

NEW ZEALAND DATA SHEET

1. PRODUCT NAME

Diclofenac Devatis 0.1% (1 mg/ml) Eye Drops, Single Dose

2. QUALITATIVE AND QUANTITATIVE COMPOSITION

Active substance:

Each ml contains 1 mg diclofenac sodium

Excipient with known effect:

For the full list of excipients, see section 6.1.

3. PHARMACEUTICAL FORM

Eye drop, solution.

Clear and colorless solution. Free of particles.

4. CLINICAL PARTICULARS

4.1 Therapeutic indications

- Post-operative inflammation in cataract surgery and other surgical interventions.
- Prevention of cystoid macular edema after cataract extraction with lens implantation.
- Post-traumatic inflammation in non-penetrating wounds.
- Inhibition of miosis in cataract surgery.
- Relief of pain and photophobia.
- Non-infected inflammatory conditions of the anterior segment of the eye.

4.2 Dose and Method of Administration

Posology/duration and frequency of administration

Adults

a) Ocular surgery and its complications

Preoperatively, up to 1 drop 5 times during the 3 hours before surgery.

Postoperatively, 1 drop 3 times on the day of surgery, followed by 1 drop 3 to 5 times daily for as long as required.

b) Relief of pain and photophobia; post-traumatic inflammation

One drop 4 to 6 hourly.

When pain is due to a surgical procedure (e.g. refractive surgery), 1 to 2 drops in the hour preceding surgery, 1 to 2 drops within the first 15 minutes after intervention and 1 drop 4 to 6 hourly for 3 days thereafter.

Method of administration

The contents remain sterile until the original closure is broken. Patients must discard residual contents after use.

If more than one medication needs to be instilled in the eye, an interval of at least 5 minutes between application of the different medicinal products must be allowed.

Following instillation of the eye drops, nasolacrimal occlusion or closing the eyes for 3 minutes may reduce systemic absorption. This may result in a decrease in systemic side effects and an increase in local activity.

Additional information on special populations

Hepatic/Renal impairment

No dosage adjustment is required in patients with impaired hepatic or renal function.

Pediatric population

Diclofenac Devatis Eye Drops is not indicated for use in children. Pediatric experience is limited to a few published clinical studies in strabismus surgery.

Geriatric population

There is no indication that dosage needs to be modified for the elderly.

4.3 Contraindications

Known hypersensitivity to the active substance or to any of the excipients (see section 6.1).

Third trimester of pregnancy.

As with other non-steroidal anti-inflammatory agents, Diclofenac Devatis Eye Drops is contraindicated in patients in whom attacks of asthma, urticaria or acute rhinitis are precipitated by aspirin or by other drugs with prostaglandin synthesis inhibiting activity. There is the potential for cross-sensitivity to aspirin, phenylacetic acid derivatives, and other non-steroidal anti-inflammatory agents.

4.4 Special warning and precautions for use

The anti-inflammatory activity of ophthalmic non-steroidal anti-inflammatory agents (NSAIDs) including diclofenac may mask the onset and/or progression of ocular infections. In the presence of an infection or if there is a risk of infection, appropriate therapy should be given concurrently with Diclofenac Devatis Eye Drops. Although there have been no reported adverse events, there is a theoretical possibility that patients receiving other medications which may prolong bleeding time, or with known haemostatic defects may experience exacerbation with Diclofenac Devatis Eye Drops.

Topical NSAIDs are known to slow or delay healing. Topical ophthalmic corticosteroids may slow corneal wound healing. Caution should be exercised when topical NSAIDs such as diclofenac are used concomitantly with topical steroids (see section 4.5).

Eye drops are not for injection. They should never be injected subconjunctivally, nor should they be directly introduced into the anterior chamber of the eye.

Patients with evidence of corneal epithelial breakdown should immediately discontinue use of Diclofenac Devatis Eye Drops and should be monitored closely for corneal health.

Diclofenac Devatis Eye Drops should not be used while wearing soft contact lenses. The lenses must be removed before application of the drops and not reinserted earlier than 15 minutes after use.

The wearing of contact lenses is discouraged during treatment of an ocular inflammation.

4.5 Interaction with other medicinal products and other forms of interaction

Concomitant use of topical NSAIDs such as diclofenac and topical steroids in patients with significant pre-existing corneal inflammation may increase the risk of developing corneal complications including slow or delay corneal healing, therefore caution should be used.

Concomitant use of Diclofenac Devatis Eye Drops with medications that prolong bleeding time may increase the risk of hemorrhage.

Ocular diclofenac at 0.1% has been used safely in clinical studies in combination with antibiotics and beta-blocking agents for ocular use.

4.6 Fertility, Pregnancy and lactation

General principles

Pregnancy category is C

Excipients containing boron have been shown to cause reduced fertility and effects on embryofetal development in animal studies and this appears to be dose related. The relevance of this to humans is uncertain.

Pregnancy

No reproductive toxicity studies have been conducted with Diclofenac Devatis Eye Drops.

