This document is an English-translated version of an attachment of a notification for Revision of PRECAUTIONS issued by the Ministry of Health, Labour and Welfare.

This English version is intended to be a reference material to provide convenience for users.

In the event of inconsistency between the Japanese original and this English translation, the former shall prevail.

Revision of PRECAUTIONS

Isopropylantipyrine/acetaminophen/
allylisopropylacetylurea/anhydrous caffeine
Salicylamide/acetaminophen/anhydrous caffeine/
chlorpheniramine maleate
Salicylamide/acetaminophen/anhydrous caffeine/
promethazine methylenedisalicylate

October 8, 2024

Therapeutic category

Antipyretics, analgesics and anti-inflammatory agents Agents used for common cold

Non-proprietary name

Isopropylantipyrine/acetaminophen/allylisopropylacetylurea/anhydrous caffeine
Salicylamide/acetaminophen/anhydrous caffeine/chlorpheniramine maleate
Salicylamide/acetaminophen/anhydrous caffeine/promethazine methylenedisalicylate

Safety measure

PRECAUTIONS should be revised.

9. PRECAUTIONS CONCERNING PATIENTS WITH SPECIFIC BACKGROUNDS

Current

9.5 Pregnant Women

Pregnant women or women who may be pregnant should be administered this drug only if the potential therapeutic benefits are considered to outweigh the potential risks. If administration is deemed necessary, caution should be exercised such as limiting the drug to the minimum effective use and checking amniotic fluid volume as necessary. Renal impairment and decreased urine output in foetuses as well as accompanying oligohydramnios have been reported following use of cyclooxygenase inhibitors (oral dosage form or suppository) in pregnant women.

Revised 9. PRECAUTIONS CONCERNING PATIENTS WITH SPECIFIC

9.5 Pregnant Women

BACKGROUNDS

Pregnant women or women who may be pregnant should be administered this drug only if the potential therapeutic benefits are considered to outweigh the potential risks. If administration is deemed necessary, caution should be exercised such as limiting the drug to the minimum effective use and checking amniotic fluid volume and findings suggestive of constriction of the foetal ductus arteriosus with consideration given to the gestational age and duration of administration as necessary. Renal impairment and decreased urine output in foetuses as well as accompanying oligohydramnios have been reported following cyclooxygenase inhibitors (oral dosage form or suppository) in pregnant women. It has been reported that constriction of the foetal ductus arteriosus occurred in pregnant women who had been administered cyclooxygenase inhibitors in their second and/or third trimester of pregnancy with a higher risk known in women exposed to the drug in their third trimester.