health
Department:
Health
REPUBLIC OF SOUTH AFRICA

Private Bag X828, PRETORIA, 0001 Dr AB Xuma Building1112 Voortrekker Road, Pretoria Townlands 351-JR, PRETORIA, 0187 Tel (012) 395 8000, Fax (012) 395 8918

Mrs TL Burger
MC Pharma (Pty) Ltd
62 Constantia Avenue
Mnandi
Centurion
0157
**Tshwane**

Dear Mrs Burger

**Section 21 Authorization for POLYVALENT ANTI-SNAKE VENOM 20ML INJECTION**

Attached, please find the Authorization for exemption under Section 21 of the Medicines and Related Substances Act by SAHPRA granted for:

- **Polyvalent Anti-Snake Venom 20mL injection**

The quantities for which approval was granted are only estimates based on procurement by provinces over the last 6 months. Please note that the National Department of Health (NDOH) cannot guarantee the procurement of these quantities, as NDOH has no control over orders being placed by provincial depots, and current stock holding might influence estimated quantities.

The following process will be followed to ensure the quality of the product being brought in:

1. Manufacturer will submit an assay and identification of every batch imported.
2. An additional assay of every batch will be done by a quality control laboratory.
3. A random sample will be assayed during the authorized period by a quality control laboratory.
4. Aggregate statistics to be submitted to NDOH in the first week of each month of all orders received and quantities supplied per province.
5. The NDOH needs to be advised of the quantities and date of arrival of stocks in terms of this authorization within 7 days after arrival.
6. The supplier will provide monthly reports, by the 7th of each month, using the attached format of orders received and issues done.
7. Participating Authorities (PAs) will provide a consolidated close out report of usage using the attached format on the date when an authorization lapses.

8. The full quantities imported in terms of this Section 21authorisation must be accounted for.
9. Note that this authorization DOES NOT cover supplies to the private sector.
10. Where this authorization is obtained to provide security of supply due to supply challenges from the contracted supplier, PAs are requested to buy out against contracted suppliers and ensure that related orders are cancelled accordingly to prevent overstocking once the contracted supplier gets back into stock.

It should be noted this authorization applies only for use of the product in the public sector with estimated usage quantities for a period of one month. The authorization is expected to expire on **04 May 2027**.

**Table 1: Provincial usage**

| Province | Six Months Estimate |
|---|---|
| **Correctional Services** | 0 |
| **EC-MT** | 0 |
| **EC-PE** | 0 |
| **FS** | 204 |
| **GP** | 30 |
| **KZN** | 750 |
| **LP** | 400 |
| **MP** | 180 |
| **NC** | 60 |
| **NW** | 110 |
| **SAMHS** | 1 |
| **WC** | 200 |
| **Total** | **1 935** |

Yours sincerely

K Jamaloodien

**KHADIJA JAMALOODIEN**
**CHIEF DIRECTOR: HEALTH PRODUCTS PROCUREMENT**
**DATE:** 5th 12026

S2100040414

SAHPRA Head Office
Building A, Loftus Park
2nd Floor
Kirkness Street
Arcadia
0083

# Section 21 Outcome Letter

2026-11-04

Ms Khadija Jamaloodien

1112, Voortrekker Road, Pretoria Townlands 351-Jr, Pretoria, Gauteng, South Africa, 0187

Pretoria

buhle.mbongo@health.gov.za

Dear Ms Khadija Jamaloodien

**REQUEST TO USE UNREGISTERED MEDICINE IN TERMS OF SECTION 21 OF THE MEDICINES AND CONTROLLED SUBSTANCES ACT, 1965 (ACT 101 of 1965):**

Your application dated **2026-10-27** refers

**A. STATUS: Approved**

**B. APPLICANT: Ms Khadija Jamaloodien**

**C. IMPORTING COMPANY: MC PHARMA (PTY) LTD**

**D. NUMBER OF PATIENT/(S) INTENDED TO BE TREATED: 1**

**E. UNREGISTERED MEDICINES: GENERIC NAME (INN / ACTIVE INGREDIENT): Polyvalent Snakebite Antivenom INJ**

**F. TRADE NAME: Anti Snake Venom Serum 10 ml**

**G. QUANTITY: 1901 Packs (5 )**

SAHPRA
South African
Health Products
Regulatory Authority

SAHPRA Head Office
Building A, Loftus Park
2nd Floor
Kirkness Street
Arcadia
0083

**H. LETTER NUMBER: S2100040414**

Section 21 authorization letters are valid for a period of 6 months from the letter date, unless otherwise specified.

