Adapalene 0.3% +
Benzoyl Peroxide 2.5%

EPIDUO® FORTE

INDICATIONS AND CLINICAL USE

EPIDUO FORTE Gel (adapalene 0.3%/benzoyl peroxide 2.5%) is indicated for:

- Treatment of acne vulgaris, characterized by comedones, inflammatory papules/pustules with or without occasional nodules in patients 12 years of age and older. (See Clinical Trials Section)

CONTRAINDICATIONS

- Patients who are hypersensitive to adapalene, benzoyl peroxide or to any ingredient in the formulation or component of the container. For a complete listing, see the DOSAGE FORMS, COMPOSITION AND PACKAGING section.
- Application to areas of skin affected by eczema or seborrhoeic dermatitis
- Pregnancy
- Women planning a pregnancy

WARNINGS AND PRECAUTIONS

General

For external use only. Not for ophthalmic use. Prescription-only medicine.

Avoid contact with the eyes, lips, nostrils , mucous membranes, abraded skin and open wounds. If contact occurs, rinse thoroughly with water.

If a reaction suggesting allergic / hypersensitivity reactions to any component of the formula occurs, the use of the product should be discontinued.

This product contains propylene glycol (EI520) that may cause skin irritation.

Concomitant topical acne therapy is not recommended because a possible cumulative irritancy effect may occur, especially with the use of peeling, desquamating, or abrasive agents (see DRUG INTERACTIONS, Drug-Drug Interactions). Avoid concomitant use of other potentially irritating topical products (medicated or abrasive soaps and cleansers, soaps and cosmetics that have strong skin-drying effect and products with high concentrations of alcohol, astringents, spices, or limes).

The product should not be applied to cuts, abrasions, eczematous or sunburned skin. As with other retinoids, use of electrolysis, “waxing” and chemical depilatories for hair removal should be avoided on skin treated with EPIDUO FORTE Gel (see DRUG INTERACTIONS, Drug-Lifestyle Interactions).

EPIDUO FORTE Gel may bleach hair and coloured fabric. Use caution when applying near hairline (see DRUG INTERACTIONS, Drug-Lifestyle Interactions).

Patients should be advised to use non-comedogenic cosmetics (see DRUG INTERACTIONS, Drug-Lifestyle Interactions).

Certain cutaneous signs and symptoms such as erythema, dryness, scaling, burning or pruritus are associated with the topical application of retinoids and can also be expected with the use of EPIDUO FORTE Gel (adapalene 0.3%/benzoyl peroxide 2.5%). These treatment-related effects generally occur during the first four weeks of therapy, are mostly mild to moderate in intensity, and usually lessen as the skin adjusts with continued use. Depending on the degree of the side effects, patients can be directed to use a moisturizer, use the medication less frequently or temporarily discontinue use until the symptoms subside (see DOSAGE AND ADMINISTRATION).

As with any retinoid, exposure to excessive sunlight, including sunlamps, should be avoided while using the preparation, or a suitably effective sunscreen product and protective clothing over the treated areas is recommended when exposure cannot be avoided. In case of sunburn, allow the skin to heal before using EPIDUO FORTE Gel. Weather extremes, such as wind or cold, may also be irritating to patients under treatment with adapalene.

Special Populations

Pregnant Women: EPIDUO FORTE Gel is contraindicated in pregnancy, or in women planning a pregnancy. If the product is used during pregnancy, or if the patient becomes pregnant while taking this drug, treatment should be discontinued. ***Topical adapalene/benzoyl peroxide should be used by women of childbearing years only after contraceptive counselling.***

There are no well-controlled trials in pregnant women treated with EPIDUO FORTE Gel. Animal reproduction studies have not been conducted with the combination gel..

Orally administered retinoids have been associated with congenital abnormalities. When used in accordance with the prescribing information, topically administered retinoids are generally assumed to result into low systemic exposure due to minimal dermal absorption. However, there could be individual factors (e.g. damaged skin barrier, excessive use) that contribute to an increased systemic exposure. There have been rare reports of birth defects among babies born to women exposed to topical retinoids during pregnancy. However, there are no well-controlled prospective studies of the use of topical retinoids, including adapalene, in pregnant women. A retrospective study of mothers exposed to topical tretinoin during the first trimester of pregnancy found no increase in the incidence of birth defects.

