

# SUMMARY OF PRODUCT CHARACTERISTICS

## 1. NAME OF THE MEDICINAL PRODUCT

SECNOL 2 g, granules in sachet-dose

## 2. QUALITATIVE AND QUANTITATIVE COMPOSITION

Secnidazole ..... 2.000 g per sachet

Excipient with known effect: sucrose

For the full list of excipients, see section 6.1.

## 3. PHARMACEUTICAL FORM

Granules.

## 4. CLINICAL PARTICULARS

### 4.1 Therapeutic indications

SECNOL 2 g, granules in sachet-dose, is indicated for the treatment of the following infections (see sections 4.4 and 5.1):

- Urethritis and vaginitis due to *Trichomonas vaginalis*,
- Bacterial vaginosis (see section 4.4 "Bacterial vaginosis"),
- Intestinal amoebiasis,
- Hepatic amoebiasis,
- Giardiasis.

Official recommendations regarding the appropriate use of antibacterial agents should be taken into account.

### 4.2 Posology and method of administration

#### Posology

This formulation containing 2 g per sachet is not suitable for all recommended dosages. If necessary, other presentations should be used, particularly in children.

Urethritis and vaginitis due to *Trichomonas vaginalis*, bacterial vaginosis:

- Adults: 2 g in a single dose; taken on a single day.  
In cases of urethritis and vaginitis, the partner should be treated simultaneously.

#### Intestinal amoebiasis:

- Acute symptomatic amoebiasis (*histolytica* form):
  - Adults: 2 g in a single dose; taken on a single day
  - Children: 30 mg/kg/day in a single dose; taken on a single day
- Asymptomatic amoebiasis (minuta and cystic forms):  
Same daily dose for 3 days.

#### Hepatic amoebiasis:

- Adults: 1.5 g per day, in one or several doses, for 5 days
- Children: 30 mg/kg/day, in one or several doses, for 5 days

Note: In the suppurative phase of hepatic amoebiasis, treatment with secnidazole must be combined with drainage of pus or abscesses.

#### Giardiasis:

- Children: 30 mg/kg/day in a single dose; taken on a single day.

#### Method of administration

Oral use.

This medicinal product should be taken at the beginning of a meal.

### 4.3 Contraindications

Hypersensitivity to secnidazole, to the imidazole class, or to any of the excipients listed in section 6.1.

### 4.4 Special warnings and precautions for use

#### Bacterial vaginosis

The level of evidence is based on a single study comparing a single dose of secnidazole with metronidazole administered for seven days. In relation to pharmacokinetic parameters (see section 5.2), the single-dose regimen of secnidazole may be insufficient in some patients, and local vaginal treatment may be required.

#### **Hypersensitivity**

Allergic reactions may occur and may be severe (see section 4.8). In such cases, secnidazole must be discontinued and appropriate medical treatment should be initiated.

#### **Blood disorders**

Avoid administering secnidazole in patients with a history of blood dyscrasia.

#### **Excipient with known effect**

This medicinal product contains sucrose. Its use is not recommended in patients with fructose intolerance, glucose-galactose malabsorption syndrome, or sucrase/isomaltase deficiency.

#### **Drug interactions**

Concomitant use of secnidazole and alcohol is not recommended (see section 4.5).

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

#### **Disulfiram-like reaction**

Many medicinal products produce a disulfiram-like reaction with alcohol, and their combination with alcohol is not recommended.

#### **Combinations not recommended**

##### **+ Alcohol (beverage or excipient)**

Disulfiram-like effect (flushing, heat, vomiting, tachycardia). Avoid consuming alcoholic beverages and medicinal products containing alcohol. Consider the complete elimination of medicinal products (according to their half-life) before resuming alcohol consumption or taking medicinal products containing alcohol.

### **4.6 Fertility, pregnancy and lactation**

#### **Pregnancy**

Animal studies have not shown teratogenic effects.

During the first trimester of pregnancy, clinical data are limited. As a precaution, secnidazole should preferably not be used during the first trimester. Beyond the first trimester, based on clinical experience, use of secnidazole can be considered.

#### **Breast-feeding**

No data are available on the passage of secnidazole into breast milk. However, transfer into breast milk has been documented for other imidazole derivatives, and cases of oro-anal candidiasis and diarrhoea have been reported in breastfed infants whose mothers received these medicinal products.

Therefore, it is preferable to avoid administering this medicinal product during breastfeeding or to interrupt breastfeeding for 24 hours if a single dose is taken.

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

Patients should be informed of the potential risk of dizziness and advised not to drive or operate machinery if such symptoms occur.

### **4.8 Undesirable effects**

Adverse reactions are listed in decreasing order of frequency using the following convention: very common ( $\geq 1/10$ ), common ( $\geq 1/100$  to  $< 1/10$ ), uncommon ( $\geq 1/1,000$  to  $< 1/100$ ), rare ( $\geq 1/10,000$  to  $< 1/1,000$ ), very rare ( $< 1/10,000$ ), frequency not known (cannot be estimated from available data).

#### **Gastrointestinal disorders**

Common: nausea, vomiting, epigastric pain, dysgeusia (metallic taste), glossitis, stomatitis

Blood and lymphatic system disorders

Frequency not known: leukopenia (reversible upon discontinuation)

#### **Nervous system disorders**

Rare: headache, dizziness, incoordination, ataxia, paraesthesia, sensory-motor polyneuritis

#### **Immune system disorders**

Rare: immediate hypersensitivity reaction (fever, erythema, urticaria, angioedema)

#### Reporting of suspected adverse reactions

Reporting suspected adverse reactions after marketing authorisation is important. It allows continuous monitoring of the benefit-risk balance of the medicinal product. Healthcare professionals should report any suspected adverse reactions via the national reporting system:

Agence nationale de sécurité du médicament et des produits de santé (ANSM) and the network of Regional Pharmacovigilance Centres – Website:

<https://signalement.social-sante.gouv.fr/>

#### **4.9 Overdose**

In case of overdose, an increase in adverse effects related to secnidazole administration should be expected, particularly neurological disorders as reported with other imidazoles.

