

## PATIENT PACKAGE INSERT IN ACCORDANCE WITH THE PHARMACISTS’ REGULATIONS (PREPARATIONS) – 1986

The medicine is dispensed with a doctor’s prescription only

# EXJADE® 125 mg Dispersible tablets

Each dispersible tablet contains: deferasirox 125 mg

# EXJADE® 250 mg Dispersible tablets

Each dispersible tablet contains: deferasirox 250 mg

# EXJADE® 500 mg Dispersible tablets

Each dispersible tablet contains: deferasirox 500 mg

**Inactive and allergenic ingredients:** See section 2 “Important information about some of the ingredients of the medicine” and section 6 “Further information”.

**Read the leaflet carefully in its entirety before using the medicine.** This leaflet contains concise information about the medicine. If you have further questions, refer to the doctor or pharmacist.

This medicine has been prescribed for the treatment of your ailment or for the treatment of your child’s ailment. Do not pass it on to others. It may harm them even if it seems to you that their ailment is similar.

### 1. WHAT IS THE MEDICINE INTENDED FOR?

- To treat chronic iron overload caused by blood transfusions, in adults and children (aged 2 years and above).
- To treat chronic iron overload in patients with non-transfusion-dependent thalassemia from the age of 10 and above.

**Therapeutic group:** iron chelating agent.

Repeated blood transfusions are sometimes necessary in patients suffering from certain types of anemia such as thalassemia, sickle-cell disease and myelodysplastic syndromes (MDS). However, repeated blood transfusions can cause a build-up of excess iron. This is because blood contains iron and the body does not have a natural way to remove the excess iron received with the blood transfusions. In patients with non-transfusion-dependent thalassemia, iron overload may develop over time, mainly due to increased absorption of dietary iron in response to low blood cell counts. Over time, the excess iron can damage vital organs such as the liver and heart.

Iron chelator medicines are used to remove the excess iron and reduce the risk of damage to the body’s organs.

Exjade traps and removes excess iron, which is then excreted mainly in the stools.

### 2. BEFORE USING THE MEDICINE

**Do not use the medicine if:**

- you are sensitive (allergic) to deferasirox or any of the additional ingredients contained in the medicine, that appear in section 6 “Further information”. If this applies to you, **tell the doctor before taking Exjade**. If you think you are allergic, consult the doctor.
  - you have moderate or severe kidney disease.
  - you are currently taking other iron chelator medicine.

**Exjade is not recommended if**

- you are at an advanced stage of myelodysplastic syndrome (MDS); decreased production of blood cells by the bone marrow) or have advanced cancer.

**Special warnings regarding use of the medicine**

**Before beginning treatment with Exjade, tell the doctor if:**

- you have a liver or kidney problem.
- you have a cardiac problem caused by iron overload.
- you notice a marked decrease in your urine output (sign of a kidney problem).
- you have a severe rash or breathing difficulties and dizziness or swelling, mainly of the face and throat (signs of a severe allergic reaction, also see section 4 “Side effects”).
- you have a combination of any of the following symptoms: rash, red skin, blistering of the lips, eyes or mouth, skin peeling, high fever, flu-like symptoms, enlarged lymph nodes (signs of a severe skin reaction, also see section 4 “Side effects”).
- you experience a combination of drowsiness, upper right abdominal pain, yellowing or increased yellowing of the skin or eyes and dark urine (signs of liver problems).
- you experience difficulty thinking, remembering information or solving problems, feel less alert or aware of your surroundings or feel very sleepy with low energy (signs of a high level of ammonia in your blood, which may be associated with liver or kidney problems, also see section 4 “Side effects”).
- you vomit blood and/or have black stools.

- you frequently have abdominal pain, particularly after eating or taking Exjade.
- you have frequent heartburn.
- you have a low platelet or white blood cell count in your blood tests.
- you have blurred vision.
- you have diarrhea or vomiting.

If any of these conditions apply to you, tell the doctor immediately.

**Children and adolescents**

Exjade can be used in children and adolescents aged 2 years and above to treat chronic iron overload caused by blood transfusions and aged 10 years and above to treat non-transfusion-dependent chronic iron overload in thalassemia patients.

The doctor will adjust the dosage according to the child’s growth.

