

## **SUMMARY OF PRODUCT CHARACTERISTICS**

### **1 NAME OF THE MEDICINAL PRODUCT**

Minims Atropine Sulphate 1%.

### **2 QUALITATIVE AND QUANTITATIVE COMPOSITION**

Clear, colourless, sterile eye drops containing Atropine Sulphate PhEur 1% w/v.

### **3 PHARMACEUTICAL FORM**

Sterile, single-use eye drops.

### **4 CLINICAL PARTICULARS**

#### **4.1 Therapeutic indications**

As a topical mydriatic and cycloplegic

#### **4.2 Posology and method of administration**

*Adults (including the elderly):*

One drop to be instilled into the eye, or as required.

#### **4.3 Contraindications**

Hypersensitivity to any component of the preparation.

Due to the risk of precipitating an acute attack, do not use in cases of confirmed narrow-angle glaucoma or where latent narrow angle glaucoma is suspected. If in doubt it is recommended that an alternative preparation is used.

#### **4.4 Special warnings and precautions for use**

The protracted mydriasis which is difficult to reverse, may be a disadvantage.

Systemic absorption may be reduced by compressing the lacrimal sac at the medial canthus for a minute during and following the instillation of the drops. (This blocks the passage of the drops via the naso-lacrimal duct to the wide absorptive area of the nasal and pharyngeal mucosa. It is especially advisable in children.)

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

None known.

#### **4.6 Fertility, Pregnancy and lactation**

The safety for use in pregnancy and lactation has not been established, therefore, use only when directed by a physician.

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

May cause transient blurring of vision on instillation. Warn patients not to drive or operate hazardous machinery until vision is clear.

#### **4.8 Undesirable effects**

Side effects rarely occur but include anticholinergic effects such as dry mouth and skin, flushing, increased body temperature, urinary symptoms, gastrointestinal symptoms and tachycardia. These effects are more likely to occur in infants and children.

#### **4.9 Overdose**

Systemic reactions to topical atropine are unlikely at normal doses. Symptoms which can occur following an overdose, however, include anticholinergic effects (as listed in section 4.8 above), cardiovascular changes (tachycardia, atrial arrhythmias, atrio-ventricular dissociation) and central nervous system effects (confusion, ataxia, restlessness, hallucination, convulsions). Treatment is supportive.

## **5 PHARMACOLOGICAL PROPERTIES**

### **5.1 Pharmacodynamic properties**

Atropine sulphate is a competitive antagonist of acetylcholine at postganglionic cholinergic (parasympathetic) nerve endings.

Atropine does not discriminate between the recently discovered muscarinic receptor sub types M1 (in parasympathetic ganglia of the submucous plexus, with high affinity for selecting antimuscarinic pirenzepine) and M2 (low affinity for pirenzepine and occurring predominantly in heart and smooth muscle).

### **5.2 Pharmacokinetic properties**

Atropine is well absorbed from the small bowel and not at all from the stomach. Thus the effects of oral dosing are much slower in onset than after parenteral dosing. Atropine is also absorbed by mucous membranes but less readily from the eye and skin, although significant toxicity can sometimes occur through absorption of excessive eye drops.

Atropine has a volume of distribution of 1 - 6 L/kg. Protein binding is moderate, with approximately 50% of the drug bound in plasma. Its plasma clearance is 8ml/min/kg.

Only traces of atropine are found in breast milk. The drug readily crosses the blood-brain barrier and may cause confusion and delirium post-operatively. It crosses the placenta readily.

Atropine is metabolised by hepatic oxidation and conjugation to inactive metabolites, with about 2% undergoing hydrolysis to tropine and tropic acid. About 30% of the dose is excreted unchanged in the urine. Only trace amounts of the dose are eliminated in the faeces.

There is some evidence of prolonged elimination in elderly subjects.

### **5.3 Preclinical safety data**

There are no preclinical data of relevance to the prescriber which are additional to that already included in other sections of the SPC.

## **6 PHARMACEUTICAL PARTICULARS**

**6.1 List of excipients**

Hydrochloric acid  
Purified water

**6.2 Incompatibilities**

None known.

**6.3 Shelf life**

15 months.

**6.4 Special precautions for storage**

Store below 25°C. Do not freeze. Protect from light.

**6.5 Nature and contents of container**

A sealed, conical shaped container fitted with a twist and pull-off cap. Each Minims unit is overwrapped in an individual polypropylene/paper pouch. Each container holds approximately 0.5ml of solution.

**6.6 Special precautions for disposal**

Each Minims unit should be discarded after a single use.

**7 MARKETING AUTHORISATION HOLDER**

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**8 MARKETING AUTHORISATION NUMBER(S)**

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