

**PACKAGE LEAFLET: INFORMATION FOR THE USER**  
**Cisplatin 1 mg/ml**  
**Concentrate for solution for infusion**

cisplatin

**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 pharmacist or nurse.
- If you get any side effects, talk to your doctor, pharmacist or nurse. This includes any possible side effects not listed in this leaflet. See section 4.

**What is in this leaflet:**

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

 **SANDOZ**

**1. WHAT CISPLATIN 1 MG/ML IS AND WHAT IT IS USED FOR**

Cisplatin forms part of a group of medicines called cytostatics, which are used in the treatment of cancer. Cisplatin can be used alone but more commonly Cisplatin is used in combination with other cytostatics.

Cisplatin can destroy cells in your body that may cause certain types of cancer (tumour of testis, tumour of ovary, head and neck epithelial tumour (tumour affecting the outer tissue layer of the skin), tumour in the lung).

Your doctor will be able to provide you with more information.

**2. WHAT YOU NEED TO KNOW BEFORE YOU USE CISPLATIN**

**Do not use Cisplatin:**

- if you are allergic to cisplatin or any of the other ingredients of this medicine (listed in section 6).
- if you are allergic (hypersensitive) to any other medicine that contains platinum
- if you have kidney problems (renal dysfunction)
- if you suffer from dehydration
- if you suffer from decrease in blood cell count
- if your hearing is impaired
- if you are breastfeeding
- combined with yellow fever vaccine and phenytoin (see "Other medicines and Cisplatin" below).

**Warnings and precautions**

**Talk to your doctor, pharmacist or nurse before using Cisplatin**

- Your doctor will carry out tests in order to determine the levels of calcium, sodium, potassium and magnesium in your blood, as well as to check your blood cell count and your liver and kidney function.
- Cisplatin should only be administered under the strict supervision of a specialist doctor experienced in administering chemotherapy.
- Your hearing will be tested prior to each treatment with Cisplatin.
- If you suffer from a nervous disorder not caused by Cisplatin.
- If you suffer from an infection. Please consult your doctor.
- If you suffer from vomiting and diarrhoea after administration of Cisplatin the liquid loss must be compensated
- If you intend to have children (see Pregnancy, breast-feeding and fertility).
- With spillage of cisplatin the contaminated skin must immediately be washed with water and soap.
- If cisplatin is injected outside the blood vessels the administration must be stopped immediately. Infiltration of cisplatin in the skin can result in tissue damage (cellulitis, fibrosis and necrosis).

Please consult your doctor, even if these statements were applicable to you at any time in the past.

**Other medicines and Cisplatin**

Tell your doctor or pharmacist if you are taking, have recently taken, or might take any other medicines,

- Simultaneous use of medicines that inhibit the bone marrow function or radiation can potentiate the adverse effects of cisplatin on the bone marrow.
- Cisplatin toxicity may increase when administered simultaneously with other cytostatics (medicine for cancer treatment), such as bleomycin and methotrexate.
- Agents to treat high blood pressure (antihypertensives containing furosemide, hydralazine, diazoxide, and propranolol) may increase the toxic effect of Cisplatin on kidneys.
- Cisplatin toxicity may severely affect the kidneys when administered simultaneously with agents that may cause side effects in the kidneys, such as those for the prevention/treatment of certain infections (antibiotics: cephalosporins, aminoglycosides, and/or amphotericin B) and contrast agents.
- Cisplatin toxicity may affect hearing abilities when administered simultaneously with agents that may have a side effect on hearing faculties, such as aminoglycosides.
- If you use agents to treat gout during your treatment with cisplatin, then the dosage of such agents may need to be adjusted (e.g. allopurinol, colchicine, probenecid and/or sulfinpyrazone).
- Administration of drugs that elevate your rate of bodily urine excretion (loop diuretics) combined with cisplatin (cisplatin dose: more than 60mg/m<sup>2</sup>, urine secretion: less than 1000 ml per 24 hours) may result in toxic effects on kidneys and hearing.
- The first signs of hearing damage (dizziness and/or tinnitus) may remain hidden
  - during your treatment with cisplatin
  - when you are also being administered agents to treat hypersensitivity (antihistamines, such as buclizine, cyclizine, loxapine, meclozine, phenothiazines, thioxanthenes and/or trimethobenzamides).
- Cisplatin given in combination with ifosfamide may result in hearing impairment or toxic effect on kidneys.
- The effects of treatment with cisplatin can be reduced through simultaneous administration of pyridoxine and hexamethylmelamine.
- Cisplatin given in combination with bleomycin and vinblastin may result in paleness or blue coloration of the fingers and/or toes (Raynaud's phenomenon).
- Administration of cisplatin for treatment with paclitaxel or in combination with docetaxel may result in severe nerve damage.
- The combined use of cisplatin with bleomycin and etoposide may decrease lithium levels in the blood. Therefore, lithium levels should be checked on a regular basis.
- Cisplatin reduces the effects of phenytoin on the treatment of epilepsy (also see "Do not use Cisplatin").
- Penicillamine may reduce the effectiveness of Cisplatin.
- Cisplatin may have an adverse impact on the effectivity of agents preventing coagulation (anticoagulants). Therefore, coagulation should be checked more often during combined use.
- Cisplatin and ciclosporin may result in suppression of the immune system with the risk of increased production of white blood cells (lymphocytes).
- You should not receive any vaccinations containing live viruses within three months of treatment with cisplatin.
- When undergoing treatment with Cisplatin, you must not receive yellow fever vaccinations (also see "Do not use Cisplatin").

