

**Package leaflet: Information for the patient**

INBEC 50 mg/600 mg/300 mg film-coated tablets

dolutegravir/abacavir/lamivudine

▼ This medicine is subject to additional monitoring. This will allow quick identification of new safety information. You can help by reporting any side effects you may get. See the end of section 4 for how to report side effects.

**Read all of this leaflet carefully before you start using this medicine 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 or pharmacist.
- This medicine has been prescribed for you only. Do not pass it on to others. It may harm them, even if their signs of illness are the same as yours.
- If you get any side effects, talk to your doctor or pharmacist. This includes any possible side effects not listed in this leaflet.

**What is in this leaflet**

1. What INBEC is and what it is used for
2. What you need to know before you take INBEC
3. How to take INBEC
4. Possible side effects
5. How to store INBEC
6. Contents of the pack and other information

**1. What INBEC is and what it is used for**

INBEC is a medicine that contains three active ingredients used to treat HIV infection: abacavir, lamivudine and dolutegravir. Abacavir and lamivudine belong to a group of anti-retroviral medicines called nucleoside analogue reverse transcriptase inhibitors (NRTIs), and dolutegravir belongs to a group of anti-retroviral medicines called integrase inhibitors (INIs). INBEC is used to treat HIV (human immunodeficiency virus) infection in adults and children over 12 years old

who weigh at least 40 kg. Before you are prescribed INBEC your doctor will arrange a test to find out whether you carry a particular type of gene called HLA-B\*5701. INBEC should not be used in patients who are known to carry the HLA-B\*5701 gene. Patients with this gene are at a high risk of developing a serious hypersensitivity (allergic) reaction if they use INBEC (see ‘hypersensitivity reactions’ in section 4). INBEC does not cure HIV infection; it reduces the amount of virus in your body, and keeps it at a low level. It also increases the number of CD4 cells in your blood. CD4 cells are a type of white blood cells that are important in helping your body to fight infection. Not everyone responds to treatment with INBEC in the same way. Your doctor will monitor the effectiveness of your treatment.

## 2. What you need to know before you take INBEC Tablets

### Do not take INBEC:

- if you are allergic (hypersensitive) to dolutegravir, abacavir (or any other medicine containing abacavir), or lamivudine, or any of the other ingredients of this medicine (listed in section 6). Carefully read all the information about hypersensitivity reactions in Section 4.
- if you are taking a medicine called dofetilide (to treat heart conditions).  
→ If you think any of these apply to you, tell your doctor.

### Warnings and precautions

#### IMPORTANT — Hypersensitivity reactions

**INBEC contains abacavir and dolutegravir.** Both of these active ingredients can cause a serious allergic reaction known as a hypersensitivity reaction, which can be life threatening in people who continue to take abacavir-containing products.

**You must carefully read all the information under ‘Hypersensitivity reactions’ in the panel in Section 4.**

Some people taking INBEC or other combination treatments for HIV are more at risk of serious side effects than others. You need to be aware of the extra risks:

- if you have moderate or severe liver disease

- if you have ever had liver disease, including hepatitis B or C (if you have hepatitis B infection, don't stop INBEC without your doctor's advice, as your hepatitis may come back)

- if you have a kidney problem

→ Talk to your doctor if any of these apply to you before using INBEC. You may need extra check-ups, including blood tests, while you're taking your medicine. See Section 4 for more information.

#### Abacavir hypersensitivity reactions

Even patients who don't have the HLA-B\*5701 gene may still develop a hypersensitivity reaction (a serious allergic reaction).

→ Carefully read all the information about hypersensitivity reactions in Section 4 of this leaflet.

#### Risk of heart attack

The possibility that abacavir increases the risk of having a heart attack cannot be excluded.

→ Tell your doctor if you have heart problems, if you smoke, or have other illnesses that may increase your risk of heart disease such as high blood pressure or diabetes. Don't stop taking INBEC unless your doctor advises you to do so.

#### Look out for important symptoms

Some people taking medicines for HIV infection develop other conditions, which can be serious.

These include:

- symptoms of infections and inflammation
- joint pain, stiffness and bone problems

You need to know about important signs and symptoms to look out for while you're taking INBEC.

→ Read the information 'Other possible side effects of combination therapy for HIV' in Section 4 of this leaflet.

#### Protect other people

HIV infection is spread by sexual contact with someone who has the infection, or by transfer of infected blood (for example, by sharing injection needles). You can still pass on HIV when taking this medicine, although the risk is lowered by effective antiretroviral therapy. Discuss with your doctor the precautions needed to avoid infecting other people.

### **Children**

This medicine is not for children under 12 years of age. The use of INBEC in children under 12 years of age has not yet been studied.

### **Other medicines and INBEC**

Tell your doctor if you are taking, have recently taken or might take any other medicines, including herbal medicines and other medicines bought without a prescription.

