**CO-CODAMOL 8/500 EFFERVESCENT TABLETS**  
**PL 17780/0511**

**UKPAR**

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CO-CODAMOL 8/500 EFFERVESCENT TABLETS
PL 17780/0511

LAY SUMMARY

The Medicines and Healthcare products Regulatory Agency granted Winthrop Pharmaceuticals UK Limited a Marketing Authorisation (licence) for the medicinal products Co-codamol Effervescent 8/500 Tablets (PL 17780/0511) on 15th January 2010. This is a prescription-only medicine.

Co-codamol 8/500 Effervescent Tablets contains two active ingredients- paracetamol and codeine both of which belong to a group of medicines called pain-killers (analgesics). Co-codamol 8/500 Effervescent Tablets is a “compound analgesic” and is used to treat headache, including migraine, toothache, neuralgia, period pain, pain caused by rheumatism and arthritis and to relieve symptoms of cold, flu and sore throats.

This application is identical to the previously granted application for and Co-codamol 8/500 Effervescent Tablets (PL 17780/0072), granted to Winthrop Pharmaceuticals UK Limited on 13th November 2001. Essential similarity or equivalence to the approved product has been demonstrated and, as such, these products can be used interchangeably.

No new or unexpected safety concerns arose from this simple application and it was, therefore, judged that the benefits of taking Co-codamol 8/500 Effervescent Tablets outweigh the risks; hence a Marketing Authorisation has been granted.
CO-CODAMOL 8/500 EFFERVESCENT TABLETS
PL 17780/0511

SCIENTIFIC DISCUSSION

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Pharmaceutical assessment Page 5
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INTRODUCTION

Based on the review of the data on quality, safety and efficacy, the MHRA granted Winthrop Pharmaceuticals UK Limited a Marketing Authorisation for the medicinal product Co-codamol 8/500 Effervescent Tablets (PL 17780/0511) on the 15th January 2010. The product is a prescription-only medicine.

This application was submitted as an simple abridged application according to Article 10c of Directive 2001/83/EC, cross-referring to Co-codamol 8/500 Effervescent Tablets currently granted to Winthrop Pharmaceuticals UK Limited (PL 17780/0072). This product has previously been shown to be essentially similar to the originator product Co-codamol Effervescent (PL 00071/0235) licensed to Smithkline Beecham (SWG) Limited in November 1981.

No new data were submitted nor was it necessary for this simple application, as the data are identical to that of the previously granted cross-reference product. As the cross-reference product was granted prior to the introduction of current legislation, no Public Assessment Report (PAR) has been generated for it.

The product contains the active ingredients paracetamol and codeine which are indicated for pain relief.
1. INTRODUCTION
This is a simple, informed consent application for Co-codamol 8/500 Effervescent Tablets submitted under Article 10c of Directive 2001/83/EC. The proposed Marketing Authorisation Holder is Winthrop Pharmaceuticals UK Limited, One Onslow Street, Guildford, Surrey, GU1 4YS, UK.

The application cross-refers to Co-codamol 8/500 Effervescent Tablets (PL 17780/0072), approved on 13th November 2001 to the same marketing authorisation holder Winthrop Pharmaceutical UK Limited. The current application is considered valid.

2. MARKETING AUTHORISATION APPLICATION FORM
2.1 Name(s)
The proposed name of the product is Co-codamol 8/500 Effervescent Tablets. The product has been named in line with current requirements.

2.2 Strength, pharmaceutical form, route of administration, container and pack sizes
This product contain codeine phosphate hemihydrate and paracetamol equivalent to 8mg and 5000mg respectively. Co-codamol 8/500 Effervescent Tablets are to be stored in blisters composed of PPFP (paper/polyethylene/foil/PE) in pack sizes 48, 60 and 100 tablets. Not all pack sizes may be marketed. The Marketing Authorisation Holder (MAH) has committed to submitting mock-ups for all packaging for assessment before those pack sizes are commercially marketed. All primary product packaging complies with EU legislation regarding contact with food. The proposed shelf-life is 5 years with no specific storage conditions is consistent with the details registered for the cross-reference product.

