PATIENT INFORMATION LEAFLET

MORPHINE HYDROCHLORIDE Osel 0.01 g/1 mL Solution for Injection Sterile

Administered intramuscularly, intravenously or subcutaneously.

Active substance: Each 1 mL ampoule contains 0.01 g morphine hydrochloride. *Excipients:* Sodium chloride, water for injection.

Read all of this leaflet carefully before you start using this medicine because it contains important information for you.

- Keep this leaflet. You may need to read it again.
- If you have any further questions, ask your doctor or pharmacist.
- This medicine has been prescribed for you only. Do not pass it on to others.
- Tell your doctor that you are taking this medicine when you go to the doctor or hospital during the use of this medicine.
- Follow exactly what is written in this instruction. Do not use **high or low** doses other than the recommended dosage.

What is in this leaflet:

- 1. What MORPHINE HYDROCHLORIDE is and what is it used for?
- 2. Things to consider before using the MORPHINE HYDROCHLORIDE
- 3. How to use MORPHINE HYDROCHLORIDE?
- 4. What are the possible side effects?
- 5. Storage of MORPHINE HYDROCHLORIDE

Headings are included.

1. What MORPHINE HYDROCHLORIDE is and what is it used for?

- MORPHINE HYDROCHLORIDE, is a drug containing morphine, a very powerful painkiller that is included in the narcotic painkillers group as an active substance.
- Each box contains 10 ampoules of 1 milliliter. Each 1 milliliter ampoule is a clear, colorless or pale yellow-brown solution containing 0.01 g morphine hydrochloride and sodium chloride and water for injection as excipients.

• MORPHINE HYDROCHLORIDE is used in for the following cases:

- Sudden onset (acute) and severe pains: Fractures, dislocations, injuries, rupture of limbs, crushing, burns, traumas, myocardial infarction, spasm pain due to kidney stones (colic pain), penetrating ulcer pain.
- Cancer pains, spread of cancer to another organ (metastatic carcinoma), end-stage (terminal) diseases: Morphine should be given for a long time and regularly in these patients.
- Post-surgery pains: It helps the patient to take action early.
- As a pain reliever during childbirth.



- Orthopedic and diagnostic procedures.
- The accumulation of water in the lungs (pulmonary edema) and sudden failure of the heart (acute left ventricular failure): Morphine provides a dramatic improvement in this situation by relieving fear and anxiety, reducing oxygen consumption and directing blood from the fluidized lung to the peripheral body tissues. However, it should not be used in pulmonary edema caused by irritating factors.
- Before anesthesia (preanesthetic medication): Your doctor will use this drug if you have cases where other pre-anesthesia drugs cannot be used.
- In cardiovascular surgery (cardiovascular surgery): It has been reported that instead of respiratory anesthesia drugs or intravenous anesthesia drugs can be used in place of these drugs in patients that may adversely affect the heart and circulatory functions.

2. Things to consider before using the MORPHINE HYDROCHLORIDE DO NOT USE MORPHINE HYDROCHLORIDE

If:

- •You are allergic (hypersensitive) to morphine or any of the other ingredients in the medicine;
- You have a sudden deterioration in your breathing due to decreased lung function;
- You have sudden onset (acute) abdominal complaints of unknown cause;
- You have digestive spasms and severe liver failure;
- You have had a surgical procedure involving the bile ducts;
- Your breathing is severely weakened, especially if it is accompanied by bruising and excessive sputum discharge;
- You have had any head trauma, increased intracranial pressure, convulsions, coma,
- Alcohol poisoning (drinking large amounts of alcohol at one time) or poisoning due to substances containing barbiturates,
- You have paralytic ileus (loss of movement and obstruction in your bowel due to various diseases);
- There is severe central nervous system suppression;
- Your blood acidity has increased due to the pressure of your breathing (respiratory acidosis);
- You are in a state of shock;
- There is a seizure due to pregnancy poisoning (eclampsia);
- There is myxedema (a disease table that occurs due to insufficiency of thyroid hormone and includes various signs and symptoms such as slowness of thinking, unresponsiveness, chills, persistent constipation, slowing of the pulse, decrease in sweating, yellow and pale skin color, dryness and roughness of the skin);
- There is cor pulmonale (enlargement of the right side of the heart and heart failure in response to increased pressure in the pulmonary arteries due to diseases affecting the lung structure and / or function)
- You have asthma:
- You have epilepsy or have frequent referrals;
- You have fluid retention in your brain (cerebral edema);



- You have a cardiac arrhythmia (heart rhythm disturbance);
- You are bleeding and your blood volume is severely reduced;
- Do not use this drug if you are using MAO inhibitors or if you have used it in the last 14 days. This medicine should not be given to children younger than 1 year old and premature babies before surgery.

