

Directions for Use

B. Braun Melsungen AG · 34209 Melsungen, Germany



0.9% w/v Sodium Chloride Injection

1. NAME OF THE MEDICINAL PRODUCT

0.9% w/v Sodium Chloride Injection Solution for Injection

2. QUALITATIVE AND QUANTITATIVE COMPOSITION

1 ml of solution contains

Sodium Chloride

Electrolyte concentrations:

Sodium

154 mmol/l 154 mmol/l Chloride

For the full list of excipients, see section 6.1.

3. PHARMACEUTICAL FORM

Solution for injection

Clear, colourless aqueous solution

Theoretical osmolarity Acidity (titration to pH 7.4)

4. CLINICAL PARTICULARS

4.1 Therapeutic indications

Solvent or diluent for compatible medicinal products

4.2 Posology and method of administration

Dosage, route of administration and the duration of use depend on the instructions given for the medicinal product to be dissolved or dilut-

Method of administration

Intravenous, intramuscular or subcutaneous use.

For the use of this solution as solvent/diluent for compatible medici- 0.9% w/v Sodium Chloride Injection has no influence on the ability to nal products, the instructions for use relating to the medicinal product to be added must be observed.

4.3 Contraindications

0.9% w/v Sodium Chloride Injection must not be administered to

- severe hypernatraemia
- severe hyperchloraemia

4.4 Special warnings and precautions for use

0.9% w/v Sodium Chloride Injection should only be administered with caution in cases of

- hypernatraemia
- hyperchloraemia

Clinical monitoring should include checks of the serum ionogram, the acid-base status and water balance.

Please note: The safety information of the additive provided by the respective manufacturer have to be taken into account.

4.5 Interaction with other medicinal products and other forms of interaction

Medicinal products causing sodium retention

The concomitant use of sodium-retaining drugs (e.g. corticosteroids, non-steroidal anti-inflammatory agents) may lead to oedema.

4.6 Fertility, pregnancy and lactation

308 m0sm/l

< 0.3 mmol/l

4.5 - 7.0

There is a limited amount of data from the use of 0.9% w/v Sodium Chloride Injection in pregnant women. These data do not indicate direct or indirect harmful effects of 0.9% w/v Sodium Chloride Injection with respect to reproductive toxicity (see section 5.3). As the concentrations of sodium and chloride are similar to that in human body no harmful effects are to be expected if the product is used as indi-

Therefore 0.9% w/v Sodium Chloride Injection can be used if indicat-

Breast-feeding

As the concentration of sodium and chloride are similar to that in human body no harmful effects are to be expected if the product is used as indicated. 0.9% w/v Sodium Chloride Injection can be used during breast-feeding, if required.

No data available.

4.7. Effects on ability to drive and use machines

drive and use machines.

4.8 Undesirable effects

None to be expected if the product is used according to directions.

4.9 Overdose

Symptoms

Overdose of 0.9% w/v Sodium Chloride Injection may result in hypernatraemia, hyperchloraemia, hyperhydration, hyperosmolarity of the serum and hyperchloraemic acidosis.

Immediate stop of administration, administration of diuretics with continuous monitoring of serum electrolytes, correction of electrolyte and acid-base imbalances.



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5. PHARMACOLOGICAL PROPERTIES

5.1 Pharmacodynamic properties

Pharmacotherapeutic group: Solvents and diluting agents, including irrigating solutions

ATC Code: V07AB

Sodium is the primary cation of the extracellular space and together with various anions, regulates the size of this. Sodium and potassium are the major mediators of bioelectric processes within the body.

The sodium content and the liquid metabolism of the body are closely coupled to each other. Each deviation of the plasma sodium concentration from the physiological one simultaneously affects the fluid status of the body.

An increase in the sodium content of the body also means reduction of the body's free water content independent of the serum osmolality.

A 9 mg/ml sodium chloride Injection solution has the same osmolarity as plasma. Administration of this solution primarily leads to a replenishment of the interstitial space which is about 2/3 of the entire extracellular space. Only 1/3 of the administered volume remains in the intravascular space. Therefore the haemodynamic effect of the solution is of short duration only.

Chloride is exchanged for hydrogen carbonate in the tubule system and is, thus, involved in the regulation of the acid base balance.

5.2 Pharmacokinetic properties

The kidneys are the major regulator of the sodium, chloride and fluid balances. In co-operation with the hormonal control mechanisms (renin-angiotensin-aldosterone system, antidiuretic hormone) and the hypothetical natriuretic hormone they are primarily responsible for keeping the volume of the extracellular space constant and regulating its fluid composition.

5.3 Preclinical safety data

Non-clinical data reveal no special hazard for humans based on conventional studies of safety pharmacology, repeated dose toxicity, genotoxicity, carcinogenic potential, toxicity to reproduction.

6 PHARMACEUTICAL PARTICULARS

6.1 List of excipients

Water for injections

6.2 Incompatibilities

When mixing with other medicinal products, possible incompatibilities should be considered.

6.3 Shelf life

- <u>unopened</u>
- 3 years

after first opening

The product must be used immediately after opening the container, see also section 6.6.

• after preparation of the ready-to-use mixture

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 dilution has taken place in controlled and validated aseptic conditions.

6.4 Special precautions for storage

PE-ampoules 5 ml, GA, V: Do not store above 25 °C.

PE-ampoules 10 ml and 20ml, PP-ampoules: Do not store above 30 °C. For storage conditions after preparation of ready-to-use mixtures of the medicinal product, see section 6.3.

6.5 Nature and contents of container

- Glass vials sealed with rubber stoppers, containing: 10 ml, 20 ml, 50 ml, 100 ml
- supplied in packs of 20 x 10 ml, 20 x 20 ml, 1 x 50 ml, 20 x 50 ml, 1 x 100 ml, 20 x 100 ml
- Glass ampoules containing: 2 ml, 5 ml, 10 ml, 20 ml supplied in packs of 10 \times 2 ml, 10 \times 5 ml, 10 \times 10 ml, 10 \times 20 ml, 5 \times 2 ml, 5 \times 5 ml, 5 \times 10 ml, 5 \times 20 ml
- Polyethylene ampoules containing: 5 ml, 10 ml, 20 ml supplied in packs of 100 \times 5 ml, 100 \times 10 ml, 100 \times 20 ml, 20 \times 5 ml, 20 \times 10 ml, 20 \times 20 ml, 10 \times 5 ml, 10 \times 10 ml, 10 \times 20 ml
- Polypropylene ampoules, containing: 10 ml, 20 ml supplied in packs of 100 \times 10 ml, 100 \times 20 ml, 20 \times 10 ml, 20 \times 20 ml, 10 \times 10 ml, 10 \times 20 ml

Not all pack sizes may be marketed.

6.6 Special precautions for disposal and other handling

Containers are for single use only. Discard container and unused content after use.

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

Solution should be used immediately after opening of the container or after preparation of the ready-to-use mixture.

Do not use if the solution is not clear and colourless or the container or its closure show visible signs of damage.

7 DATE OF REVISION OF THE TEXT

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