**Pregnancy, breast-feeding and fertility**

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

Cisplatin should not be used during **pregnancy** unless it is clinically necessary for the mother. You must use effective contraception during and at least 7 months after treatment with Cisplatin.

Cisplatin must not be used while **breast-feeding**.

Male patients treated with Cisplatin are advised not to father a child during treatment and for up to 4 months after treatment. Further, men are advised to seek counseling on sperm preservation before starting treatment.

**Driving and using machines**

Do not drive or use any tools or machinery that require your full attention, because cisplatin may make you feel sleepy and/or cause vomiting.

**Cisplatin contains sodium.**

This medicine contains 35 mg sodium (main component of cooking salt) in each 10ml vial. This is equivalent to 1.75% of the recommended maximum daily dietary intake of sodium for an adult. This medicine contains 71 mg sodium (main component of cooking salt) in each 20ml vial. This is equivalent to 3.55% of the recommended maximum daily dietary intake of sodium for an adult. This medicine contains 177 mg sodium (main component of cooking salt) in each 50ml vial. This is equivalent to 8.85% of the recommended maximum daily dietary intake of sodium for an adult. This medicine contains 354 mg sodium (main component of cooking salt) in each 100ml vial. This is equivalent to 17.7% of the recommended maximum daily dietary intake of sodium for an adult.

**3. HOW TO USE CISPLATIN**

**Dosage and method of administration**

Cisplatin should only be given by a specialist in cancer treatment. The concentrate is diluted with a sodium chloride solution, or a sodium chloride solution that contains glucose, or a sodium chloride solution that contains mannitol.

Cisplatin is only given by infusion into a vein (an intravenous infusion).

Cisplatin should not come into contact with any materials that contain aluminium.

The recommended dosage of Cisplatin depends on your well-being, the anticipated effects of the treatment, and whether or not cisplatin is given on its own (monotherapy) or in combination with other agents (combination chemotherapy).

**Cisplatin (monotherapy):**

The following dosages are recommended:

- A *single* dosage of 50 to 120 mg/m<sup>2</sup> body surface, every 3 to 4 weeks
- 15 to 20 mg/m<sup>2</sup> per day over a 5-day period, every 3 to 4 weeks

**The following information is intended for healthcare professionals only:**

**Special precautions for disposal and other handling**

Cisplatin is to be diluted before use. For preparation of solution for infusion, any device containing aluminium that may come in contact with cisplatin (sets for intravenous infusion, needles, catheters, syringes) must be avoided.

Preparation of solution for infusion must take place in aseptic conditions.

For dilution of the concentrate, one of the following solutions should be used:

- sodium chloride solution 0.9%;
- mixture of sodium chloride solution 0.9% and glucose solution 5% (1:1) (resulting final concentrations: sodium chloride 0.45%, glucose 2.5%).
- Should hydration prior to the treatment with cisplatin be impossible, the concentrate may be diluted with:
  - mixture of sodium chloride solution 0.9% and mannitol solution 5% (1:1) (resulting final concentrations: sodium chloride 0.45%, mannitol 2.5%).

**Preparation of cisplatin solution for infusion:**

More than one vial may be necessary to obtain the required dose for the patient. The required amount (dose) of the cisplatin should be withdrawn aseptically from the appropriate number of vials using graduated syringes fitted with a needle and be diluted in 1-2 litres of one of the above mentioned solutions.

The diluted solution should be administered only by intravenous infusion.

Only clear and colourless to yellowish solutions without visible particles should be used. The diluted medicinal product is for single use only.

Cytotoxic agents should be prepared for administration only by personnel who have been trained in the safe handling of the preparation.

Refer to local cytotoxic handling guidelines.

