

Package leaflet: information for the user
Almiral 75mg/3ml solution for injection or infusion
Diclofenac sodium

Read all of this leaflet carefully before you start using this medicine because it contains important information for you.

- Keep this 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 only. Do not pass it on to others. It may harm them, even if their signs of illness are the same as yours.
- If you get any side effects, talk to your doctor or pharmacist. This includes any possible side effects not listed in this leaflet. See section 4.

What is in this leaflet:

1. What Almiral is and what it is used for
2. What you need to know before you use Almiral
3. How to use Almiral
4. Possible side effects
5. How to store Almiral
6. Contents of the pack and other information

1. What Almiral is and what it is used for

Diclofenac sodium, the active ingredient in Almiral, is one of a group of medicines called non-steroidal anti-inflammatory drugs (NSAIDs). NSAIDs reduce pain and inflammation.

The intramuscular injection is used to treat a number of painful conditions including:

- 'Flare-ups' of joint or back pain.
- Attacks of gout.
- Pain caused by kidney stones.
- Pain caused by injuries.

Almiral can either be given as an injection into the muscle, or as a slow infusion into a vein. The intravenous infusion is used in hospitals to prevent or treat pain following an operation.

Almiral is not suitable for children.

2. What you need to know before you use Almira

Do not take Almira if:

- You are allergic to diclofenac sodium or any of the other ingredients of this medicine (listed in section 6).
- You think you may be allergic to aspirin, ibuprofen or any other NSAID. Signs of a hypersensitivity reaction include swelling of the face and mouth (angioedema), breathing problems, chest pain, runny nose, skin rash or any other allergic type reaction.
- You have now, or have ever had, a stomach (gastric) or duodenal (peptic) ulcer, or bleeding in the digestive tract (this can include blood in vomit, bleeding when emptying bowels, fresh blood in faeces or black, tarry faeces).
- You have had stomach or bowel problems after you have taken other NSAIDs.
- You have moderate or severe heart, kidney or liver failure.
- You have established heart disease and/or cerebrovascular disease e.g. if you have had a heart attack, stroke, mini-stroke (TIA) or blockages to blood vessels to the heart or brain or an operation to clear bypass blockages.
- You have or have had problems with your blood circulation (peripheral arterial disease).
- You are more than six months pregnant.

Warnings and precautions

Talk to your doctor or pharmacist before using Almira if:

- You suffer from any bowel disorders including ulcerative colitis or Crohn's disease.
- You have kidney or liver problems, or are you elderly.
- You suffer from any blood or bleeding disorder.
- You have a condition called porphyria.
- You have ever had asthma.
- You are breastfeeding.
- You have angina, blood clots, high blood pressure, raised cholesterol or raised triglycerides.
- You have heart problems, or have you had a stroke, or do you think you might be at risk of these conditions (for example, if you have high blood pressure, diabetes or high cholesterol or are a smoker).
- You have diabetes.
- You smoke.
- You have Lupus (SLE) or any similar condition.
- You could be suffering from dehydration.
- You have suffered any heavy loss of blood recently.

Tell your doctor if you recently had or you are going to have a surgery of the stomach or intestinal tract before receiving/taking/using Almiral, as diclofenac can sometimes worsen wound healing in your gut after surgery.

Other special warnings

- You should take the lowest dose of diclofenac for the shortest possible time, particularly if you are underweight or elderly.
- There is a small increased risk of heart attack or stroke when you are taking any medicine like diclofenac. The risk is higher if you are taking high doses for a long time. Always follow the doctor's instructions on how much to take and how long to take it for.
- Whilst you are taking these medicines your doctor may want to give you a check-up from time to time.
- If you have a history of stomach problems when you are taking NSAIDs, particularly if you are elderly, you must tell your doctor straight away if you notice any unusual symptoms.
- Because it is an anti-inflammatory medicine, diclofenac may reduce the symptoms of infection, for example, headache and high temperature. If you feel unwell and need to see a doctor, remember to tell him or her that you are taking diclofenac.

