

**IRISH MEDICINES BOARD ACTS 1995 AND 2006**

**MEDICINAL PRODUCTS(CONTROL OF PLACING ON THE MARKET)REGULATIONS,2007**

**(S.I. No.540 of 2007)**

**PA0302/004/001**

Case No: 2035502

The Irish Medicines Board in exercise of the powers conferred on it by the above mentioned Regulations hereby grants to

**D.D.D. Limited**

**94 Rickmansworth Road, Watford, Hertfordshire WD1 7JJ, United Kingdom**

an authorisation, subject to the provisions of the said Regulations, in respect of the product

**Blistex Relief Cream**

The particulars of which are set out in Part I and Part II of the attached Schedule. The authorisation is also subject to the general conditions as may be specified in the said Regulations as listed on the reverse of this document.

This authorisation, unless previously revoked, shall continue in force from **30/01/2008** until **17/01/2009**.

Signed on behalf of the Irish Medicines Board this

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A person authorised in that behalf by the said Board.

## Part II

### Summary of Product Characteristics

#### 1 NAME OF THE MEDICINAL PRODUCT

Blistex Relief Cream

#### 2 QUALITATIVE AND QUANTITATIVE COMPOSITION

Strong Ammonia Solution	0.270 % w/w
Aromatic Ammonia Solution	6.040 % w/w
Liquified Phenol	0.494 % w/w

For excipients, see 6.1.

#### 3 PHARMACEUTICAL FORM

Cream

Off white, homogenous, smooth cream with a taste of peppermint.

#### 4 CLINICAL PARTICULARS

##### 4.1 Therapeutic Indications

The treatment of sore, cracked and chapped lips.

##### 4.2 Posology and method of administration

At first symptoms apply every hour.

By topical application to the lips.

##### 4.3 Contraindications

Hypersensitivity to any of the ingredients.

Use on Mucous membranes.

##### 4.4 Special warnings and precautions for use

If the condition persists consult your doctor. If you experience any unwanted effects whilst using Blistex Relief Cream consult your doctor or pharmacist.

Keep all medicines out of reach and sight of children.

##### 4.5 Interaction with other medicinal products and other forms of interaction

None known.

##### 4.6 Pregnancy and lactation

Not contra-indicated.

#### 4.7 Effects on ability to drive and use machines

None.

#### 4.8 Undesirable effects

None known.

#### 4.9 Overdose

No known problems associated with overdosage.

### 5 PHARMACOLOGICAL PROPERTIES

#### 5.1 Pharmacodynamic properties

The product was developed for topical use and is for the relief of sores, cracked and chapped lips.

Ammonia is incorporated into the formulation for its rubefacient properties.

Phenol is present in the formulation for its disinfectant properties.

Phenol is bacteriostatic in concentrations of about 0.02% to 1% bactericidal to some organisms in concentrations as low as 0.4%. Phenol is also reported to be active against certain viruses.

These two actives are present in an emollient emulsion base, comprising largely of Lanolin 25.4% w/w and White Petroleum Jelly 33% w/w. These oleaginous substances, also known as occlusive agents and humectants, are employed as protectives and as agents for softening the skin and rendering it more pliable, but chiefly as vehicles for the more active drugs above.

Emollients soften the skin by forming an occlusive oil film on the stratum corneum, thus preventing drying from evaporation of the water that diffuses to the surface from the underlying layers of skin.

In this way, Blistex Relief Cream provides an effective treatment for sore, cracked and chapped lips.

(Reference abstracted from Goodman & Gillman and Martindale).

#### 5.2 Pharmacokinetic properties

Approximately 80mg of Blistex Relief Cream is applied to the lips at any time. Blistex Relief Cream is a topical treatment with locally acting agents. Any trace quantities of ammonia entering the blood system via Blistex Relief Cream would be so small compared to normal background concentrations of ammonia as to be inconsequential.

