Ultibro Breezhaler inhalation powder, hard capsules

This medicinal product is subject to additional monitoring. This will allow quick identification of new safety information. Healthcare professionals are asked to report any suspected adverse reactions. Refer to section 4.8 of the SmPC for how to report adverse reactions.

PRESENTATION: Each capsule contains 143 µg of indacaterol maleate equivalent to 110 µg of indacaterol and 63 µg of glycopyrronium bromide equivalent to 50 µg of glycopyrronium. Each delivered dose (the dose that leaves the mouthpiece of the inhaler) contains 110 µg of indacaterol maleate equivalent to 85 µg of indacaterol and 54 µg of glycopyrronium bromide equivalent to 43 µg of glycopyrronium.

INDICATIONS: Ultibro Breezhaler is indicated as a maintenance bronchodilator treatment to relieve symptoms in adult patients with chronic obstructive pulmonary disease (COPD).

DOSE AND ADMINISTRATION: The recommended dose is the inhalation of the content of one capsule once daily using the Ultibro Breezhaler inhaler. Ultibro Breezhaler is recommended to be administered at the same time of the day each day. If a dose is missed, it should be taken as soon as possible on the same day. Patients should be instructed not to take more than one dose in a day. Ultibro Breezhaler can be used at the recommended dose in elderly patients (75 years of age and older). Ultibro Breezhaler can be used at the recommended dose in patients with mild to moderate renal impairment. In patients with severe renal impairment or end-stage renal disease requiring dialysis it should be used only if the expected benefit outweighs the potential risk. Ultibro Breezhaler can be used at the recommended dose in patients with mild and moderate hepatic impairment. There are no data available for the use of Ultibro Breezhaler in patients with severe hepatic impairment, therefore caution should be observed in these patients. Ultibro Breezhaler can be used at the recommended dose in patients with mild and moderate hepatic impairment. There are no data available for the use of Ultibro Breezhaler in patients with severe hepatic impairment, therefore caution should be observed in these patients. There is no relevant use of Ultibro Breezhaler in the paediatric population (under 18 years) in the indication COPD. The safety and efficacy of Ultibro Breezhaler in children have not been established. No data are available.

Method of administration
For inhalation use only. The capsules must not be swallowed. The capsules must be administered only using the Ultibro Breezhaler inhaler. Patients should be instructed on how to administer the product correctly. Patients who do not experience improvement in breathing should be asked if they are swallowing the medicine rather than inhaling it.

CONTRAINDICATIONS: Hypersensitivity to the active substance or to any of the other excipients.

WARNINGS/PRECAUTIONS: Ultibro Breezhaler should not be administered concomitantly with medicinal products containing other long-acting beta-adrenergic agonists or long-acting muscarinic antagonists, the pharmacotherapeutic groups to which the components of Ultibro Breezhaler belong. Asthma: Ultibro Breezhaler should not be used for the treatment of asthma due to the absence of data in this indication. Long-acting beta2 adrenergic agonists may increase the risk of asthma-related serious adverse events, including asthma-related deaths, when used for the treatment of asthma. Not for acute use: Ultibro Breezhaler is not indicated for the treatment of acute episodes of bronchospasm. Hypersensitivity related to indacaterol or glycopyrronium. Immediate hypersensitivity reactions have been reported after administration of indacaterol, one of the components of Ultibro Breezhaler. If signs suggesting allergic reactions (in particular, difficulties in breathing or swallowing, swelling of tongue, lips and face, urticaria, skin rash) occur, treatment should be discontinued immediately and alternative therapy instituted. Paradoxical bronchospasm: As with other inhalation therapy, administration of Ultibro Breezhaler may result in paradoxical bronchospasm which can be life-threatening. If this occurs, treatment should be discontinued immediately and alternative therapy instituted. Narrow-angle glaucoma: No data are available in patients with narrow-angle glaucoma, therefore Ultibro Breezhaler should be used with caution in these patients. Patients should be informed about the signs and symptoms of acute narrow-angle glaucoma and should be informed to stop using Ultibro Breezhaler should any of these signs or symptoms develop. Urinary retention: No data are available in patients with urinary retention, therefore Ultibro Breezhaler should be used with caution in these patients. Patients with severe renal impairment:
These patients should be monitored closely for potential adverse reactions. **Cardiovascular effects:** Ultibro Breezhaler should be used with caution in patients with cardiovascular disorders (coronary artery disease, acute myocardial infarction, cardiac arrhythmias, hypertension). **Hypokalaemia:** Beta₂-adrenergic agonists may produce significant hypokalaemia in some patients, which has the potential to produce adverse cardiovascular effects. The decrease in serum potassium is usually transient, not requiring supplementation. In patients with severe COPD, hypokalaemia may be potentiated by hypoxia and concomitant treatment, which may increase the susceptibility to cardiac arrhythmias. Clinically relevant effects of hypokalaemia have not been observed in clinical studies of Ultibro Breezhaler at the recommended therapeutic dose. **Hyperglycaemia** Inhalation of high doses of beta₂-adrenergic agonists may produce increases in plasma glucose. Upon initiation of treatment with Ultibro Breezhaler plasma glucose should be monitored more closely in diabetic patients. Ultibro Breezhaler should be used with caution in patients with convulsive disorders or thyrotoxicosis, and in patients who are unusually responsive to beta₂-adrenergic agonists. Patients with rare hereditary problems of galactose intolerance, the Lapp lactase deficiency or glucose-galactose malabsorption should not take this medicine. **Pregnancy and Lactation:** There are no data from the use of Ultibro Breezhaler in pregnant women available. Indacaterol may inhibit labour due to a relaxant effect on uterine smooth muscle. Therefore, Ultibro Breezhaler should only be used during pregnancy if the expected benefit to the patient justifies the potential risk to the foetus. It is not known whether indacaterol, glycopyrronium and their metabolites are excreted in human milk. The use of Ultibro Breezhaler by breast-feeding women should only be considered if the expected benefit to the woman is greater than any possible risk to the infant.