As for any other cytotoxic agent, cisplatin should be used with extreme caution: gloves, face masks and protective clothing are required and vital. Cisplatin should be processed under a protective hood, if possible. Contact with skin and/or mucous membranes must be avoided.

Pregnant hospital employees should not work with cisplatin.

**Skin contact:** Rinse with large quantities of water. Apply an ointment if you have a temporary burning feeling. (Note: Some persons are sensitive to platinum and may experience a skin reaction). In the event of spillage, operators should put on gloves and mop up the spilled material with a sponge kept in the area for that purpose. Rinse the area twice with water. Put all solutions and sponges into a plastic bag and seal it. In the case of spillage all items coming into contact with Cisplatin should be handled and disposed in accordance to local cytotoxic guidelines.

#### Cisplatin in combination with other chemotherapeutic agents (combination chemotherapy):

- The typical dosage is 20 mg/m<sup>2</sup> or more, every 3 to 4 weeks
- In the treatment of tumours in the lung the typical dosage is 80 mg/m<sup>2</sup>

In order to avoid, or reduce, kidney problems, you are advised to drink copious amounts of water for a period of 24 hours following treatment with Cisplatin.

#### **If you believe you have received more Cisplatin than you should**

Your doctor will ensure that the correct dose for your condition is given. In case of overdose, you may experience increased side effects. Your doctor may give you symptomatic treatment for these side effects.

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

#### **4. POSSIBLE SIDE EFFECTS**

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

##### **Contact your doctor as soon as possible if:**

- you have persistent or severe diarrhoea or vomiting
- you have stomatitis/mucositis (sore lips or mouth ulcer)
- you have swelling of the face, lips, mouth or throat
- you have unexplained respiratory symptoms such as non-productive cough, difficulty in breathing or crackles
- you have difficulty in swallowing
- you have numbness or tingling in your fingers or toes
- you have extreme tiredness
- you have abnormal bruising or bleeding
- you have signs of infection, such as sore throat and high temperature
- you have sensation of discomfort close to or at the injection site during the infusion.
- you have severe pain or swelling in either of your legs, chest pain, or difficulty breathing (possibly indicating harmful blood clots in a vein) (common: may affect up to 1 in every 10 people).

##### **Very common (may affect more than 1 in 10 people)**

- reduction in the number of white blood cells, which makes infections more likely (leukopenia).
- reduction in blood platelets, which increases the risk of bruising and bleeding (thrombocytopenia).
- reduction in red blood cells, which can make the skin pale and cause weakness or breathlessness (anaemia).
- bone marrow failure (no production of blood cells)
- low levels of sodium in the blood
- fever

##### **Common (may affect up to 1 in 10 people)**

- sepsis
- arrhythmia, including reduced heartbeat (bradycardia), accelerated heartbeat (tachycardia)
- shortness of breath (dyspnoea), inflammation of the lungs (pneumonia) and respiratory failure

##### **Uncommon (may affect up to 1 in 100 people)**

- decreased production of sperm (dysfunctional spermatogenesis) and ovulation, and painful breast growth in men (gynaecomastia).
- acute leukemia
- low blood levels of magnesium (hypomagnesemia)
- damage of hearing (ototoxicity)
- metallic setting on the gums

##### **Rare (may affect up to 1 in 1,000 people)**

- various diseases of the brain (leukoencephalopathy)
- high levels of cholesterol in the blood (hypercholesterolaemia)
- convulsion
- numbness, tingling, burning (peripheral neuropathy)
- abnormal changes in the brain that can cause a collection of symptoms including headache, confusion, seizures, and vision loss associated with MRI imaging findings (reversible posterior leukoencephalopathy syndrome)
- heart attack
- inflammation of mucous membranes of the mouth (stomatitis).

##### **Very rare (may affect up to 1 in 10,000 people)**

- increased iron levels in the blood
- heart stops pumping blood (cardiac arrest)

