included a combination of other drugs previously known to be associated with the development of SJS and TEN, and were missing information to support a reliable association. Health Canada's review of the scientific literature did not identify any cases of SJS or TEN associated with the use of pegfilgrastim.

Health Canada's review of the available information did not find sufficient evidence to support a link between the use of Neulasta and the risks of SJS and TEN. It was determined that the existing product safety information in the Canadian product monograph for Neulasta is appropriate. Therefore, no updates are needed at this time.

In Hong Kong, there are 4 registered pharmaceutical products containing pegfilgrastim. All products are prescription-only medicines. As of the end of May 2024, with regard to pegfilgrastim, the Department of Health (DH) had received one case of adverse drug reaction, but the case was not related to SJS or TEN. The DH will remain vigilant on any safety update of the drug issued by other overseas drug regulatory authorities.

Drug Recall

Batch Recall of Honpo Seirogan Pills

On 2 May 2024, the Department of Health (DH) endorsed a licensed drug wholesaler, namely Leepharm Enterprises Limited (Leepharm), to recall two batches (batch number: BAA9 and JAA9) of Honpo Seirogan Pills (HK-54060) manufactured by a Japan manufacturer, Kyokuto Co. Ltd. (Kyokuto) from the market due to potential quality issue.

The DH received notification from overseas authority on suspension of operations of Kyokuto in pharmaceutical manufacturing and sales business, Kyokuto conducted voluntary recalls for products that were thought to have an impact on quality. In the notification, it was reported that there was no risk of serious health damage caused by the product and there have been no reports of health damage related to the incident. According to available information and after impact assessment, as a precautionary measure, Leepharm is voluntarily recalling the above batches from the market.

The above product, containing creosote, Phellodendron bark, Sophora root and Citrus unshiu peel, is an over-the-counter medicine indicated for relief of occasional diarrhea. According to Leepharm, the above two batches of product have only been imported into Hong Kong in 2019 and supplied to local pharmacies, medicine stores and re-exported to Macau.

As of the end of May 2024, the DH had not received any adverse reaction reports in connection with the above batches of product. A notice was posted in the Drug Office website on 2 May 2024 to alert the public of the product recall. The DH noted that the recall was completed.

A product containing any western drug ingredient must be registered under the Pharmacy and Poisons Ordinance before it can be sold in Hong Kong. Part 1 poisons should be sold at registered pharmacies under the supervision of registered pharmacists. Illegal sale or possession of Part 1 poisons and unregistered pharmaceutical products are offences under the Pharmacy and Poisons Ordinance (Cap. 138). The maximum penalty is a fine of $100,000 and two years' imprisonment for each offence. Antibiotics can only be supplied at registered pharmacies by registered pharmacists or under their supervision and upon a doctor's prescription. They should only be used under the advice of a doctor. Illegal sale or possession of antibiotics are offences under the Antibiotics Ordinance (Cap. 137) and the maximum penalty is a $50,000 fine and one year's imprisonment for each offence.

Under the Import and Export Ordinance (Cap. 60), pharmaceutical products must be imported or exported under and in accordance with an import or export licence issued under the Import and Export Ordinance. Illegal import or export of pharmaceutical products are offences under the Import and Export Ordinance (Cap. 60) and the maximum penalty is a fine of $500,000 and 2 years' imprisonment.

All registered pharmaceutical products should carry a Hong Kong registration number on the package in the format of "HK-XXXXX". The products mentioned in the above incidents were not registered pharmaceutical products under the Ordinance in Hong Kong. Their safety, quality and efficacy cannot be guaranteed. Members of the public were exhorted not to use products of unknown or doubtful composition. They should stop using the aforementioned products immediately if they had them in their possession and to consult healthcare professionals if they felt unwell after taking the products. The products should be destroyed or disposed properly, or submitted to the Department's Drug Office during office hours.

Update on Drug Office's website: You can now search the newly registered medicines in the past year at http://www.drugoffice.gov.hk/eps/drug/newsNRM60/en/healthcare_providers?pageNoRequested=1.

Details of ALL registered pharmaceutical products can still be found in the Drug Office website at http://www.drugoffice.gov.hk/eps/do/en/healthcare_providers/news_informations/

Useful Contact

Drug Complaint:

Tel: 2572 2068
Fax: 3904 1224
E-mail: pharmgeneral@dh.gov.hk

Adverse Drug Reaction (ADR) Reporting:

Tel: 2319 2920
Fax: 2319 6319
E-mail: adr@dh.gov.hk
Link: http://www.drugoffice.gov.hk/adr.html
Post: Clinical Trials and Pharmacovigilance Unit,
Drug Office, Department of Health,
Suite 2002-05, 20/F, AIA Kowloon Tower, Landmark East,
100 How Ming Street,
Kwun Tong, Kowloon

The purpose of Drug News is to provide healthcare professionals with a summary of local and overseas drug safety news released. Healthcare professionals are advised to keep update with the information and provide corresponding advice or therapeutic measure to patients and public.