2.3 Legal status
The product will be available as a prescription-only medicine (POM).

2.4 Marketing authorisation holder/Contact Persons/Company
Winthrop Pharmaceuticals UK Limited, One Onslow Street, Guildford, Surrey, GU1 4YS, UK.

The QP responsible for pharmacovigilance is stated and his CV is included.

2.5 Manufacturers
The proposed manufacturing sites are consistent with those registered for the cross-reference products and evidence of GMP compliance has been provided.
2.6 Qualitative and quantitative composition
The proposed composition is consistent with the details registered for the cross-reference product.

2.7 Manufacturing process
The proposed manufacturing process is consistent with the details registered for the cross-reference product and the maximum batch size is stated.

2.8 Finished product/shelf-life specification
The proposed finished product specification are in-line with the details registered for the cross-reference product.

2.9 Drug substance specification
The proposed drug substance specification is consistent with the details registered for the cross-reference product.

2.10 TSE Compliance
None of the excipients used in the product contain materials of animal or human origin. This is consistent with the cross-reference product.

3. EXPERT REPORTS
The applicant has included detailed expert reports in Module 2 of the application. Signed declarations and copies of the experts’ CVs are enclosed in Module 1.4 for the quality, non-clinical and clinical experts. All are considered to have sufficient experience for their responsibilities.

4. PRODUCT NAME & APPEARANCE
See 2.1 for details of the proposed product name. The appearance of the product is identical to the cross-reference product.

5. SUMMARY OF PRODUCT CHARACTERISTICS
The proposed summary is consistent with the details registered for the cross-reference product.

6. PATIENT INFORMATION LEAFLET/CARTON
PIL
The patient information leaflet has been prepared in-line with the details registered for the cross-reference product.

A package leaflet has been submitted to the MHRA along with results of consultations with target patient groups ("user testing"), in accordance with Article 59 of Council Directive 2001/83/EC. The results indicate that the package leaflet is well-structured and organised, easy to understand and written in a comprehensive manner. The test shows that the patients/users are able to act upon the information that it contains.

Carton and blister
The proposed artwork is comparable to the artwork registered for the cross-reference product and complies with statutory requirements. In line with current legislation the
applicant has also included the name of the product in Braille on the outer packaging and has included sufficient space for a standard UK pharmacy dispensing label.

7. CONCLUSIONS
The data submitted with this application are acceptable. A Marketing Authorisation should be granted.
PRECLINICAL ASSESSMENT

No new preclinical data have been supplied with this application and none are required for an application of this type.
CLINICAL ASSESSMENT

No new clinical data have been supplied with this application and none are required for an application of this type.
OVERALL CONCLUSION AND RISK BENEFIT ASSESSMENT

QUALITY
The data for this application are consistent with that previously assessed for the cross-reference product and as such has been judged to be satisfactory.

PRECLINICAL
No new preclinical data were submitted and none are required for an application of this type.

EFFICACY
Codeine and paracetamol are well known drugs and have been used in the treatment of pain relief for many years. This application is identical to previously granted application for Co-codamol 8/500 Effervescent Tablets (PL 17780/0072) in which the applicant demonstrated essential similarity to the innovator product Co-codamol Effervescent (PL 00071/0235) licensed to Smithkline Beecham (SWG) Limited.

No new or unexpected safety concerns arise from this application.

The SPC, PIL and labelling are satisfactory and consistent with that for the cross-reference product.