A progress report must be submitted once treatment is completed or on a reauthorization request

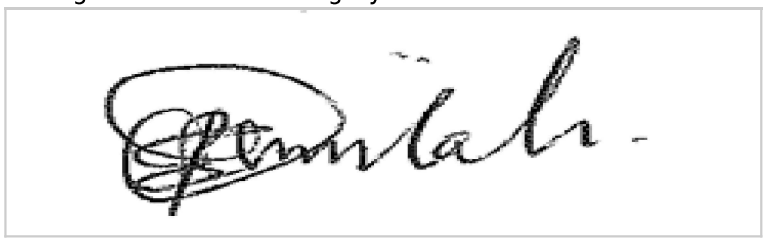
**Comments:**

No Data

Yours faithfully,

Ebenezer Minlah

Manager: Section 21 Category A Medicines



health
Department:
Health
REPUBLIC OF SOUTH AFRICA

Private Bag X828, PRETORIA, 0001 Dr AB Xuma Building1112 Voortrekker Road, Pretoria Townlands 351-JR, PRETORIA, 0187 Tel (012) 395 8000, Fax (012) 395 8918

# REQUEST FOR QUOTATION FORM

- **Instruction to complete this Request for Quotation (RFQ)**
  **PLEASE PROVIDE A QUOTE FOR THE FOLLOWING PRODUCT(S).**
  **PLEASE QUOTE ON THIS RFQ FORM AND ATTACH YOUR QUOTE WITH THE REQUESTED DETAILS.**
  **THE SECTIONS HIGHLIGHTED IN YELLOW MUST BE COMPLETED BY THE SUPPLIER.**
- **THIS DOES NOT CONSTITUTE ANY OBLIGATION TO PROCURE THE ITEM AS THIS WILL BE SUBMITTED FOR CONSIDERATION TO PROVINCIAL PROCUREMENT UNITS TO SERVE AS A BUY OUT AGAINST CURRENT NON-COMPLIANT SUPPLIERS.**

**ONLY RESPONSES FROM DULY REGISTERED SUPPLIERS WILL BE EVALUATED**

| | | | | | |
|---|---|---|---|---|---|
| REFERENCE NUMBER: | NORMAL | | SECTION 21 | X | **S21RFQ191/2026** |
| QUOTE ENQUIRY DATE | **09/10/2026** | QUOTE CLOSING DATE | | | **15/10/2026** |
| FOR CRITICAL DELIVERY, DELIVERY REQUESTED ON/BEFORE *(SCM Practitioner to Specify if applicable)* | | | | | |

## REQUESTING INSTITUTION CONTACT DETAILS

| | | | |
|---|---|---|---|
| NAME OF REQUESTOR | Buhle Mbongo | | |
| EMAIL ADDRESS | Buhle.Mbongo@health.gov.za | | |
| PHONE No. | **012 395 9539** | FAX No. | **N/A** |

## PRODUCT INFORMATION

| | | | |
|---|---|---|---|
| DESCRIPTION PER MPC | **Polyvalent Snake Venom Antiserum Injection** | | |
| TRADE DESCRIPTION | BeAfrique Lyo10 Antisnake Venom Serum-Pan Africa | | |
| UNIT OF MEASURE | 1's | PACK or BOX (*SIZE/ QUANTITY*) | 1 |
| QUANTITY REQUIRED | **1 900** | | |