Ammonia in the body represents that which is liberated from the deamination of amino acids and the deamination of amides. Portal Venous blood contains a high concentration of ammonia.

Normally about 20% of the urea produced in the body diffuses in the gut, where it is converted by bacteria to ammonia and carbon dioxide. Intestinal bacteria also produce ammonia from dietary proteins. The ammonia is absorbed and converted back to urea in the liver, by the way of the Ornithine cycle. Another significant role of ammonia is in the synthesis of glutamine.

Renal excretion – Normal renal venous blood contains a high concentration of ammonia synthesised from glutamine and other amino acids in the kidney. The ammonia that is formed by the kidney is excreted when the urine is acidic, but is largely returned to the systemic circulation if the urine is alkaline. In an acidic urine,  $\text{NH}_3$  accepts a proton and exists

almost entirely as  $\text{NH}_4^+$ . Under normal states of metabolism about 70mEq of non-volatile acid is generated per day:

about one half of this is excreted in the urine in conjunction with  $\text{NH}_4^+$ , and the remainder is excreted as titratable acid.

Renal production of ammonia is stimulated by acidosis: ammonia buffers urinary acid and allows further secretion of

protons into the tubular fluid. Potassium depletion also results in a primary increase in the alkalization of the urine (Tannen, 1977). This may increase the amount of ammonia that is returned to the circulation via the renal vein and have a deleterious effect when potassium depletion coexists with hepatic failure.

Normal physiological mechanisms are designed to keep the concentration of ammonia in the blood as low as possible.

Thus, ammonia added to the venous circulation by the kidney or gastrointestinal tract is converted to urea by the liver.

Phenol – A paper published by JAMA in 1953 showed that phenol readily penetrates the human skin and that detoxification by conjugation is initiated immediately.

The pharmaceutical form of Blistex Relief Cream is similar to the aromatised liquid petrolatum of Camphor phenique. This being so, we would expect that after local application the amount of phenol in blood attributable to Blistex Relief Cream would be of the order of 0.0003 mg/100ml of blood.

According to the Journal of Clinical Pathology 12;129, 1942 the residual phenol content of blood in normal human beings varies from 0.0 to 0.08 mg/100ml free phenol and 0.0 to 0.08mg/100ml conjugated phenol.

This suggests that residual phenol in normal humans can be anything up to 250 times greater than that which is likely to come from Blistex Relief Cream.

The results of the 1953 paper indicate that phenol from Blistex Relief Cream is rapidly absorbed through the skin and is rapidly detoxified due to its extremely low concentrations.

### **5.3 Preclinical safety data**

Not applicable.

## **6 PHARMACEUTICAL PARTICULARS**

### **6.1 List of excipients**

Saccharin sodium  
 Racemic camphor  
 Polysorbate 40  
 Peppermint oil  
 Sorbitan palmitate  
 Ethanol 96 %  
 White petroleum jelly  
 Cineole  
 Purified Water

### **6.2 Incompatibilities**

Not applicable.

### **6.3 Shelf Life**

2 years.

### **6.4 Special precautions for storage**

Do not store above 25°C.

### **6.5 Nature and contents of container**

Collapsible printed aluminium tube with elongated nozzle and plastic screw-on cap.

Size - Pack size: 5 g.

**6.6 Special precautions for disposal of a used medicinal product or waste materials derived from such medicinal product and other handling of the product**

No special requirements.

**7 MARKETING AUTHORISATION HOLDER**

DDD Limited  
94 Rickmansworth Road  
Watford  
Hertfordshire, WD18 7JJ  
United Kingdom

**8 MARKETING AUTHORISATION NUMBER**

PA 302/4/1

**9 DATE OF FIRST AUTHORISATION/RENEWAL OF THE AUTHORISATION**

Date of first authorisation: 18 January 1994

Date of last renewal: 18 January 2004

**10 DATE OF REVISION OF THE TEXT**

May 2005