Adapalene administered orally at doses of $\geqslant$25 mg/kg/day has been shown to be teratogenic. No teratogenic effects were seen in rats at oral doses of up to 5.0 mg/kg/day.
Dermal teratology studies conducted in rats and rabbits at doses of 0.6 - 6.0 mg adapalene/kg/day exhibited no foetotoxicity and only minimal increases in supernumerary ribs in both species and delayed ossification in rabbits. The AUC at the No Observable Adverse Effect Level in the rat (6.0 mg/kg/ day, the most sensitive species) corresponds to safety margins of 32 and 102 when compared respectively to the exposure data in humans with EPIDUO FORTE Gel (adapalene 0.3%/benzoyl peroxide 2.5%).

Nursing Women: It is not known whether adapalene or benzoyl peroxide is excreted in human milk following use of EPIDUO FORTE Gel. Animal pharmacology studies indicate that adapalene is excreted in milk at levels lower than plasma levels. Because many drugs are excreted in human milk, caution should be exercised when EPIDUO FORTE Gel are administered to a nursing mother. If applied to the chest, facial contact and oral ingestion by the infant from maternal skin may occur.

Pediatrics (9-16 years of age): Safety and effectiveness of EPIDUO FORTE Gel (adapalene 0.3%/benzoyl peroxide 2.5%) in children below the age of 12 years have not been established.

Geriatrics (> 65 years of age): Safety and effectiveness EPIDUO FORTE Gel in geriatric patients age 65 years and above have not been established.

CLINICAL TRIALS

Study demographics and trial design

Summary of patient demographics for Phase III clinical trial with EPIDUO FORTE Gel in moderate and severe acne vulgaris (Study 18240)

Trial design	Dosage, route of administration and duration	Study subjects (n=number)	Mean age (Range) y	Gender % M/F
Double-blind, multi-center, randomized, three treatment arms, controlled (active and vehicle)	Adapalene 0.3% /BPO 2.5% gel Adapalene 0.1% /BPO 2.5% gel Gel vehicle Topical 12 weeks	(503) 217 217 69	19.6 (12-57)	48 / 52

Treatment response was defined as the percent of subjects who were rated 'Clear' or 'Almost Clear' at Week 12 with at least a two-grade improvement based on the Investigator's Global Assessment (IGA), and mean absolute change from baseline at Week 12 in both inflammatory and non-inflammatory lesion counts. An IGA score of 'Clear' corresponded to clear skin with no inflammatory or non-inflammatory lesions. An IGA score of 'Almost Clear' corresponded to a few scattered comedones and a few small papules.

At Baseline, 50% of enrolled patients had acne severity assessed as "moderate" (IGA = 3) and 50% had scores of "severe" (IGA=4). For lesion counts, subjects had an average of 98 total lesions (range: 51-226), of which the mean number of inflammatory lesions was 38 (range: 20-99) and the mean number of non-inflammatory lesions was 60 (range: 30-149).The age of the patients ranged from 12 to 57 years, with 273 (54.3%) patients 12 to 17 years of age. A similar number of males (47.7%) and females (52.3%) were enrolled.

Efficacy Results of Study 18240 in the overall population: subjects with moderate and severe acne vulgaris, Week 12 (MI[a], ITT Population)

	EPIDUO FORTE Gel (N=217)	EPIDUO Gel (N=217) [b]	Vehicle Gel (N=69)
Success Rate: IGA at least two-grade improvement and "clear" or "almost clear"	33.7%	27.3%	11.0%
p-value vs Vehicle Gel	<0.001	0.014	-
Mean reduction in Inflammatory Lesions Count (percent change)	27.8 (68.7%)	26.5 (69.3%)	13.2 (39.2%)

p-value vs Vehicle Gel	<0.001	<0.001	-
Mean reduction in Non-inflammatory Lesions Count (percent change)	40.5 (68.3%)	40.0 (68.0%)	19.7 (37.4%)
p-value vs Vehicle Gel	<0.001	<0.001	-

[a] MI: Missing data was imputed using multiple imputation methodology
[b]: This study was not designed or powered to compare the efficacy of EPIDUO FORTE Gel to the lower strength adapalene and benzoyl peroxide gel, 0.1%/2.5%, nor to compare the lower strength adapalene and benzoyl peroxide gel, 0.1%/2.5% to the vehicle control.