## TO BE COMPLETED BY THE SUPPLIER/ SERVICE PROVIDER

### SUPPLIER CONTACT DETAILS (as per CSD)

| | | | | | | |
|---|---|---|---|---|---|---|
| DID YOU BID ITEM FOR TENDER | YES | | NO | X | IF NO, WHY | **Not on tender** |
| COMPANY NAME | **MC Pharma (Pty) Ltd** | | | | | |
| SUPPLIER NUMBER | **MAAA0714828** | | | | | |
| SECURITY CODE | | | | | | |
| SUPPLIER CODE (NDoH) | | | | | | |

| | | | | |
|---|---|---|---|---|
| CONTACT PERSON 1 | NAME | **T Burger** | | |
| | PHONE | | FAX | |
| | MOBILE | *082 457 7894* | | |
| | E-MAIL | **Tracy.Burger@mcpharma.co.za** | | |
| CONTACT PERSON 2 | NAME | **J Castle** | | |
| | PHONE | | | |

| | | |
|---|---|---|
| | MOBILE | *072 926 8778* |
| | E-MAIL | **Junita.Castle@mcpharma.co.za** |

| **QUOTE DETAILS** | | | |
|---|---|---|---|
| PRICE PER UNIT (INCL. VAT) | **R 1,420.25** | TOTAL PRICE (INCL. DELIVERY & VAT) | **R2,698,475.00** |
| VOLUMES AVAILABLE – 14DAYS | **Immediate - 4 days – Immediate Stock on hand** | | |
| VOLUMES AVAILABLE – 21DAYS | | | |
| VOLUMES AVAILABLE – 28DAYS | | | |
| VOLUMES AVAILABLE – 35DAYS | | | |
| VOLUMES AVAILABLE – 42DAYS | | | |
| VOLUMES AVAILABLE – 49DAYS | | | |
| VOLUMES AVAILABLE – 56DAYS | | | |
| VOLUMES AVAILABLE – 112DAYS | | | |
| QUOTE VALIDITY PERIOD | 90 days | | |
| NORMAL LEAD/DELIVERY TIME | 3-7 days in country | | |

| **DEVIATION TO SPECIFICATION** |
|---|
| *COMMENTS:* |
| |
| |

| **DECLARATION BY SUPPLIER** | |
|---|---|
| **I hereby declare that in submitting this bid, there has been no consultation, communication, agreement or arrangement with any competitor/supplier regarding the price, quality, quantity, specifications and conditions or delivery particulars of the products or services to which this bid invitation relates.** | |
| **NAME** | **T Burger** |
| **CAPACITY** | **Managing Director** |
| **SIGNATURE** *(OF A DULY AUTHORISED REPRESENTATIVE OF THE SUPPLIER)* |  **pp** |
| **DATE** | **15 October 2026** |

| **PROVINCIAL ESTIMATES** | |
|---|---|
| **Province** | **Three Months Estimate** |
| **DCS** | **0** |
| **EC-MT** | **0** |
| **EC-PE** | **0** |
| **FS** | **204** |
| **GP** | **30** |
| **KZN** | **750** |
| **LP** | **400** |

| | |
|---|---|
| **MP** | **180** |
| **NC** | **60** |
| **NW** | **110** |
| **SAMHS** | **1** |
| **WC** | **200** |
| ***Please submit quotations to Section21Quotes@health.gov.za*** | |

**Please ensure that you include the following as part of the Quotation:**

- Delivery Time (Weeks)
- Price (Vat Inclusive)
- Generic Name
- Trade Name
- Quotation on Official Company Letterhead
- Central Supplier Database Summary Report (CSD)
- Medicine Registration Certificate (Only for Locally Registered Products)
- *Artwork/Labelling
- *Package Insert/ Professional Information/Summary of Product Characteristics: (Please attach)
- *Manufacturer Certificate: (Please attach)
- *Country of Origin: (Please indicate)

*Additional items required when submitting a quote for a Section 21 Item (Unregistered Medicine)
All of the above is required to expedite the process in considering the quotation.