Other medicines and Almiral

Tell your doctor or pharmacist if you are using, have recently used or might use any other medicines, especially:

- Medicines to treat diabetes.
- Anticoagulants (blood thinning tablets like warfarin).
- Diuretics (water tablets).
- Lithium (used to treat some mental problems).
- Methotrexate (for some inflammatory diseases and some cancers).
- Ciclosporin and tacrolimus (used to treat some inflammatory diseases and after transplants).
- Trimethoprim (a medicine used to prevent or treat urinary tract infections).
- Quinolone antibiotics (for infections).
- Any other NSAID or COX-2 (cyclo-oxygenase-2) inhibitor, for example aspirin or ibuprofen.
- Mifepristone (a medicine used to terminate pregnancy).
- Cardiac glycosides (for example digoxin), used to treat heart problems.
- Medicines known as SSRIs used to treat depression.
- Oral steroids (an anti-inflammatory drug).
- Medicines used to treat heart conditions or high blood pressure, for example beta-blockers or ACE inhibitors.
- Voriconazole (a medicine used to treat fungal infections).

- Phenytoin (a medicine used to treat seizures).
- Colestipol/cholestyramine (used to lower cholesterol).

Pregnancy, breast-feeding and fertility

If you are pregnant or breast-feeding, think you may be pregnant or are planning to have a baby, ask your doctor or pharmacist for advice before taking this medicine.

Do not take diclofenac if you are in the last 3 months of pregnancy as it could harm your unborn child or cause problems at delivery. It can cause kidney and heart problems in your unborn baby. It may affect your and your baby's tendency to bleed and cause labour to be later or longer than expected. You should not take diclofenac during the first 6 months of pregnancy unless absolutely necessary and advised by your doctor. If you need treatment during this period or while you are trying to get pregnant, the lowest dose for the shortest time possible should be used. If taken for more than a few days from 20 weeks of pregnancy onward, diclofenac can cause kidney problems in your unborn baby that may lead to low levels of amniotic fluid that surrounds the baby (oligohydramnios) or narrowing of a blood vessel (ductus arteriosus) in the heart of the baby. If you need treatment for longer than a few days, your doctor may recommend additional monitoring.

Having Almira may make it more difficult to conceive. You should talk to your doctor if you are planning to become pregnant, or if you have problems getting pregnant.

Driving or using machines

Very occasionally people have reported that diclofenac have made them feel dizzy, tired or sleepy. Problems with eyesight have also been reported. If you are affected in this way, you should not drive or operate machinery.

Almira contains benzyl alcohol.

This medicine contains 52.35mg benzyl alcohol in each milliliter. Benzyl alcohol may cause allergic reactions. Ask your doctor or pharmacist for advice if you are pregnant or breast-feeding or if you have a liver or kidney disease. This is because large amounts of benzyl alcohol can build-up in your body and may cause side effects (called "metabolic acidosis").

Almira contains sodium metabisulphite.

May rarely cause severe hypersensitivity reactions and bronchospasm.

3. How to use Almira

Always use this medicine exactly as your doctor has told you. Check with your doctor or pharmacist if you are not sure.

Your doctor will decide when and how to treat you with Almira. You will either be given an intravenous infusion (a drip into a vein) or an intramuscular injection (an injection into a muscle). The intramuscular injection is usually injected into the buttocks.

The recommended dose is for:

Adults

One or two ampoules (75 to 150 mg) each day for one or two days.

Use in elderly

Your doctor may give you a dose that is lower than the usual adult dose if you are elderly.

Use in children

Not suitable for children.

A doctor, nurse or pharmacist will prepare the injection for you.

If you have had an operation and are in hospital, the ampoule contents may be diluted and put into a drip bag before being given to you. A nurse or doctor will usually then give you the injection or infusion. You would not usually have to give the injection to yourself.