##### **Not known (frequency cannot be estimated from the available data)**

- infection
- destruction of red blood cells (Coombs positive hemolytic anemia)
- certain enzyme increased (amylase)
- group of symptoms that develop when there is too much antidiuretic hormone (ADH) in the body like water retention, electrolyte imbalances and a low level of sodium in the blood (called hyponatremia or water intoxication)
- dehydration
- low levels of electrolytes in the blood (potassium, phosphate, calcium)
- increased blood level of uric acid, a waste material from food digestion
- muscle cramps (tetany)
- stroke
- loss of taste
- inflammation of blood vessels in the brain
- sudden shooting pains from the neck through the back into the legs when bending forward (Lhermitte's sign)
- spinal cord compression (myelopathy)
- damage of nerves which control involuntary bodily functions (may effect blood pressure, temperature control, digestion, bladder function)
- blurred vision
- colour blindness
- loss of sight (blindness)
- inflammation of the optic nerve
- swelling around the nerve responsible for sight (papilledema)
- pigmentation of the retina (a multi-layered sensory tissue that lines the back of the eye responsible for sight)
- noise in the ears, such as ringing, buzzing, roaring, clicking
- deafness
- problems with the heart
- Collection of signs including hemolytic anemia (destruction of red blood cells), kidney failure and a low platelet (a type of blood cell that helps to clot blood) count (hemolytic uremic syndrome)
- pale and blue-colored fingers and toes (Raynaud's phenomenon)
- feeling sick (nausea) and vomiting
- loss of appetite
- hiccups
- diarrhoea
- enzymes in the blood increased which could be a sign of liver damage
- blood clot in the lungs
- Rash
- loss of hair (alopecia)
- muscle spasms
- decrease or complete loss of kidney function
- weakness, loss of energy
- redness, inflammation, swelling of the skin and pain in the area of the injection as a result of injection in the surrounding tissue instead of the vein

##### **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 Yellow Card Scheme ([www.mhra.gov.uk/yellowcard](http://www.mhra.gov.uk/yellowcard)) or search for MHRA Yellow Card in Google play or Apple App store. By reporting side effects you can help provide more information on the safety of this medicine.

#### **5. HOW TO STORE CISPLATIN**

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

Do not store above 25°C.

Do not refrigerate or freeze.

Keep the vial in the outer carton in order to protect from light.

Do not use this medicine after the expiry date which is stated on the carton and vial after "EXP".

The expiry date refers to the last day of that month.

Do not use this medicine if you notice visible signs of deterioration.

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**

Each millilitre (ml) of solution contains 1 milligram (mg) of cisplatin.

The 10 ml vial contains 10 mg cisplatin, the 20 ml vial contains 20 mg cisplatin, the 50 ml vial contains 50 mg cisplatin and the 100 ml vial contains 100 mg cisplatin.

##### **What Cisplatin contains**

- The active substance is cisplatin.
- Other ingredients are sodium chloride, dilute hydrochloric acid and water for injections

##### **What Cisplatin looks like and contents of the pack**

Cisplatin is a clear and colourless to yellowish solution for infusion in glass injection vials. Packaging with 1, 5 or 10 injection vial(s) of 10 ml, each injection vial containing 10 mg cisplatin. Packaging with 1, 5 or 10 injection vial(s) of 20 ml, each injection vial containing 20 mg cisplatin. Packaging with 1, 5 or 10 injection vial(s) of 50 ml, each injection vial containing 50 mg cisplatin. Packaging with 1, 5 or 10 injection vial(s) of 100 ml, each injection vial containing 100 mg cisplatin.

Not all pack sizes may be marketed.

The vials are packed with or without a plastic protection (Onco-Safe or Sleeving). "Onco-Safe" and Sleeving do not come into contact with the medicine and provide additional transport protection, which increases the safety for the medical and pharmaceutical personnel.

##### **Marketing authorisation holder and manufacturer:**

**Marketing authorisation holder:** Sandoz Limited, Park View, Riverside Way, Watchmoor Park Camberley, Surrey, GU15 3YL, United Kingdom

**Manufacturer:** EBEWE Pharma Ges.m.b.H. Nfg.KG, Mondseestrasse 11, 4866 Unterach, Austria Or Fareva Unterach GmbH, Mondseestraße 11, 4866 Unterach, Austria

**This leaflet was last revised in 10/2024**

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

##### **Incompatibilities**

Cisplatin reacts with aluminium which results in production of a black platinum precipitate.

Therefore any device containing aluminium that may come in contact with cisplatin (sets for intravenous infusion, needles, catheters, syringes) must be avoided.

This medicinal product must not be mixed with other medicinal products except those mentioned above.

The cisplatin must not be diluted with glucose solution 5% alone or mannitol solution 5% alone, but only with the mixtures containing additional sodium chloride as stated above.

Antioxidants (such as sodium metabisulphite), bicarbonates (sodium bicarbonate), sulfates, fluorouracil and paclitaxel may inactivate cisplatin in infusion systems.

##### **Special precautions for storage**

**Medicinal product as packaged for sale:**

Do not store above 25°C. Do not refrigerate or freeze. Keep the vial in the outer carton in order to protect from light.

##### **Stability after first opening**

Vials with 10 mg/10 ml and 20 mg/20 ml

For single use only. Discard any unused contents. Remove solution from vial immediately before use.

Vials with 50 mg/50 ml and 100 mg/100 ml

Do not refrigerate. The chemical and physical stability of the medicinal product after first opening has been demonstrated for 28 days, when the product is stored at room temperature with light protection.

From a microbiological point of view, unless the method of opening precludes the risk of microbial contamination, the product should be used immediately. If not used immediately, in-use storage times and conditions are the responsibility of the user.

##### **Solution for infusion after dilution:**

Chemical and physical in-use stability has been demonstrated for 48 hours at 2 to 8°C when protected from light for solutions with a final cisplatin concentration of 0.1 mg/ml after dilution of the cisplatin concentrate with one of the following solutions:

- sodium chloride solution 0.9%;
- mixture of sodium chloride solution 0.9% and glucose solution 5% (1:1);
- mixture of sodium chloride solution 0.9% and mannitol solution 5% (1:1).

From a microbiological point of view, the product should be used immediately.

If not used immediately, in-use storage times and conditions prior to use are the responsibility of the user and would normally not be longer than 24 hours at 2 to 8°C, unless reconstitution / dilution (etc) has taken place in controlled and validated aseptic conditions.

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**Cisplatin 1 mg/ml**  
**Concentrate for solution for infusion**

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**What is in this leaflet:**

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



**1. WHAT CISPLATIN 1 MG/ML IS AND WHAT IT IS USED FOR**

Cisplatin forms part of a group of medicines called cytostatics, which are used in the treatment of cancer. Cisplatin can be used alone but more commonly Cisplatin is used in combination with other cytostatics.

Cisplatin can destroy cells in your body that may cause certain types of cancer (tumour of testis, tumour of ovary, head and neck epithelial tumour (tumour affecting the outer tissue layer of the skin), tumour in the lung). Your doctor will be able to provide you with more information.

**2. WHAT YOU NEED TO KNOW BEFORE YOU USE CISPLATIN**

**Do not use Cisplatin:**

- if you are allergic to cisplatin or any of the other ingredients of this medicine (listed in section 6).
- if you are allergic (hypersensitive) to any other medicine that contains platinum
- if you have kidney problems (renal dysfunction)
- if you suffer from dehydration
- if you suffer from decrease in blood cell count
- if your hearing is impaired
- if you are breastfeeding
- combined with yellow fever vaccine and phenytoin (see "Other medicines and Cisplatin" below).

**Warnings and precautions**

**Talk to your doctor, pharmacist or nurse before using Cisplatin**

- Your doctor will carry out tests in order to determine the levels of calcium, sodium, potassium and magnesium in your blood, as well as to check your blood cell count and your liver and kidney function.
- Cisplatin should only be administered under the strict supervision of a specialist doctor experienced in administering chemotherapy.
- Your hearing will be tested prior to each treatment with Cisplatin.
- If you suffer from a nervous disorder not caused by Cisplatin.
- If you suffer from an infection. Please consult your doctor.
- If you suffer from vomiting and diarrhoea after administration of Cisplatin the liquid loss must be compensated.
- If you intend to have children (see Pregnancy, breast-feeding and fertility).
- With spillage of cisplatin the contaminated skin must immediately be washed with water and soap.
- If cisplatin is injected outside the blood vessels the administration must be stopped immediately. Infiltration of cisplatin in the skin can result in tissue damage (cellulitis, fibrosis and necrosis).

Please consult your doctor, even if these statements were applicable to you at any time in the past.

**Other medicines and Cisplatin**

Tell your doctor or pharmacist if you are taking, have recently taken, or might take any other medicines,

- Simultaneous use of medicines that inhibit the bone marrow function or radiation can potentiate the adverse effects of cisplatin on the bone marrow.
- Cisplatin toxicity may increase when administered simultaneously with other cytostatics (medicine for cancer treatment), such as bleomycin and methotrexate.
- Agents to treat high blood pressure (antihypertensives containing furosemide, hydralazine, diazoxide, and propranolol) may increase the toxic effect of Cisplatin on kidneys.
- Cisplatin toxicity may severely affect the kidneys when administered simultaneously with agents that may cause side effects in the kidneys, such as those for the prevention/treatment of certain infections (antibiotics: cephalosporins, aminoglycosides, and/or amphotericin B) and contrast agents.
- Cisplatin toxicity may affect hearing abilities when administered simultaneously with agents that may have a side effect on hearing faculties, such as aminoglycosides.
- If you use agents to treat gout during your treatment with cisplatin, then the dosage of such agents may need to be adjusted (e.g. allopurinol, colchicine, probenecid and/or sulfinpyrazone).
- Administration of drugs that elevate your rate of bodily urine excretion (loop diuretics) combined with cisplatin (cisplatin dose: more than 60mg/m<sup>2</sup>, urine secretion: less than 1000 ml per 24 hours) may result in toxic effects on kidneys and hearing.
- The first signs of hearing damage (dizziness and/or tinnitus) may remain hidden
  - during your treatment with cisplatin
  - when you are also being administered agents to treat hypersensitivity (antihistamines, such as buclizine, cyclizine, loxapine, meclozine, phenothiazines, thioxanthenes and/or trimethobenzamides).
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- The combined use of cisplatin with bleomycin and etoposide may decrease lithium levels in the blood. Therefore, lithium levels should be checked on a regular basis.
- Cisplatin reduces the effects of phenytoin on the treatment of epilepsy (also see "Do not use Cisplatin").
- Penicillamine may reduce the effectiveness of Cisplatin.
- Cisplatin may have an adverse impact on the effectivity of agents preventing coagulation (anticoagulants). Therefore, coagulation should be checked more often during combined use.
- Cisplatin and ciclosporin may result in suppression of the immune system with the risk of increased production of white blood cells (lymphocytes).
- You should not receive any vaccinations containing live viruses within three months of treatment with cisplatin.
- When undergoing treatment with Cisplatin, you must not receive yellow fever vaccinations (also see "Do not use Cisplatin").

**Pregnancy, breast-feeding and fertility**

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

Cisplatin should not be used during **pregnancy** unless it is clinically necessary for the mother. You must use effective contraception during and at least 7 months after treatment with Cisplatin.

Cisplatin must not be used while **breast-feeding**.

Male patients treated with Cisplatin are advised not to father a child during treatment and for up to 4 months after treatment. Further, men are advised to seek counseling on sperm preservation before starting treatment.

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Do not drive or use any tools or machinery that require your full attention, because cisplatin may make you feel sleepy and/or cause vomiting.

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**3. HOW TO USE CISPLATIN**

**Dosage and method of administration**

Cisplatin should only be given by a specialist in cancer treatment. The concentrate is diluted with a sodium chloride solution, or a sodium chloride solution that contains glucose, or a sodium chloride solution that contains mannitol.

Cisplatin is only given by infusion into a vein (an intravenous infusion).

Cisplatin should not come into contact with any materials that contain aluminium.

The recommended dosage of Cisplatin depends on your well-being, the anticipated effects of the treatment, and whether or not cisplatin is given on its own (monotherapy) or in combination with other agents (combination chemotherapy).

**Cisplatin (monotherapy):**

The following dosages are recommended:

- A *single* dosage of 50 to 120 mg/m<sup>2</sup> body surface, every 3 to 4 weeks
- 15 to 20 mg/m<sup>2</sup> per day over a 5-day period, every 3 to 4 weeks

**Cisplatin in combination**

with other chemotherapeutic agents (combination chemotherapy):

- The typical dosage is 20 mg/m<sup>2</sup> or more, every 3 to 4 weeks
- In the treatment of tumours in the lung the typical dosage is 80 mg/m<sup>2</sup>

In order to avoid, or reduce, kidney problems, you are advised to drink copious amounts of water for a period of 24 hours following treatment with Cisplatin.

**If you believe you have received more Cisplatin than you should**

Your doctor will ensure that the correct dose for your condition is given. In case of overdose, you may experience increased side effects. Your doctor may give you symptomatic treatment for these side effects.

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

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- Should hydration prior to the treatment with cisplatin be impossible, the concentrate may be diluted with:

mixture of sodium chloride solution 0.9% and mannitol solution 5% (1:1) (resulting final concentrations: sodium chloride 0.45%, mannitol 2.5%).

**Preparation of cisplatin solution for infusion:**

More than one vial may be necessary to obtain the required dose for the patient. The required amount (dose) of the cisplatin should be withdrawn aseptically from the appropriate number of vials using graduated syringes fitted with a needle and be diluted in 1-2 litres of one of the above mentioned solutions.

The diluted solution should be administered only by intravenous infusion.

Only clear and colourless to yellowish solutions without visible particles should be used.

The diluted medicinal product is for single use only.

Cytotoxic agents should be prepared for administration only by personnel who have been trained in the safe handling of the preparation.

Refer to local cytotoxic handling guidelines.

As for any other cytotoxic agent, cisplatin should be used with extreme caution: gloves, face masks and protective clothing are required and vital. Cisplatin should be processed under a protective hood, if possible. Contact with skin and/or mucous membranes must be avoided. Pregnant hospital employees should not work with cisplatin.

**Skin contact:** Rinse with large quantities of water. Apply an ointment if you have a temporary burning feeling. (Note: Some persons are sensitive to platinum and may experience a skin reaction).

In the event of spillage, operators should put on gloves and mop up the spilled material with a sponge kept in the area for that purpose.

Rinse the area twice with water. Put all solutions and sponges into a plastic bag and seal it. In the case of spillage all items coming into contact with Cisplatin should be handled and disposed in accordance to local cytotoxic guidelines.

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#### 4. POSSIBLE SIDE EFFECTS

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

##### Contact your doctor as soon as possible if:

- you have persistent or severe diarrhoea or vomiting
- you have stomatitis/mucositis (sore lips or mouth ulcer)
- you have swelling of the face, lips, mouth or throat
- you have unexplained respiratory symptoms such as non-productive cough, difficulty in breathing or crackles
- you have difficulty in swallowing
- you have numbness or tingling in your fingers or toes
- you have extreme tiredness
- you have abnormal bruising or bleeding
- you have signs of infection, such as sore throat and high temperature
- you have sensation of discomfort close to or at the injection site during the infusion.
- you have severe pain or swelling in either of your legs, chest pain, or difficulty breathing (possibly indicating harmful blood clots in a vein) (common: may affect up to 1 in every 10 people).

##### Very common (may affect more than 1 in 10 people)

- reduction in the number of white blood cells, which makes infections more likely (leukopenia).
- reduction in blood platelets, which increases the risk of bruising and bleeding (thrombocytopenia).
- reduction in red blood cells, which can make the skin pale and cause weakness or breathlessness (anaemia).
- bone marrow failure (no production of blood cells)
- low levels of sodium in the blood
- fever

##### Common (may affect up to 1 in 10 people)

- sepsis
- arrhythmia, including reduced heartbeat (bradycardia), accelerated heartbeat (tachycardia)
- shortness of breath (dyspnoea), inflammation of the lungs (pneumonia) and respiratory failure

##### Uncommon (may affect up to 1 in 100 people)

- decreased production of sperm (dysfunctional spermatogenesis) and ovulation, and painful breast growth in men (gynaecomastia).
- acute leukemia
- low blood levels of magnesium (hypomagnesemia)
- damage of hearing (ototoxicity)
- metallic setting on the gums

##### Rare (may affect up to 1 in 1,000 people)

- various diseases of the brain (leukoencephalopathy)
- high levels of cholesterol in the blood (hypercholesterolaemia)
- convulsion
- numbness, tingling, burning (peripheral neuropathy)
- abnormal changes in the brain that can cause a collection of symptoms including headache, confusion, seizures, and vision loss associated with MRI imaging findings (reversible posterior leukoencephalopathy syndrome)
- heart attack
- inflammation of mucous membranes of the mouth (stomatitis).

##### Very rare (may affect up to 1 in 10,000 people)

- increased iron levels in the blood
- heart stops pumping blood (cardiac arrest)

##### Not known (frequency cannot be estimated from the available data)

- infection
- destruction of red blood cells (Coombs positive hemolytic anemia)
- certain enzyme increased (amylase)
- group of symptoms that develop when there is too much antidiuretic hormone (ADH) in the body like water retention, electrolyte imbalances and a low level of sodium in the blood (called hyponatremia or water intoxication)
- dehydration
- low levels of electrolytes in the blood (potassium, phosphate, calcium)
- increased blood level of uric acid, a waste material from food digestion
- muscle cramps (tetany)
- stroke
- loss of taste
- inflammation of blood vessels in the brain
- sudden shooting pains from the neck through the back into the legs when bending forward (Lhermitte's sign)
- spinal cord compression (myelopathy)
- damage of nerves which control involuntary bodily functions (may effect blood pressure, temperature control, digestion, bladder function)
- blurred vision
- colour blindness
- loss of sight (blindness)
- inflammation of the optic nerve
- swelling around the nerve responsible for sight (papilledema)
- pigmentation of the retina (a multi-layered sensory tissue that lines the back of the eye responsible for sight)
- noise in the ears, such as ringing, buzzing, roaring, clicking
- deafness
- problems with the heart
- Collection of signs including hemolytic anemia (destruction of red blood cells), kidney failure and a low platelet (a type of blood cell that helps to clot blood) count (hemolytic uremic syndrome)
- pale and blue-colored fingers and toes (Raynaud's phenomenon)
- feeling sick (nausea) and vomiting
- loss of appetite
- hiccups
- diarrhoea
- enzymes in the blood increased which could be a sign of liver damage
- blood clot in the lungs
- Rash
- loss of hair (alopecia)
- muscle spasms
- decrease or complete loss of kidney function
- weakness, loss of energy
- redness, inflammation, swelling of the skin and pain in the area of the injection as a result of injection in the surrounding tissue instead of the vein

##### 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 Yellow Card Scheme ([www.mhra.gov.uk/yellowcard](http://www.mhra.gov.uk/yellowcard)) or search for MHRA Yellow Card in Google play or Apple App store. By reporting side effects you can help provide more information on the safety of this medicine.

