

## PATIENT INFORMATION LEAFLET

### MEKARD 250 mg/20 ml concentrated solution for i.v. infusion

For intravenous use.

#### Sterile

- **Active substance:** Each ml contains 14 mg of dobutamine hydrochloride equivalent to 12.5 mg of dobutamine.
- **Excipients:** Sodium metabisulfite, water for injection, sodium hydroxide (for pH adjustment), hydrochloric acid (for pH adjustment)

**Before using this medicine, read all of this PATIENT INFORMATION LEAFLET carefully. Because, this leaflet includes important information for you.**

- *Keep this PATIENT INFORMATION LEAFLET. You may need to read it again.*
- *If you have any further questions, ask your doctor or pharmacist.*
- *This medicine has been prescribed for you. Do not pass it on to others.*
- *During the use of this medicine, tell that you are using this medicine when you go to a doctor or hospital.*
- *Follow these instructions exactly as written. Do not use **higher or lower** dose other*

#### **The following subjects are covered herein:**

1. *What is MEKARD and what is it used for?*
2. *Before you are given MEKARD*
3. *How you will given MEKARD?*
4. *What are the possible side effects?*
5. *How to store MEKARD*

#### **1. What is MEKARD and what is it used for?**

MEKARD is a group of drugs called inotropic drugs that make the heart beat stronger.

Each ampoule of MEKARD contains 280 mg (equivalent to 250 mg dobutamine), milliliter of 14 mg of dobutamine hydrochloride (equivalent to 12.5 mg of dobutamine).

MEKARD is available in 20 ml colorless glass ampoules, as 10 ampoules in a box.

MEKARD is used in the following cases;

- Adults;

In the case of low cardiac output associated with MEKARD, heart attack, cardiomyopathy (a disease of the heart muscle), open heart surgery, septic shock (blood poisoning) or cardiogenic

shock (inadequate maintenance of the cardiac output), when supportive therapy is required It indicated. MEKARD can also be used to maintain or increase cardiac output in expiratory positive pressure ventilation (positive pressure when exhaling).

*-Dobutamine stress echocardiography:*

MEKARD can also be used as an alternative for heart stress tests in patients who cannot perform routine exercises completely. For this purpose, dobutamine should be used in units that normally perform exercise stress testing and necessary precautions should be taken for the tests.

- Pediatric population

Dobutamine is indicated in all pediatric age groups (from newborn to 18 years old) in case of low cardiac output hypoperfusion (the blood is not scattered enough in the body) resulting from heart decompensation after cardiac surgery, cardiogenic shock (inadequate sustaining of cardiac output), cardiomyopathies (a disease of the heart muscle), and septic shock (blood poisoning).

## **2. Before you are given MEKARD**

### **DO NOT USE MEKARD under the following circumstances**

If:

- If you have sensitivity (allergy) to Dobutamine, sodium metasulfite or other components
- If you have certain heart or blood vessel disorders: Dobutamine should not be used to detect weak blood supply to your heart. (Cardiac stress test known as Dobutamine Stress Echocardiography)
- If you have high blood pressure due to a tumor close to your kidney (pheochromocytoma);
- Your doctor will know if there is a problem in your heart or blood vessels;
- Decrease in your blood volume (hypovolemia).

### **USE MEKARD CAREFULLY in the following cases**

If;

- If you have a heart attack recently;
- If you have asthma;
- If you have unstable cardiac spasm (angina);
- If you have heart disease;
- If you have had a heart transplant
- If you have high blood pressure;
- If there is a condition that makes exercise dangerous for you.

### Children

Increases in heart rate and blood pressure are more frequent and intense in children than in adults. The newborn baby cardiovascular system has been reported to be less sensitive to dobutamine, and the hypotensive effect (low blood pressure) appears to be more common in adult patients than in young children. Accordingly, the use of dobutamine in children should be closely monitored.

If these warnings apply or applied to you, please consult your physician.

### **Using MEKARD with food and beverages**

There is no known interaction with food and beverages.

### **Pregnancy**

*Please consult your physician or pharmacist before taking the drug.*

It will be used by your doctor when the expected benefits are more than any possible risk to your baby.

*If you realize that you are pregnant during your treatment, immediately consult your physician or pharmacist.*

### **Lactation**

*Please consult your physician or pharmacist before taking the drug.*

It is recommended that you stop breastfeeding during your treatment. However, it will be used by your doctor when the expected benefits are more than any possible risk to your baby.

### **Ability to drive and use machines**

Do not use tools and machinery if there is an effect due to the administration of MEKARD.

### **Vital information regarding some of the excipients contained in MEKARD**

This product contains sodium metabisulphite. Rarely it may cause severe hypersensitivity reactions (severe allergy) and bronchospasm (difficulties in breathing).

This medicinal product contains less than 1 mmol (23 mg) of sodium per each “dose”, in fact, “it does not contain sodium”.

### **Use in combination with other drugs**

Special attention must be paid to the use of dobutamine in combination with the following drugs:

- Anaesthesia causing substance (anesthetics);
- Beta-blockers (drugs used to treat some heart conditions, anxiety and migraine);
- Alpha blockers (drugs used to treat some heart conditions by relaxing the muscles in the blood vessels)
- ACE inhibitors (drugs used in the treatment of blood pressure and lowering blood pressure);
- Vasodilators (vasodilators);
- Entacapone (a drug used to treat Parkinson's disease)

*If you are currently taking or recently took any prescribed or over-the-counter drugs, please inform your physician or pharmacist.*

### **3. How you will be given MEKARD?**

#### **Instructions regarding correct use and dosage/administration frequency:**

Your doctor will decide the dose and frequency to be administered to you. The dose will be determined by your physical condition and your medical condition.