The doctor may also prescribe another drug to protect the stomach to be taken at the same time, particularly if you have had stomach problems before, or if you are elderly, or taking certain other drugs as well.

If you have had more Almira than you should

If you think you have been given too much Almira tell your doctor or nurse straight away.

If you have any further questions on the use of this medicine, ask your doctor or pharmacist.

4. Possible side effects

Like all medicines, this medicine can cause side effects, although not everybody gets them.

Side effects may be minimised by using the lowest effective dose for the shortest duration necessary.

Some side effects can be serious, stop using diclofenac and tell the doctor straight away if you notice:

- Stomach pain, indigestion, heartburn, wind, nausea (feeling sick) or vomiting (being sick).
- Any sign of bleeding in the stomach or intestine, for example, when emptying your bowels, blood in vomit or black, tarry faeces.
- Allergic reactions which can include skin rash, itching, bruising, painful red areas, peeling or blistering.
- Wheezing or shortness of breath (bronchospasm).
- Swollen, face, lips, hands or fingers.
- Yellowing of your skin or the whites of your eyes.
- Persistent sore throat or high temperature.
- An unexpected change in the amount of urine produced and/or its appearance.
- Mild cramping and tenderness of the abdomen, starting shortly after the start of the treatment with diclofenac and followed by rectal bleeding or bloody diarrhoea usually within 24 hours of the onset of abdominal pain (frequency not known, cannot be estimated from the available data).
- Chest pain, which can be a sign of a potentially serious allergic reaction called Kounis syndrome.
- Injection site reactions including injection site pain, redness, swelling, hard lump, sores and bruising. This can progress to blackening and death of the skin and underlying tissues surrounding the injection site, that heal with scarring, also known as Nicolau syndrome.

If you notice that you are bruising more easily than usual or have frequent sore throats or infections, tell your doctor.

The following side effects have been reported:

Common side effects (may affect up to 1 in 10 people):

- Stomach pain, heartburn, nausea, vomiting, diarrhoea, indigestion, wind, loss of appetite.
- Headache, dizziness, vertigo.
- Skin rash or spots.
- Raised levels of liver enzymes in the blood.
- Injection site reactions, symptoms include redness, swelling, change in the skin colour, inflammation, pain, and hypersensitivity.

Rare side effects (may affect up to 1 in 1,000 people):

- Stomach ulcers or bleeding (there have been very rare reported cases resulting in death, particularly in the elderly).
- Gastritis (inflammation, irritation or swelling of the stomach lining).
- Vomiting blood.

- Diarrhoea with blood in it or bleeding from the back passage.
- Black, tarry faeces or stools.
- Drowsiness, tiredness.
- Hypotension (low blood pressure, symptoms of which may include faintness, giddiness or light headedness).
- Skin rash and itching.
- Fluid retention, symptoms of which include swollen ankles.
- Liver function disorders, including hepatitis and jaundice.
- Injection site necrosis (dead skin and tissue around the injection site).

Very rare side effects (may affect up to 1 in 10,000 people):

- Tingling or numbness in the fingers, tremor, visual disturbances such as blurred or double vision, hearing loss or impairment, tinnitus (ringing in the ears), sleeplessness, nightmares, mood changes, depression, anxiety, mental disorders, disorientation and loss of memory, fits, headaches together with a dislike of bright lights, fever and a stiff neck, disturbances in sensation.
- Constipation, inflammation of the tongue, mouth ulcers, inflammation of the inside of the mouth or lips, taste changes, lower gut disorders (including inflammation of the colon, or worsening of colitis or Crohn's disease).
- Palpitations (fast or irregular heart beat), chest pain, hypertension (high blood pressure), inflammation of blood vessels (vasculitis), inflammation of the lung (pneumonitis), heart disorders, including congestive heart failure or heart attack, blood disorders (including anaemia).
- Kidney or severe liver disorders including liver failure, presence of blood or protein in the urine.
- Serious skin rashes including Stevens-Johnson syndrome Lyell's syndrome and other skin rashes which may be made worse by exposure to sunlight.
- Hair loss.