#### 5. HOW TO STORE CISPLATIN

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

Do not store above 25°C.

Do not refrigerate or freeze.

Keep the vial in the outer carton in order to protect from light.

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

Do not use this medicine if you notice visible signs of deterioration.

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

Each millilitre (ml) of solution contains 1 milligram (mg) of cisplatin.

The 10 ml vial contains 10 mg cisplatin, the 20 ml vial contains 20 mg cisplatin,

the 50 ml vial contains 50 mg cisplatin and the 100 ml vial contains 100 mg cisplatin.

##### What Cisplatin contains

- The active substance is cisplatin.
- Other ingredients are sodium chloride, dilute hydrochloric acid and water for injections

##### What Cisplatin looks like and contents of the pack

Cisplatin is a clear and colourless to yellowish solution for infusion in glass injection vials.

Packaging with 1, 5 or 10 injection vial(s) of 10 ml, each injection vial containing 10 mg cisplatin.

Packaging with 1, 5 or 10 injection vial(s) of 20 ml, each injection vial containing 20 mg cisplatin.

Packaging with 1, 5 or 10 injection vial(s) of 50 ml, each injection vial containing 50 mg cisplatin.

Packaging with 1, 5 or 10 injection vial(s) of 100 ml, each injection vial containing 100 mg cisplatin.

Not all pack sizes may be marketed.

The vials are packed with or without a plastic protection (Onco-Safe or Sleeving). "Onco-Safe" and Sleeving do not come into contact with the medicine and provide additional transport protection, which increases the safety for the medical and pharmaceutical personnel.

##### Marketing authorisation holder and manufacturer:

**Marketing authorisation holder:** Sandoz Limited, Park View, Riverside Way

Walthamoor Park, Camberley, Surrey, GU15 3YL, United Kingdom

**Manufacturer:** EBWE Pharma Ges.m.b.H. Nfg.KG, Mondseestrasse 11,

4866 Unterach, Austria Or Fareva Unterach GmbH, Mondseestraße 11

4866 Unterach, Austria

This leaflet was last revised in 10/2024

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

##### Incompatibilities

Cisplatin reacts with aluminium which results in production of a black platinum precipitate. Therefore any device containing aluminium that may come in contact with cisplatin (sets for intravenous infusion, needles, catheters, syringes) must be avoided.

This medicinal product must not be mixed with other medicinal products except those mentioned above.

The cisplatin must not be diluted with glucose solution 5% alone or mannitol solution 5% alone, but only with the mixtures containing additional sodium chloride as stated above.

Antioxidants (such as sodium metabisulphite), bicarbonates (sodium bicarbonate), sulfates, fluorouracil and paclitaxel may inactivate cisplatin in infusion systems.

##### Special precautions for storage

Medicinal product as packaged for sale:

Do not store above 25°C. Do not refrigerate or freeze. Keep the vial in the outer carton in order to protect from light.

##### Stability after first opening

Vials with 10 mg/10 ml and 20 mg/20 ml

For single use only. Discard any unused contents. Remove solution from vial immediately before use.

Vials with 50 mg/50 ml and 100 mg/100 ml

Do not refrigerate. The chemical and physical stability of the medicinal product after first opening has been demonstrated for 28 days, when the product is stored at room temperature with light protection.

From a microbiological point of view, unless the method of opening precludes the risk of microbial contamination, the product should be used immediately. If not used immediately, in-use storage times and conditions are the responsibility of the user.

##### Solution for infusion after dilution:

Chemical and physical in-use stability has been demonstrated for 48 hours at 2 to 8°C when protected from light for solutions with a final cisplatin concentration of 0.1 mg/ml after dilution of the cisplatin concentrate with one of the following solutions:

- sodium chloride solution 0.9%;
- mixture of sodium chloride solution 0.9% and glucose solution 5% (1:1);
- mixture of sodium chloride solution 0.9% and mannitol solution 5% (1:1).

From a microbiological point of view, the product should be used immediately. If not used immediately, in-use storage times and conditions prior to use are the responsibility of the user and would normally not be longer than 24 hours at 2 to 8°C, unless reconstitution / dilution (etc) has taken place in controlled and validated aseptic conditions.

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