RISK BENEFIT ASSESSMENT
The quality of the product is acceptable and no new preclinical or clinical safety concerns have been identified. The applicant’s product is identical to the cross-reference product which, in turn, has been shown to be interchangeable with the innovator product. Extensive clinical experience with codeine and paracetamol is considered to have demonstrated the therapeutic value of the compound. The risk benefit is therefore considered to be positive.
**CO-CODAMOL 8/500 EFFERVESCENT TABLETS**
**PL 17780/0511**

**STEPS TAKEN FOR ASSESSMENT**

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<tr>
<td>1</td>
<td>The MHRA received the marketing authorisation application on 28&lt;sup&gt;th&lt;/sup&gt; October 2009.</td>
</tr>
<tr>
<td>2</td>
<td>Following standard checks and communication with the applicant the MHRA considered the application valid on 5&lt;sup&gt;th&lt;/sup&gt; November 2009.</td>
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<tr>
<td>3</td>
<td>Following assessment of the application the MHRA requested further information relating to the quality dossier on 7&lt;sup&gt;th&lt;/sup&gt; January 2010.</td>
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<tr>
<td>4</td>
<td>The applicant responded to the MHRA’s requests, providing further information on 7&lt;sup&gt;th&lt;/sup&gt; January 2010.</td>
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<tr>
<td>5</td>
<td>The application was determined on 15&lt;sup&gt;th&lt;/sup&gt; January 2010.</td>
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STEPS TAKEN AFTER AUTHORISATION - SUMMARY

The following table lists a non-safety update to the Marketing Authorisation for this product that has been approved by the MHRA since the product was first licensed. The table include an update that has been incorporated into the text of this Public Assessment Report (PAR) or added as an annex to this PAR. This is not a complete list of the post-authorisation changes that have been made to this Marketing Authorisation.

<table>
<thead>
<tr>
<th>Date submitted</th>
<th>Application type</th>
<th>Scope</th>
<th>Outcome</th>
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<tbody>
<tr>
<td>29th October 2012</td>
<td>Type 1B</td>
<td>To update sections 2 (Qualitative and quantitative composition), 4.2 (Posology and method of administration), 5.3 (Preclinical safety data), 6.1 (List of excipients), 6.2 (Incompatibilities) and 6.5 (Nature and content of container) of the Summary of Product Characteristics (SmPC) and, consequentially, the Patient Information Leaflet (PIL) in line with the Quality Review of Documents (QRD) template.</td>
<td>Approved 09th January 2013</td>
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# SUMMARY OF PRODUCT CHARACTERISTICS

1 **NAME OF THE MEDICINAL PRODUCT**  
Co-codamol 8/500 Effervescent Tablets

2 **QUALITATIVE AND QUANTITATIVE COMPOSITION**  
Each effervescent tablet contains 500mg paracetamol and 8mg codeine phosphate.  
Also contains sorbitol and sodium (see section 4.4)  
For a full list of excipients, see section 6.1

3 **PHARMACEUTICAL FORM**  
Effervescent Tablet  
Flat white tablets with bevelled edges

4 **CLINICAL PARTICULARS**

4.1 **Therapeutic indications**  
For the relief of most painful and febrile conditions such as headache including migraine, neuralgia, toothache, sore throat, colds, influenza, dysmenorrhoea and rheumatic pain.

4.2 **Posology and method of administration**  
**Adults and children over 12 years:**  
Two tablets, to be dissolved in water, not more frequently than every 4 hours, up to a maximum of 8 tablets in any 24 hour period.

**Children under 12 years:**  
Not recommended for children under 12 years of age.  
The product is for oral administration.

4.3 **Contraindications**  
Hypersensitivity to paracetamol, codeine phosphate or any of the other constituents.

4.4 **Special warnings and precautions for use**  
Care is advised in the administration of paracetamol to patients with severe renal or severe hepatic impairment. The hazard of overdose is greater in those with non-cirrhotic alcoholic liver disease.  
This product contains 388mg of sodium per effervescent tablet. This may be harmful to people on a low sodium or low salt diet.

This product contains sorbitol. Patients with rare hereditary problems of fructose intolerance should not take this medicine.

The recommended dose should not be exceeded. This medicine should not be taken with any other paracetamol-containing products. If symptoms persist, the patient should be advised to consult their doctor. The patient should be advised to see immediate medical advice in the event of an overdose, even if they feel well, because of the risk of delayed, serious liver damage.

The risk-benefit of continued use should be assessed regularly by the prescriber.