USE MORPHINE HYDROCHLORIDE CAREFULLY

If:

Morphine is a narcotic drug that can cause addiction; It is an addiction that develops after physical, psychological, and repeated use.

Abrupt withdrawal of a long-term treatment creates an addictive effect; Therefore, withdrawal should be done gradually and according to the duration of treatment, the dose given and the pain.

Addiction syndrome occurs after discontinuation of long-term treatment and the following effects are observed: Abnormal pupillary dilation, tears, runny nose, sneezing, muscle tremors, weakness, sweating, anxiety (extreme anxiety), irritability, insomnia, nausea, vomiting, diarrhea. dehydration (dehydration of the body), hemoconcentration (increased blood density) and leukocytosis (increase in the number of white blood cells), abdominal and muscle cramps, heart conditions, very high fever, very high blood pressure.

- Morphine should not be administered to children under the age of 1, newborn and premature babies in the preoperative period.
- Care should be taken in the treatment of patients with a history of addiction to psychotropic drugs.
- Dosage should be reduced in patients with renal and hepatic insufficiency, in the elderly and in debilitated patients.
- •Morphine should be administered with caution to patients with severe myasthenia (a type of muscle disease), patients with kidney, liver and adrenal gland failure, patients with insufficient thyroid gland function (hypothyroidism), patients with increased intracranial pressure, patients with enlarged prostate gland and in case of shock.
- In patients with respiratory failure, it should be followed up whether breathing is normal or not. The tendency to sleep is a sign of decompensation.
- Constipation status should be monitored before and during treatment.
- In cases with reduced blood volume (hypovolemia), morphine may cause collapse (anesthesia period during which life centers are paralyzed). Hypovolemia should be corrected before morphine injection.
- Caution should be exercised during or recently discontinued treatment with MAO inhibitors.
- The drug does not contain any preservatives, so microorganisms can develop after opening the ampoules. The syringe in which the pharmaceutical solution is prepared is for single and individual use and cannot be reused.
- You need to inject MORPHINE HYDROCHLORIDE; a sterile syringe should be used and the solution should be drawn into the syringe immediately after the ampoule is opened. The entry of microorganisms must be prevented. Unused or remaining medical solution must be disposed of in accordance with current regulations.

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- You need to use MORPHINE HYDROCHLORIDE as a serum, contamination of microorganisms to the solution and serum should be prevented during the process. Unused or remaining medical solution must be disposed of in accordance with applicable regulations. It is not recommended to use it for more than 4-6 hours outside the hospital.
- With too fast or prolonged administration, there is a risk of irritation, necrosis (dead tissue) or thrombophlebitis (blood clot formation due to inflammation of the veins) at the injection site. The application site should be changed every 24 hours to reduce the risk of thrombophlebitis.
- The solution is not clear, it should not be used.

Please consult your physician if these warnings are valid for you, even at any time in the past.

Use of MORPHINE HYDROCHLORIDE with food and beverage

Since the sedative effect of morphine increases with alcohol, do not use it with alcoholic beverages and alcohol-containing drugs.

Pregnancy

Consult your doctor or your pharmacist before using the drug.

There is limited data on pregnant women. It has been observed that morphine does not cause birth defects in the fetus/newborn. As a precaution, morphine should not be used during pregnancy.

Morphine crosses the placenta and can cause respiratory depression in the newborn. In the case of maternal addiction, addiction, irritability, vomiting, convulsions and increased lethal effects may occur in the newborn. In this case, the newborn should be monitored.

If you notice that you are pregnant during your treatment, consult your doctor or pharmacist immediately.

Breast-feeding

Consult your doctor or your pharmacist before using the drug.

There is insufficient information about whether morphine passes into breast milk. Risk situation for the breastfed child should not be excluded. Stopping treatment or breastfeeding should be considered, considering the benefits of the mother or child.

Driving and using machines

Do not drive and/or use machine within 48 hours after injection due to the depressant effect of morphine on the central nervous system and reducing attention.