NSAID use during the 3rd trimester may cause premature closure of the fetal ductus arteriosus, fetal renal impairment, inhibition of platelet aggregation, and may delay labour and birth. NSAID use in the 3rd trimester of pregnancy is therefore contraindicated.

In addition, data from epidemiological studies suggest an increased risk of miscarriage and congenital malformation associated with NSAID use in early pregnancy.

Animal fertility and reproductive studies are included in section 5.3.

Diclofenac Devatis Eye Drops is contraindicated in 3rd trimester of pregnancy.

Diclofenac Devatis Eye Drops should not be used during the first two trimesters of pregnancy unless the expected benefits to the mother outweigh the risks to the fetus. If there is a compelling need for NSAID treatment during the first or second trimester, limit use to the lowest effective dose and shortest duration possible.

Use of NSAIDs in the second or third trimester may cause fetal renal dysfunction leading to oligohydramnios and, in some cases, neonatal renal impairment. Oligohydramnios is generally seen after days to weeks of treatment, although it has been reported as soon as 48 hours after NSAID initiation. Oligohydramnios is usually, but not always, reversible after treatment discontinuation. Consider ultrasound monitoring of amniotic fluid if treatment extends beyond 48 hours. Discontinue treatment with Diclofenac Devatis Eye Drops if oligohydramnios occurs.

Breast-feeding

There is insufficient information on the excretion of diclofenac in human milk after the use of Diclofenac Devatis Eye Drops. Following oral administration of 50 mg coated tablets only traces of the active substance were detected in breast milk and in quantities so small that no undesirable effects on the infant are to be expected. Use of ocular diclofenac is not recommended during breast-feeding unless the expected benefits outweigh the possible risks.

Fertility

Studies have not been performed to evaluate the effect of topical ocular administration of Diclofenac Devatis Eye Drops on human fertility. Animal studies suggest that prostaglandins are necessary for implantation. Therefore, long-term use of NSAIDs by prescription for chronic non-reproductive disorders and continuing use of over-the-counter NSAIDs preparations, while trying to conceive, could potentially adversely affect the peri-implantation process and outcome.

4.7 Effects on ability to drive and use machines

Patients experiencing blurred vision or other visual disturbances should refrain from driving a vehicle or operating machines until vision clears.

4.8 Undesirable effects

The most frequently observed adverse reaction is a transient, mild to moderate eye irritation.

Other less frequently observed reactions are eye pain, eye pruritus, ocular hyperemia and blurred vision immediately after instillation of the eye drops.

Punctate keratitis or corneal disorders have been observed, usually after frequent application. In patients with risk factors of corneal disorders such as during the use of corticosteroids or with concomitant diseases such as infections or rheumatoid arthritis, diclofenac has been associated, in rare cases, with ulcerative keratitis, corneal thinning, punctate keratitis, corneal epithelium defect and corneal edema, which might become sight-threatening. Most patients were treated for a prolonged period of time.

In rare cases dyspnea and exacerbation of asthma have been reported.

Allergic conditions has been reported such as conjunctival hyperemia, allergic conjunctivitis, eyelid erythema, eye allergy, eyelid edema, eyelid pruritus, urticaria, rash, eczema, erythema, pruritus,

hypersensitivity, cough and rhinitis.

Post Marketing Experience

The following adverse reactions have been reported during clinical studies with diclofenac sodium and are classified according to the subsequent 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 $< 1/1,000$) and very rare ($< 1/10,000$). Within each frequency grouping, adverse reactions are presented in order of decreasing seriousness.

Eye disorders

Common: punctate keratitis, eye pain, eye irritation, eye pruritus, conjunctival hyperemia.

Uncommon: keratitis, intraocular pressure increased, corneal edema, conjunctival edema, corneal deposits, conjunctival follicles, ocular discomfort, eye discharge, eyelid margin crusting, lacrimation increased, eyelid irritation, ocular hyperemia.

Immune system disorders

Uncommon: hypersensitivity

General disorders and administration site conditions

Uncommon: impaired healing

The following adverse reactions have been identified from post-marketing surveillance following administration of Diclofenac sodium. Frequency cannot be estimated from the available data. Within each System Organ Class adverse reactions are presented in order of decreasing seriousness.

Eye disorders

Not known: corneal perforation, ulcerative keratitis, corneal epithelium defect, corneal opacity, corneal thinning, allergic conjunctivitis, eye allergy, eyelid erythema, eyelid edema, eyelid pruritus, vision blurred.

Infections and infestations

Not known: rhinitis

Pregnancy, puerperium and perinatal conditions

Not known: oligohydramnios, neonatal renal impairment

Respiratory, thoracic and mediastinal disorders

Not known: asthma exacerbations, dyspnea, cough

Skin and subcutaneous tissue disorders

Not known: urticaria, rash, eczema, erythema, pruritus

Reporting of suspected adverse reactions

Reporting suspected adverse reactions after authorisation of the medicine is important. It allows continued monitoring of the benefit/risk balance of the medicine. Healthcare professionals are asked to report any suspected adverse reactions <https://nzphvc.otago.ac.nz/reporting>.