The leaflet will state in a prominent position in the 'before taking' section:  
- Do not take for longer than directed by your prescriber  
- Taking codeine regularly for a long time can lead to addiction, which might cause you to feel restless and irritable when you stop the tablets.  
- Taking a painkiller for headaches too often or for too long can make them worse.

The label will state (To be displayed prominently on outer pack – not boxed):
- Do not take for longer than directed by your prescriber as taking codeine regularly for a long time can lead to addiction

4.5 Interaction with other medicinal products and other forms of interaction
The speed of absorption of paracetamol may be increased by metoclopramide or domperidone and absorption reduced by cholestyramine.

The anticoagulant effect of warfarin and other coumarins may be enhanced by prolonged regular daily use of paracetamol with increased risk of bleeding; occasional doses have no significant effect.

4.6 Pregnancy and lactation
Epidemiological studies in human pregnancy have shown no ill effects due to paracetamol used in the recommended dose. Codeine has been used for many years without apparent ill consequence and animal studies have not shown any hazard. Patients should follow the advice of their doctor regarding the use of this product. Paracetamol is excreted in breast milk but not in a clinically significant amount. Available published data do not contraindicate breast feeding.

4.7 Effects on ability to drive and use machines
None.

4.8 Undesirable effects
- Regular prolonged use of codeine is known to lead to addiction and tolerance. Symptoms of restlessness and irritability may result when treatment is then stopped.
- Prolonged use of a painkiller for headaches can make them worse.

Blood and the lymphatic system
Frequency not known: blood dyscrasias including thrombocytopenia and agranulocytosis

Nervous system disorders
Frequency not known: dizziness, light-headedness, confusion, drowsiness

Gastrointestinal disorders
Frequency not known: pancreatitis, constipation, nausea, vomiting

Skin and subcutaneous tissue disorders
Frequency not known: allergic reactions (hypersensitivity) including skin rash

Renal and urinary disorders
Frequency not known: urinary retention

4.9 Overdose
Paracetamol
Liver damage is possible in adults who have taken 10g or more of paracetamol. Ingestion of 5g or more of paracetamol may lead to liver damage if the patient has risk factors (see below).

Risk factors
If the patient:
- is on long term treatment with carbamazepine, phenobarbitone, phenytoin, primidone, rifampicin, St. John’s Wort or other drugs that induce liver enzymes, or
- regularly consumes ethanol in excess of recommended amounts, or
- is likely to be glutathione depleted e.g. eating disorders, cystic fibrosis, HIV infection, starvation, cachexia.

Symptoms
Symptoms of paracetamol overdosage in the first 24 hours are pallor, nausea, vomiting, anorexia and abdominal pain. Liver damage may become apparent 12 to 48 hours after ingestion. Abnormalities of glucose metabolism and metabolic acidosis may occur. In severe poisoning, hepatic failure may progress to encephalopathy, haemorrhage, hypoglycaemia, cerebral oedema and death. Acute renal
failure with acute tubular necrosis, strongly suggested by loin pain, haematuria and proteinuria may develop even in the absence of severe liver damage. Cardiac arrhythmias and pancreatitis have been reported.

Management
Immediate treatment is essential in the management of paracetamol overdose. Despite a lack of significant early symptoms, patients should be referred to hospital urgently for immediate medical attention. Symptoms may be limited to nausea or vomiting and may not reflect the severity of overdose or the risk of organ damage. Management should be in accordance with established treatment guidelines (see BNF overdose section).

Treatment with activated charcoal should be considered if the overdose has been taken within 1 hour. Plasma paracetamol concentration should be measured at 4 hours or later after ingestion (earlier concentrations are unreliable). Treatment with N-acetylcysteine may be used up to 24 hours after ingestion of paracetamol, however, the maximum protective effect is obtained up to 8 hours post-ingestion. The effectiveness of the antidote declines sharply after this time. If required the patient should be given intravenous N-acetylcysteine, in line with the established dosage schedule. If vomiting is not a problem, oral methionine may be a suitable alternative for remote areas, outside hospital. Management of patients who present serious hepatic dysfunction beyond 24h from ingestion should be discussed with the NPIS or a liver unit.

