Medicines & Healthcare products Regulatory Agency

MHRA Regulating Medicines and Medical Devices

Public Assessment Report

Decentralised Procedure

Morphine sulfate 10mg/5ml Oral Solution

Procedure No: UK/H/5580/001/DC

UK Licence No: PL 29831/0563

Wockhardt UK Limited

Lay Summary

Morphine sulfate 10mg/5ml Oral Solution
(morphine sulfate)

This is a summary of the public assessment report (PAR) for Morphine sulfate 10mg/5ml Oral Solution (PL 29831/0563; UK/H/5580/001/DC). It explains how Morphine sulfate 10mg/5ml Oral Solution was assessed and its authorisation recommended, as well as its conditions of use. It is not intended to provide practical advice on how to use Morphine sulfate 10mg/5ml Oral Solution.

For practical information about using Morphine sulfate 10mg/5ml Oral Solution, patients should read the package leaflet or contact their doctor or pharmacist.

What is Morphine sulfate 10mg/5ml Oral Solution and what is it used for?
Morphine sulfate 10mg/5ml Oral Solution is a 'generic medicine'. This means that it is similar to a 'reference medicine', already authorised in the European Union (EU) called Oramorph Oral Solution 10mg/5ml.

Morphine sulfate 10mg/5ml Oral Solution is used to relieve severe pain.

How does Morphine sulfate 10mg/5ml Oral Solution work?
Morphine sulfate 10mg/5ml Oral Solution contains the active substance morphine sulfate. Morphine sulfate belongs to a group of medicines called 'opioid analgesics', which act at specific points in the brain and nervous tissue to modulate sensitivity to pain.

How is Morphine sulfate 10mg/5ml Oral Solution used?
Morphine sulfate 10mg/5ml Oral Solution should be taken by mouth, using a 5 ml plastic spoon to measure the dose. (This spoon is available from a pharmacist).

Please read Section 3 of the package leaflet for detailed information on dosing recommendations, the route of administration, and the duration of treatment.

The prescribing doctor will decide the amount of medicine that should be given to the patient.

- In **adults** the usual dose is 5 to 10 ml (one to two 5ml plastic spoons) every four hours.
- In **children aged 13 to 18 years**, the most that should be taken is 2.5 to 10 ml (half to two 5 ml plastic spoons) every four hours.
- In **children aged 6 to 12 years**, the most that should be taken is 2.5 to 5 ml (half to one 5 ml plastic spoon) every four hours.
- In **children aged 1 to 5 years**, the most that should be taken is 2.5 ml (half a 5 ml plastic spoon) every four hours.
- Do not give this medicine to children under 1 year of age.

This medicine can only be obtained with a prescription.

What benefits of Morphine sulfate 10mg/5ml Oral Solution have been shown in studies?
No additional studies were needed as Morphine sulfate 10mg/5ml Oral Solution is a generic medicine that is given as an oral solution and contains an active substance in the same concentration as the reference medicine, Oramorph Oral Solution 10mg/5ml. For this reason

Morphine sulfate 10mg/5ml Oral Solution is expected to be bioequivalent to the reference medicine. Two medicines are bioequivalent when they produce the same levels of the active substance in the body.

What are the possible side effects from Morphine sulfate 10mg/5ml Oral Solution?
Because Morphine sulfate 10mg/5ml Oral Solution is a generic medicine, its benefits and possible side effects are taken as being the same as the reference medicine, Oramorph Oral Solution 10mg/5ml.

For information about side effects that may occur with using Morphine sulfate 10mg/5ml Oral Solution, please refer to the package leaflet or the Summary of Product Characteristics (SmPC) available on the Medicines and Healthcare products Regulatory Agency website.

Why is Morphine sulfate 10mg/5ml Oral Solution approved?
It was concluded that, in accordance with EU requirements, Morphine sulfate 10mg/5ml Oral Solution has been shown to have comparable quality and to be bioequivalent to the reference medicine, Oramorph Oral Solution 10mg/5ml. The MHRA, therefore, decided that, as for Oramorph Oral Solution 10mg/5ml, the benefits outweigh the identified risks and recommended that this product can be approved for use.

What measures are being taken to ensure the safe and effective use of Morphine sulfate 10mg/5ml Oral Solution?
A Risk Management Plan (RMP) has been developed to ensure that Morphine sulfate 10mg/5ml Oral Solution is used as safely as possible. Based on this plan, safety information has been included in the SmPC and the package leaflet for this product, including the appropriate precautions to be followed by healthcare professionals and patients.

Known side effects are continuously monitored. Furthermore new safety signals reported by patients and healthcare professionals will be monitored and reviewed continuously as well.

Other information about Morphine sulfate 10mg/5ml Oral Solution
Ireland and the UK agreed to grant a Marketing Authorisation for Morphine sulfate 10mg/5ml Oral Solution on 22 July 2015. The marketing authorisation in the UK was granted on 19 August 2015.

The full PAR for Morphine sulfate 10mg/5ml Oral Solution follows this summary.

For more information about treatment with Morphine sulfate 10mg/5ml Oral Solution, read the package leaflet or contact your doctor or pharmacist.

This summary was last updated in October 2015.

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I Introduction

Based on the review of the data on quality, safety and efficacy, the Member States have granted a Marketing Authorisation (MA) for the medicinal product Morphine sulfate 10mg/5ml Oral Solution. The application was submitted using the Decentralised Procedure (DCP), with the UK as Reference Member State (RMS) and Ireland as a Concerned Member States (CMS).

Morphine Sulfate 10mg/5ml Oral Solution is a prescription-only medicine (POM), indicated for the relief of severe pain.

This application was made under made under Article 10(1) of Directive 2001/83/EC, as amended, as a generic medicinal product. The reference medicinal product, which has been authorised in accordance with Community provisions in force for not less than 10 years in the European Economic Area, is Morphinsulfat 20mg/ml Losung. This reference medicinal product was authorised to Boehringer Ingelheim Pharma GmbH & Co. KG in Germany on 21 May 1997 (MA number: 34663.01.00). The MA holder has cited Oramorph Oral Solution 10 mg/5ml (PL 00015/0122) as the UK reference product, which was authorised to Boehringer Ingelheim Limited in the UK on 08 March 1988.

The medicinal product contains the active substance morphine sulfate, which is an opioid analgesic with affinity mainly for μ opioid receptors, and also for κ, if not σ and δ, opioid receptors located on the cell surfaces of the brain and nervous tissue. This action results in alteration of neurotransmitter release and calcium uptake. It has been postulated that this is the basis of the modulation of sensory input from afferent nerves sensitive to pain.

No new non-clinical studies were conducted, which is acceptable given that the application was based on being a generic medicinal product of an originator product that has been licensed for over 10 years.

Since Morphine sulfate 10mg/5ml Oral Solution is intended for generic substitution, this will not lead to an increased exposure to the environment. An environmental risk assessment is, therefore, not deemed necessary.

No clinical studies were performed as part of this application.

Morphine Sulfate 20mg/ml Oral Solution is an aqueous solution at the time of administration and in line with the *Guideline on the Investigation of Bioeuivalence (CPMP/EWP/QWP/1401/98 Rev. 1/Corr* **) no bioequivalence studies or other clinical studies are required for this application.

The RMS has been assured that acceptable standards of Good Manufacturing Practice (GMP) are in place for this product type at all sites responsible for the manufacture and assembly of this product.

For manufacturing sites within the Community, the RMS has accepted copies of current manufacturer authorisations issued by inspection services of the competent authorities as certification that acceptable standards of GMP are in place at those sites.

A Risk Management Plan (RMP) and a summary of the pharmacovigilance system have been

provided with this application and are satisfactory.

The RMS and CMS considered that the application could be approved at the end of procedure (Day 210) on 22 July 2015. After a subsequent National phase, a licence was granted in the UK on 19 August 2015.

II Quality aspects

II.1 Introduction

The application is submitted according to Article 10(1) of Directive 2001/83/EC, as amended. The applicant has specified Morphinsulfat 20mg/ml Losung, authorised in Germany (MA number: 34664.01.00), as the reference medicinal product for the purpose of determining the expiry period of data exclusivity (MA holder: Boehringer Ingelheim Pharma GmbH & Co. KG). The applicant has specified Oramorph Oral Solution 10 mg/5ml (PL 00015/0122) as the UK reference product (MA Holder: Boehringer Ingelheim Limited).

The product is formulated as a clear colourless to pale yellow oral solution containing the active substance morphine sulfate at a concentration of 2 mg/ml (each 5 ml contains 10 mg of morphine sulfate). The excipients present are methyl parahydroxybenzoate (E218), propyl parahydroxybenzoate (E216), sucrose, liquid glucose, sodium hydroxide solution (for pH adjustment), hydrochloric acid solution (for pH adjustment) and purified water.

The oral solution is presented in 100 ml, 250 ml and 500 ml conventional amber soda glass (Type III) bottles, each fitted with a 28 mm white polypropylene push and turn cap with expanded polyethylene (EPE) liner.

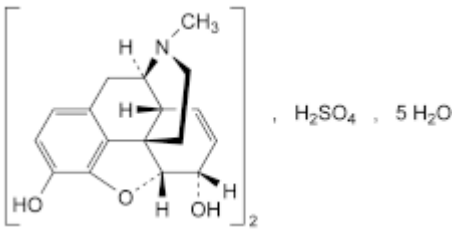
II.2 Drug Substance

Morphine sulfate

INN: Morphine sulfate

Chemical Name: Di(7,8-didehydro-4,5α-epoxy-17-methylmorphinan-3,6α-diol) sulfate pentahydrate

Structure:



Molecular formula: $C_{34}H_{40}N_2O_{10}S,5H_2O$

Molecular weight: 759

Appearance: White or almost white, crystalline powder.

Solubility: Soluble in water, very slightly soluble in ethanol (96 per cent), practically insoluble in toluene.

Morphine sulfate is the subject of a European Pharmacopoeia monograph.

All aspects of the manufacture and control of the active substance, morphine sulfate, are covered by a European Directorate for the Quality of Medicines and Healthcare (EDQM) Certificate of Suitability.

II.3 Medicinal Product

Pharmaceutical development

The objective was to develop a product that is comparable to the UK reference product Oramorph Oral Solution 20 mg/ml (PL 00015/0122).

All the excipients used in the manufacture of the proposed formulation, other than the pH adjusters sodium hydroxide solution and hydrochloric acid solution, comply with their respective European Pharmacopoeial monographs. The sodium hydroxide solution and hydrochloric acid solution are made up from sodium hydroxide, hydrochloric acid and purified water that are of European Pharmacopoeial grade.

Satisfactory certificates of analysis have been provided for all excipients showing compliance with their proposed specifications.

None of the excipients used contain material of animal or human origin.

No genetically modified organisms (GMO) have been used in the preparation of these excipients.

Manufacture of the product

A satisfactory batch formula has been provided for the manufacture of the finished product, together with an appropriate account of the manufacturing process. The manufacturing process has been validated with pilot-scale batches and a commitment has been provided that process validation will be performed on the first three production-scale batches of the finished product. A satisfactory validation protocol reflecting the production-scale batches is provided.

Finished Product Specification

The finished product specification is satisfactory. Test methods have been described that have been adequately validated, as appropriate. Batch data have been provided from two pilot-scale batches that comply with the release specification. Certificates of analysis have been provided for all working standards used.

Stability of the product

Stability studies were performed in accordance with current guidelines on batches of the finished product, packed in the packaging proposed for marketing. The data from these studies support a shelf-life of 12 months (unopened) and 3 months (after opening) with storage conditions of “Store in the original container in order to protect from light” and “Store below 25 °C”.

Suitable post approval stability commitments have been provided.

II.4 Discussion on chemical, pharmaceutical and biological aspects

The grant of a Marketing Authorisation is recommended.

III Non-clinical aspects

The pharmacodynamic, pharmacokinetic and toxicological properties of morphine sulfate are well-established. As morphine sulfate is a widely used, well-known active substance, the applicant has not provided additional studies and further studies are not required. An overview based on a literature review is, thus, appropriate.

Suitable justification has been provided for non-submission of an Environmental Risk Assessment (ERA). As the application is for a generic version of an already authorised product, it is not expected that environmental exposure will increase following approval of the marketing authorisation for the proposed product.

IV Clinical aspects

IV.1 Introduction

No new clinical data have been submitted for this application. The applicant's clinical overview on the clinical pharmacology, efficacy and safety of the product has been written by an appropriately qualified person and is adequate. The proposed indications and posology are identical to those of the reference product.

IV.2 Pharmacokinetics

In accordance with the *Guideline On The Investigation Of Bioequivalence (CPMP/EWP/QWP/1401/98 Rev. 1 Corr**)*, bioequivalence studies may be waived if a test product is an aqueous oral solution at the time of administration and contains an active substance in the same concentration as the reference medicine, an approved oral solution. Morphine sulfate 10mg/5ml Oral Solution meets these criteria. The formulation of the Morphine sulfate 10mg/5ml Oral Solution differs from the UK reference product, Oramorph Oral Solution 10mg/5ml, in the omission of ethanol. The applicant has provided suitable justification that the absence of ethanol will not affect the bioavailability of the product.

IV.3 Pharmacodynamics

The applicant has included a bibliographic review of the pharmacodynamics of the active substance. As noted above, in Section IV.2 Pharmacokinetics, the product is an aqueous oral solution and, therefore, bioequivalence studies can be waived.

IV.4 Clinical efficacy

No new efficacy data were submitted with this application and none were required.

IV.5 Clinical safety

No new safety data were submitted with this application and none were required.

IV.6 Risk Management Plan (RMP)

The marketing authorisation holder has submitted an RMP, in accordance with the requirements of Directive 2001/83/EC as amended, describing the pharmacovigilance activities and interventions designed to identify, characterise, prevent or minimise risks relating to Morphine sulfate 10mg/5ml Oral Solution.

A summary of safety concerns and planned risk minimisation activities, as approved in the RMP, are listed below:

Summary table of safety concerns

Summary of safety concerns	
Important identified risks	Respiratory depression Use in CNS depression or excitation states e.g. acute alcoholism; head injury; coma; convulsive conditions. Use in phaeochromocytoma Use in acute asthma Use in acute hepatic disease Concurrent use of MAOIs GI effects / Ileus Tolerance and dependence Hypotension Anaphylaxis
Important potential risks	Drug abuse Neonatal withdrawal effects (following chronic maternal use) Accidental overdose Use in chronic hepatic or renal disease
Missing information	Use in pregnancy Use during breast feeding

Summary table of risk minimisation measures

Safety concern	Routine risk minimisation measures	Additional risk minimisation measures
Respiratory depression.	Routine risk minimisation. The SmPC is up to date. **Section 4.3, Contraindications state:** "Respiratory depression... **Section 4.6, Fertility, pregnancy and lactation state:** "Neonates, whose mothers are given opioid analgesics during childbirth, should be monitored for signs of respiratory depression or withdrawal syndrome and (if necessary), treated with a specific opioid antagonist." **Section 4.9, Overdosage state:** "Signs of morphine toxicity and overdosage: These are likely to consist of pin-point pupils, respiratory depression and hypotension."	No additional risk minimisation activities are necessary for the safe and effective use of the medicinal product.
Use in CNS depression or excitation states e.g. acute alcoholism; head	Routine risk minimisation. The SmPC is up to date. **Section 4.3, Contraindications state:** "...acute alcoholism, head injuries, coma, convulsive disorders and where the intracranial pressure is raised, paralytic ileus. **Section 4.5, Interaction with other medicinal products**	No additional risk minimisation activities are necessary for

Safety concern	Routine risk minimisation measures	Additional risk minimisation measures
injury; coma; convulsive conditions.	**and other forms of interaction state** 'Monoamine oxidise inhibitors are known to interact with narcotic analgesics producing CNS excitation or depression with hyper- or hypotensive crisis, please see section 4.3.'	the safe and effective use of the medicinal product.
Use in phaeochromocytoma.	Routine risk minimisation The SmPC is up to date. **Section 4.3, Contraindications state:** "Morphine and some other opioids can induce the release of endogenous histamine and thereby stimulate catecholamine release making them unsuitable for use in patients with phaeochromocytoma."	No additional risk minimisation activities are necessary for the safe and effective use of the medicinal product.
Use in acute asthma	Routine risk minimisation The SmPC is up to date. **Section 4.3 state** 'Opioids are contra-indicated in acute asthma exacerbations' Section 4.4 states 'Opioids are contra-indicated in acute asthma exacerbations.'	No additional risk minimisation activities are necessary for the safe and effective use of the medicinal product.
Use in acute hepatic disease	Routine risk minimisation The SmPC is up to date. **Section 4.2, Posology and method of administration states** 'Reductions in dosage may be appropriate in the elderly, patients with moderate-severe renal or hepatic impairment, or where sedation is desirable'. **Section 4.3, Contraindications state** 'Acute hepatic disease'.	No additional risk minimisation activities are necessary for the safe and effective use of the medicinal product.
Concurrent use of MAOIs	Routine risk minimisation The SmPC is up to date. **Section 4.3, Contraindications state** 'Monoamine-oxidase inhibitors'. **Section 5.4, Interaction with other medicinal products and other forms of interaction state** ' Monoamine oxidase inhibitors are known to interact with narcotic analgesics producing CNS excitation or depression with hyper- or hypotensive crisis'.	No additional risk minimisation activities are necessary for the safe and effective use of the medicinal product.
GI effects / Ileus	Routine risk minimisation The SmPC is up to date. **Section 4.3 states** 'Paralytic ileus'. **Section 4.4, Special warnings and precautions for use state** 'Morphine sulfate should not be given if paralytic ileus is likely to occur...'.	No additional risk minimisation activities are necessary for the safe and

Safety concern	Routine risk minimisation measures	Additional risk minimisation measures
		effective use of the medicinal product.
Tolerance and dependence	Routine risk minimisation The SmPC is up to date. **Section 4.4, Special warnings and precautions for use state** 'Tolerance and dependence may occur'.	No additional risk minimisation activities are necessary for the safe and effective use of the medicinal product.
Hypotension	Routine risk minimisation The SmPC is up to date. **Section 4.4, Special warnings and precautions for use** state 'The administration of morphine may result in severe hypotension in individuals whose ability to maintain homeostatic blood pressure has already been compromised by depleted blood volume or the concurrent administration of drugs such as phenothiazine or certain anaesthetics'. **Section 4.9, Overdose state** 'Signs of morphine toxicity and overdosage: These are likely to consist of pin-point pupils, respiratory depression and hypotension.'	No additional risk minimisation activities are necessary for the safe and effective use of the medicinal product.
Anaphylaxis	Routine risk minimisation The SmPC is up to date. **Section 4.8, Undesirable effects state** 'Hypersensitivity reactions including anaphylaxis'.	No additional risk minimisation activities are necessary for the safe and effective use of the medicinal product.
Drug abuse	Morphine is a drug of abuse. The potential for abuse is therefore higher that with other medication	No additional risk minimisation activities are necessary for the safe and effective use of the medicinal product.
Neonatal withdrawal effects (following chronic maternal use)	Routine risk minimisation The SmPC is up to date. **Section 4.6, Fertility, pregnancy and lactation state** 'Withdrawal symptoms have been described in neonates after prolonged morphine use during pregnancy'.'	No additional risk minimisation activities are necessary for

Safety concern	Routine risk minimisation measures	Additional risk minimisation measures
		the safe and effective use of the medicinal product.
Accidental overdose	Routine risk minimisation The SmPC is up to date. **Section 4.9, Overdose state** 'Signs of morphine toxicity and overdosage: These are likely to consist of pin-point pupils, respiratory depression and hypotension. Circulatory failure and deepening coma may occur in more severe cases. Convulsions may occur in infants and children. Death may occur from respiratory failure. Treatment of morphine overdosage: Administer 0.4-2 mg naloxone intravenously. Repeat at 2-3 minute intervals as necessary to a maximum of 10mg, or by an infusion 2 mg in 500 ml of normal saline or 5 % dextrose (4 micrograms/ml). Empty the stomach. A 0.02 % aqueous solution of potassium permanganate may be used for lavage. Care should always be taken that the airway is maintained. Assist respiration if necessary. Maintain fluid and electrolyte levels, oxygen, i.v. fluids, vasopressors and other supportive measures should be employed as indicated. Caution: the duration of the effect of naloxone (2-3 hours) may be shorter than the duration of the effect of the morphine overdose. It is recommended that a patient who has regained consciousness after naloxone treatment should be observed for at least 6 hours after the last dose of naloxone.	No additional risk minimisation activities are necessary for the safe and effective use of the medicinal product.
Use in chronic hepatic or renal disease	Routine risk minimisation The SmPC is up to date. **Section 4.4, Special warnings and precautions for use state** 'It is wise to reduce dosage in chronic hepatic and renal disease, myxoedema, adrenocortical insufficiency, prostatic hypertrophy or shock.'	No additional risk minimisation activities are necessary for the safe and effective use of the medicinal product.
Use in pregnancy	Routine risk minimisation The SmPC is up to date. **Section 4.6, Fertility, pregnancy and lactation state** 'In humans, there are no adequate data available to allow an evaluation of any potential teratogenic risk. There have been reports of a possible link to an increased incident of inguinal hernias. Morphine crosses the placental barrier. Animal studies showed a potential for damage in offspring throughout the entire duration of gestation (see section 5.3). For this reason, morphine must only be used during pregnancy in cases where the maternal benefit clearly outweighs the risk for the child. Due to the mutagenic properties of morphine, it should not be administered to men and women of child-producing/child	No additional risk minimisation activities are necessary for the safe and effective use of the medicinal product.

Safety concern	Routine risk minimisation measures	Additional risk minimisation measures
	bearing potential unless effective contraception is assured.'	
Use during breast feeding	Routine risk minimisation The SmPC is up to date. Section 4.6, Fertility, pregnancy and lactation state 'Morphine is excreted into breast milk, where it reaches higher concentrations than in maternal plasma. As clinically relevant concentrations may be reached in nursing infants, breast-feeding is not advised.'	No additional risk minimisation activities are necessary for the safe and effective use of the medicinal product.

IV.7 Discussion on the clinical aspects

The grant of a Marketing Authorisation is recommended for this application.

V User consultation

The package leaflet has been evaluated via a user consultation study in accordance with the requirements of Articles 59(3) and 61(1) of Directive 2001/83/EC, as amended. The language used for the purpose of user testing the package leaflet was English.

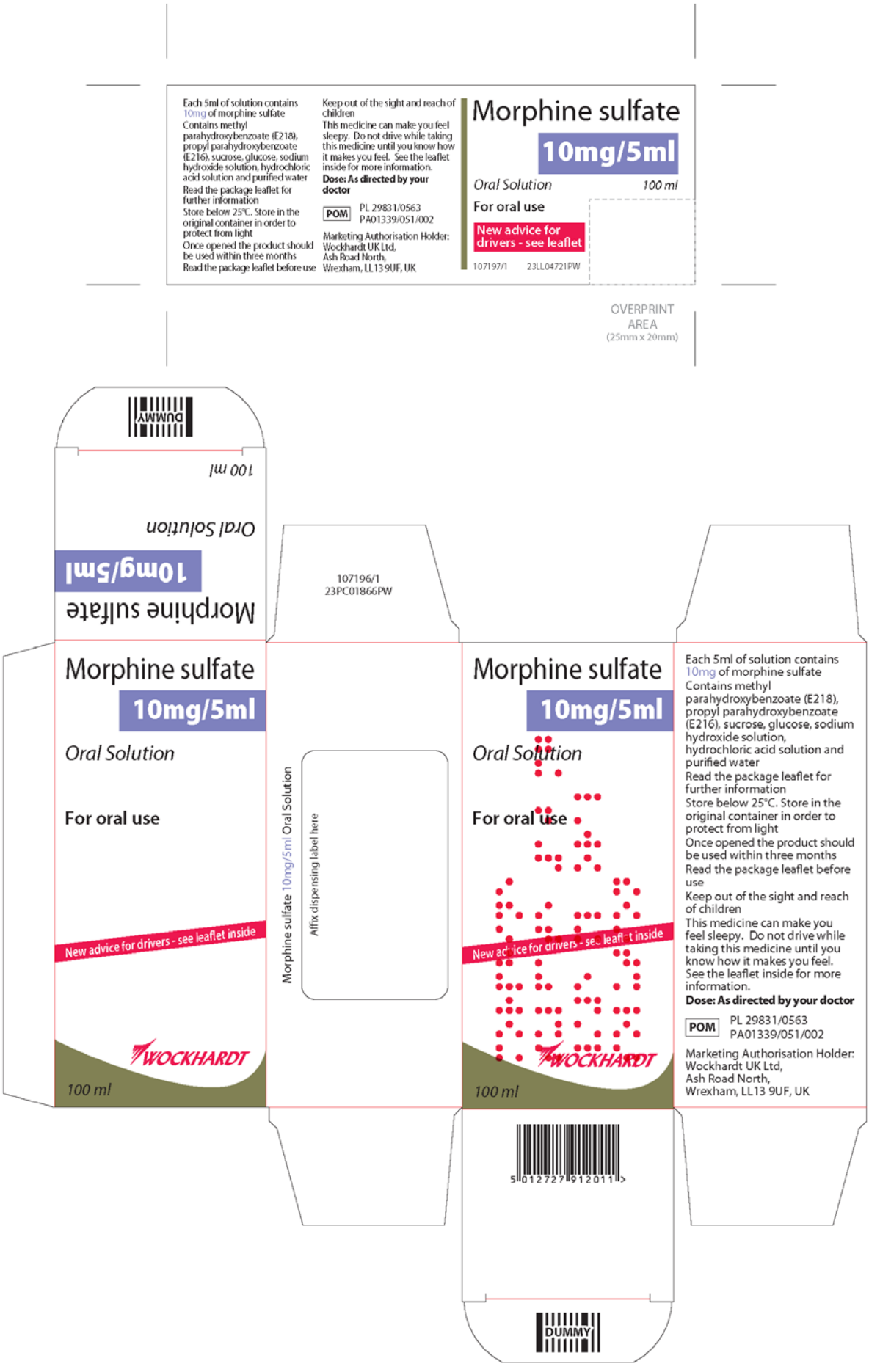
The results show that the package leaflet meets the criteria for readability as set out in the *Guideline on the readability of the label and package leaflet of medicinal products for human use*.

VI Overall conclusion, benefit/risk assessment and recommendation

The quality of the product is acceptable, and no new non-clinical or clinical safety concerns have been identified. The application includes an adequate review of published non-clinical and clinical data concerning the efficacy and safety of morphine sulfate. The waiver for the need for bioequivalence studies is acceptable. The benefit/risk assessment is, therefore, considered to be positive.

The Summary of Product Characteristics (SmPC), package leaflet and labelling are satisfactory, in line with current guidelines and consistent with the reference product. In accordance with Directive 2012/84/EU, the current approved UK versions of the SmPC and package leaflet for this product are available on the Medicines and Healthcare products Regulatory Agency website.

The currently approved labels are listed below:


Each 5ml of solution contains 10mg of morphine sulfate
Contains methyl parahydroxybenzoate (E218), propyl parahydroxybenzoate (E216), sucrose, glucose, sodium hydroxide solution, hydrochloric acid solution and purified water
Read the package leaflet for further information
Store below 25°C. Store in the original container in order to protect from light
Once opened the product should be used within three months
Read the package leaflet before use
Keep out of the sight and reach of children
This medicine can make you feel sleepy. Do not drive while taking this medicine until you know how it makes you feel. See the leaflet inside for more information.
Dose: As directed by your doctor
POM
PL 29831/0563
PA01339/051/002
Marketing Authorisation Holder:
Wockhardt UK Ltd,
Ash Road North,
Wrexham, LL13 9UF, UK
Morphine sulfate
10mg/5ml
Oral Solution
100 ml
For oral use
New advice for drivers - see leaflet
107197/1
23LL04721PW
OVERPRINT AREA
(25mm x 20mm)
DUMMY
100 ml
Oral Solution
10mg/5ml
Morphine sulfate
107196/1
23PC01866PW
Morphine sulfate
10mg/5ml
Oral Solution
For oral use
New advice for drivers - see leaflet inside
WOCKHARDT
100 ml
Morphine sulfate 10mg/5ml Oral Solution
Affix dispensing label here
Morphine sulfate
10mg/5ml
Oral Solution
For oral use
New advice for drivers - see leaflet inside
WOCKHARDT
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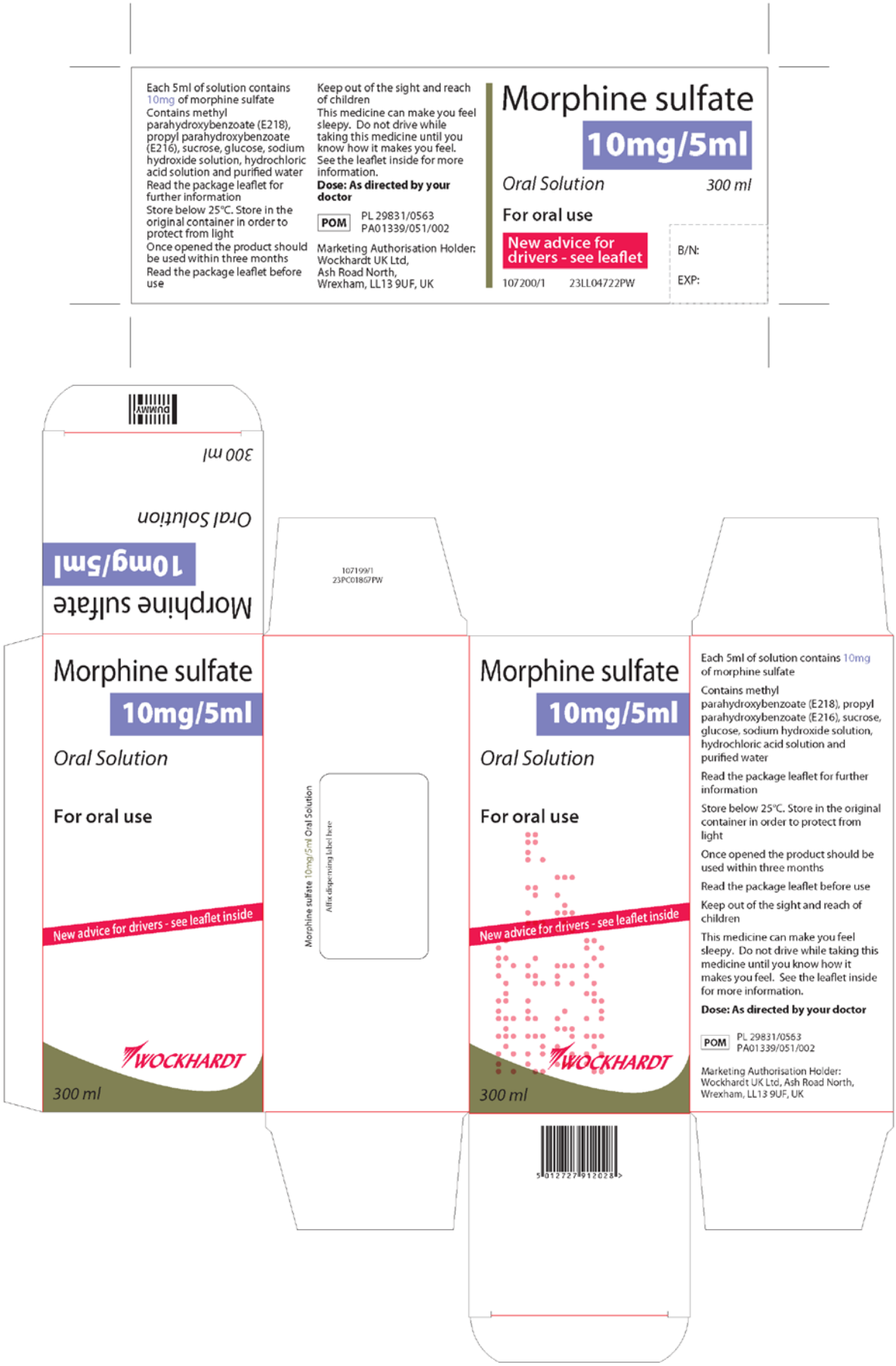
Wockhardt UK Ltd,
Ash Road North,
Wrexham, LL13 9UF, UK
5 012727 912011
DUMMY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Morphine sulfate
10mg/5ml
Oral Solution
300 ml
For oral use
New advice for drivers - see leaflet
107200/1
23LL04722PW
B/N:
EXP:
DUMMY
300 ml
Oral Solution
10mg/5ml
Morphine sulfate
107199/1
23PC01867PW
Morphine sulfate
10mg/5ml
Oral Solution
For oral use
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300 ml