Exjade is not indicated for use in children under 2 years of age.

**Tests and follow-up**

During the course of treatment, you will need to undergo regular blood and urine tests. These tests will monitor the amount of iron in your body (blood ferritin levels) to check whether Exjade is working properly. The tests will also monitor kidney function (blood creatinine levels, presence of protein in the urine) and liver function (levels of transaminases, bilirubin and alkaline phosphatase in your blood). Your doctor may ask you to undergo a kidney biopsy, if he/she suspects significant kidney damage. You may also have MRI (magnetic resonance imaging) tests to determine the amount of iron in the liver. The doctor will take these tests into consideration when deciding which dose of Exjade is best for you and will also use these tests to decide when you should stop taking Exjade.

You must undergo hearing and vision tests before beginning treatment and once a year during the course of treatment, as a precautionary measure.

**Drug interactions**

**If you are taking, or have recently taken, other medicines, including non-prescription medicines and nutritional supplements, tell the doctor or pharmacist.**

- Exjade must not be combined with other iron chelating preparations.
- Do not take antacids (medicines used to treat heartburn) containing aluminium at the same time of day as Exjade.

In particular, inform the doctor or pharmacist if you are taking:

- ciclosporin (used to prevent the rejection of a transplanted organ or for other conditions, such as rheumatoid arthritis or skin asthma)
- simvastatin (used to lower cholesterol)
- certain painkillers or anti-inflammatory medicines (e.g. aspirin, ibuprofen, corticosteroids)
- oral bisphosphonates (used to treat osteoporosis)

- anticoagulant medicines (used to prevent or treat formation of blood clots)
- hormonal contraception (birth control preparations)
- bepidil, ergotamine (used to treat heart problems and migraines)
- repaglinide (used to treat diabetes)
- rifampicin (used to treat tuberculosis)
- phenytoin, phenobarbital, carbamazepine (used to treat epilepsy)
- ritonavir (used to treat HIV infection)
- paclitaxel (used to treat cancer)
- theophylline (used to treat respiratory diseases such as asthma)
- clozapine (used to treat psychiatric disorders such as schizophrenia)
- tizanidine (used as a muscle relaxant)
- cholestyramine (used to lower cholesterol levels in the blood)
- busulfan (used as a treatment prior to transplantation in order to destroy the original bone marrow before the transplant).
- Midazolam (used to ease anxiety and/or sleeping difficulties)

Additional tests may be required to monitor the levels of some of these medicines in your blood.

**Use of the medicine and food**

Take Exjade on an empty stomach and wait at least 30 minutes before eating any food, preferably at the same time each day.

Dissolve the tablets in a glass of water, apple juice or orange juice. Do not dissolve the tablets in fizzy drinks or milk (also see below “How to take Exjade”).

**Use in the elderly (adults aged 65 and over)**

Elderly people aged 65 and over can use the same dose of Exjade as other adults. Elderly patients may experience more side effects (primarily diarrhea) than younger patients. They should be monitored closely by the doctor for detection of side effects that may require a dosage adjustment.

**Pregnancy and breastfeeding**

If you are pregnant or breastfeeding, think you may be pregnant or are planning to become pregnant, consult the doctor before using the medicine.

Exjade is not recommended during pregnancy unless clearly necessary.

If you are using a hormonal contraceptive to prevent pregnancy, you should use an additional or different type of contraception (e.g., a condom), as Exjade may reduce the effectiveness of hormonal contraceptives.

Breastfeeding is not recommended during treatment with Exjade.

**Driving and operating machinery**

If you feel dizzy after taking Exjade, do not drive a vehicle or operate any tools or machinery until you feel normal again. Children should be cautioned against riding a bicycle or playing near the road, and the like.

**Important information about some of the ingredients of the medicine**

Exjade tablets contain lactose (milk sugar) and sodium.

If you have an intolerance to certain sugars, inform the doctor before taking Exjade.

The medicine contains less than 1 mmol (23 mg) sodium per tablet, and is therefore essentially considered ‘sodium-free’. Each Exjade 125 mg dispersible tablet contains approximately 136 mg lactose monohydrate.

Each Exjade 250 mg dispersible tablet contains approximately 272 mg lactose monohydrate.