Superiority of EPIDUO FORTE Gel over vehicle gel was demonstrated in the overall study population of subjects with moderate and severe acne (IGA=3 and IGA=4) at Week 12 for Success Rate (subjects rated "Clear" or "Almost Clear" on the IGA with at least 2-grade improvement [33.7% vs. 11.0%, p<0.001]) and for changes in inflammatory (-27.8 vs -13.2, p<0.001) and non-inflammatory lesion counts (-40.5 vs -19.7, p<0.001)

The primary efficacy analyses were also confirmed in the PP analyses and sensitivity analyses using traditional imputation methodology for missing data. Results of primary efficacy analyses are shown in the above table.

In addition, in the subjects with severe acne (IGA= 4), EPIDUO FORTE Gel was shown to be superior to gel vehicle for the same endpoints: see following table.

Efficacy Results of Study 18240 in subjects with severe acne, Week 12 (MI[a], ITT Population)

	EPIDUO FORTE Gel (N=106)	**EPIDUO Gel (N=112)**	**Vehicle Gel (N=34)**
Success Rate: IGA at least three-grade improvement and "clear" or "almost clear"	31.9%	20.5%	11.8%
p-value vs Vehicle Gel	0.029	0.443	-
Mean reduction in Inflammatory Lesions: Count (percent change)	37.2 (74.4%)	30.2 (68.0%)	14.3 (33.0%)
p-value vs Vehicle Gel	<0.001	<0.001	-
Mean reduction in Non-inflammatory Lesions: Count (percent change)	46.3 (72.0%)	43.9 (68.4%)	17.8 (30.8%)
p-value vs Vehicle Gel	<0.001	<0.001	-

[a]MI: Missing data was imputed using multiple imputation methodology

Both EPIDUO FORTE Gel and EPIDUO Gel were superior to Vehicle in terms of each lesion type, inflammatory and non-inflammatory. However, when analyzing Success rate, where IGA required to be improved by at least 3 grades, only EPIDUO FORTE Gel was shown superior to Vehicle (31.9% vs 11.8%, p=0.029), while EPIDUO Gel was not (20.5% vs 11.8%, p=0.443). EPIDUO Gel was included in this trial as a reference therapy, however this study was not designed or powered to statistically compare the efficacy of EPIDUO FORTE to the lower strength reference therapy, nor to compare the reference therapy to the vehicle control. In subjects graded as "moderate" (IGA Grade 3) EPIDUO FORTE had similar levels of effectiveness to the EPIDUO Gel.

ADVERSE REACTIONS

Treatment-related adverse events typically associated with use of EPIDUO FORTE Gel include mild to moderate application site reactions, such as skin irritation characterized by scaling, dryness, erythema, and burning/stinging. These reactions usually occur early in the treatment, and tend to gradually lessen and subside spontaneously over time.

During clinical trials, 245 participants with acne lesions received EPIDUO FORTE once daily. A total of 217 participants were treated once daily for approximately 12 weeks.

Tabulated list of adverse events reported in ⩾1% of patients during treatment with EPIDUO FORTE in the Phase 3 vehicle-controlled study, by System Organ Class, Preferred Terms and frequency:

All Adverse Events (considered as related or not) Reported by ⩾1% of patients during treatment with EPIDUO FORTE in the Phase 3 vehicle-controlled study

System Organ Class/Preferred Term	CD0271 (adapalene) 0.3%/ CD1579 (benzoyl peroxide) 2.5% (N=217)	CD0271 (adapalene) 0.1%/CD1579 (benzoyl peroxide) 2.5% (N=217)	Vehicle Gel (N=69)
Infections and infestations	8.8%	7.8%	11.6%
Nasopharyngitis	6.5%	5.1%	1.4%
Upper respiratory tract infection	0.5%	2.3%	5.8%
Influenza	0.9%	0.9%	1.4%
Gastroenteritis	1.4%	0.5%	0
Ear infection	0	0	1.4%
Pharyngitis	0	0	1.4%
Skin and subcutaneous tissue disorders	6.0%	1.8%	2.9%
Skin irritation	4.1%	0.5%	0
Dermatitis allergic	0.5%	1.4%	0
Eczema	1.4%	0	0
Rash	0.5%	0	1.4%
Urticaria	0.5%	0	1.4%
Nervous system disorders	1.4%	0.9%	2.9%
Headache	1.4%	0.9%	1.4%
Dizziness	0	0	1.4%
Respiratory, thoracic and mediastinal disorders	0.5%	0.5%	2.9%
Cough	0.5%	0.5%	1.4%
Rhinitis seasonal	0	0	1.4%
General disorders and administration site conditions	0	0.5%	1.4%

Fatigue	0	0.5%	1.4%
Pyrexia	0	0	1.4%
Ear and labyrinth disorders	0	0	1.4%
Motion sickness	0	0	1.4%
Metabolism and nutrition disorders	0	0	1.4%
Hypokalaemia	0	0	1.4%

Effects on the ability to drive and use machines.