Please ***SUBMIT COMPLETED RFQ FORM AND QUOTATIONS ON AN OFFICIAL COMPANY LETTERHEAD***
**NB:**

- The supplier submitting the quotation must be the same entity which the provinces will place their orders
- The size of each individual attachment must not be more than 2MB (you may attach multiple files in one email but collectively they should not be more than 2MB in size).
- Please ensure that you provide all prescribed documentation that is outlined on page two of this RFQ.
- The confirmation letter from manufacturer to Supply South Africa with Bivalent oral Poliomyelitis Vaccine (bOPV) must be provided ( only in cases of Bivalent oral Poliomyelitis Vaccine RFQ)
- Kindly be advised that a picture format of an Artwork shall not be accepted. Artwork must be in pdf or word format only.
- All prices must please be submitted in two decimals and in ZAR.
- If submitting more than one quotation, please make sure that your subject line includes e.g., 1 of 2 or 1 of 3 etc.
- Any submission with missing documentation shall not be considered.
- Any submission with blurry relevant documents shall not be considered.
- The only electronic GMP Certificate considered is that from EUDRA
- CSD must be updated for the current month of the RFQ date.
- **Email subject line for responses with quotes must be kept unchanged from the originally sent RFQ email.**

Please ***SUBMIT COMPLETED RFQ FORM AND QUOTATIONS ON AN OFFICIAL COMPANY LETTERHEAD***

MC Pharma (Pty) Ltd.
62 Constantia Avenue,
Mnandi, Centurion, 0157
Tel: +27 (0)12 668-3019
www.mcpharma.co.za

15 October 2026

**TO: The National Department of Health**

**Directorate: Affordable Medicines**

**TEL: 012 395 0539**
Email: Buhle.mbongo@health.gov.za

Dear Ms Mbongo

**Re: RFQ S21RFQ191 – Polyvalent Snake Venom Antiserum Injection**

| | |
|---|---|
| • **Quantity:** | **1,900** vials |
| • **Delivery Time (weeks)** | **Immediate to 4 days -** Stock on Hand |
| • **Price (VAT inclusive) per vial** | R1420.25.00 per vial |
| • **Generic Name:** | Antisnake Venom – African snakes |
| • **Trade/Brand Name:** - | **BEAFRIQUE LYO Antisnake Venom Serum – Pan Africa (10) Injection** |
| • **Packaging:** | 1vial packed in 1's |
| • **Specifications:** | **Effective against 10 African species** |
| • **Shelf-life:** | 48 months |
| • **Package Insert:** | Attached |
| • **Manufacturer:** | Biological E |
| • **Country of Origin:** | India |

Please note that the immediate availability of the product is on the condition that the manufacturer receives the notice of our order as soon as possible.

We are looking forward to your positive response and please do not hesitate to make contact should you have any further requirements.

Regards

pp

**T Burger**
**Managing Director**

MC Pharma (Pty) Ltd.
62 Constantia Avenue,
Mnandi, Centurion, 0157
Tel: +27 (0)12 668-3019
www.mcpharma.co.za

15 October 2026

# QUOTATION # 20261015 S

**TO: The National Department of Health**

**TEL: 012 395 0539**
Email: Buhle.mbongo@health.gov.za

CONTACT PERSON / PATIENT: Buhle Mbongo

NB IMPORTED AND SUPPLIED UNDER SECTION 21 TERMS

| PRODUCT CODE | DESCRIPTION | PACK SIZE | QUANTITY | PRICE EXCL | PRICE INCL |
|---|---|---|---|---|---|
| ANSV 001 | Each vial contains Antisnake Venom | 1's | 1,900 | R1235,00 | R1420,25 |
| **Brand** | **BeAfriques Lyo 10 Antisnake Venom Serum -Pan Africa** | (packed in 1's) | **1,900** | R2,346,500.00 | R2,698,475.00 |
| | | | | | |
| | | | | | |
| | | | **Total** | **R2,346,500.00** | **R2,698,475.00** |

Valid for 90 days

Employee signature/s: _____

Date: 15 October 2024

Approved by: T Burger

| | | |
|---|---|---|
| **Product Name** | **Anti Snake Venom Serum – Pan Africa (10)** | |
| **Component** | **Pack Insert** | |
| **Dimensions** | **107 x 265 mm_Front & Back** | |
| **Colours:** | Black | Keyline & not for printing |

107 mm

265 mm

For the use only of a Registered Medical Practitioner or Hospital or a Laboratory