Don't take INBEC with the following medicine:

- dofetilide, used to treat heart conditions

Some medicines can affect how INBEC works, or make it more likely that you will have side effects. INBEC can also affect how some other medicines work.

**Tell your doctor** if you are taking any of the medicines in the following list:

- metformin, to treat diabetes
- medicines called antacids, to treat indigestion and heartburn. Do not take an antacid during the 6 hours before you take INBEC, or for at least 2 hours after you take it. (See also Section 3).
- calcium supplements, iron supplements and multivitamins. Do not take a calcium supplement, iron supplement or multivitamin during the 6 hours before you take INBEC, or for at least 2 hours after you take it (see also Section 3).
- emtricitabine, etravirine, efavirenz, nevirapine or tipranavir/ritonavir, to treat HIV infection
- other medicines containing lamivudine, used to treat HIV infection or hepatitis B infection
- cladribine, used to treat hairy cell leukaemia

- rifampicin, to treat tuberculosis (TB) and other bacterial infections
- trimethoprim/sulfamethoxazole, an antibiotic to treat bacterial infections
- phenytoin and phenobarbital, to treat epilepsy
- oxcarbazepine and carbamazepine, to treat epilepsy and bipolar disorder
- St. John's wort (*Hypericum perforatum*), a herbal remedy to treat depression
- methadone, used as a heroin substitute. Abacavir increases the rate at which methadone is removed from the body. If you are taking methadone, you will be checked for any withdrawal symptoms. Your methadone dose may need to be changed.

→ Tell your doctor or pharmacist if you are taking any of these. Your doctor may decide to adjust your dose or that you need extra checkups.

### Pregnancy

If you are pregnant, think you may be pregnant, or if you are planning to have a baby:

→ Talk to your doctor about the risks and benefits of taking INBEC.

If you have taken INBEC during your pregnancy, your doctor may request regular blood tests and other diagnostic tests to monitor the development of your child. In children whose mothers took NRTIs during pregnancy, the benefit from the protection against HIV outweighed the risk of side effects.

### **Breast-feeding**

Women who are HIV-positive must not breast-feed because HIV infection can be passed on to the baby in breast milk.

A small amount of the ingredients in INBEC can also pass into your breast milk.

If you are breast-feeding, or thinking about breast-feeding:

→ Talk to your doctor immediately.

### **Driving and using machines**

INBEC can make you dizzy and have other side effects that make you less alert.

→ Don't drive or operate machinery unless you are sure your alertness has not been affected.

### **3. How to take INBEC Tablets**

Always take this medicine exactly as your doctor has told you. Check with your doctor or pharmacist if you are not sure.

- **The usual dose is one tablet once a day**

Swallow the tablet with some liquid. INBEC can be taken with or without food.

#### **Use in children and adolescents**

Children and adolescents aged between 12 and 17 years and weighing at least 40 kg can take the adult dose of one tablet once a day.

Do not take an antacid during the 6 hours before you take INBEC, or for at least 2 hours after you take it. Other acid-lowering medicines like ranitidine and omeprazole can be taken at the same time as INBEC.

→ Talk to your doctor for further advice on taking antacid medicines with INBEC.

Do not take a calcium or iron supplement during the 6 hours before you take INBEC, or for at least 2 hours after you take it.

→ Talk to your doctor for further advice on taking calcium supplements, iron supplements or multivitamins with INBEC.

#### **If you take more INBEC than you should**

If you take too many tablets of INBEC, contact your doctor or pharmacist for advice. If possible, show them the INBEC pack.

#### **If you forget to take INBEC**

If you miss a dose, take it as soon as you remember. But if your next dose is due within 4 hours, skip the dose you missed and take the next one at the usual time. Then continue your treatment as before.

→ Don't take a double dose to make up for a missed dose.

#### **If you have stopped taking INBEC**

If you have stopped taking INBEC for any reason — especially because you think you are having side effects, or because you have another illness:

Talk to your doctor before you start taking it again. Your doctor will check whether your symptoms were related to a hypersensitivity reaction. If the doctor thinks they may be related to a hypersensitivity reaction, you will be told never again to take INBEC, or any other medicine containing abacavir or dolutegravir. It is important that you follow this advice.

If your doctor advises that you can start taking INBEC again, you may be asked to take your first doses in a place where you will have ready access to medical care if you need it.

#### **4. Possible side effects**

During HIV therapy there may be an increase in weight and in levels of blood lipids and glucose. This is partly linked to restored health and life style, and in the case of blood lipids sometimes to the HIV medicines themselves. Your doctor will test for these changes.

Like all medicines, this medicine can cause side effects, but not everybody gets them.