Not relevant.

Tabulated summary of adverse reactions

The adverse reactions (i.e. adverse events considered as related) are classified by System Organ Class and frequency, using the following convention: very common (≥ 1/10), common (≥1/100 to <1/10), uncommon (≥1/1,000 to <1/100), rare (≥1/10,000 to <1/1,000), very rare (<1/10,000), not known (cannot be estimated from the available data).

System Organ Class (SOC)	Frequency	Adverse Reactions
Eye disorders	Uncommon	Erythema of eyelid
Nervous system disorders	Uncommon	Paresthesia (tingling at application site)
Skin and subcutaneous tissue disorders	Common	Skin irritation, eczema, skin burning sensation, atopic dermatitis
	Uncommon	Pruritus, rash, dry skin
	Not known*	Application site burn**

* Post marketing surveillance data

** Most of the cases of "application site burn" were superficial burns but cases with second degree burn or severe burn reactions have been reported.

If skin irritation appears after application of EPIDUO FORTE Gel, the intensity is generally mild or moderate, with local tolerability signs and symptoms (erythema, dryness, scaling, burning and pain of skin (stinging pain) peaking during the first week and then subsiding spontaneously.

In addition to some of the above, other adverse drug reactions were reported with EPIDUO Gel (Adapalene 0.1%/Benzoyl peroxide 2.5%), the previously approved fixed combination of adapalene and benzoyl peroxide:

- **Clinical trials:**

Other adverse drug reactions reported in clinical trials with EPIDUO Gel are irritative contact dermatitis (common) and sunburn (uncommon).

- **Post-Marketing surveillance data:**

The following events have been reported since the global launch of EPIDUO Gel. These events have been chosen for inclusion due to either their seriousness, causal connection to EPIDUO Gel or frequency of

reporting. Post-market adverse events are reported spontaneously from a population of unknown size, thus estimates of frequency cannot be made.
Eye disorders: Eyelid oedema, conjunctivitis
Respiratory, thoracic and mediastinal disorders: Throat tightness.
Skin and subcutaneous tissue disorders: Pain of skin, allergic contact dermatitis, swelling of face, blister (vesicles), acne, eczema vesicular, photosensitivity reaction, skin discoloration, rash, pruritus, skin oedema,

DRUG INTERACTIONS

Overview

There are no known interactions with other medications which are likely to be used topically and concurrently with EPIDUO FORTE Gel (adapalene 0.3%/benzoyl peroxide 2.5%). Absorption of adapalene through human skin is low, and therefore interaction with systemic medications is unlikely.
The percutaneous penetration of benzoyl peroxide in the skin is low and the drug substance is completely metabolised into benzoic acid which is rapidly eliminated. Therefore, the potential interaction of benzoic acid with systemic medicinal products is unlikely to occur.

Drug-Drug Interactions

No formal drug-drug interaction studies were conducted with EPIDUO FORTE Gel.

As EPIDUO FORTE Gel has the potential for local irritation, it is possible that concomitant use of abrasive cleansers, strong drying agents, or irritant products may produce additive irritant effects. Particular caution should be exercised in using preparations containing sulphur, resorcinol, or salicylic acid in combination with EPIDUO FORTE Gel. If these preparations have been used, it is advisable not to start therapy with EPIDUO FORTE Gel until the effects of such preparations have subsided.

Drug-Food Interactions

Interactions of EPIDUO FORTE Gel with food products have not been established.

Drug-Herb Interactions

Interactions of EPIDUO FORTE Gel with herbal products have not been established.

Drug-Laboratory Interactions

Interactions of EPIDUO FORTE Gel with laboratory tests have not been established.

Drug-Lifestyle Interactions

EPIDUO FORTE Gel should not come into contact with any coloured material including hair and fabrics as this may result in bleaching and discolouration.

As with other retinoids, use of electrolysis, “waxing” and chemical depilatories for hair removal should be avoided on skin treated with EPIDUO FORTE Gel.

Patients should be advised to use non-comedogenic cosmetics. Colour cosmetics such as blushers and powders are acceptable; however, make-up cosmetics should be water based. Cosmetics must be removed by thorough cleansing before the area is treated.