Treatment is symptomatic.

### **5. PHARMACOLOGICAL PROPERTIES**

#### **5.1 Pharmacodynamic properties**

Pharmacotherapeutic class: ANTIPROTOZOAL AGENTS – NITROIMIDAZOLE DERIVATIVES,

ATC code: P01AB07

Secnidazole is a synthetic derivative of the 5-nitroimidazole family.

#### Mechanism of action

Secnidazole has amoebicidal and antiprotozoal activity.

From a bacteriological standpoint, although the species usually involved in bacterial vaginosis are resistant to 5-nitroimidazoles, including secnidazole, available data have shown activity of secnidazole in this condition, although the mechanism has not been elucidated.

#### Breakpoints

Breakpoints distinguish susceptible strains from those with intermediate susceptibility, and these in turn from resistant strains.

Recommendations of the Antibigram Committee of the French Society for Microbiology (CA-SFM) (based on CA-SFM breakpoints established for metronidazole):

S ≤ 4 mg/L and R > 4 mg/L

#### Antimicrobial spectrum of activity

The prevalence of acquired resistance may vary geographically and over time for certain species. Therefore, it is useful to have information on local resistance prevalence, especially for the treatment of severe infections. If necessary, specialist advice should be sought, particularly when the usefulness of the medicinal product may be questioned due to the level of local resistance prevalence.

#### Classification of species according to susceptibility to the antimicrobial agent:

#### **CLASSES**

##### **SPECIES USUALLY SUSCEPTIBLE**

###### **Anaérobies**

*Bacteroides fragilis*

*Bilophila wadsworthia*

*Clostridium* spp. y compris *Clostridium difficile* et *Clostridium perfringens*

*Fusobacterium*

*Peptostreptococcus*

*Porphyromonas*

*Prevotella*

*Veillonella*

##### **SPECIES WITH VARIABLE SUSCEPTIBILITY (ACQUIRED RESISTANCE ≥ 10%)**

###### **Anaérobies**

*Bifidobacterium* (+)

*Eubacterium*

## **NATURALLY RESISTANT SPECIES**

### **Aérobies**

*Gardnerella vaginalis*

### **Anaérobies**

*Atopobium*

*Actinomyces*

*Lactobacillus spp.*

*Mobiluncus*

*Propionibacterium acnes*

(+) The prevalence of bacterial resistance is > 50% in France.

### **Antiparasitic activity**

#### **Susceptible species**

*Entamoeba histolytica*

*Giardia intestinalis*

*Trichomonas vaginalis*

## **5.2 Pharmacokinetic properties**

After oral administration of a single 2 g dose of secnidazole, the maximum serum concentration is reached at  $5.3 \pm 1.3$  hours. The plasma half-life is  $17.5 \pm 4.3$  hours on average. Elimination, mainly urinary, is slow; approximately 15% of the administered dose is recovered in urine collected up to 168 hours after administration.

In a Phase I study (IPR\_CONCVAG\_10) conducted in women (n = 14 evaluable) with bacterial vaginosis, considerable variability was observed with, in some cases, a marked decrease in pharmacokinetic parameters between 48 hours and 72 hours. Vaginal concentrations of secnidazole were  $3.6 \pm 2.8$  mg/L and  $1.74 \pm 1.4$  mg/L, respectively 48 hours and 72 hours after oral administration of a single 2 g dose.

As with other imidazole derivatives, secnidazole can cross the placenta and pass into breast milk.

## **5.3 Preclinical safety data**

Non-clinical data from conventional studies of safety pharmacology, repeated-dose toxicity, genotoxicity, carcinogenicity, and reproductive and developmental toxicity revealed no special hazard for humans.

## **6. PHARMACEUTICAL PARTICULARS**

### **6.1 List of excipients**

Neutral microgranules\*, povidone, macrogol 4000, methacrylic acid ester copolymers (Eudragit NE30D), talc, colloidal anhydrous silica (Aerosil 200).

\*Composition of neutral microgranules: sucrose – starch

### **6.2 Incompatibilities**

Not applicable.

### **6.3 Shelf life**

3 years.

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

This medicinal product does not require any special storage conditions.

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

4.224 g in sachet. Box of 1 or 3 sachets (Paper/Aluminium/Polyethylene).

### **6.6 Special precautions for disposal and handling**

No special requirements.

## **7. MARKETING AUTHORISATION HOLDER**

**SUBSTIPHARM  
24 RUE ERLANGER  
75016 PARIS  
FRANCE**

## **8. MARKETING AUTHORISATION NUMBER(S)**

- 34009 333 707 1 8: 4.224 g sachet (Paper/Aluminium/Polyethylene).
- 34009 333 708 8 6: 4.224 g sachet (Paper/Aluminium/Polyethylene), box of 3.

## **9. DATE OF REVISION OF THE TEXT**

**March 2026**

## **10. DOSIMETRY**

**Not applicable.**

## **11. INSTRUCTIONS FOR PREPARATION OF RADIOPHARMACEUTICALS**

**Not applicable.**

## **PRESCRIPTION AND DISPENSING CONDITIONS**

**List I**