Each Exjade 500 mg dispersible tablet contains approximately 544 mg lactose monohydrate.

### 3. HOW SHOULD YOU USE THE MEDICINE?

Always use the preparation according to the doctor’s instructions. Check with the doctor or pharmacist if you are uncertain about the dosage and treatment regimen of the preparation.

Treatment with Exjade will be overseen by a doctor who is experienced in the treatment of iron overload.

The dosage and the treatment regimen will be determined by the doctor only. In all patient, the dosage of Exjade is related to the body weight. The doctor will calculate the dosage you need and tell you how many tablets to take each day.

The usual daily dosage at the start of the treatment is generally:

- For patients regularly receiving blood transfusions - 20 mg per kilogram body weight. A higher or lower starting dosage may be recommended by the doctor based on your individual treatment needs.
- For patients who do not regularly receive blood transfusions - 10 mg per kilogram body weight.
- Depending on your response to treatment, the doctor may later adjust your treatment to a higher or lower dose.

The maximum daily dosage is:

- 40 mg per kilogram body weight for patients regularly receiving blood transfusions.
- 20 mg per kilogram body weight for adult patients not regularly receiving blood transfusions.
- 10 mg per kilogram body weight for children under 18 years old not regularly receiving blood transfusions.

**Do not exceed the recommended dose.**

**Duration of treatment:**

**Continue taking Exjade every day, for as long as your doctor instructs you to.** This is a long-term treatment, possibly lasting for months or years. The doctor will regularly monitor your condition to make sure that the treatment is having the desired effect (see also section 2: “Tests and follow-up”).

If you have questions regarding duration of treatment, refer to the doctor.

**How to take:**

**When to take Exjade:**

- Take Exjade once a day, every day, at about the same time.
- Take the tablets on an empty stomach.
- Then, wait at least 30 minutes before eating any food.

Taking Exjade at the same time each day will help you remember when to take the tablets.

**How to take Exjade:**

**Place** the tablet(s) into a glass of water, apple or orange juice (100-200 ml).



**Stir** until the tablet(s) dissolve(s) completely. The liquid in the glass will look cloudy.

**Drink** all the contents of the glass, then add a little water or juice to what remains in the glass, stir and drink that as well.

Do not dissolve the tablets in fizzy drinks or milk.

Do not chew, break or crush the tablets.

Do not swallow the tablets whole.

For any question about how Exjade works or why it has been prescribed for you, consult your doctor or pharmacist.

**If you took an overdose, or if a child or someone else has accidentally swallowed the medicine:**

Refer immediately to a doctor or proceed to a hospital emergency room and bring the package of the medicine with you. Urgent medical treatment may be necessary. You may experience effects such as abdominal pain, diarrhea, nausea and vomiting, and kidney or liver problems that could be serious.

**If you forget to take the medicine:**

If you forgot to take the medicine at the required time, take the dose as soon as you remember on the same day. Take the next dose at the usual time. Do not take a double dose on the following day to compensate for forgotten tablet(s). Adhere to the treatment regimen as recommended by the doctor.

Even if there is an improvement in your health, do not stop treatment with the medicine without consulting the doctor.

**If you stop taking the medicine:**

Do not stop treatment with Exjade without explicit instruction from the doctor. If you stop taking Exjade, the excess iron will no longer be removed from your body (also see above “Duration of treatment”).

**Do not take medicines in the dark! Check the label and the dose each time you take the medicine. Wear glasses if you need them.**

**If you have further questions regarding use of the medicine, consult the doctor or pharmacist.**

### 4. SIDE EFFECTS

As with any medicine, use of Exjade may cause side effects in some users. Do not be alarmed by the list of side effects. You may not suffer from any of them. Most of the side effects are mild to moderate and will generally pass after a few days to a few weeks of treatment.

**Some side effects could be severe and require immediate medical treatment.**

These side effects are uncommon (may affect up to 1 in every 100 patients) or rare (may affect up to 1 in every 1,000 patients).

