NON-TERATOGENIC EFFECTS: Because of the known effects of prostaglandin biosynthesis inhibiting drugs on the fetal cardiovascular (closure of the ductus arteriosus), the use of Amplinak™ during late pregnancy should be avoided.

NURSING MOTHERS: Amplinak™ is excreted in the milk of lactating rats. It is not known whether this drug is excreted in human milk. Because many drugs are excreted in human milk, caution should be exercised when Amplinak™ ophthalmic suspension is administered to a nursing woman.

PEDIATRIC USE: The safety and effectiveness of Amplinak™ in pediatric patients below the age of 10 years have not been established.

GERIATRIC USE: No overall differences in safety and effectiveness have been observed between elderly and younger patients.

ADVERSE REACTIONS:
Ocular Adverse Reactions: The most frequently reported ocular adverse reactions following cataract surgery were capsular opacity, decreased visual acuity, foreign body sensation, increased intraocular pressure, and sticky sensation. These reactions occurred in approximately 5% to 10% of patients. Other ocular adverse reactions occurring at an incidence of approximately 1% to 5% include conjunctival edema, corneal edema, dry eye, lid margin crusting, ocular discomfort, ocular hyperemia, ocular pain, ocular pruritus, photophobia, tearing and vitreous detachment.

Some of these reactions may be the consequence of the cataract surgical procedure.

Non-Ocular Adverse Reactions: Non-ocular adverse reactions reported at an incidence of 1% to 4% included headache, hypertension, nausea/vomiting, and sinusitis.

Instructions to patients: 1. Amplinak™ should not be administered while wearing contact lens. 2. Do not touch the nozzle tip to any surface, as this may contaminate the solution. 3. Keep the bottle tightly closed when not in use. 4. Keep out of reach of children. 5. Use the suspension within one month of opening of container.

Dosage and Administration: One drop of Amplinak™ ophthalmic suspension should be applied to the affected eye three times-daily beginning 1 day prior to cataract surgery, continue on the day of surgery and through the first 2 weeks of the postoperative period.

HOW SUPPLIED:
Amplinak™ Ophthalmic suspension is supplied in 5 mL dropper bottles.

NOTE:
Store Amplinak™ Ophthalmic suspension below 30°C. Protect from sunlight.

DESCRIPTION:
Amplinak™

(Nepafenac ophthalmic suspension ) 1 mg/mL, w/v is sterile, topical, nonsteroidal anti-inflammatory (NSAID) prodrug for ophthalmic use. Chemically nepafenac is 2-amino-3-benzoylbenzeneacetonitrile with an empirical formula of C₁₅H₁₃N₂O₂. The structural formula of nepafenac is:

![Structural formula of nepafenac](image)

Nepafenac is a yellow crystalline powder. The molecular weight of nepafenac is 254.28. Amplinak™ ophthalmic suspension is supplied as a sterile, aqueous 0.1% suspension with a pH approximately of 7.4. The osmolality of Amplinak™ ophthalmic suspension is approximately 305 mOsmol/kg.
CONTRAINDICATIONS: Amplinak™ is contraindicated in patients with previously demonstrated hypersensitivity to any of the ingredients in the formula or to other NSAID.

WARNINGS: For TOPICAL OPHTHALMIC USE ONLY NOT FOR INJECTION.

There is the potential for cross-sensitivity to acetylsalicylic acid, phenylacetic acid derivatives and other nonsteroidal anti-inflammatory agents. Therefore caution should be taken when treating individuals who have previously exhibited sensitivities to these drugs. With some nonsteroidal anti-inflammatory drugs including Amplinak™, there exists the potential for increased bleeding time due to interference with thromocyte aggregation. There have been reports that ocularly applied nonsteroidal anti-inflammatory drugs may cause increased bleeding of ocular tissues (including hyphemas) in conjunction with ocular surgery.

PRECAUTIONS: Topical nonsteroidal anti-inflammatory drugs (NSAIDs) including Amplinak™ may slow or delay healing. Topical corticosteroids are also known to slow or delay healing. Concomitant use of topical NSAIDs and topical steroids may increase the potential for healing problems.

Use of topical NSAIDs may result in keratitis. In some susceptible patients, continued use of topical NSAIDs may result in epithelial breakdown, corneal thinning, corneal erosion, corneal ulceration or corneal perforation. These events may be sight threatening. Patients with evidence of corneal epithelial breakdown should immediately discontinue use of topical NSAIDs including Amplinak™ and should be closely monitored for corneal health.

Postmarketing experience with topical NSAIDs suggests that patients with complicated ocular surgeries, corneal denervation, corneal epithelial defects, diabetes mellitus, ocular surface diseases (e.g., dry eye syndrome), rheumatoid arthritis, or repeat corneal surgeries within a short period of time may be at increased risk for corneal adverse events which may become sight threatening. Topical NSAIDs should be used with caution in these patients. Postmarketing experience with topical NSAIDs also suggests that use more than 1 day prior to surgery or use beyond 14 days post surgery may increase patient risk and severity of corneal adverse events. It is recommended that Amplinak™ ophthalmic suspension be used with caution in patients with known bleeding tendencies or who are receiving other medications which may prolong bleeding time.

PREGNANCY: TERATOGENIC EFFECTS. Pregnancy Category C. Reproduction studies performed with nepafenac in rabbits and rats at oral doses up to 10 mg/kg/day have revealed no evidence of teratogenicity due to nepafenac, despite the induction of maternal toxicity. At this dose, the animal plasma exposure to nepafenac and amfenac was approximately 260 and 2400 times human plasma exposure at the recommended human topical ophthalmic dose for rats and 80 and 680 times human plasma exposure for rabbits, respectively. In rats, maternally toxic doses ≥ 10 mg/kg were associated with dystocia, increased postimplantation loss, reduced fetal weights and growth, and reduced fetal survival.

Nepafenac has been shown to cross the placental barrier in rats. There are no adequate and well-controlled studies in pregnant women. Because animal reproduction studies are not always predictive of human response, Amplinak™ should be used during pregnancy only if the potential benefit justifies the potential risk to the fetus.