When you're being treated for HIV, it can be hard to tell whether a symptom is a side effect of INBEC or other medicines you are taking, or an effect of the HIV disease itself. So it is very important to talk to your doctor about any changes in your health.

Even patients who don't have the HLA-B\*5701 gene may still develop a hypersensitivity reaction (a serious allergic reaction), described in this leaflet in the panel headed 'Hypersensitivity reactions'. It is very important that you read and understand the information about this serious reaction.

As well as the side effects listed below for INBEC, other conditions can develop during combination therapy for HIV.

It is important to read the information in this section under the heading 'Other possible side effects of combination therapy for HIV'.

#### **Hypersensitivity Reactions**

INBEC contains abacavir and dolutegravir. Both of these active ingredients can cause a serious allergic reaction known as a hypersensitivity reaction.

These hypersensitivity reactions have been seen more frequently in people taking medicines that contain abacavir.

**Who gets these reactions?**

Anyone taking INBEC could develop a hypersensitivity reaction, which could be life threatening if they continue to take INBEC.

You are more likely to develop this reaction if you have a gene called HLA-B\*5701 (but you can get a reaction even if you don't have this gene). You should have been tested for this gene before INBEC was prescribed for you. If you know you have this gene, tell your doctor.

About 3 to 4 in every 100 patients treated with abacavir in a clinical trial who did not have the HLAB\*5701 gene developed a hypersensitivity reaction.

What are the symptoms?

The most common symptoms are:

fever (high temperature) and skin rash.

Other common symptoms are:

nausea (feeling sick), vomiting (being sick), diarrhoea, abdominal (stomach) pain, severe tiredness.



#### 4. How to store INBEC Tablets

Other symptoms include:

pains in the joints or muscles, swelling of the neck, shortness of breath, sore throat, cough, occasional headaches, inflammation of the eye (conjunctivitis), mouth ulcers, low blood pressure, tingling or numbness of the hands or feet.

When do these reactions happen?

Hypersensitivity reactions can start at any time during treatment with INBEC, but are more likely during the first 6 weeks of treatment.

Contact your doctor immediately:

- if you get a skin rash, OR
- if you get symptoms from at least 2 of the following groups:
  - fever
  - shortness of breath, sore throat or cough
  - nausea or vomiting, diarrhoea or abdominal pain
  - severe tiredness or aches and pains, or generally feeling ill.

**Your doctor may advise you to stop taking INBEC.**

#### **If you have stopped taking INBEC**

If you have stopped taking INBEC because of a hypersensitivity reaction, you must NEVER AGAIN take INBEC, or any other medicine containing abacavir. If you do, within hours, your blood pressure could fall dangerously low, which could result in death. You should also never again take medicines containing dolutegravir.

If you have stopped taking INBEC for any reason especially because you think you are having side effects, or because you have other illness:

Talk to your doctor before you start again. Your doctor will check whether your symptoms were related to a hypersensitivity reaction. If the doctor thinks they may have been, you will then be told never again to take INBEC, or any other medicine containing abacavir. You may also be told never again to take any other medicine containing dolutegravir. It is important that you follow this advice.

Occasionally, hypersensitivity reactions have developed in people who start taking abacavir containing products again, but who had only one symptom on the Alert Card before they stopped taking it.

Very rarely, patients who have taken medicines containing abacavir in the past without any symptoms of hypersensitivity have developed a hypersensitivity reaction when they start taking these medicines again.

If your doctor advises that you can start taking INBEC again, you may be asked to take your first doses in a place where you will have ready access to medical care if you need it.

If you are hypersensitive to INBEC, return all your unused INBEC tablets for safe disposal. Ask your doctor or pharmacist for advice.

The INBEC pack includes an Alert Card, to remind you and medical staff about hypersensitivity reactions. Detach this card and keep it with you at all times.

### **Very common side effects**

These may affect more than 1 in 10 people:

- headache
- diarrhoea
- feeling sick (nausea)
- difficulty in sleeping (insomnia)
- lack of energy (fatigue)

### **Common side effects**

These may affect up to 1 in 10 people:

- hypersensitivity reaction (see 'Hypersensitivity reactions' earlier in this section)
- loss of appetite
- rash
- itching (pruritus)
- being sick (vomiting)
- stomach (abdominal) pain
- stomach (abdominal) discomfort
- indigestion
- wind (flatulence)
- dizziness
- abnormal dreams
- nightmares
- depression (feelings of deep sadness and unworthiness)
- tiredness
- fever (high temperature)
- cough
- irritated or runny nose
- hair loss
- muscle pain and discomfort
- joint pain

- feeling weak
- general feeling of being unwell

Common side effects that may show up in blood tests are:

- an increase in the level of liver enzymes

### **Uncommon side effects**

These may affect up to 1 in 100 people:

- inflammation of the liver (hepatitis)
- suicidal thoughts and behaviours (particularly in patients who have had depression or mental

health problems before)

Uncommon side effects that may show up in blood tests are:

- a decreased number of cells involved in blood clotting (thrombocytopenia).
- a low red blood cell count (anaemia) or low white blood cell count (neutropenia)
- an increase in sugar (glucose) in the blood
- an increase in triglycerides (type of fat) in the blood

### **Rare side effects**

These may affect up to 1 in 1000 people:

- inflammation of the pancreas (pancreatitis)
- breakdown of muscle tissue.

