

CORE SUMMARY OF PRODUCT CHARACTERISTICS

1. NAME OF THE MEDICINAL PRODUCT

Tuberculin PPD RT 23 SSI, 2 T.U./0.1 ml, solution for injection.
Tuberculin PPD RT 23 SSI, 10 T.U./0.1 ml, solution for injection.

2. QUALITATIVE AND QUANTITATIVE COMPOSITION

Tuberculin PPD RT 23 SSI, 2 T.U./0.1 ml, solution for injection:
1 dose = 0.1 ml contains 0.04 microgram Tuberculin PPD.

Tuberculin PPD RT 23 SSI, 10 T.U./0.1 ml, solution for injection:
1 dose = 0.1 ml contains 0.20 microgram Tuberculin PPD.

For excipients, see 6.1.

3. PHARMACEUTICAL FORM

Solution for injection.
Clear, colourless to light yellow solution.

4. CLINICAL PARTICULARS

4.1 Therapeutic indications

Mantoux tuberculin skin testing for diagnostic use in patients infected with tuberculous mycobacteria.

Some countries also recommend tuberculin testing in conjunction with BCG vaccination, either to ensure that only tuberculin-negative individuals are vaccinated or as a post-vaccination test.

4.2 Posology and method of administration

Injection technique

0.1 ml Tuberculin PPD RT 23 SSI should be administered with a 1 ml graduated syringe fitted with a short bevel needle (gauge 25 or 26). The injection should be given strictly intradermally in the middle third of the forearm, as a reaction might be weaker near the wrist or the elbow joint.

The skin is slightly stretched, and the needle point (held almost parallel with the skin surface, bevel upwards) is inserted into the superficial layer of the dermis. The needle should be visible through the epidermis during insertion. The solution is slowly injected and a small papule of 8-10 mm in diameter appear and remains for about 10 minutes. If a papule does not appear the solution has been injected too deeply, and the test should be repeated on the other arm. If the same arm is used the injection site should be separated at least 4 cm from the first injection site.

The injection may result in an induration surrounded by an area of erythema a few hours after the injection.

Dosage and strength

The dosage is always 0.1 ml by strictly intradermal injection.

The strength 2 T.U./0.1 ml is recommended. 10 T.U./0.1 ml may be used for a second test if the first test is negative (less than approx. 6 mm in diameter) and a retest is considered appropriate, refer to section 4.5.

Evaluating the reaction

The reaction should be evaluated 48-72 hours after the injection.

A positive reaction to Tuberculin PPD RT 23 SSI is defined as a flat, uneven, slightly raised induration having a diameter of at least 6 millimetres, surrounded by a more or less defined area of redness. Only the induration is assessed. The diameter of the induration in millimetres are measured transversely to the long axis of the forearm with a clear, flexible, plastic ruler.

HOW TO READ THE MANTOUX TEST		
Diameter of induration in millimetres		
Negative 0-5 mm	Positive 6-14 mm	Strongly positive 15 + mm

A positive reaction indicates a response of the immune system due to one or more of the following reasons:

- a. infection with *Mycobacterium tuberculosis* complex (*M. tuberculosis*, *M. bovis*, *M. africanum* or *M. microti*)
- b. infection with non-tuberculous mycobacteria
- c. previous BCG vaccination (BCG vaccinated persons normally become tuberculin positive after 4-8 weeks)

Reactions with a diameter larger than 15 millimetres are defined as strongly positive and gives a strong indication of infection with *Mycobacterium tuberculosis* complex.

4.3 Contraindications

Tuberculin PPD RT 23 SSI should not be administered to patients known to be hypersensitive to any component of the medicinal product or to patients who previously have experienced a severe skin reaction to Tuberculin products.

4.4 Special warnings and precautions for use

No special precautions need to be considered. Although anaphylaxis is extremely rare, facilities for its management should always be available during skin testing.