Other side effects that have also been reported with not known frequency (that cannot be estimated from the available data):

- Inflammation of the pancreas, impotence. Facial swelling, inflammation of the lining of the brain (meningitis), stroke, throat disorders, confusion, hallucinations, malaise (general feeling of discomfort), inflammation of the nerves in the eye.
- Tissue damage at the injection site.

Reporting of side effects

If you get any side effects, talk to your doctor, pharmacist or nurse. This includes any possible side effects not listed in this leaflet. You can also report side effects directly via the national reporting system:

Malta ADR Reporting Website: www.medicinesauthority.gov.mt/adrportal

By reporting side effects you can help provide more information on the safety of this medicine.

5. How to store Almiral

Keep this medicine out of the sight and reach of children.

Do not use this medicine after the expiry date which is stated on the carton. The expiry date refers to the last day of that month.

Store in the original package. Do not refrigerate or freeze.

Do not throw away any medicines via wastewater or household waste. Ask your pharmacist how to throw away medicines you no longer use. These measures will help protect the environment.

6. Contents of the pack and other information

What Almiral contains:

- The active substance is diclofenac sodium. Each 3ml ampoule contains 75mg diclofenac sodium.
- The other ingredients are: benzyl alcohol, sodium formaldehyde sulfoxylate, propylene glycol, sodium metabisulphite, sodium hydroxide, water for injection.

What Almiral looks like and contents of the pack

Almiral injection is a clear colourless to faintly yellow solution in 3.0 mL amber glass ampoules.

Almiral injection is supplied in single use amber glass ampoules containing 3 ml of diclofenac sodium 25 mg/ml, in packs of 5, 10 or 100 ampoules.

Not all pack sizes may be marketed.

Marketing Authorisation Holder

MEDOCHEMIE LTD, 1-10 Constantinoupoleos street, 3011 Limassol, Cyprus

Manufacturer

Medochemie Ltd, Ampoule Injectable Facility: 48 Iapetou Street , Agios Athanassios Industrial Area, 4101 Agios Athanassios, Limassol, Cyprus

This leaflet was last revised in October 2022.

The following information is intended for healthcare professionals only:

Dosage and Administration

Adults

Almiral (given im or iv) should not be given for more than two days; if necessary, treatment can be continued with Almiral tablets or suppositories.

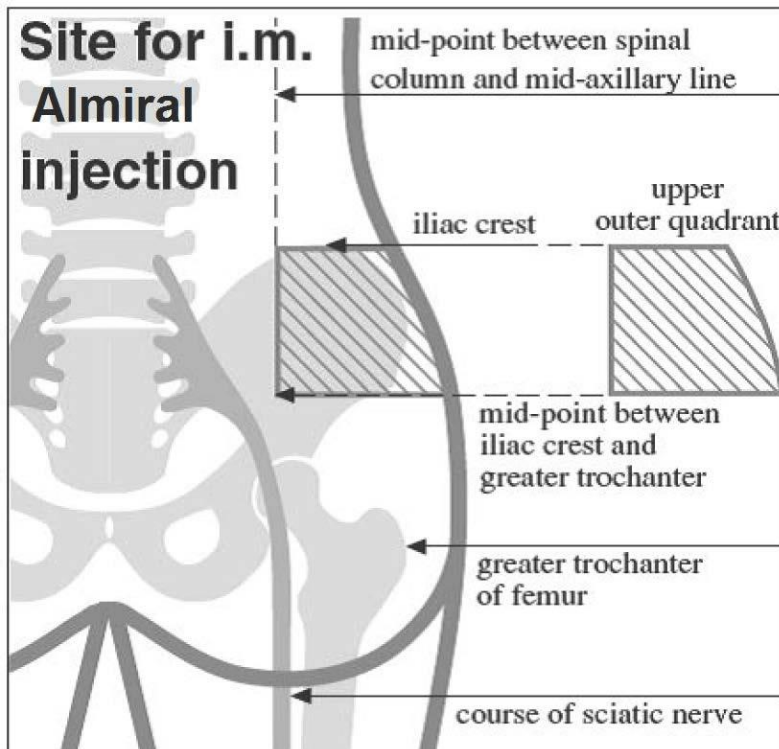
Intramuscular injection: The following directions for intramuscular injection must be adhered to in order to avoid damage to a nerve or other tissue at the injection site.