Codeine
The effects in overdosage will be potentiated by simultaneous ingestion of alcohol and psychotropic drugs.

Symptoms
Central nervous system depression, including respiratory depression, may develop but is unlikely to be severe unless other sedative agents have been co-ingested, including alcohol, or the overdose is very large. The pupils may be pin-point in size; nausea and vomiting are common. Hypotension and tachycardia are possible but unlikely.

Management
This should include general symptomatic and supportive measures including a clear airway and monitoring of vital signs until stable. Consider activated charcoal if an adult presents within one hour of ingestion of more than 350mg or a child more than 5mg/kg.

Give naloxone if coma or respiratory depression is present. Naloxone is a competitive antagonist and has a short half-life so large and repeated doses may be required in a seriously poisoned patient. Observe for at least four hours after ingestion, or eight hours if a sustained release preparation has been taken.

5 PHARMACOLOGICAL PROPERTIES
5.1 Pharmacodynamic properties
Pharmacotherapeutic group: Anilides, Paracetamol combinations
ATC Code: N02B E51
Paracetamol is an analgesic and antipyretic.

Codeine phosphate is a moderate analgesic and has weak cough suppressant activity.

5.2 Pharmacokinetic properties
Paracetamol is rapidly and almost completely absorbed from the gastrointestinal tract. Concentration in plasma reaches a peak in 30-60 minutes. Plasma half-life is 1-4 hours. Paracetamol is relatively uniformly distributed throughout most body fluids, plasma protein binding is variable.

Codeine phosphate is well absorbed after oral administration and is widely distributed. About 86% is excreted in the urine in 24 hours; 40-70% if free or conjugated morphine, 5-15% is free or conjugated norcodeine.
5.3 Preclinical safety data
There are no preclinical data of relevance to the prescriber which are additional to that already included in other sections of the SPC.

6 PHARMACEUTICAL PARTICULARS

6.1 List of excipients
- Sorbitol,
- Saccharin sodium
- Sodium hydrogen carbonate (sodium bicarbonate),
- Polyvidone (povidone)
- Sodium lauryl sulphate
- Anhydrous citric acid
- Anhydrous sodium carbonate
- Dimeticone (dimethicone)

6.2 Incompatibilities
None.

6.3 Shelf life
48 months.

6.4 Special precautions for storage
This medicinal product does not require any special storage conditions.

6.5 Nature and contents of container
Individually packed into PPFP or Surlyn laminate strips in cardboard carton.
Pack sizes: 48, 60, 100.

6.6 Special precautions for disposal
No special requirements

7 MARKETING AUTHORISATION HOLDER
Winthrop Pharmaceuticals UK Limited
One Onslow Street
Guildford
Surrey
GU1 4YS
United Kingdom
Trading as: Winthrop Pharmaceuticals, PO Box 611, Guildford, Surrey, GU1 4YS, UK

8 MARKETING AUTHORISATION NUMBER(S)
PL 17780/0511

9 DATE OF FIRST AUTHORISATION/RENEWAL OF THE AUTHORISATION
15/01/2010

10 DATE OF REVISION OF THE TEXT
15/01/2010
MODULE 3

PATIENT INFORMATION LEAFLET

If any of the side effects gets worse, lasts longer than a few days or you notice any side effects not listed in this leaflet, please tell your doctor or pharmacist.

**SIDE EFFECTS TO WATCH FOR**

- Keep the medicine in the original packaging in order to protect from moisture.
- Do not use this medicine if the expiry date shown on the pack.
- Store your medicine in the original packaging in order to protect from moisture.
- Ask your pharmacist how to dispose of medicines no longer required. Do not dispose of medicines by flushing down a toilet or sink or by throwing out with your normal household refuse. This will help protect the environment.