**INTERACTIONS:** Information on the potential for interactions is based on the potential for each of its two components. Beta-adrenergic blockers may weaken or antagonise the effect of beta₂-adrenergic agonists. Therefore Ultibro Breezhaler should not be given together with beta-adrenergic blockers (including eye drops) unless there are compelling reasons for their use. Where required, cardioselective beta-adrenergic blockers should be preferred, although they should be administered with caution. The co-administration of Ultibro Breezhaler with other anticholinergic-containing medicinal products has not been studied and is therefore not recommended. Concomitant administration of other sympathomimetic agents (alone or as part of combination therapy) may potentiate the adverse events of indacaterol. Concomitant hypokalaemic treatment with methylxanthine derivatives, steroids, or non-potassium-sparing diuretics may potentiate the possible hypokalaemic effect of beta₂-adrenergic agonists, therefore use with caution. Inhibition of the key contributors of indacaterol clearance, CYP3A4 and P-glycoprotein (P-gp), raises the systemic exposure of indacaterol up to two-fold. The magnitude of exposure increases due to interactions does not raise any safety concerns given the safety experience of treatment with indacaterol in clinical studies of up to one year at doses up to twice the maximum recommended indacaterol dose.

**ADVERSE REACTIONS:** The presentation of the safety profile is based on the experience with Ultibro Breezhaler and the individual components. Ultibro Breezhaler showed similar adverse reactions to the individual components. As it contains indacaterol and glycopyrronium, the type and severity of adverse reactions associated with each of these components may be expected in the combination. The most common adverse reactions with Ultibro Breezhaler are: Upper respiratory tract infections. Common: Pyrexia, chest pain, dyspepsia, dental caries, bladder obstruction and urinary retention, cough, oropharyngeal pain including throat irritation, dizziness, headache, nasopharyngitis, urinary tract infections, sinusitis, rhinitis, chest pain, hypersensitivity, diabetes mellitus and hyperglycaemia. Uncommon: Fatigue, peripheral oedema, muscle spasm, myalgia, pain extremity, dry mouth, pruritis, rash, glaucoma, myalgia, musculoskeletal pain, paradoxical bronchospasm, dysphonia, epistaxis, gastroenteritis, tachycardia, palpitations, insomnia.

Please refer to SmPC for a full list of adverse events for Ultibro Breezhaler.
LEGAL CATEGORY: POM

PACK SIZES:
Single pack containing 10x1 or 3x10 hard capsules, together with one inhaler.

MARKETING AUTHORISATION HOLDER: Novartis Europharm Limited, Frimley Business Park Camberley GU16 7SR, United Kingdom.

MARKETING AUTHORISATION NUMBERS: EU/1/13/862/003, EU/1/13/862/007

Please refer to Summary of Product Characteristics (SmPC) before prescribing. Full prescribing information is available on request from Novartis Pharma Services Inc, Representative Office Malta P.O Box 4, Marsa, MRS 1000 Malta. Tel: +35621222872

2016-MT-ULT-10-NOV-2016