**Stop taking the medicine and refer to a doctor immediately if any of the following cases applies to you or your child:**

- severe rash, or breathing difficulties and dizziness or swelling, mainly of the face and throat (signs of severe allergic reaction)
- a combination of any of the following symptoms: rash, red skin, blistering of the lips, eyes or mouth, skin peeling, high fever, flu-like symptoms, enlarged lymph nodes (signs of severe skin reaction)
- marked decrease in urine output (sign of a kidney problem)
- a combination of drowsiness, upper right abdominal pain, yellowing or increased yellowing of the skin or eyes and dark urine (signs of liver problems)
- difficulty thinking, remembering information, or solving problems, reduced alertness or awareness or feeling very sleepy with low energy (signs of a high level of ammonia in the blood, which may be associated with liver or renal problems and lead to a change in the brain function)
- bloody vomit and/or black stools
- frequent abdominal pains, particularly after eating or taking Exjade
- frequent heartburn
- partial loss of vision
- severe upper abdominal pain (pancreatitis)

**Some side effects could become serious.**

These side effects are uncommon.

**Refer to a doctor as soon as possible if:**

- you suffer from blurred or cloudy eyesight
- you suffer from reduced hearing

**Additional side effects:**

**Very common side effects (may affect more than 1 in every 10 patients):**

- abnormal tests related to kidney function

**Common side effects (may affect up to 1 in every 10 patients):**

- gastrointestinal disorders, such as nausea, vomiting, diarrhea, abdominal pain, bloating, constipation, indigestion
- rash
- headache
- abnormal tests related to liver function
- itching
- abnormal urine tests (protein in the urine)

If any of the above effects affects you severely, refer to a doctor.

**Uncommon side effects (may affect up to 1 in every 100 patients):**

- dizziness
- fever
- sore throat
- swelling of arms or legs

- change in the color of the skin
- anxiety
- sleep disorders
- tiredness

If any of the above effects affects you severely, refer to a doctor.

**Side effects of unknown frequency** (frequency cannot be estimated from the available data):

- a decrease in the number of blood cells involved in blood clotting (thrombocytopenia), in the number of red blood cells (anemia aggravated), in the number of white blood cells (neutropenia) or in the number of all kinds of blood cells (pancytopenia)
- hair loss
- kidney stones
- low urine output
- a tear in the stomach or intestine wall that may cause pain and nausea
- severe upper abdominal pain (pancreatitis)
- abnormal level of acid in the blood

**If a side effect occurs, if one of the side effects worsen or if you suffer from a side effect not mentioned in this leaflet, consult with the doctor.**

Side effects can be reported to the Ministry of Health by clicking on the link “Report Side Effects of Drug Treatment” found on the Ministry of Health homepage ([www.health.gov.il](http://www.health.gov.il)) that directs you to the online form for reporting side effects, or by entering the link: <https://sideeffects.health.gov.il>

### 5. HOW SHOULD THE MEDICINE BE STORED?

Avoid poisoning! This medicine and any other medicine should be kept in a safe place out of the reach and sight of children and/or infants in order to avoid poisoning. Do not induce vomiting unless explicitly instructed to do so by the doctor.

Do not use the medicine after the expiry date (exp. date) that appears on the package. The expiry date refers to the last day of that month.

**Storage conditions:** Do not store above 30°C. Store in original packaging to protect from moisture.

Do not use a package that is damaged or shows signs of tampering.

Do not dispose of medicines via the wastewater or household waste. Ask the pharmacist how to discard of medicines no longer in use. These measures will help protect the environment.

### 6. FURTHER INFORMATION

In addition to the active ingredient, the medicine also contains:

Crospovidone, lactose monohydrate microcrystalline cellulose, povidone (K30), sodium lauryl sulphate, colloidal silicon dioxide, magnesium stearate.

**What the medicine looks like and the contents of the package:**

Exjade dispersible tablets are packaged in packs containing 28 or 84 tablets.

Not all pack sizes may be marketed.

Exjade 125 mg, 250 mg and 500 mg tablets are white to yellowish, round and flat, with beveled edges and embossed on one side with “J125”, “J250” and “J500”, respectively, and “NVR” on the other side.

**Registration Holder and Importer and its address:** Novartis Israel Ltd., P.O.B 7126, Tel Aviv.

Revised in August 2021 according to MOH guidelines.

**Registration number of the medicine in the National Drug Registry of the Ministry of Health:**

Exjade 125 mg: 133 99 31337

Exjade 250 mg: 134 02 31338

Exjade 500 mg: 134 01 31339