#### **Method of administration:**

It is administered intravenously. This medicine will be diluted before it is given to you. It will be administered intravenously as infusion (dropwise).

- **Different age groups:**

#### **Use in children:**

In children, the dose will be adjusted by the doctor based on the patient's response.

#### **Use in elderly:**

Your doctor will decide the dose of the drug.

- **Special usage cases:**

#### **Renal/Hepatic failure:**

Your doctor will decide the dose of the drug.

*If you are under the impression that the effect MEKARD is too strong or weak, consult your physician or pharmacist.*

#### **If you have taken more MEKARD than you should have:**

*If you have used MEKARD more than you should have or more than prescribed, consult a physician or a pharmacist.*

This section does not apply as MEKARD will be administered to you by the medical personnel in the hospital. If you think you are given too much MEKARD, nausea, vomiting, restlessness, palpitations, headache, difficulty in breathing and chest pain occur. Please inform your doctor.

#### **If you forget to take MEKARD**

*Do not double-dose to make up for forgotten doses.*

#### **Possible effects once MEKARD treatment is concluded**

MEKARD will be applied to you by the health personnel who are experienced in the hospital, and will decide on the termination of the treatment according to your situation.

#### **4. Possible side effects**

Like all medications, side effects may occur in people who have sensitivity to substances found in the ingredients of MEKARD.

Your doctor will check your heart and decide if you are eligible to use it before administering MEKARD.

Side effects are classified as follows:

Very common:	It can be seen in at least 1 of 10 patients.
Common:	Less than one in 10 patients, but more than one in 100 patients.
Uncommon:	Less than one in 100 patients, but more than one in 1,000 patients.
Rare:	Less than one in 1,000 patients, but more than one in 10,000 patients.
Very rare:	Less than one in 10,000 patients.
Unknown:	Unable to predict from available data.

#### **Very common:**

- Increase in heart rate
- Chest pain
- Heart rate irregularities

#### **Common:**

- Increase or decrease in blood pressure
- Constriction of blood vessels (vasoconstriction)
- Irregular heartbeat (palpitations)
- Abnormal contractions in the heart muscle (ventricular dysrhythmia)
- Excessive and usually premature contraction of the heart due to the dose (ventricular extrasystole)
- Increased heart palpitation (increased ventricular frequency) in patients with abnormal heart rhythm (atrial fibrillation)
- Rapid contractions in the ventricle of the heart (ventricular tachycardia)
- Asthma-like symptoms (bronchospasm)
- Difficulty in breathing
- Increase in white blood cells (eosinophilia)
- Prevention of blood clot formation

- Rash (exanthema)
- Fever
- Inflammation of the vessel at the injection site (phlebitis)
- Headache
- Heart-chest pain (anginal pain)
- Local inflammation
- Urgency to urinate
- Nausea
- Chest pain
- Inhibition of thrombocyte aggregation (only for days of infusion)
- Ventricular dysrhythmia, dose-related ventricular extrasystoles, palpitations. Increased ventricular frequency in patients with atrial fibrillation.
- $\geq 50$  mmHg blood pressure increase, angina pain. Vasoconstriction, especially in patients previously treated with beta receptor blockers.

**Uncommon:**

- Uncontrolled contractions in the ventricle of the heart (ventricular fibrillation)
- Rapid contractions in the ventricles of the heart (Ventricular tachycardia)
- Heart attack (myocardial infarction- Dobutamine stress echocardiography)

**Very rare:**

- Slow heart rate (bradycardia)
- Inadequate blood supply to the heart (myocardial ischemia)
- Myocardial infarction
- Low potassium (hypokalemia)
- Skin staining (petechial hemorrhage)
- Heart block
- Constriction of blood vessels that feed the heart (coronary vasospasm)
- Skin tissue death (skin necrosis)

**Unknown:**

- Chest pain due to stress (stress cardiomyopathy)
- Allergic reactions (hypersensitivity reactions), including rash, fever, increase in white

blood cells (eosinophilia) and asthma-like symptoms (bronchospasm)

- Severe allergic reactions (anaphylactic reactions) and fatal severe asthma attacks possibly caused by sensitivity of sodium metabisulphite
- Muscle cramps (myoclonus) in patients with severe renal insufficiency receiving Dobutamine
- Abnormal heart function test (ST segment elevation of electrocardiogram)
- Cardiac muscle inflammation (eosinophilic myocarditis) in patients with heart transplantation
- Heart block (left ventricular outflow tract obstruction)
- Fatal heart rupture
- Feeling of restlessness, heat and anxiety
- Fatigue (nausea)
- Headache
- Pins-and-needles sensation (paresthesia)
- Tremor
- Feelings of fever and anxiety
- Muscle cramps (myoclonic spasm)
- Pulmonary capillary pressure reduction
- Increased will to urinate (at high doses)

*If you notice any side effect not mentioned in this leaflet, please inform your doctor or pharmacist.*

## **5. How to store MEKARD**

*Keep MEKARD out of the sight and reach of children, and in its original packaging.*

Store at room temperatures below 25°C, in a space keeping light out. Avoid excessive heat exposure.

### **Use in accordance with the expiration date.**

*Do not use MEKARD after the expiration date printed on its packaging. If you notice any irregularities in the product and/or its packaging, do not use MEKARD.*

***Marketing Authorization Holder:***

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