One ampoule once (or in severe cases twice) daily intramuscularly by deep intragluteal injection into the upper outer quadrant. If two injections daily are required it is advised that the alternative buttock be used for the second injection. Alternatively, one ampoule of 75 mg can be combined with other dosage forms of Almiral (tablets or suppositories) up to the maximum daily dosage of 150 mg.

Renal colic: One 75 mg ampoule intramuscularly. A further ampoule may be administered after 30 minutes if necessary. The recommended maximum daily dose of Almiral is 150 mg.

Recommended injection procedure

1. The patient may lie down or stand (holding a stable piece of furniture for support) whichever is most comfortable.
2. The buttocks should be exposed and inspected to find the most suitable injection site. Avoid scars and lumps and choose the buttock which is free from any problems. If more than one injection needs to be given the other buttock should be used.
3. The injection site should be thoroughly disinfected e.g. with isopropyl alcohol and allowed to dry before injecting the solution.
4. Give the deep intramuscular injection high into upper outer quadrant (for boundary definitions see diagram) of the buttock taking particular care to avoid the sciatic nerve (see diagram) and blood vessels (see point 5 below). Avoid injecting into an area where resistance is felt.



N.B. In obese patients avoid deposition of the drug into the subcutaneous fatty tissue.

In small thin patients with little muscle bulk, be especially aware of the sciatic nerve which may be quite superficial.

5. Before injection and after needle insertion, pull back the syringe plunger to check the needle has not entered a vessel. If blood is drawn, withdraw the needle to another site and check again.
6. The injection should be given slowly to minimise local tissue damage.
7. If the patient complains of severe pain or pronounced discomfort stop the injection immediately. Retry at another site. A dull aching pain may be experienced after normal injection.
8. Advise the patient to remain reasonably mobile for one to two hours after the injection, whenever possible.

Intravenous infusion: Immediately before initiating an intravenous infusion, Almira must be diluted with 100-500 ml of either sodium chloride solution (0.9%) or glucose solution (5%). Both solutions should be buffered with sodium bicarbonate solution (0.5 ml 8.4% or 1 ml 4.2%). Only clear solutions should be used.

Intravenous infusions should be freshly made up and used immediately. Once prepared, the infusion should not be stored.

Almira must not be given as an intravenous bolus injection.

Two alternative regimens are recommended:

- For the treatment of moderate to severe postoperative pain, 75 mg should be infused continuously over a period of 30 minutes to 2 hours. If necessary, treatment may be repeated after 4-6 hours, not exceeding 150 mg within any period of 24 hours.
- For the prevention of post-operative pain, a loading dose of 25 mg-50 mg should be infused after surgery over 15 minutes to 1 hour, followed by a continuous infusion of approx. 5mg per hour up to a maximum daily dosage of 150 mg.

Children

Almiral is not recommended for use in children.

Elderly

Although the pharmacokinetics of diclofenac are not impaired to any clinically relevant extent in elderly patients, non-steroidal anti-inflammatory drugs should be used with particular caution in such patients who generally are more prone to adverse reactions. In particular it is recommended that the lowest effective dosage be used in frail elderly patients or those with a low body weight and the patient should be monitored for GI bleeding for 4 weeks following initiation of NSAID therapy.

The recommended maximum daily dose of Almiral is 150 mg.

The infusion solution should not be used if crystals or precipitates are observed.

Incompatibilities

The ampoules used im or iv as an infusion should not be mixed with other injection solutions.

Shelf life

Three years.