A. LEVY
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IMPORTERS OF DENTAL SUPPLIES.
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א. לוי
דנטל דפו בע"מ
יבואני אספקה וציוד דנטליים,
מוצרים לבתי מרקחת
רח' קלישר 27, ת"א 65165

אפריל 2023

רופא/ה נכבד/ה,
רוקח/ת נכבד/ה,

<u>הנדון: עדכון העלון לרופא של התכשיר</u>
<u>סקנדונסט 3% ללא מיצר כלי דם</u>
<u>SCANDONEST 3% WITHOUT VASOCONSTRICTOR</u>
Mepivacaine Hydrochloride 30 mg/ml Solution for injection

חברת א. לוי דנטל דפו בע"מ מבקשת להודיע על <u>עדכון העלון לרופא</u> של התכשיר סקנדונסט 3% ללא מיצר כלי דם – Scandonest 3% Without Vasoconstrictor.

בהודעה זו מצויינים העדכונים המהותיים בלבד בעלון לרופא. בעלון ישנם שינויים נוספים.

התוויה הרשומה לתכשיר בישראל <u>עודכנה</u>. להלן ההתוויה העדכנית:

For the local and loco-regional anaesthesia in dental surgery in adults, adolescents and children above 4 years of age (calculated as 20 kg of body weight).

משטר המינון המאושר לתכשיר בישראל <u>עודכן</u>. להלן משטר המינון העדכני:

4.2) Posology and method of administration: The medicinal product should only be used by or under the supervision of dentists, stomatologists or other clinicians sufficiently trained and familiar with diagnosis and treatment of systemic toxicity. The availability of appropriate resuscitation equipment and medication and adequately trained staff is recommended before induction of regional anaesthesia with local anaesthetics to enable prompt treatment of any respiratory and cardiovascular emergencies. The patient's state of consciousness should be monitored after each local anaesthetic injection.

<u>Posology:</u> As the absence of pain is related to the patient individual sensibility, the lowest dose of anaesthetic leading to effective anaesthesia should be used. For more extensive procedures one or more cartridges may be required, without exceeding the maximum recommended dose.
For adults, the maximum recommended dose is of 4.4 mg/kg of body weight with an absolute maximum recommended dose of 300 mg for the individuals above 70 kg of body weight corresponding to 10 ml of solution.

Of note, the maximum quantity has to take into account the patient's body weight. As patients possess different body weights, each patient possess a different maximum allowed quantity of mepivacaine that can tolerate. Additionally, there are important individual variations with regards to the onset and duration of action.

The following table lists the maximum allowed doses in adults for the most commonly used anaesthetic techniques and the equivalent in number of cartridges:

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Weight (kg)	Mepivacaine hydrochloride dose (mg)	Volume (ml)	Equivalent* in cartridge numbers (1.7 ml)
50	220	7.3	4.0
60	264	8.8	5.0
≥70	300	10.0	5.5

* Rounded to the nearest half-cartridge

Paediatric population: SCANDONEST 3% WITHOUT VASOCONSTRICTOR is contraindicated in children below 4 years of age (calculated as 20 kg body weight) (see section 4.3).

Recommended therapeutic dose: The quantity to be injected should be determined by the age and weight of the child and the magnitude of the operation. The average dosage is 0.75 mg/kg = 0.025 ml of mepivacaine solution per kg body weight: ~ ¼ cartridge (15 mg of mepivacaine hydrochloride) for a 20 kg child.

Maximum recommended dosage: The maximum recommended dose in pediatric population is 3 mg of mepivacaine/kg (0.1 ml mepivacaine/kg).

The following table lists the maximum allowed dose in children and the equivalent in number of cartridges:

Weight (kg)	Mepivacaine hydrochloride dose (mg)	Volume (ml)	Equivalent* in cartridge numbers (1.7 ml)
20	60	2	1.2
35	105	3.5	2.0
45	135	4.5	2.5

* Rounded to the nearest half-cartridge

Special populations: Due to the lack of clinical data, particular precaution should be used in order to administer the lowest dose leading to efficient anaesthesia in:
- elderly people,
- patients with renal or hepatic impairment.

Mepivacaine is metabolized by the liver and can lead to elevated plasma levels in patients with hepatic impairment, in particular after repeated use. In case a reinjection is required, patient should be monitored, to identify any sign of relative overdose.

Concomitant use of sedatives to reduce patient anxiety: If sedative medication is administered, the maximum safe dose of mepivacaine may be reduced due to an additive effect of the combination on central nervous system depression (see section 4.5).

Method of administration: Infiltration and perineural use. For single use.

Precautions to be taken before administering the medicinal product: The medicinal product should not be used if cloudy and discoloured. The rate of injection should not exceed 1 ml of solution per minute. Local anaesthetics should be injected with caution when there is inflammation and/or infection at the site of the injection. The injection rate shall be very slow (1 ml/min).

Risk associated with an accidental intravascular injection: Accidental intravascular injection (e.g.: inadvertent intravenous injection into the systemic circulation, inadvertent intravenous or intra-arterial injection in the head area and neck area) may be associated with severe adverse reactions, such as convulsions, followed by central nervous system or cardiorespiratory depression and coma, progressing ultimately to respiratory arrest, due to the sudden high level of mepivacaine in the systemic circulation.
Thus, to ensure that the needle does not penetrate a blood vessel during injection, aspiration should be performed before the local anaesthetic product is injected. However, the absence of blood in the syringe does not guarantee that intravascular injection has been avoided.

Risk associated with intraneural injection: Accidental intraneural injection may lead the drug to move in retrograde manner along the nerve. In order to avoid intraneural injection and to prevent nerve injuries in connection with nerve blockades, the needle should always be slightly withdrawn if electric shock sensation is felt by the patient during injection or if the injection is particularly painful. If needle nerve injuries occur, the neurotoxic effect could be aggravated by mepivacaine's potential chemical neurotoxicity as it may impair the perineural blood supply and prevent mepivacaine local wash-out.

עדכונים מהותיים נעשו בסעיפים הבאים בעלון לרופא:

4.3) Contraindications:

- Hypersensitivity to the active substance (or any local anaesthetics agent of the amide type) or to any of the excipients listed in section 6.1,
- Children below 4 years of age (ca. 20 kg body weight),
- Severe disorders of atrioventicular conduction not compensated by pace maker,
- Poorly controlled epileptic patient.

4.4) Special warnings and precautions for use:

Special warnings: If there is any risk of an allergic reaction, choose different medicine for anaesthesia (see Section 4.3).
Mepivacaine must be used safely and effectively under appropriate conditions:
The local anaesthetic effects may be reduced when SCANDONEST 3% WITHOUT VASOCONSTRICTOR is injected into an inflamed or infected area.
Risk of biting trauma (lips, cheeks, mucosa, and tongue) exists, especially in children; the patient should be told to avoid chewing gum or eating until normal sensation is restored.

Mepivacaine must be used with caution in:

Patients with cardiovascular disorders:
- Peripheral vascular disease,
- Arrhythmias particularly of ventricular origin,
- Atrio-ventricular conduction disorders,
- Heart failure,
- Hypotension.

Mepivacaine should be administered with caution in patients with impaired cardiac function since they may be less able to compensate or worsen changes due to prolongation of atrio-ventricular conduction.

Epileptic patients: Because of their convulsive actions, all local anaesthetics should be used very cautiously. For poorly controlled epileptic patients, see section 4.3.

Patients with a hepatic disease: The lowest dose leading to efficient anaesthesia should be used.

Patients with a kidney disease: The lowest dose leading to efficient anaesthesia should be used.

Patients with porphyria: SCANDONEST 3% WITHOUT VASOCONSTRICTOR should only be used to patients with acute porphyria when no safer alternative is available. Caution should be taken in all patients with porphyria, as this medicinal product may trigger porphyria.

Patients with acidosis: Caution should be used in case of acidosis such as worsened of renal insufficiency or poorly control of type 1 diabetes mellitus.

Elderly patients: Dosages should be reduced in elderly patients (due to lack of clinical data). Mepivacaine should be administered with caution in patients, who are using antiplatelet / anticoagulant medicines or are suffering from a coagulation disorder, because of higher risk of bleeding. The higher risk of bleeding is more associated with the procedure, rather than with the medicine.

Precautions for use: Local anaesthetics should only be employed by healthcare professionals who are well versed in diagnosis and management of dose-related toxicity and other acute emergencies which might arise from the block to be employed. The immediate availability of oxygen, other resuscitative drugs, cardiopulmonary resuscitative equipment, and the personnel resources needed for proper management of toxic reactions and related emergencies should be considered (see section 4.2). Delay in proper management of dose-related toxicity, under ventilation from any cause, and/or altered sensitivity may lead to the development of acidosis, cardiac arrest and, possibly, death.

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Hypoxaemia and metabolic acidosis may potentiate the cardiovascular toxicity. Early control of seizures and aggressive airway management to treat hypoxaemia and acidosis may prevent cardiac arrest.
Concomitant use of the other medicinal products may require thorough monitoring (see section 4.5).
This medicinal product contains 24.67 mg sodium per 10 ml (maximum recommended dose), equivalent to 1.23 % of the WHO recommended maximum daily intake of 2g sodium for an adult.

קיימים עדכונים נוספים. למידע נוסף יש לעיין בעלון לרופא המעודכן.

העלון לרופא מפורסם במאגר התרופות שבאתר משרד הבריאות, וניתן לקבלו מודפס על ידי פניה לבעל הרישום א. לוי דנטל דפו בע"מ, רחוב קלישר 27, תל אביב 6516506. טלפון: 03-5173150. דואר אלק':
levydent@netvision.net.il

בברכה,
א. לוי דנטל דפו בע"מ