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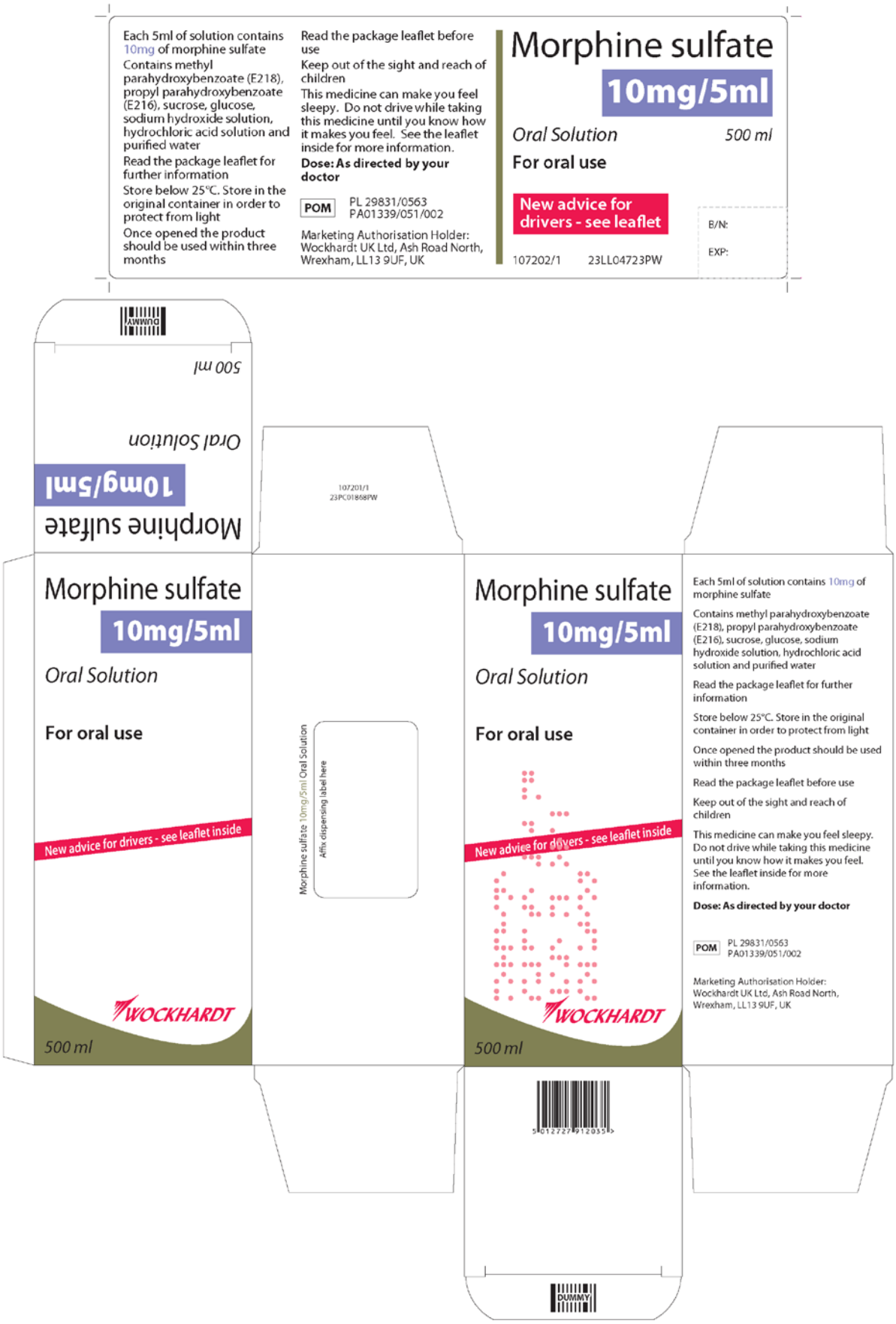
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PL 29831/0563
PA01339/051/002
Marketing Authorisation Holder: Wockhardt UK Ltd, Ash Road North, Wrexham, LL13 9UF, UK
Morphine sulfate
10mg/5ml
Oral Solution
500 ml
For oral use
New advice for drivers - see leaflet
B/N:
EXP:
107202/1
23LL04723PW
DUMMY
500 ml
Oral Solution
10mg/5ml
Morphine sulfate
107201/1
23PC01868PW
Morphine sulfate
10mg/5ml
Oral Solution
For oral use
New advice for drivers - see leaflet inside
WOCKHARDT
500 ml
Morphine sulfate 10mg/5ml Oral Solution
Affix dispensing label here
Morphine sulfate
10mg/5ml
Oral Solution
For oral use
New advice for drivers - see leaflet inside
WOCKHARDT
500 ml
Each 5ml of solution contains 10mg of morphine sulfate
Contains methyl parahydroxybenzoate (E218), propyl parahydroxybenzoate (E216), sucrose, glucose, sodium hydroxide solution, hydrochloric acid solution and purified water
Read the package leaflet for further information
Store below 25°C. Store in the original container in order to protect from light
Once opened the product should be used within three months
Read the package leaflet before use
Keep out of the sight and reach of children
This medicine can make you feel sleepy. Do not drive while taking this medicine until you know how it makes you feel. See the leaflet inside for more information.
Dose: As directed by your doctor
POM
PL 29831/0563
PA01339/051/002
Marketing Authorisation Holder: Wockhardt UK Ltd, Ash Road North, Wrexham, LL13 9UF, UK
DUMMY

Annex - Table of content of the PAR update for MRP and DCP

Steps taken after the initial procedure with an influence on the Public Assessment Report (Type II variations, PSURs, commitments)

Scope	Procedure number	Product information affected	Date of start of the procedure	Date of end of procedure	Approval/ non approval	Assessment report attached Y/N (version)