Rare side effects that may show up in blood tests are:

- increase in an enzyme called amylase

### **Very rare side effects**

These may affect up to 1 in 10,000 people:

- numbness, tingly feelings in the skin (pins and needles)
- sensation of weakness in the limbs
- skin rash, which may form blisters and looks like small targets (central dark spots surrounded by a paler area, with a dark ring around the edge) (erythema multiforme)
- a widespread rash with blisters and peeling skin, particularly around the mouth, nose, eyes and genitals (Stevens–Johnson syndrome), and a more severe form causing skin peeling in more than 30% of the body surface (toxic epidermal necrolysis)
- lactic acidosis (excess lactic acid in the blood).

**Very rare side effects that may show up in blood tests are:**

- a failure of the bone marrow to produce new red blood cells (pure red cell aplasia).

If you get any side effects

→ Talk to your doctor. This includes any possible side effects not listed in this leaflet.

**Other possible side effects of combination therapy for HIV**

Combination therapy such as INBEC may cause other conditions to develop during HIV treatment.

**Symptoms of infection and inflammation**

People with advanced HIV infection or AIDS have weak immune systems, and are more likely to develop serious infections (opportunistic infections). Such infections may have been “silent” and not detected by the weak immune system before treatment was started. After starting treatment, the immune system becomes

stronger, and may attack the infections, which can cause symptoms of infection or inflammation. Symptoms usually include fever, plus some of the following:

- headache
- stomach ache
- difficulty breathing

In rare cases, as the immune system becomes stronger, it can also attack healthy body tissue (autoimmune disorders). The symptoms of autoimmune disorders may develop many months after you start taking medicine to treat your HIV infection. Symptoms may include:

- palpitations (rapid or irregular heartbeat) or tremor
- hyperactivity (excessive restlessness and movement)
- weakness beginning in the hands and feet and moving up towards the trunk of the body.

If you get any symptoms of infection and inflammation or if you notice any of the symptoms above:

→ Tell your doctor immediately. Don't take other medicines for the infection without your doctor's advice.

### **Joint pain, stiffness and bone problems**

Some people taking combination therapy for HIV develop a condition called osteonecrosis. In this condition, parts of the bone tissue die because of reduced blood supply to the bone. People may be more likely to get this condition:

- if they have been taking combination therapy for a long time
- if they are also taking anti-inflammatory medicines called corticosteroids
- if they drink alcohol
- if their immune systems are very weak

- if they are overweight.

**Signs of osteonecrosis include:**

- stiffness in the joints
- aches and pains (especially in the hip, knee or shoulder)
- difficulty moving.

If you notice any of these symptoms:

→ **Tell your doctor.**

**Reporting of side effects**

If you get any side effects, talk to your doctor or pharmacist. This includes any possible side effects not listed in this leaflet. You can also report side effects directly (see details below). By reporting side effects you can help provide more information on the safety of this medicine.

**5. How to store INBEC**

Store at room temperature, 20°C to 25°C, (68°F to 77°F).  
Keep this medicine out of the sight and reach of children.

Do not use this medicine after the expiry date which is stated on the carton and bottle after EXP.

Store in the original package in order to protect from moisture. Keep the bottle tightly closed. Do not remove the desiccant.

This medicine does not require any special temperature storage conditions.

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 INBEC contains

- The active substances are dolutegravir, abacavir and lamivudine. Each tablet contains dolutegravir sodium equivalent to 50 mg dolutegravir, 600 mg abacavir (as sulfate) and 300 mg lamivudine.

- The other ingredients are mannitol, microcrystalline cellulose, povidone K30, sodium starch glycollate, magnesium stearate. Opadry II Blue 85F505121

### What INBEC looks like and contents of the pack

INBEC film-coated tablets are Light Blue to blue, oval shaped, film coated tablets, debossed with 35 on one side and EM on the other side.

The film-coated tablets are provided in bottles containing 30 tablets.

The bottle contains a desiccant to reduce moisture. Once the bottle has been opened keep the desiccant in the bottle, do not remove it.

Not all pack sizes may be available in your country.

### Marketing Authorisation Holder and Manufacturer

#### Marketing Authorisation Holder

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I.T.B.T. Park, Hinjawadi, Pune - 411057, INDIA.

#### Manufacturer

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