# BEAFRIQUE LYO 10™

## Combipack of Anti Snake Venom Serum – Pan Africa (10) with Sterile Water for Injection

**COMPOSITION :**

Anti Snake Venom Serum – Pan Africa (10) is a Lyophilized product containing Enzyme Refined Equine Immunoglobulin $F(ab')_2$ fragments as white or slightly yellow powders or solid friable masses before reconstitution and clear to opalescent and colorless to very faintly yellow liquids and free from turbidity after reconstitution (with 10 mL Sterile WFI) for parenteral administration. It contains Glycine as stabilizer, Sodium Chloride and Mannitol as excipient and Cresol as preservative

It is produced by pepsin digestion, heat inactivation at controlled temperature and Caprylic acid precipitation of hyper immune plasma derived from healthy equines immunized with snake venoms procured from Africa namely

*Bitis gabonica, Bitis arietans, Echis leucogaster, Echis ocellatus, Naja haje, Naja melanoleuca, Naja nigricollis, Dendroaspis polylepis, Dendroaspis viridis, Dendroaspis jamesoni.*

Combipack of Anti Snake Venom Serum – Pan Africa (10) with Sterile Water for Injection

**a. Anti Snake Venom Serum – Pan Africa (10) (20 mL Vial with 10 mL of SWFI) (Lyophilized, Polyvalent, Enzyme refined, Equine F(ab'), Immunoglobulin)**

Upon reconstitution with 10 mL of Sterile Water for Injection

Each mL of Antiserum neutralizes:

*Bitis gabonica* venom.....≥ 25 $LD_{50}$
*Bitis arietans* venom .....≥ 25 $LD_{50}$
*Echis leucogaster* venom.....≥ 25 $LD_{50}$
*Echis ocellatus* venom.....≥ 25 $LD_{50}$
*Naja haje* venom.....≥ 25 $LD_{50}$
*Naja melanoleuca* venom.....≥ 20 $LD_{50}$
*Naja nigricollis* venom.....≥ 20 $LD_{50}$
*Dendroaspis polylepis* venom.....≥ 25 $LD_{50}$
*Dendroaspis viridis* venom.....≥ 25 $LD_{50}$
*Dendroaspis jamesoni* venom.....≥ 25 $Ld_{50}$

Preservative : Cresol ≤ 0.25% v/v
Stabilizers : Glycine
Excipients : Sodium chloride & Mannitol

**b. Sterile Water for Injection BP– 10 mL Ampoule**

Paraspecifically
- *Bitis rhinoceros*
- *Bitis nasicornis*
- *Cerastes cerastes*
- *Dendroaspis angusticeps*
- *Echis pyramidum*
- *Macrovipera deserti*
- *Naja senegalensis*
- *Naja arabica*
- *Naja nivea*
- *Naja annulifera*
- *Naja mossambica*
- *Hemachatus haemachatus*
- *Naja pallida*
- *Naja nubiae*
- *Naja anchitae*

**INDICATIONS:**

The Anti Snake Venom Serum – Pan Africa (10) is indicated for bites caused by above mentioned species of snakes, where the patient presents with visible clinical signs and symptoms of severe local and/or systemic envenomation.

1. **Local envenomation :**
(i) Presence of bite marks with or without oozing of blood, blistering and change in color of skin
(ii) Rapidly progressive or massive swelling involving more than half of the bitten limb within few hours of bite (without tourniquet)
(iii) Enlargement and tenderness of regional lymph nodes within hours after bite
2. **Systemic envenomation :**
(i) **Neurotoxic envenoming** : Moderate or no local swelling, progressive descending paralysis with ptosis and paralysis of eye movements. Earliest symptoms of neurotoxicity is blurred vision/double vision, feeling of heaviness of eyelids and apparent drowsiness, raising the eyebrows and puckering the forehead even before ptosis. Imminent respiratory failure is suggested by dyspnoea, distress, restlessness, sweating, respiratory muscle weakness and terminal coma as a result of respiratory or circulatory failure.
(ii) **Haemorrhagic envenoming** : Spontaneous systemic bleeding from gums (gingival sulci), coagulopathy detected by 20 min WBCT with or without external bleeding, persistent bleeding from fang marks, nausea, vomiting and shock.
(iii) **Cytotoxic envenoming:** Painful and progressive swelling with blood stained tissue fluid leaking from bite wound, hypovolemic shock, blistering and bruising-severe pain at bite site, and throughout affected limb and painful and tender enlargement of lymph glands, and irreversible tissue death (necrosis/gangrene).

**RECONSTITUTION AND ADMINISTRATION**

Anti Snake Venom Serum – Pan Africa (10) is supplied in 20 mL glass vial with 10 mL sterile water for Injection as diluent. Withdraw diluent in 10 mL sterile syringe and insert needle through vial stopper and inject in the powder. Mix the contents gently by swirling action and avoid vigorous shaking. Serum should be used immediately after reconstitution in single dose. Reconstitution time not more than 10 minutes.

**DOSAGE AND ADMINISTRATION :**

As of now Snake Venom Antiserum is the only specific antidote for snake envenomation and prompt administration of adequate dose of Antiserum is of paramount importance for neutralization of unbound circulating snake venom components for early response to treatment. Anti Snake Venom Serum is most effective when given intravenously.

Any delay in administration may result in increased dose requirement and decreased effectiveness. As the clinical signs can vary due to many factors such as type of snake, time of reporting after bite, size of snake, amount of venom injected during bite, seasonal & regional variation in venom composition etc., no accurate dosage can be recommended, however, considering the average quantity of venom injected by snake at the time of bite and degree of envenomation, The recommended Initial dosage is 20 mL of antivenom by slow direct intravenous injection or diluted in 250 ml of infusion fluid (0.9% sodium chloride or 5% glucose solution).

**Duration :** 5 minutes for slow intravenous injection. 1 hr for infusion; start infusion slowly; approximately 50 mL/hr and increase gradually

After the first antivenom administration, the patient must be monitored closely for at least 12 hours.

Subsequent administration : Subsequent dosages should be given based on the changes in the subject's clinical condition and the clinical response to the first infusion. Generally, subsequent dosages should be given 2 hrs after the initial dosage

Constant monitoring of the vital Signs at frequent intervals during initial 1 hour is recommended.

Requirement of further dosing depends on extent of reversal of coagulopathy confirmed after 6 hours of Antiserum administration by WBCT in haemorrhagic bite OR if symptoms persist or worsen or in respiratory failure in neurotoxic bite after one hour of Antiserum administration. If the blood is still incoagulable OR no signs of reversal of paralysis are seen, a further dose of 5 to 10 vials of



107 mm

265 mm

Antiserum should be administered by slow IV route only. Administration by IM or locally around the bite wound is not recommended.

**SUPPORTIVE TREATMENT:**

Would include hydration, ventilation (Maintenance of airway is essential in neurotoxic bites due to impending respiratory paralysis), dialysis (Renal failure is a common complication in haemotoxic bites and might require dialysis), pain management (Most of the bite sites are painful requiring administration of pain killers) and surgical intervention if required. In addition to above, administration of antibiotics and Tetanus toxoid may be necessary as per the clinical condition of the patient.

**IMMEDIATE ACTIONS AND FIRST AID:**

Quick and positive measures should be taken to meet the emergency. Do not try to catch or kill the snake without proper tools and avoid unnecessary exposure to snake. Patient should be removed to a well ventilated and quiet place and restrict his/her movement. Patient should be reassured to overcome fear. Immobilize the bitten part by applying immobilization bandage as done for a fracture and bitten part is kept below heart level. Ligation by applying tourniquets should be avoided. However, if applied it should be tied at moderate distance above the bitten part to prevent the entry of venom into the circulation. Patient should be immediately taken to nearby medical centre for treatment without loss of time.

