SCHEDULING STATUS

S2

1 NAME OF THE MEDICINE

Allodrop, 1 mg/ml, Eye Drops, Solution

2 QUALITATIVE AND QUANTITATIVE COMPOSITION

ALLODROP contains olopatadine hydrochloride equivalent to 1 mg/ml olopatadine.

Excipients with known effect:

Benzalkonium chloride 0,01 % m/v as preservative.

For full list of excipients, see section 6.1.

3 PHARMACEUTICAL FORM

Eye drops, Solution

Sterile, colourless, clear solution.

4 CLINICAL PARTICULARS

4.1 Therapeutic indications

ALLODROP is indicated for the temporary prevention of itching of the eye due to allergic conjunctivitis.

4.2 Posology and method of administration

Posology

Instil one drop of ALLODROP in the conjunctival sac of the affected eye(s) twice daily. To prevent contamination of the dropper tip and solution, care must be taken not to touch the eyelids, surrounding areas, or other surfaces with the dropper tip of the bottle. Keep the bottle tightly closed when not in use.

Use in elderly

No dosage alteration in elderly patients is necessary.

Use in children

ALLODROP may be used in paediatric patients (3 years of age and older) at the same posology as in adults.

Use in hepatic and renal impairment

ALLODROP eye drops has not been studied in patients with renal or hepatic disease. However, a renal impairment study after oral dosing of olopatadine in patients with severe renal impairment indicates that a higher plasma concentration can be expected with ALLODROP in this population. However, because of the low plasma exposure following topical ocular administration, no dose adjustment is necessary. Hepatic metabolism represents a small fraction of olopatadine elimination. Therefore, hepatic impairment is not expected to alter the pharmacokinetics of olopatadine and no dose adjustment is necessary.

Method of administration

For ocular use only.

After the bottle cap is removed, if the tamper evident snap collar is loose, remove before using the product. To prevent contamination of the dropper tip and solution, care must be taken not to touch the eyelids, surrounding areas, or other surfaces with the dropper tip of the bottle. Keep the bottle tightly closed when not in use.

In case of concomitant therapy with other topical ocular medicines, an interval of five minutes should be allowed between successive applications. Eye ointments should be administered last.

4.3 Contraindications

Known hypersensitivity to olopatadine, benzalkonium, or to any of the excipients of ALLODROP listed in 6.1.

4.4 Special warnings and precautions for use

ALLODROP is an antiallergic/antihistaminic medicine and, although administered topically, is absorbed systemically. If signs of serious reactions or hypersensitivity occur, discontinue the use of this treatment.

Benzalkonium chloride:

ALLODROP contains benzalkonium chloride which may cause eye irritation.

Benzalkonium chloride has also been reported to cause punctate keratopathy and/or toxic ulcerative keratopathy. Close monitoring is required with frequent or prolonged use in dry eye patients, or in conditions where the cornea is compromised.

Contact lenses

Benzalkonium is known to discolour soft contact lenses. Avoid contact with soft contact lenses. Patients should be instructed to remove contact lenses prior to administration of the eye drop and wait at least 15 minutes after instillation before re-inserting contact lenses.

4.5 Interaction with other medicines and other forms of interaction

In case of concomitant therapy with other topical ocular medicines, an interval of 5 minutes should be allowed between successive applications.

No human clinical medicine interaction studies were performed with ALLODROP.

In vitro studies have shown that olopatadine did not inhibit metabolic reactions which involve cytochrome P-450 isozymes 1A2, 2C8, 2C9, 2C19, 2D6, 2E1 and 3A4. These results indicate that ALLODROP is unlikely to result in metabolic interactions with other concomitantly administered active substances.

4.6 Fertility, pregnancy and lactation

Pregnancy

No adequate and well-controlled studies were performed in pregnant women. Studies in animals have shown reproductive toxicity at systemic doses well in excess of the maximal level recommended for human ocular use. Because animal studies are not always predictive of human responses, the use of ALLODROP in pregnancy is not recommended.

Breastfeeding

It is not known whether topical administration to humans could result in sufficient systemic absorption to produce detectable quantities in human breast milk. ALLODROP is not recommended for breastfeeding mothers.

Fertility

No human data available.

4.7 Effects on ability to drive and use machines

Temporary blurred vision or other visual disturbances may affect the ability to drive or use machines. If blurred vision occurs at instillation, the patient must wait until the vision clears before driving or using machinery.

4.8 Undesirable effects

Summary of the safety profile

No serious ophthalmic or systemic adverse reactions related to ALLODROP were reported in clinical studies. The most frequent treatment-related adverse reaction was eye pain, reported at an overall incidence of 0,7 %.

