ינואר 2021

רופא/ה יקר/ה,
רוקח/ת יקר/ה,

**הנדון: <u>ESEMRON - אסמרון</u>**

**Dosage form:** solution for injection
**Composition**: rocuromium bromide 10mg/ml

**חברת מרק שארפ ודוהם (ישראל-1996) בע"מ, (MSD ישראל), מבקשת ליידע על עדכון העלון לרופא של התכשיר ESEMRON.**

**להלן לשון ההתוויה המאושרת לתכשיר:**
Adjunct to general anaesthesia to facilitate tracheal intubation, to provide skeletal muscle relaxation during surgery.
Esmeron indicated as an adjunct in the intensive care unit (ICU) to facilitate tracheal intubation and mechanical ventilation.

למידע מלא ולהוראות מתן מפורטות, יש לעיין בעלון לרופא המאושר על ידי משרד הבריאות.

**<u>עדכונים מהותיים שבוצעו בעלון לרופא:</u>**
טקסט שהוסף מודגש בקו תחתון, טקסט שנמחק מסומן בקו חוצה.

### 4.4 Special warnings and precautions for use

…
As with other neuromuscular blocking agents, residual neuromuscular blockade has been reported for Esmeron. In order to prevent complications resulting from residual neuromuscular blockade, it is recommended to extubate only after the patient has recovered sufficiently from neuromuscular block. <u>Geriatric patients (65 years or older) may be at increased risk for residual neuromuscular block.</u>
…

~~Anaphylactic reactions can occur following the administration~~ <u>High rates</u> of <u>cross-sensitivity between</u> neuromuscular blocking agents ~~Precautions for treating such reactions should always be taken. Particularly in the case of previous anaphylactic reactions~~ <u>have been reported. Therefore, where possible, before administering Esmeron, hypersensitivity</u> to <u>other</u> neuromuscular blocking agents~~, special precautions~~ <u>should be excluded. Esmeron</u> should ~~be taken since allergic cross-reactivity~~ <u>only be used when absolutely essential in susceptible patients. Patients who experience a hypersensitivity reaction under general anaesthesia should be tested subsequently for hypersensitivity</u> to <u>other</u> neuromuscular ~~blocking agents has been reported.~~ <u>blockers</u>.

<u>Rocuronium may increase the heart rate.</u>
…

<u>Because rocuronium bromide is always used with other drugs and because of the risk of malignant hyperthermia during anesthesia, even in the absence of known triggering factors, physicians should be aware of the early symptoms, confirmatory diagnosis and treatment of malignant hyperthermia prior to the start of anesthesia. Animal studies have shown that rocuronium bromide is not a triggering factor for malignant hyperthermia. Rare cases of malignant hyperthermia with ESMERON have been observed thru post-marketing surveillance; however, the causal association has not been proven.</u>
…

<u>Sodium
This medicine contains less than 1 mmol sodium (23 mg) per vial, that is to say essentially ‘sodium-free’.</u>

### 4.5 Interactions with other medicinal products and other forms of interaction

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**<u>Effect of other drugs on Esmeron</u>**
…
<u>Decreased effect:</u>
…
- Calcium chloride, potassium chloride.

…

Paediatric population
No formal interaction studies have been performed. The above mentioned interactions for adults and their special warnings and precautions for use (see section 4.4) should be taken into account for paediatric patients.

### 4.6 Pregnancy and lactation

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Caesarean section
In patients undergoing Caesarean section, Esmeron can be used as part of a rapid sequence induction technique, provided no intubation difficulties are anticipated and a sufficient dose of anaesthetic agent is administered or following suxamethonium facilitated intubation. However, Esmeron, administered in doses of 0.6 mg/kg may not produce adequate conditions for intubation until 90 seconds after administration. This dose has been shown to be safe in parturients undergoing Caesarean section.

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Breast-feeding~~Lactation~~
It is unknown whether rocuronium bromide is excreted in human breast milk. Animal studies have shown insignificant levels of rocuronium bromide in breast milk. ~~Animal studies do not indicate direct or indirect harmful effects with respect to pregnancy, embryonal/foetal development.~~

Insignificant levels of rocuronium bromide were found in the milk of lactating rats. There are no human data on the use of Esmeron during lactation. Esmeron should be given to lactating women only when the attending physician decides that the benefits outweigh the risks.After the administration of a single dose, it is recommended to abstain from next breastfeeding for five elimination half-lives of rocuronium, i.e. for about 6 hours.

### 4.8 Undesirable effects

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Tabulated list of adverse reactions

| MedDRA SOC | Preferred term[a1] | | |
|---|---|---|---|
| | Uncommon / Rare[2] (<1/100,>1/10000)[b] | Very rare (<1/10000) | Not Known |
| … | | | |
| Cardiac disorders | Tachycardia | | Kounis syndrome |

…

Paediatric population
A meta-analysis of 11 clinical studies in paediatric patients (n=704) with rocuronium bromide (up to 1 mg/kg) showed that tachycardia was identified as adverse drug reaction with a frequency of 1.4%.

### 4.9 Overdose

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In the event of overdosage and prolonged neuromuscular block, the patient should continue to receive ventilatory support and sedation. ~~Upon start~~ There are two options for the reversal of ~~spontaneous recovery an~~neuromuscular block: (1) In adults, sugammadex can be used for reversal of intense (profound) and deep block. The dose of sugammadex to be administered depends on the level of neuromuscular block. (2) An acetylcholinesterase inhibitor (e.g. neostigmine, edrophonium, pyridostigmine) or sugammadex can be used once spontaneous recovery starts and should be administered in adequate doses.

…

בעלון לרופא היו עדכונים נוספים שאינם מהותיים ואינם נכללים בהודעה זו. העלון לרופא נשלח לפרסום במאגר התרופות שבאתר משרד הבריאות, וניתן לקבלו מודפס על ידי פניה לבעל הרישום, חברת MSD ישראל, בטלפון 09-9533333.

ESMERON מופץ ע"י חברת נובולוג בע"מ.

בברכה,

אורית בילין
רוקחת ממונה
MSD ישראל

Refrences:
Esmeron SPC 01/2021