**ADVERSE REACTIONS:**

Anti Snake Venom Serum – Pan Africa (10) being derived from equines is heterogeneous to humans. Can give either early or late reaction. Inj. Adrenaline should be always kept handy, before starting the dose of Anti Snake Venom Serum – Pan Africa (10)

ANTIVENOM REACTIONS

| Type | Early (within Few Hours) | | Late Five Days or more |
|---|---|---|---|
| | Anaphylactic | Pyrogenic | Serum Sickness |
| Timeline | Develops within 3 to 60 minutes of starting Antivenom | Develops within 1-2 hours of starting Antivenom | Appear after about 5-24 (Av.7) days after injection of Antivenom |
| Symptoms | Cough, tachycardia, Itching (especially of scalp) urticaria, fever, nausea, vomiting and headache | Chills, fever, vasodilation and fall of blood pressure | Itching, urticaria, fever, arthralgia, periarticular swelling, proteinuria and sometimes neurological symptoms |
| Recommended treatment | 1. Stop administration of Antivenom temporarily<br>2. Give Inj. Adrenaline (1:1000) 0.5 to 1 mL for adults and 0.01 mg/kg for children by IM route<br>3. Repeat the dose if required every 5-10 minutes<br>4. In addition, administration of 10-25 mg of Chlorpheniramine maleate for adults and 0.2 mg/kg for children may be given by IV route followed by hydrocortisone 100 mg for adults and 2mg/kg for children by IV route.<br>5. In pyrogenic reaction, patient may be physically cooled and with antipyretics<br>6. Hypovolaemia may be corrected by IV fluids | | Serum sickness should be treated with 5 day course of antihistamines. Patients who fail to respond in 24-48 hours should be given 5 day course of prednisolone. Chlorpheniramine dose : Adults – 2 mg six hourly, Children - 0.25 mg/kg/day in divided doses. Prednisolones dose : Adults - 5 mg six hourly, Children - 0.7 mg/kg/day in divided doses. |

Reduction in adverse reactions has been reported by use of adequate dilutions of Antivenoms with saline and controlling rate of infusion.

**PREGNANCY AND LACTATION**

Considering the risk associated with snake bite envenomation, pregnancy is not a contraindication for the administration of Anti Snake Venom Serum Pan Africa (10) subsequent to bite.

**DRUG INTERACTIONS :**

There are no known drug interactions reported.

**HOW IT IS SUPPLIED?**

Lyophilized Anti Snake Venom Serum – Pan Africa (10) is supplied in 20 mL glass vials along with Sterile Water for Injection, 10 mL for the purpose of reconstitution.

**STORAGE:**

Lyophilized Anti Snake Venom Serum – Pan Africa (10) is stable at room temperature and Do not store above 30ºC, away from light Store in a cool, dark place and avoid exposure to excessive heat

**SHELF LIFE:**

Four Years (48 months)

**CONTRAINDICATIONS AND PRECAUTIONS:**

There are no known contraindications for the administration of Anti Snake Venom Serum Pan Africa (10). Proper precautions is necessary while dealing with persons with a known hypersensitivity to constituents of product. Few doctors prefer to pre-medicate patients with Inj. Adrenaline 0.25 mL s/c to prevent possibility of adverse reaction. In haemotoxic bites, intramuscular injections should be avoided till correction of coagulopathy to avoid formation of haematoma and oozing of blood. In patients having tourniquet, it should be released slowly only after start of antivenom administration.

**REFERENCES :**


1. Guidelines for the prevention and clinical management of Snakebite in Africa: WHO (2010) Regional office for Africa. Brazzaville
2. Guidelines for the management of snakebites : Warrell D.A. W.H.O. (2010) Regional Office of South-East Asia.



Manufactured by:
BE *Biological E. Limited*
18/1&3, Azamabad, Hyderabad – 500 020
Telangana, India.

