



Direct Healthcare Professional Communication

March 2022

Infliximab: Use of live vaccines in infants exposed in utero or during breastfeeding

Dear Healthcare professional,

The Egyptian Pharmaceutical Vigilance Center of the Central Administration for Pharmaceutical Care at The Egyptian Drug Authority would like to inform you of the following:

Summary

Infants exposed to infliximab in utero (i.e., during pregnancy)

- Infliximab crosses the placenta and has been detected in infant serum up to 12 months after birth. After in utero exposure, infants may be at increased risk of infection, including serious disseminated infection that can become fatal.
- Live vaccines (e.g., BCG vaccine) should not be given to infants after in utero exposure to infliximab for 12 months after birth.
- If there is a clear clinical benefit for the individual infant, administration of a live vaccine might be considered at an earlier timepoint if infant infliximab serum levels are undetectable or if infliximab administration was limited to the first trimester of pregnancy.

Infants exposed to infliximab via breast milk

- Infliximab has been detected at low levels in breast milk. It has also been detected in infant serum after exposure to infliximab via breast milk.
- Administration of a live vaccine to a breastfed infant while the mother is receiving infliximab is not recommended unless infant infliximab serum levels are undetectable.

Background information on the security concerns

Infliximab is a chimeric human-murine immunoglobulin G1 (IgG1) monoclonal antibody that specifically binds to human TNF α . In the European Union, it is indicated for the treatment of rheumatoid arthritis, Crohn's disease (adult and pediatric), ulcerative colitis (adult and pediatric), ankylosing spondylitis, psoriatic arthritis, and psoriasis.

Administration of live vaccines to infants exposed to infliximab in utero

Infliximab crosses the placenta and has been detected in the serum of infants exposed to infliximab in





utero for up to 12 months after birth (Julsgaard et al, 2016). These infants may be at increased risk of infection, including serious disseminated infection that can become fatal. This includes disseminated Bacillus Calmette Guérin (BCG) infection which has been reported following administration of BCG live vaccine after birth.

A 12-month waiting period starting at birth is therefore recommended before live vaccines are administered to infants who have been exposed to infliximab in utero. If there is a clear clinical benefit for the individual infant, administration of a live vaccine might be considered earlier if infant infliximab serum levels are undetectable or if infliximab administration was limited to the first trimester of pregnancy (when placental transfer of IgG is considered minimal).

Administration of live vaccines to infants exposed to infliximab via breast milk

Limited data from published literature indicate that infliximab has been detected at low levels in breast milk at concentrations up to 5% of the maternal serum level (Fritzsche et al, 2012).

Infliximab has also been detected in infant serum after exposure to infliximab via breast milk. Systemic exposure in a breastfed infant is expected to be low because infliximab is largely degraded in the gastrointestinal tract.

Administration of live vaccines to a breastfed infant when the mother is receiving infliximab is not recommended unless infant infliximab serum levels are undetectable.

Product information

The infliximab SmPC, patient leaflets and patient reminder cards are being updated to reflect the current recommendations on live vaccination of infants following in utero exposure or whilst breastfeeding. Patients treated with infliximab should be given the package leaflet and the patient reminder card. Women treated with infliximab should be educated on the importance of discussing (live) vaccines with their infants' physicians, should they become pregnant or choose to breastfeed while using infliximab.

References

https://www.ema.europa.eu/en/documents/dhpc/direct-healthcare-professional-communication-dhpc-infliximab-remicade-flixabi-inflextra-remxima_en.pdf

Call for reporting

The Egyptian Pharmaceutical Vigilance Center is reminding HCP and public to report any safety information regarding human medicinal products including adverse drug reactions, medications errors, lack of efficacy and other medicine related problems through the following contacts:





The Egyptian Pharmaceutical Vigilance Center

Address: 21 Abd El Aziz Al Soud Street, El-Manial, Cairo, Egypt, And PO Box: 11451
Telephone: (+2)02 25354100, Extension: 1470 Fax: +202 – 23610497

Hotline: 15301

Email: Pv.follow-up@edaegypt.gov.eg

Online reporting: <https://primaryreporting.who-umc.org/EG>
QR Code:

