

Blank Space

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

- underactive thyroid gland (hypothyroidism) causing changes in heart rate, appetite or weight; tiredness, feeling cold, or swelling at the front of the neck
- changes in thyroid function tests
- inflammation of the gallbladder (cholecystitis); symptoms may include pain in the upper right abdomen, fever, nausea, yellowing of the skin and eyes (jaundice)
- too little sugar in the blood
- impaired glucose tolerance
- slow heart beat.

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

- thirst, low urine output, dark urine, dry flushed skin
- fast heart beat.

Other serious side effects

- hypersensitivity (allergic) reactions including skin rash
- a type of an allergic reaction (anaphylaxis) which causes difficulty in swallowing or breathing, swelling and tingling, possibly with a drop in blood pressure with dizziness or loss of consciousness
- an inflammation of the pancreas gland (pancreatitis); symptoms may include sudden pain in the upper abdomen, nausea, vomiting, diarrhoea
- liver inflammation (hepatitis); symptoms may include yellowing of the skin and eyes (jaundice), nausea, vomiting, loss of appetite, generally feeling unwell, itching, light-coloured urine
- irregular heart beat
- low level of platelet count in blood; this could result in increased bleeding or bruising.

Tell your doctor straight away if you notice any of the side effects above.

Other side effects:

Tell your doctor, pharmacist or nurse if you notice any of the side effects listed below. They are usually mild and tend to disappear as treatment progresses.

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

- diarrhoea
- abdominal pain
- nausea
- constipation
- flatulence (wind)
- headache
- local pain at the injection site.

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

- stomach discomfort after meal (dyspepsia)
- vomiting
- feeling of fullness in the stomach
- fatty stools
- loose stools
- discolouration of faeces
- dizziness
- loss of appetite
- change in liver function tests
- hair loss
- shortness of breath
- weakness.

If you get any side effects, please tell your doctor, nurse or pharmacist.

A few people experience pain at the site of the subcutaneous injection. This pain usually only lasts a short time. If this happens to you, you can relieve this by gently rubbing the site of injection for a few seconds afterwards.

If you are administering Octreotide by subcutaneous injection, it may help to reduce the risk of gastrointestinal side effects if you avoid eating meals around the time of injection. It is therefore recommended that you inject Octreotide between meals or when you go to bed.

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 at: www.mhra.gov.uk/yellowcard

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

5. How to store Octreotide

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

Store the ampoules and multidose vial in a refrigerator (2°C - 8°C). Do not freeze. Keep the ampoules and vials in the outer carton in order to protect from light.

Unopened Octreotide ampoules or vials may be stored for a maximum of 2 weeks below 25°C and in the original pack.

Once in use, a multidose vial may be stored for a maximum of 2 weeks stored in a refrigerator (2 - 8 °C) and in the original pack. You can use your multidose vial up to 10 times and you must return any remainder to your pharmacist if you have not used it within two weeks.

Chemical and physical in-use stability of the diluted solution has been demonstrated for 8 hours at 25°C. From a microbiological point of view, the product should be used immediately after dilution. If not used immediately, in-use storage times and conditions prior to use are the responsibility of the user.

If your doctor decides to stop your treatment, return any leftover medicine to the pharmacist. Only keep it if your doctor tells you to.

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 to protect the environment.

6. Content of the pack and other information

What Octreotide contains

The active substance is octreotide, as octreotide acetate.

One ampoule of 1 ml solution for injection contains octreotide acetate equivalent to 0.05 milligrams, 0.1 milligrams, 0.5 milligrams octreotide.

One multidose vial of 5 ml solution for injection contains octreotide acetate equivalent to 1 milligram octreotide. 1 ml of solution contains 0.2 milligrams octreotide

The other ingredients are: sodium acetate trihydrate, acetic acid, glacial, sodium chloride, water for injection, phenol (for the multidose vial only).

What Octreotide solution for injection looks like and contents of the pack

This medicinal product is presented as a clear colourless solution for injection.
Pack size of 5, 10 or 30 ampoules of 1 ml solution
Pack size of 1, 10 or 30 multidose vials of 5 ml solution.

Not all pack sizes may be marketed.

Marketing Authorization Holder and Manufacturer

Sun Pharmaceutical Industries Europe B.V.
Polarisavenue 87
2132 JH Hoofddorp
The Netherlands

This medicine is authorised in the Member States of the European Economic Area and in the United Kingdom (Northern Ireland) under the following names:

Denmark:	Octreotid SUN 0,05, 0,1, 0,5 mg/1ml, 1 mg/5ml injektionsvæske, opløsning
Germany:	Octreotid SUN 0,05, 0,1, 0,5 mg/1ml, 1 mg/5ml Injektionslösung
Italy:	Octreotide SUN 0,05, 0,1, 0,5 mg/1ml, 1 mg/5 ml soluzione iniettabile
Spain:	Octreotida SUN 100 microgramos/ml solución inyectable EFG
Sweden:	Oktreotid SUN 50, 100, 200, 500 mikrogram/ml injektionsvätska, lösning
United Kingdom (Northern Ireland):	Octreotide 50, 100, 200, 500 micrograms/ml Solution for Injection

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Multidose vials:
Octreotide 200 µg/ml should only be administered by the subcutaneous route.

Octreotide should be administered by the subcutaneous route without dilution.

To prevent contamination, it is recommended to puncture the cap of the vial not more than 10 times. To reduce local discomfort, let the solution reach room temperature before injection. Avoid multiple injections at short intervals at the same site.

How much Octreotide to use
The dose of Octreotide depends on the condition being treated.

Acromegaly

Treatment is usually started at 0.05 to 0.1 mg every 8 or 12 hours by subcutaneous injection. It is then changed according to its effect and relief of symptoms (such as tiredness, sweating, feeling of pressure in the chest, constipation). The optimal daily dose will be 0.1 mg 3 times/day. A maximum dose of 1.5 mg/day should not be exceeded.

Tumours of the gastrointestinal tract

Treatment is usually started at 0.05 mg once or twice a day by subcutaneous injection. Depending on response and tolerability, the dosage can be gradually increased to 0.1 mg to 0.2 mg 3 times/day. In carcinoid tumours, therapy should be discontinued if there is no improvement after 1 week of treatment at the maximum tolerated dose.

Complications following pancreatic surgery

The usual dosage is 0.1 mg 3 times/day by subcutaneous injection for 1 week, starting at least 1 hour before surgery.

Bleeding gastro-oesophageal varices

The recommended dosage is 25 micrograms/hour for 5 days by continuous intravenous infusion. Monitoring of blood sugar level is necessary during treatment.

TSH-secreting pituitary adenomas

The dosage most generally effective is 100 micrograms three times a day by subcutaneous injection. The dose can be adjusted according to the responses of TSH and thyroid hormones. At least 5 days of treatment will be needed to judge the efficacy.

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