Important information about some of the excipients contained in MORPHINE HYDROCHLORIDE

MORPHINE HYDROCHLORIDE contains less than 23 mg sodium per dose; in other words, it does not contain sodium.

Use with other medicines

- Risk of respiratory depression increases if used with other morphine derivatives, benzodiazepines, barbiturates.
- The depressant effects of morphine are enhanced by the following drugs that suppress the

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central nervous system: anesthetics, hypnotics and anxiolytics, antidepressants, sedative H1 antihistamines, phenothiazines, neuroleptics, antihypertensives, thalidomide, baclofen.

- Opioid agonists-antagonists (buprenorphine, nalbuphine, pentazocine): increased risk of developing withdrawal syndrome; The analgesic and cough relief effects of morphine may be reduced.
- Rifampicin: may reduce the concentrations and effectiveness of morphine. Clinical monitoring and dose adjustment of morphine are required during and after rifampicin therapy.
- If MAO inhibitors (a type of antidepressant) are used at the same time, the sedative effect of morphine may increase and blood pressure may decrease.
- Alcohol: when taken together, it can increase the sedation effect of morphine and cause attention deficit.
- When used together with morphine, it enhances the effect of muscle relaxants.
- Morphine should not be used in such scorpion stings since it strengthens the venom effect of some scorpion breeds.
- Morphine may reduce the effect of diuretic drugs used in congestive heart failure.

If you are currently using any medicine with or without a prescription, or if you have used it recently, please inform your doctor or pharmacist about them.

3. How to use MORPHINE HYDROCHLORIDE

Instructions for appropriate use and dose administration frequency:

In order to prevent habituation in you, your morphine injections will be made at the smallest effective dose and at the longest possible intervals. If you are at high risk, if you are very young and very old, or if you are using nervous system depressant medication, your medication dose will be reduced.

The usual dose of morphine for subcutaneous or intramuscular injection is 10 mg for a 70 kg person. This dose can be repeated every 4 hours by decreasing or increasing the dose (dose limits 5-20 mg) as required.

The usual dose administered intravenously is 2.5-5 mg. While this dose can be given slowly for 4-5 minutes, it is mostly administered in divided doses and 1-3 mg every 10 minutes until the desired analgesia effect is reached. Intravenous dose can be repeated at 1-2 hour intervals. While you are injecting intravenous morphine, your physician will keep some necessary medicines and devices (oxygen tube, mask, artificial respirators) at hand and monitor you in terms of pain, sedation and respiratory rate.

If you are being given patient-controlled analgesia, that is, as your pain gets worse, press the button and take a dose; At least 10 minutes after taking a dose, you can administer a second dose of 0.5-1 mg at once.

In chronic pain, if you have not previously received oral morphine treatment, your daily starting dose will be 0.3 mg per kg of your body weight; if you have previously received oral morphine treatment, the daily starting dose will be one third of the dose you have received.

Route and method of administration:

Morphine injection can be given intramuscularly, intravenously and subcutaneously. If the treatment will be done for a while, the intramuscular route should be chosen. Because subcutaneous injections cause pain, irritation and induration. The subcutaneous route is not suitable for patients with edema.

Administration of morphine by two different routes should be avoided because there is a risk of overdose due to kinetic differences between the various administration routes.

Liver failure:

If you have liver failure, your doctor will reduce the dose of your medication. Do not use this drug if you have cirrhosis and severe liver failure.

Renal failure:

If you have renal failure, your doctor will reduce the dose of your medication.

Various age groups

Use in children:

Morphine is usually intravenously administered slowly in children. After the initial dose of 0.025-0.1 mg/kg, 0.025 mg/kg (bolus) can be administered every 5-10 minutes until the desired pain relief (analgesia) effect is achieved.

It is also administered as a continuous intravenous infusion at a dose of 0.01-0.02 mg/kg per hour. Patient-controlled analysis with intravenous administration can be performed from the age of 6 years. The bolus dose (intravenous dose at one time) is between 0.015-0.02 mg/kg.

The subcutaneous and intramuscular dose of morphine in children is 0.1-0.2 mg/kg.

The maximum pediatric dose is 15 mg.

If you have an impression that the effect of MORPHINE HYDROCHLORIDE is too strong or weak, talk to your doctor or pharmacist.

