

## **SUMMARY OF PRODUCT CHARACTERISTICS**

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

Ironorm Capsules

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

Each capsule contains:

Ferrous Sulfate, dried 195 mg

Folic Acid 1.7 mg

Thiamine Hydrochloride (Vit B1) 1 mg

Riboflavine (Vit B2) 2 mg

Ascorbic Acid (Vit C) 15 mg

Nicotinamide 10 mg

Excipients with known effect

Soya Oil, Sorbitol Solution.

For the full list of excipients, see section 6.1.

### **3 PHARMACEUTICAL FORM**

Capsule, soft

Maroon coloured soft, gelatin capsules

### **4 CLINICAL PARTICULARS**

#### **4.1 Therapeutic indications**

The treatment of iron and vitamin deficiency states.

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

One capsule to be taken by mouth three times a day with meals.

#### **4.3 Contraindications**

Hypersensitivity to the active substances or to any of the excipients listed in section 6.1.

Hypersensitivity to peanut or soya.



System Organ Class	Very Common (≥1/10)	Common ≥1/100, < 1/10	Uncommon ≥1/1,000, <1/100	Rare ≥1/10,000, <1/1000	Very Rare <1/10,000	Not known (cannot be estimated from available data)
Metabolism and Nutrition disorders						Anorexia

### Reporting of suspected adverse reactions

Reporting suspected adverse reactions after authorisation of the medicinal product is important. It allows continued monitoring of the benefit/risk balance of the medicinal product. Healthcare professionals are asked to report any suspected adverse reactions via the Yellow Card Scheme: Website: [www.mhra.gov.uk/yellowcard](http://www.mhra.gov.uk/yellowcard)

#### 4.9 Overdose

Iron overdosage is an acute emergency requiring urgent medical attention. An acute intake of 75mg/Kg of elemental iron is considered extremely dangerous in young children. Serum iron levels should be monitored.

Symptoms and signs include abdominal pain, diarrhoea and vomiting (haematemesis is a possibility) within 1 - 2 hours, followed by cardiovascular collapse and coma in some patients. Recovery follows this phase and in some patients this continues. In others, deterioration occurs after about 15 hours characterised by diffuse vascular congestion, pulmonary oedema, convulsion, hypothermia, renal failure, shock, metabolic acidosis, coagulopathy and/or hypoglycaemia. Treatment consists of supportive and symptomatic measures. Vomiting should be induced if the patient presents early and gastric lavage should be considered using a solution of desferrioxamine. Parenteral injection of 2gm desferrioxamine should be given IV or IM and 5gm desferrioxamine in 50 – 100ml of fluid may also be left in the stomach. Recovery may be complicated by long term effects such as hepatic necrosis, toxic encephalitis and CNS damage and pyloric stenosis.

## 5 PHARMACOLOGICAL PROPERTIES

## 5 PHARMACOLOGICAL PROPERTIES

### 5.1 Pharmacodynamic properties

Pharmacotherapeutic group: Antianemic Preparations:  
ATC code: B03AE02.

Iron and Multivitamins. Multivitamin Supplement

### 5.2 Pharmacokinetic properties

Soft gelatine capsule complies with BP disintegration test and all actives are bioavailable.

**5.3 Preclinical safety data**

Not applicable

**6.1 List of excipients**

Vegetable Oil, Fat Mix, Lecithin, Coat, Gelatin, Glycerin, Sorbitol Solution, Potassium Sorbate, Black Iron Oxide, Carmine Red, Yellow Iron Oxide, Titanium Dioxide

**6.2 Incompatibilities**

Not applicable.

**6.3 Shelf life**

36 months.

**6.4 Special precautions for storage**

Keep in a cool, dry place.

**6.5 Nature and contents of container**

Glass vials of 25 capsules. Glass jars of 100 capsules

**6.6 Special precautions for disposal**

No special requirements

**7 MARKETING AUTHORISATION HOLDER**

Wallace Manufacturing Chemists Ltd.

Wallace House

51-53 Stert Street

Abingdon

Oxfordshire OX14 3JF

United Kingdom

**8. MARKETING AUTHORISATION NUMBER**

PL 0400/5016R

**9. DATE OF FIRST AUTHORISATION/RENEWAL OF THE  
AUTHORISATION**

1 May 1972

**10 DATE OF REVISION OF THE TEXT**

23/05/2016