Repeated tuberculin skin testing in patients previously vaccinated with BCG vaccine may be complicated by a booster phenomenon. Repetition of the skin test in a short period of time (less than 1 year) should be avoided, or apparent conversions of the reaction from negative to positive may be created.

4.5 Interaction with other medicinal products and other forms of interaction

A variety of host-related factors such as young or old age, poor nutrition, immunosuppression by disease or drugs, viral infections (particularly measles, mononucleosis, varicella and influenza) can lower tuberculin reactivity. After vaccinations with vaccines containing live virus (e.g. vaccines against measles, mumps and rubella) a reduced reactivity may be observed. This decreased reactivity may result in false negative reactions. Many patients co-infected with HIV and *Mycobacterium tuberculosis* have anergy for tuberculin with or without anergy to other skin test antigens. In patients with severe tuberculosis (e.g. miliary tuberculosis) tuberculin reactivity may be

suppressed.

Recent infection with environmental non-tuberculous mycobacteria can result in cross-sensitization and a false-positive reaction to a Mantoux test.

4.6 Pregnancy and lactation

Testing with Tuberculin PPD RT 23 SSI may be carried out during pregnancy and lactation.

4.7 Effects on ability to drive and use machines

No studies on the effects on the ability to drive and use machines have been performed.

4.8 Undesirable effects

Common(>1/100)	Local: Pain, irritation or discomfort at the injection site immediately after the injection.
Uncommon(<1/100)	Systemic: Headache, fever. Local: Enlargement of regional lymph node.
Rare(<1/1,000)	Systemic: Anaphylactic reactions. Local: Hypersensitivity to tuberculin can cause vesiculation and skin necrosis.

Though anaphylactic reactions are extremely rare, facilities for their management should always be available.

4.9 Overdose

No case of overdose has been reported.

5. **PHARMACOLOGICAL PROPERTIES**

5.1 Pharmacodynamic properties

Pharmacotherapeutic group (ATC code): V 04 CF 01.

5.2 Pharmacokinetic properties

Not relevant.

5.3 Preclinical safety data

Studies with non sensitised animals have revealed that, in the absence of sensitisation, the injection of tuberculin provokes a slight local reaction (rabbit) and this reaction does not increase through out the time with repeated administration of tuberculin (guinea pig).

6. **PHARMACEUTICAL PARTICULARS**

6.1 List of excipients

Disodium phosphate dihydrate	7.6 mg
Sodium chloride	4.8 mg
Potassium dihydrogen phosphate	1.5 mg
Potassium hydroxyquinoline sulphate	100 µg
Polysorbate 80	50 µg

Water for Injections

to 1 ml

6.2 Incompatibilities

Do not mix with other medicinal products.

6.3 Shelf life

36 months.

From a microbiological point of view, the product should be used immediately. If not used immediately, in-use storage times and conditions prior to use are the responsibility of the user and would normally not be longer than 24 hours at 2°C - 8°C.

6.4 Special precautions for storage

Store at 2°C - 8°C, protected from light.

6.5 Nature and contents of container

Type I glass vials (Ph.Eur.).

Stoppers of chlorobutyl rubber (Ph.Eur).

Presentations:

Tuberculin PPD RT 23 SSI 2 T.U./0.1 ml:

1,5 ml: 1 and 10 vials.

5 ml: 1 and 10 vials.

Tuberculin PPD RT 23 SSI 10 T.U./0.1 ml:

1,5 ml: 1 and 10 vials.

Not all pack sizes may be marketed.

6.6 Instructions for use and handling

Refer to section 4.2.

Any unused product or waste material should be disposed of in accordance with local requirements. The product does not contain live materials or other hazardous agents.

7. MARKETING AUTHORISATION HOLDER

Statens Serum Institut,
5, Artillerivej,
DK - 2300 Copenhagen S.

8. MARKETING AUTHORISATION NUMBER(S)

XXXXXX

9. DATE OF FIRST AUTHORISATION/RENEWAL OF THE AUTHORISATION

XXXXXX

10. DATE OF REVISION OF THE TEXT

September 2002.