DOSAGE AND ADMINISTRATION

Recommended Dose and Dosage Adjustment

EPIDUO FORTE Gel (adapalene 0.3%/benzoyl peroxide 2.5%) Gel (patients 12 years of age and older), should be applied to affected areas of the face, chest and back once daily in the evening, after washing gently with a non-medicated cleanser.

A small amount of EPIDUO FORTE Gel should be applied to provide a thin film, avoiding eyes, lips and mucous membranes. This medication should not be applied to cuts, abrasions, eczematous, or sunburned skin.

If irritation occurs, the patient should be directed to apply non-comedogenic moisturizers. Discontinue treatment if a severe local inflammatory response is experienced. Reinstitute therapy when the reaction has subsided, initially applying the preparation less frequently (e.g. every other day). Once-daily application may be resumed if it is judged that the patient is able to tolerate the treatment.

Missed Dose

If a single dose is missed, dosing should continue as per usual the following day, and the usual amount should be applied.

OVERDOSAGE

For management of a suspected oral overdose, contact your nearest medical emergency department.

In the event of an acute oral overdose, activated charcoal may be administered to aid in the removal of unabsorbed drug. General supportive measures are recommended.

EPIDUO FORTE Gel (adapalene 0.3%/benzoyl peroxide 2.5%) Gel is intended for cutaneous use only. Acute overdosage with the topical use is unlikely. If the medications are applied excessively, no more rapid or better results will be obtained and marked redness, peeling or discomfort may occur.

The acute oral toxicity of adapalene topical gel, 0.1% in mice and rats is greater than 10 mL/kg (10 mg/kg). Inadvertent oral ingestion of adapalene may lead to the same adverse effects as those associated with excessive oral intake of Vitamin A, including teratogenesis in women of childbearing years. Therefore, pregnancy testing should be carried out in women of childbearing potential who have ingested the product.

ACTION AND CLINICAL PHARMACOLOGY

Mechanism of Action

Adapalene and benzoyl peroxide have complementary mechanisms of action targeting the pathology of acne vulgaris. The actives have an effect on three pathophysiologic factors known to contribute to acne vulgaris: altered follicular growth and differentiation (comedogenesis), colonization of the pilosebaceous unit with Propionibacterium acnes (P. acnes), and inflammation.

• **Adapalene:** Adapalene is a chemically stable, retinoid-like compound. Biochemical and pharmacological profile studies have demonstrated that adapalene is a potent modulator of cellular

differentiation, keratinization and inflammatory processes, all of which represent important features in the pathology of acne vulgaris. Mechanistically, adapalene binds to specific retinoic acid nuclear receptors but, unlike tretinoin, does not bind to the cytosolic receptor protein. Although the exact mode of action of adapalene is unknown, current evidence suggests that topical adapalene normalizes the differentiation of follicular epithelial cells resulting in decreased microcomedone formation. In vitro studies with adapalene have shown inhibition of the AP-1 factors and the inhibition of the expression of toll like receptors 2. This profile suggests that the cell mediated inflammatory component of acne is reduced by adapalene.

• **Benzoyl Peroxide (BPO):** Benzoyl peroxide is an oxidizing agent with a broad spectrum bactericidal activity, in particular against Propionibacterium acnes (P. acnes), which is abnormally present in the acne-affected pilosebaceous unit. Additionally benzoyl peroxide has demonstrated exfoliative and keratolytic activities.

Pharmacodynamics

EPIDUO FORTE Gel (adapalene 0.3%/benzoyl peroxide 2.5%) combines two active substances, which have complementary mechanisms of action. The targets of this action are distinct, with no known pharmacodynamics interactions.

• **Adapalene:** Studies in acne patients provide clinical evidence that topical adapalene is effective in reducing non-inflammatory acne lesions (open and closed comedones). Adapalene inhibits the chemotactic (directional) and chemokinetic (random) responses of human polymorphonuclear leucocytes in in vitro assay models; it also inhibits the metabolism of arachidonic acid by lipoxidation to inflammatory mediators. This suggests that the cell-mediated inflammatory component of acne is modified by adapalene. Studies in human patients provide clinical evidence that topical adapalene is effective in reducing the inflammatory components of acne (i.e., papules and pustules).

• **Benzoyl Peroxide:** Benzoyl peroxide is an oxidizing agent with bactericidal and keratolytic effects. As it exerts its antimicrobial effect through its oxidizing properties, resistance to this agent is unlikely to develop and has not been reported in the literature. In addition, benzoyl peroxide has keratolytic properties, which may improve efficacy.