If you have used more MORPHINE HYDROCHLORIDE than you should

Symptoms of overdose are: Drowsiness followed by difficulty in breathing, excessive shrinkage of the pupil, decreased blood pressure, decreased body temperature, coma.

First aid will be provided at a specialized hospital and will include: stopping current morphine therapy, CPR (heart massage), administration of 0.4 mg intravenous naloxone and repeated every 2 to 5 minutes as needed (0.4-4 mg in divided doses). The starting dose for children is 0.01 mg/kg. If there is no effect after 2 to 3 doses, the diagnosis should be questioned.

Prevention: In morphine addicted persons, a very high dose of naloxone injection leads to addiction syndrome. Naloxone should be carefully injected in gradual doses in these patients.

If you have used more MORPHINE HYDROCHLORIDE than you should, talk a physician or pharmacist.

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If you forget to use MORPHINE HYDROCHLORIDE

Do not take a double dose to make up for forgotten doses.

Effects which may occur when treatment with MORPHINE HYDROCHLORIDE is discontinued

Since MORPHINE HYDROCHLORIDE is an analgesic that can cause addiction in long-term use, the patient cannot stop the treatment abruptly because a withdrawal effect may occur.

The doctor will tell you how to gradually release the dose.

If you have any further questions on the use of this medicine, ask your doctor or pharmacist for more information.

4. What are the possible side effects?

As with all medicines, there may be side effects in people who are sensitive to the ingredients of MORPHINE HYDROCHLORIDE.

If you notice any of the following, stop using MORPHINE HYDROCHLORIDE and inform your doctor IMMEDIATELY, or apply to the emergency service of the nearest hospital:

- Swelling of the hands, feet, ankles, face, lips or swelling of the mouth or throat that makes it difficult to swallow or breathe.
- · Rash, itching
- Fainting

These are all very serious side effects.

If you have one of these, you have a serious allergy to MORPHINE HYDROCHLORIDE. You may need urgent medical attention or hospitalization.

All of these very serious side effects are very rare.

Very common

: can be seen at least 1 out of 10 patients.

Common

: can be seen less than one in 10 patients, but more than one in 100

patients.

Uncommon

: can be seen less than one in 100 patients, but more than one in

1,000 patients.

Rare

: can be seen less than one in 1.000 patients, but can be seen more than

10,000 patients in one.

Very rare

: can be seen less than one in 10,000 patients.

Unknown

: cannot be estimated from available data.



Very common:

• Risk of physical and psychological dependence by dose and duration leading to addiction syndrome due to abrupt withdrawal of the drug. Symptoms of the syndrome: dilated pupils, tears and runny nose, sneezing, muscle tremors, weakness, sweating, anxiety (extreme anxiety), restlessness, insomnia, nausea, vomiting, constipation, dehydration (dehydration of the body), blood increased concentrations and white blood cells, abdominal and muscle cramps, increased heart rate, increased body temperature, increased blood pressure

Uncommon:

- •Sedation, confusion, nightmare, hallucinations, agitation, drowsiness
- •Tingling, hives, rash
- •Pain or irritation at the injection site

Rare:

- •Excessive pressure inside the skull
- •Respiratory depression, apnea (temporary arrest of breathing)
- Vomiting
- •Pain when urinating (dysuria), urinary retention

If you experience any side effect not mentioned in this patient information leaflet, inform your doctor or your pharmacist.

Reporting of suspected adverse reactions

If you get any side effects listed or not listed in this leaflet, talk to your doctor, pharmacist or nurse. Also, report the side effects you encounter to the Turkish Pharmacovigilance Center (TÜFAM) by clicking on the "Drug Side Effects Reporting" icon on www.titck.gov.tr or by calling the side effect reporting line at 0 800 314 00 08. By reporting side effects, you can help provide more information on the safety of this medicine.

5. Storage of MORPHINE HYDROCHLORIDE

Keep MORPHINE HYDROCHLORIDE out of the sight and reach of children, and in its packaging.

Store at room temperature below 25 ° C and protect from light.

Use in compliance with the expiry date.

Do not use MORPHINE HYDROCHLORIDE after the expiration date stated on the packaging.

Do not throw away drugs that have expired or are not used! Give them to the collection system determined by the Ministry of Environment and Urbanization.



Marketing Authorization Holder

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Manufacturing Site:

OSEL İlaç San. ve Tic. A. Ş. Akbaba Mah. Maraş Cad. No:52 34820 Beykoz / İSTANBUL

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