4.9 Overdose

There is no experience of overdose with Diclofenac Devatis Eye Drops. However, inadvertent oral ingestion carries a minimal risk of adverse effects as a single dose unit of Diclofenac Devatis Eye Drops contains only 0.3 mg diclofenac sodium, corresponding to about 0.2% of the recommended maximum oral daily dose for an adult.

For advice on the management of overdose please contact the National Poisons Centre on 0800 POISON or 0800 764 766.

5. PHARMACOLOGICAL PROPERTIES

5.1 Pharmacodynamic properties

Pharmacotherapeutic group: Ophthalmologicals; anti-inflammatory agents, non-steroids,
ATC code: S01BC03

Mechanism of Action

Diclofenac Devatis Eye Drops contains diclofenac sodium, a non-steroidal anti-inflammatory agent with analgesic properties. It has marked prostaglandin synthesis inhibitory activity and this is thought to have an important bearing on its mechanism of action.

Pharmacodynamic effects

Clinical trials have demonstrated that diclofenac inhibits miosis during cataract surgery and reduces ocular inflammation and pain associated with corneal epithelial defects after some types of surgical intervention. There is no indication that diclofenac has any adverse effects on wound healing.

Clinical efficacy and safety

Not available.

5.2. Pharmacokinetic properties

In rabbits, peak concentrations of ¹⁴C-labeled diclofenac could be demonstrated in the cornea and conjunctiva 30 minutes after application. Elimination was rapid and almost complete after 6 hours.

Concentrations of HP-gamma-CD in plasma and aqueous humor were below detection limits (1 nMol/ml) in rabbits after single or four times daily (q.i.d.) ocular administration for 28 days. Low concentrations of HP-gamma-CD were detected in the aqueous humor of two rabbits (1 after single instillation, 1 after q.i.d. instillation for 28 days).

Penetration of diclofenac into the anterior chamber has been confirmed in humans. No measurable plasma levels of diclofenac could be found after ocular application of Diclofenac Devatis Eye Drops, which contains 0.1% diclofenac.

5.3 Preclinical safety data

Preclinical data of systemically applied diclofenac from acute and repeated dose toxicity studies, as well as from genotoxicity, mutagenicity, teratogenicity, carcinogenicity and reproductive performance studies revealed no specific hazard for humans at the intended therapeutic doses. Systemic diclofenac has been shown to cross the placental barrier in mice and rats, but had no influence on the fertility of parent animals in rats. In rats, maternally toxic doses were associated with dystocia, prolonged gestation, decreased fetal survival, and intrauterine growth retardation. The slight effects of diclofenac on fertility and delivery as well as constriction of the ductus arteriosus in utero are pharmacological consequences of this class of prostaglandin synthesis inhibitors.

Local ocular tolerance and toxicity of different formulations of Diclofenac Devatis Eye Drops were investigated and no evidence of toxicity and local adverse effects was found.

Pregnancy

Systemic diclofenac has been shown to cross the placental barrier in mice and rats, but had no influence on the fertility of parent animals in rats. There was no evidence that diclofenac had a teratogenic potential in routine mice, rat or rabbit embryo-fetal development studies. In rats, maternally toxic doses were associated with dystocia, prolonged gestation, decreased fetal survival, and intrauterine growth retardation. The slight effects of diclofenac on fertility and delivery as well as constriction of the ductus arteriosus in utero are pharmacological consequences of this class of prostaglandin synthesis inhibitors.

The prenatal, perinatal and postnatal development of the offspring were not affected.

Animal studies have so far shown no risk to the fetus during the first and second trimesters of pregnancy, but no controlled studies in pregnant women are available.

6. PHARMACEUTICAL PARTICULARS

6.1 List of excipients

Macroglycerol ricinoleate
Boric acid (E284)
Trometamol
Water for injection

6.2 Incompatibilities

Not applicable.

6.3 Shelf life

24 months

After first opening of the sachet: 28 days. Store the containers in the outer carton to protect from light.

After first opening of the single-dose container: the product must be used immediately and the remaining content discarded after use.

6.4 Special precautions for storage

Do not store above 25°C.

Store in the original package in order to protect from light.

For storage conditions of the opened medicinal product, see section 6.3.

6.5 Nature and contents of container

0.3 ml transparent low density polyethylene single-dose containers in pre-formable PET/ Aluminum/ PE peelable sachets containing 5 single-dose containers.

Pack-sizes: 10 x 0.3 ml, 20 x 0.3 ml, 30 x 0.3 ml or 60 x 0.3 ml single dose containers.

Sachets are packed into carton boxes accompanied by Consumer Medicine Information.

Not all pack sizes may be marketed.

6.6. Special precautions for disposal

No special requirements for disposal.

Any unused product or waste material should be disposed of in accordance with local requirements.

7. MEDICINE SCHEDULE

Prescription Medicine

8. SPONSOR

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9. DATE OF FIRST APPROVAL

Date of first authorization: 09 April 2020

Date of latest renewal:

10. DATE OF REVISION OF THE TEXT

June 2022