**GENERAL INFORMATION**

What Co-Codamol 8/500 Effervescent Tablets contains:
- The active substances of Co-Codamol 8/500 Effervescent Tablets are codeine phosphate and paracetamol. Each tablet contains 8mg of codeine phosphate and 500mg of paracetamol.
- The other ingredients are: sodium bicarbonate, sodium citrates, citric acid, citrate citronelly chloride, citric acid, sodium citrates, sodium bicarbonates, potash and sweeteners.

Contents of pack:
Co-Codamol 8/500 Effervescent Tablets come in containers of 100 tablets.

The Marketing Authorisation Holder is:
Winthrop Pharmaceuticals, PO Box 671, Guildford, Surrey, GU1 4YS

The Manufacturer is:
Cavendish Manufacturing Centre, Edgfield Avenue, Fareham, Hampshire, PO16 7TT, UK

This leaflet was last updated in June 2006.

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**PATIENT INFORMATION LEAFLET**

**CO-CODAMOL 8/500 EFFERVESCENT TABLETS**

Read all of this leaflet carefully before you start taking this medicine.
- Keep the leaflet. You may need to read it again.
- If you have any questions, please ask your doctor or pharmacist.
- Please use this medicine as directed by your doctor. Do not use this medicine for conditions, other than those specified on the leaflet. It may harm you, even if the symptoms are the same as your doctor told you.
- If any of the side effects get worse, or if you notice any side effects not listed in this leaflet, please tell your doctor or pharmacist.
- Your doctor may have given you this medicine before from another company. It may have looked slightly different. Moreover, the tablet will have the same effect.

In this leaflet:
1. What this medicine is and what it is used for
2. Before you take Co-codamol
3. How to take Co-codamol
4. Possible side effects
5. How to store Co-codamol
6. Further information

**WHAT CO-CODAMOL 8/500 EFFERVESCENT TABLETS IS AND WHAT IT IS USED FOR**

The name of your medicine is Co-Codamol 8/500 Effervescent Tablets (called co-codamol throughout this leaflet). Co-Codamol contains two different medicines (called codeine phosphate and paracetamol). It belongs to a group of medicines called analgesics (painkillers) and is used to treat pain and relieve the symptoms of colds, flu and sore throats.

**BEFORE YOU TAKE CO-CODAMOL**

Important things you should know about Co-codamol:
- Do not take Co-codamol and tell your doctor if:
  - You are allergic (hypersensitive) to codeine, paracetamol or any of the other ingredients in your medicine (listed in Section 6 Further information).
  - You have had trouble breathing, including asthma, bronchial asthma, or have had swallowing difficulty.
  - You are pregnant, unless your doctor has told you that it is safe for you to have Co-codamol.
  - You have a history of drug or alcohol dependence.
  - Your doctor has advised you not to take Co-codamol.

Do not take Co-codamol if any of the above apply to you, if you are not sure, talk to your doctor or pharmacist before taking Co-codamol.

Take special care and check with your doctor before taking Co-codamol:
- You have had mastitis or liver problems.
- You have non-drinkers alcoholics liver disease.
- If you are not sure if any of the above apply to you, talk to your doctor or pharmacist before taking the medicine.
Taking other medicines
Please tell your doctor or pharmacist if you are taking or have recently taken any other medicines. This includes medicines obtained without prescription, including herbal medicines. This is because co-codamol can affect the way some other medicines work. Also, some other medicines can affect the way co-codamol works.
While taking co-codamol you should not take any other medicines which contain paracetamol.
This includes some painkillers, cough and cold remedies. It also includes a wide range of other medicines available from your doctor and more widely in shops.

Do not take this medicine and tell your doctor or pharmacist if you are taking any of the following:
- Medicines used to thin the blood such as warfarin
- Metoclopramide or domperidone — used to stop you feeling sick (nausea) or being sick (vomiting)
- Cisapride — for hay fever or cholesterol levels

If you are not sure if any of the above apply to you, talk to your doctor or pharmacist before taking co-codamol.

Pregnancy and breast-feeding
- If you are pregnant, think you may be pregnant or plan to get pregnant, talk to your doctor before taking these tablets.
- You can take co-codamol while breast-feeding.