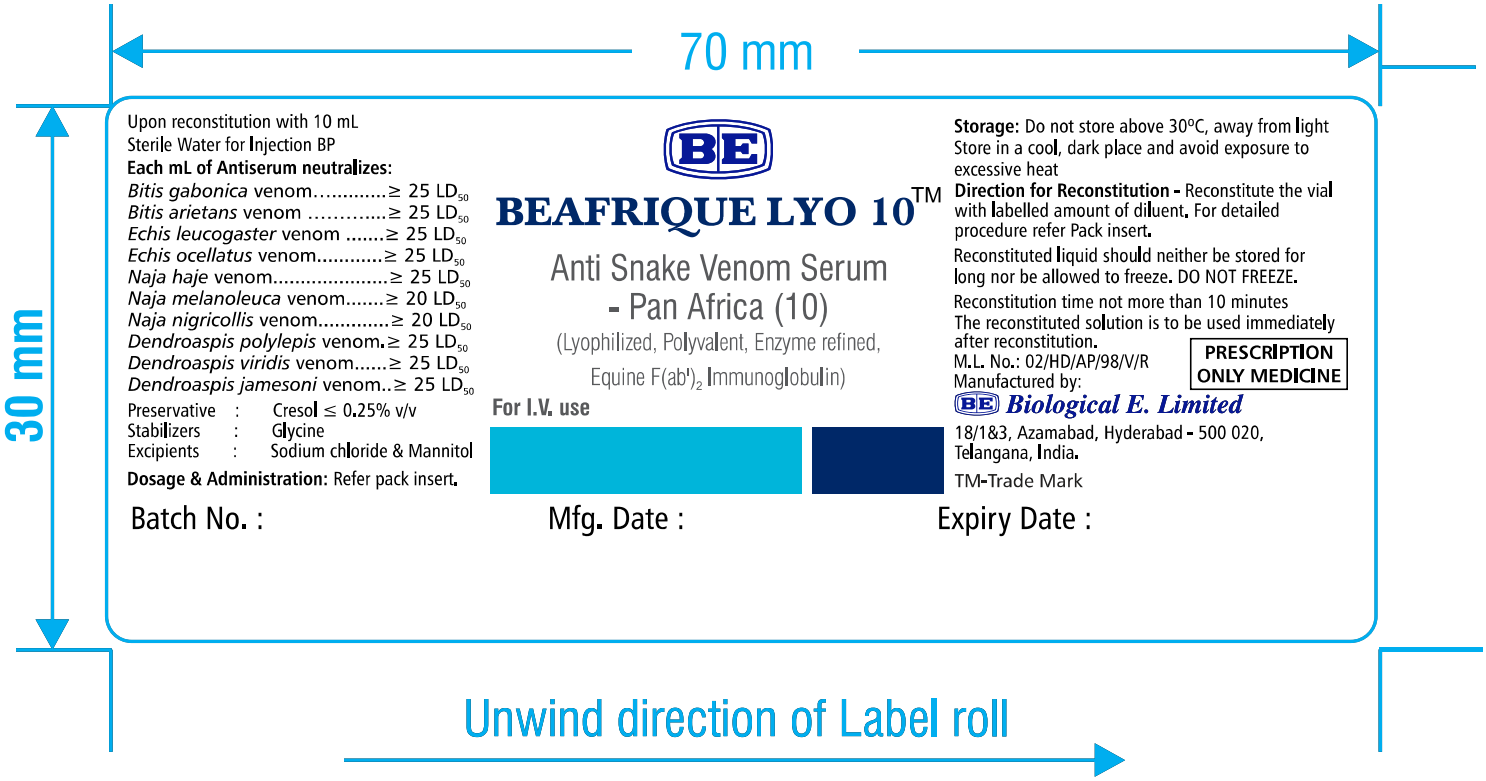

TM-Trade Mark

**PRESCRIPTION ONLY MEDICINE**



ARTWORK DETAIL LABEL

| | |
|---|---|
| **Product Name** | **BEAFRIQUE LYO 10_Tanzania** |
| **Component** | **Vial Label** |
| **Dimensions** | **70 x 30 mm** |
| **Colours:** | P 281 C  P 638 C  P Reflux Blue C  Black  Keyline & not for printing |



| | |
|---|---|
| **Product Name** | **BEAFRIQUE LYO 10** |
| **Component** | **Mono Carton** |
| **Dimensions** | **47 x 32 x 68 mm** |
| **Colours:** | P 281 C · P 638 C · P Reflux Blue C · Black · P 261 C — Keyline & not for printing |



| | |
|---|---|
| **Product Name** | **BEAFRIQUE LYO 10** |
| **Component** | **Outer Carton** |
| **Dimensions** | **164 x 50 x 70 mm** |
| **Colours:** | P 281 C · P 638 C · P Reflux Blue C · Black · P 261 C — Keyline & not for printing |