Tabulated summary of adverse reactions

System Organ Classification	**Frequency**	**Undesirable effects**
Infections and infestations	*Less frequent*	rhinitis
Immune system disorders	*Frequency unknown*	hypersensitivity, swelling face
Nervous system disorders	*Frequent*	headache, dysgeusia
	Less frequent	dizziness, hypoaesthesia
	Frequency unknown	somnolence
Eye disorders	*Frequent*	eye pain, eye irritation, dry eye, abnormal sensation in eyes

System Organ Classification	Frequency	Undesirable effects
	Less frequent	corneal erosion, corneal epithelium defect, corneal epithelium disorder, punctate keratitis, keratitis, corneal staining, eye discharge, photophobia, vision blurred, visual acuity reduced, blepharospasm, ocular discomfort, eye pruritus, conjunctival follicles, conjunctival disorder, foreign body sensation in eyes, lacrimation increased, erythema of eyelid, eyelid oedema, eyelid disorder, ocular hyperaemia
	Frequency unknown	corneal oedema, eye oedema, eye swelling, conjunctivitis, mydriasis, visual disturbance, eyelid margin crusting
Respiratory, thoracic and mediastinal disorders	*Frequent*	nasal dryness
	Frequency unknown	dyspnoea, sinusitis
Gastrointestinal disorders	*Frequency unknown*	nausea, vomiting
Skin and subcutaneous tissue disorders	*Less frequent*	dermatitis contact, skin burning sensation, dry skin
	Frequency unknown	dermatitis, erythema
General disorders and administration site conditions	*Frequent*	fatigue
	Frequency unknown	asthenia, malaise

Cases of corneal calcification have been reported very rarely in association with the use of phosphate containing eyedrops in some patients with significantly damaged corneas.

Reporting of suspected adverse reactions

Reporting suspected adverse reactions after authorisation of the medicine is important. It allows continued monitoring of the benefit/risk balance of the medicine. Healthcare providers are asked to report any suspected adverse reactions to SAHPRA via the "**6.04 Adverse Drug Reactions Reporting Form**", found online under SAHPRA's publications: https://www.sahpra.org.za/Publications/Index/8.

4.9 Overdose

In the case of overdose, appropriate monitoring and management of the patient should be implemented.

5 PHARMACOLOGICAL PROPERTIES

5.1 Pharmacodynamic properties

A 15.4 Ophthalmic preparations: Other

Pharmacotherapeutic group: ophthalmologicals; decongestant and antiallergics; other antiallergics, ATC code: S01GX 09

Mechanism of Action

Olopatadine is a potent selective antiallergic/antihistaminic agent that exerts its effects through multiple distinct mechanisms of action. It antagonises histamine (the primary mediator of allergic response in humans) and prevents histamine induced inflammatory cytokine production by human conjunctival epithelial cells. Data from in vitro studies suggest that it may act on human conjunctival mast cells to inhibit the release of pro-inflammatory mediators. In patients with patent nasolacrimal ducts, topical ocular administration of ALLODROP was suggested to reduce the nasal signs and symptoms that frequently accompany seasonal allergic conjunctivitis. It does not produce a clinically significant change in pupil diameter.

5.2 Pharmacokinetic properties

Absorption

Olopatadine is absorbed systemically, as are other topically administered medicines. However, systemic absorption of topically applied olopatadine is minimal with plasma concentrations ranging from below the assay quantitation limit (<0,5 ng/ml) up to 1,3 ng/ml. These concentrations are 50-to 200-fold lower than those following well tolerated oral doses.

Elimination

From oral pharmacokinetic studies, the half-life of olopatadine in plasma was approximately eight to 12 hours, and elimination was predominantly through renal excretion. Approximately 60-70 % of the dose was recovered in the urine as active substance. Two metabolites, the mono-desmethyl and the N-oxide, were detected at low concentrations in the urine.

6 PHARMACEUTICAL PARTICULARS

6.1 List of excipients

Benzalkonium chloride

Disodium hydrogen phosphate dodecahydrate

Sodium chloride

Hydrochloric acid

Water for injection

6.2 Incompatibilities

In the absence of compatibility studies, this medicine must not be mixed with other medicines.

6.3 Shelf life

3 years

Do not use more than 30 days after opening.

6.4 Special precautions for storage

Store at or below 25 °C.

Once the container is opened the contents must be used within 30 days and may be stored at room temperature up to 25 °C. After opening, the container must be stored in the carton.

6.5 Nature and contents of container

ALLODROP is filled into 5 ml round plastic dropper bottle. The product is stoppered with a Screw Cap and 14166 dropper. The bottle, cap and dropper are ETO sterilised. Packaged in a carton.

6.6 Special precautions for disposal and other handling

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

Do not use more than 30 days after opening the container at 25 °C (see section 6.3).

7 HOLDER OF CERTIFICATE OF REGISTRATION

iPharma (Pty) Ltd

124 Elevation Avenue, Randjesfontein

Midrand, 1683, South Africa

8 REGISTRATION NUMBER

49/15.4/0538

9 DATE OF FIRST AUTHORISATION/RENEWAL OF THE AUTHORISATION

31 August 2022

10 DATE OF REVISION OF THE TEXT

29 June 2022

iPharma