Pharmacokinetics

Absorption: A pharmacokinetic study was conducted with EPIDUO FORTE Gel in 28 adult and adolescent subjects (12 to 33 years of age) with severe acne vulgaris. The subjects were treated with once-daily applications on all potentially affected areas during a 4-week period with, on average, 2.3 grams/day (range: 1.6-3.1grams/day) of EPIDUO FORTE Gel applied as a thin layer to the face, shoulders, upper chest and upper back. After 4 weeks of treatment, 16 subjects (62%) had quantifiable adapalene plasma concentrations above the limit of quantification (LOQ of 0.1 ng/mL), with a mean Cmax of 0.16 ± 0.08 ng/mL and a mean AUC0-24h of 2.49 ± 1.21 ng.h/mL. The most exposed subject had adapalene Cmax and AUC0-24h values of 0.35 ng/mL and 6.41 ng.h/mL, respectively.

The percutaneous penetration of benzoyl peroxide is low; when applied topically, it is rapidly and completely converted into benzoic acid in the skin and eliminated in the urine.

Topical application of either Epiduo Gel or adapalene gel (at corresponding equivalent adapalene strengths, i.e. 0.1% or 0.3%) under conditions of maximized use generated similar results.

Distribution: The total binding of adapalene in the blood was greater than 99%, with adapalene bound primarily to lipoproteins and human serum albumin. In human blood with a haematocrit of 45%, the erythrocyte fraction of blood contained only 26% of the total adapalene indicating that adapalene was distributed to erythrocytes at a lesser extent.
The distribution for benzoyl peroxide could not be determined since it is converted into benzoic acid, which is an endogenous substance.

Metabolism: Following 24-hour incubation with human hepatocytes, more than 90% of adapalene was metabolized. Both metabolites and adapalene showed a possibility for conjugation - predominantly glucuronidation and sulfation.

The metabolism of benzoyl peroxide metabolism evaluated in vitro in human skin confirmed benzoyl peroxide is metabolized into benzoic acid before passing into circulation.

Excretion: Excretion of adapalene appears to be primarily by the biliary route. The majority of an administered dose of 0.3 % adapalene gel was excreted by 144 hours post dose and no drug was detected after the 6th day following last application. Under maximised conditions, the mean total unchanged drug substance excreted in feces was 0.07 % ± 0.06 % of the total dose applied (range 0.02 % to 0.19 %)

After topical administration in animal models, benzoyl peroxide was mainly and rapidly excreted in urine (45% of applied dose), nearly exclusively in the form of benzoic acid.

Special Populations and Conditions

Pharmacokinetic studies have not been conducted in subjects with a medical condition which might interfere with the absorption, distribution, metabolism, or excretion of EPIDUO FORTE Gel, in particular, a history of hepatic or renal disease.

STORAGE AND STABILITY

Keep container tightly closed. Keep in a safe place out of the reach of children.
Store below 25°C.

SHELF-LIFE

This medicine should not be used after the expiry date shown on the pack.
The product should be used within a period of 3 months after first opening.

SPECIAL HANDLING INSTRUCTIONS

There are no special handling instructions for EPIDUO FORTE Gel.

DOSAGE FORMS, COMPOSITION AND PACKAGING

EPIDUO FORTE Gel is a white to very pale yellow opaque gel.

Each gram of EPIDUO FORTE Gel contains respectively adapalene 0.3% w/w (3 mg/g) in addition to benzoyl peroxide 2.5% w/w (25 mg/g) in a vehicle consisting of acrylamide/sodium acryloyldimethyltaurate copolymer, docusate sodium, edetate disodium, glycerin, isohexadecane, poloxamer 124, polysorbate 80, propylene glycol, sorbitan oleate, and purified water.

NATURE AND CONTENT OF CONTAINERS

EPIDUO FORTE Gel is supplied in two types of containers

Tube:

2g and 5g white plastic tube having a high density polyethylene body structure with a high density polyethylene head, closed with a white polypropylene screw-cap.

Airless pump system:

15g, 30g, 45g, 60g, 70g white multidose container with airless pump system and snap on cap, made of polypropylene, low density polyethylene and high density polyethylene.

Not all pack sizes may be marketed.

Manufactured by:

G PRODUCTION INC
19400 Rte Transcanadienne
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