

## SPC Wording for

### Methadone and QT prolongation

As agreed by the PhVWP in June 2004

Revised in February 2006

#### Summary of proposed SmPC changes (February 2006)

##### Section 4.4

*Cases of QT interval prolongation and torsade de pointes have been reported during treatment with methadone, particularly at high doses (>100 mg/d). Methadone should be administered with caution to patients at risk for development of prolonged QT interval, e.g. in case of:*

- *known history of QT prolongation,*
- *advanced heart disease,*
- *ischaemic heart disease & liver disease*
- *concomitant treatment with drugs that have a potential for QT-prolongation,*

##### Section 4.5

*- methadone clearance decreases in case of co-administration of methadone and drugs which inhibit CYP3A4 activity, such as some anti-HIV agents, macrolides antibiotics, cimetidine and azole antifungal agents (since the metabolism of methadone is mediated by the CYP3A4 isoenzyme)*

*- cardiac events in case of co-administration with drugs affecting cardiac conduction, and drugs which might cause electrolyte abnormalities.*