Important information about some of the ingredients of your co-codamol tablets
- Sodium: There is a solution of sodium per effervescent tablet. This may be harmful to people on a low sodium or low salt diet.
- Sorbitol: This is a type of sugar. If you have been told by your doctor that you cannot have sugar or your age group, talk to your doctor before taking this medicine.

Changing or stopping treatment
- Gradual reduction of co-codamol may lead to tolerance and dependence. If you have taken regular daily doses of co-codamol for a long time, do not increase the dose or suddenly stop treatment without discussing this with your doctor.

How to take co-codamol
Always read the label exactly as your doctor has told you. You should check with your doctor or pharmacist if you are unsure.
- Do not take more than the recommended dose.
- Do not take longer than your doctor tells you.

Adults and children over 12
- The usual dose of co-codamol is 2 effervescent tablets, taken together.
- Dissolve the effervescent tablets in a glass of water before taking.
- Wait at least 4 hours before taking another dose.
- Do not take more than 8 tablets in any 24-hour period.

Children
Co-codamol should not be given to children under 12 years of age.
If you take more co-codamol than you should
- Tell your doctor or go to your nearest hospital casualty department straight away — even if you feel well. This is because of the risk of delayed serious liver damage.
- Remember to take any remaining tablets and the pack with you. This is so the doctor knows what you have taken.
- If you forget to take co-codamol:
  - If you forget to take a dose at the right time, take it as soon as you remember. However, if it is almost time for your next dose, skip the missed dose.

Possible side-effects
As with all medicines, co-codamol can cause side effects, although not everybody gets them. The following side effects may happen with this medicine:

Important side-effects you should know about co-codamol
- Taking a co-codamol for headaches too often or for too long can make them worse.

Side-effects that a long time can lead to addiction, which might cause you to feel restless and irritable when you stop the tablets.

Stop taking co-codamol and see a doctor or go to a hospital straight away if:
- You get swelling of the arms, back, ankles, face, lips or tongue which may cause difficulty in swallowing or breathing. You could also notice any difficulty in swallowing or feeling sick (nausea) or being sick (vomiting).

This may mean you are having an allergic reaction to co-codamol.

Talk to your doctor straight away if you notice the following serious side effects:
- Swollen stomach pain, which may reach your back. This could be a sign of inflammation of the pancreas (pancreatitis). This is a very rare side effect.

Tell your doctor or pharmacist if any of the following side effects get worse or last longer than a few days:
- Constipation
- Headache
- Dizziness, light-headedness, drowsiness, confusion
- Difficulty in passing water
- Becoming dependent on co-codamol
- You get infections or bruises more easily than usual. This could be because of a blood problem (such as agranulocytosis, neutropenia or thrombocytopenia)
Annex 1

Reference: PL 17780/0511, Application 0029
Product: Co-Codamol 8/500 Effervescent Tablets
Marketing Authorisation Holder: Wintrop Pharmaceuticals UK Limited
Active Ingredient(s): Codeine phosphate hemihydrate and paracetamol
EU Procedure Number: Not applicable

Reason
To update sections 2 (Qualitative and quantitative composition), 4.2 (Posology and method of administration), 5.3 (Preclinical safety data), 6.1 (List of excipients), 6.2 (Incompatibilities) and 6.5 (Nature and content of container) of the Summary of Product Characteristics (SmPC) and, consequentially, the Patient Information Leaflet (PIL) in line with the Quality Review of Documents (QRD) template.

Supporting Evidence
Revised SmPC and PIL text have been provided.

Evaluation
Proposed changes are in line with the latest CMDh (Co-ordination Group for Mutual Recognition and Decentralised Procedures-Human) QRD template.

The updated SmPC sections and leaflet text are satisfactory.

Conclusion
The amendments to the SmPC fragments and leaflet can be approved.

In accordance with Directive 2010/84/EU, the Summaries of Product Characteristics (SmPC) and Patient Information Leaflets (PIL) for products granted Marketing Authorisations at a national level are available on the MHRA website.

Decision: Approved (09/01/2013).