KETOROLAC TROMETAMOL

XEVOLAC®

30 mg / mL Solution for I.M. / I.V. Injection
Non-Steroidal Anti-Inflammatory Drug (NSAID)

FORMULATION :
Each mL contains Ketorolac trometamol 30 mg.

PRODUCT DESCRIPTION :
Ketorolac trometamol is a non-narcotic analgesic belonging to the non-steroidal anti-inflammatory drug (NSAID) class of medicines with analgesic, anti-inflammatory and antipyretic properties. Ketorolac trometamol (Xevolac®) Injection is available as 30 mg/mL (3%) sterile solution for intravenous (IV) or intramuscular (IM) administration. The injection solution is clear and slightly yellow in colour. Excipients for the injection are: sodium chloride, ethanol, water for injections and sodium hydroxide or hydrochloric acid to adjust pH.

PHARMACOLOGY :
Ketorolac trometamol is a nonsteroidal anti-inflammatory agent with anti-inflammatory, analgesic, and antipyretic activity. Ketorolac trometamol inhibits the synthesis of prostaglandins in tissues by decreasing the activity of the enzyme, cyclo-oxygenase, which results in decreased formation of prostaglandin precursors.

INDICATIONS :
- Ketorolac trometamol (Xevolac®) Injection is indicated for short-term (< 5 days) management of moderate to severe postoperative pain.
- Ketorolac trometamol (Xevolac®) Injection should not be used for more than 5 days. Patient should switch to another analgesic after treatment with Ketorolac in 5 days.
- Ketorolac trometamol (Xevolac®) Injection is not recommended for use as an obstetrical pre-operative medication or for obstetrical analgesia because there is no adequate study established. It may inhibit prostaglandin biosynthesis on uterine contraction and adversely affect fetal circulation.

DOSAGE AND ADMINISTRATION :
Adult : Initially 10 mg IM or bolus IV, then 10-30 mg every 4-6 hours as required up to a total maximum daily dose of 90 mg (60 mg for the elderly, patients with mild renal impairment, and those weighing less than 50 kg). Bolus IV doses should be given over no less than 15 sec. The maximum duration of treatment should not exceed two (2) days. The lowest effective dose should be used for the shortest possible time in all patient population or as prescribed by a physician.

CONTRAINDICATIONS :
- Hypersensitivity to NSAIDs, pregnant and lactating women and children below 16 years old.
- Patients who have developed nasal polyps, angioedema, or bronchospastic reactions to other NSAIDs, active history of peptic ulcer disease, cerebrovascular disease, hemorrhagic diatheses, those with high risk of hemorrhage or incomplete homeostasis, hypovolemia and patients with moderate or severe renal impairment.
- Ketorolac is contraindicated as prophylactic analgesia before any major surgery and is contra-indicated intra-operatively when homeostasis is critical because of the increased risk of bleeding.
- Ketorolac is contraindicated for neuraxial (epidural or intrathecal) administration due to its alcohol content.
- The concomitant use if Ketorolac and Probenecid is contraindicated.

WARNINGS AND PRECAUTIONS :
- As a nonsteroidal anti-inflammatory analgesic agent, Ketorolac trometamol can cause irritation, ulcer pepticum perforation or bleeding on gastrointestinal tract without previous symptoms and should be given under close supervision to patients with a history of gastrointestinal tract disease.
- Ketorolac is not an anesthetic agent and does not possess sedative or anxiolytic properties. Therefore, it is not recommended as a pre-operative or intra-operative medication for the support of anesthesia when these effects are required.
- Fluid retention and edema have been reported with the use of Ketorolac. Therefore, Ketorolac should be used with caution in patients with cardiac decompensation or similar conditions.
- Ketorolac inhibits platelet aggregation and may prolong bleeding time.
- Ketorolac injection administrated intramuscularly has produced pain at the injection site in 2-4% of patients. Eccymosis, bruising, hematoma and tingling at the injection site have been reported rarely.
- Adverse ophthalmological effects have been observed with NSAIDs.
- As with other NSAIDs that inhibit prostaglandin biosynthesis, elevations of serum urea nitrogen and creatinine have been reported in clinical trials with Ketorolac.
- As with other NSAIDs borderline elevations of one or more liver function tests may occur in up to 15 % of patients.

DRUG INTERACTIONS :
- Warfarin, ACE inhibitors, diuretics, nephrotoxic agents, anti-epileptic drugs, psychoactive drugs.
- Concomitant administration of Methotrexate and some NSAIDs has been reported to reduce the

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clearance of Methotrexate, enhancing the toxicity of Methotrexate.
- Concomitant administration of Ketorolac and Probenecid resulted in decreased clearance of Ketorolac and significant increase in Ketorolac plasma levels.
- Inhibition of renal lithium clearance leading to an increase in plasma lithium concentration has been reported with some prostaglandin synthesis-inhibiting drugs.

ADVERSE DRUG REACTIONS :
Gastrointestinal disturbances, dyspepsia, nausea, headache, diarrhea, dizziness, drowsiness, sweating, edema, pain at the site of injection.

OVERDOSE AND TREATMENT :
Symptoms and Signs
Symptoms following acute NSAIDs overdoses are usually limited to lethargy, drowsiness, nausea, vomiting, and epigastric pain, which are generally reversible with supportive care. Gastrointestinal bleeding may occur. Hypertension, acute renal failure, respiratory depression and coma may occur after the ingestion of NSAIDs but are rare.
Anaphylactoid reactions have been reported with therapeutic ingestion of NSAIDs and may occur following an overdose.
Treatment
Patients should be managed by symptomatic and supportive care following NSAID overdose. There are no specific antidotes. Emesis and/or activated charcoal (60 g to 100 g in adults, 1 g/kg to 2 g/kg in children) and/or osmotic cathartic may be indicated in patients seen within 4 hours of ingestion with symptoms or following a large oral overdose (5 to 10 times the usual dose). Forced diuresis, alkalization of urine, hemodialysis or hemoperfusion may not be useful due to high protein binding.
Single overdoses of Ketorolac trometamol injection have been variously associated with abdominal pain, nausea, vomiting, hyperventilation, peptic ulcers and/or erosive gastritis and renal dysfunction which have resolved after discontinuation of dosing.

STORAGE CONDITION :
Store at temperatures not exceeding 30°C.

PACKAGING AVAILABLE (PACK SIZE) :
Type I Clear Glass Ampoule x 1 mL (Box of 6's).

CAUTIONS :
Foods, Drugs, Devices, and Cosmetics Act prohibits dispensing without prescription.

ADR REPORTING :
For suspected adverse drug reaction, report to the FDA : www.fda.gov.ph

REGISTRATION NUMBER :
DR-XY36935.

DATE OF FIRST AUTHORIZATION / RENEWAL OF THE AUTHORIZATION :
07 November 2012 / 20 March 2017

DATE OF REVISION OF PACKAGE INSERT :
April 2017

NAME AND ADDRESS OF MARKETING AUTHORIZATION HOLDER :

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