
SCHEDULING STATUS

Schedule 4

PROPRIETARY NAME AND DOSAGE FORM

LUMIGAN 0,01 % Eye drops

COMPOSITION

Each ml of sterile solution contains bimatoprost 0,1 mg

Contains benzalkonium chloride 0,02 % m/v as a preservative.

Excipients: Citric acid monohydrate, dibasic sodium phosphate heptahydrate, sodium chloride, hydrochloric acid or sodium hydroxide (to adjust the pH) and purified water.

PHARMACOLOGICAL CLASSIFICATION

A. 15.4 Ophthalmological preparations. Other

PHARMACOLOGICAL ACTION

Pharmacodynamic properties

Bimatoprost is an ocular hypotensive agent. It is a synthetic prostamide, structurally related to prostamide F_{2α} that does not act through any known prostaglandin receptors. Bimatoprost selectively mimics the effects of prostamides. The prostamide receptor, however, has not yet been structurally identified.

Bimatoprost reduces intraocular pressure (IOP) in humans by increasing aqueous humour outflow through the trabecular meshwork and enhancing uveoscleral outflow.

Reduction of the intraocular pressure starts approximately 4 hours after the first administration and maximum effect is reached within approximately 8 to 12 hours. The duration of effect is maintained for 24 hours.

Limited experience is available with the use of bimatoprost in patients with open-angle glaucoma with pseudoexfoliative and pigmentary glaucoma, and chronic angle-closure glaucoma with patent iridotomy and no recommendation can be made.

No clinically relevant effects on heart rate and blood pressure have been observed in clinical trials.

Pharmacokinetic properties

Bimatoprost penetrates the human cornea and sclera well *in vitro*. After ocular administration, the systemic exposure of bimatoprost is very low with no accumulation over time.

After once daily ocular administration of one drop of 0,03 % bimatoprost to both eyes of 15 healthy subjects for two weeks, blood concentrations peaked within 10 minutes after dosing and declined to below the lower limit of detection (0,025 ng/ml) in most subjects within 1,5 hours after dosing.

Mean C_{max} and $AUC_{0-24hrs}$ values were similar on days 7 and 14 at approximately 0,08 ng/ml and 0,09 ng•hr/ml respectively, indicating that a steady drug concentration was reached during the first week of ocular dosing. Bimatoprost is moderately distributed into body tissues and the systemic volume of distribution in humans at steady-state was 0,67 l/kg.

As the concentration of the active substance for LUMIGAN 0,01 % has been reduced three-fold it is considered that the systemic medicine exposure will not increase compared with 0,03 % bimatoprost.

In human blood, bimatoprost resides mainly in the plasma. The plasma protein binding of bimatoprost is approximately 88 %.

Bimatoprost is not extensively metabolised in the human eye. Bimatoprost is the major circulating component in the blood once it reaches the systemic circulation following ocular dosing. Bimatoprost then undergoes oxidation, N-deethylation and glucuronidation to form a diverse variety of metabolites.

Bimatoprost is eliminated primarily by renal excretion, up to 67 % of an **intravenous** dose administered to healthy volunteers was excreted in the urine, 25 % of the dose was excreted via the faeces. The elimination half-life, determined after **intravenous** administration, was approximately 45 minutes, the total blood clearance was 1,5 l/hr/kg.

Characteristics in patients

Elderly patients: After twice daily dosing with 0,03 % bimatoprost, the mean AUC_{0-24hr} value of 0,0634 ng•hr/ml bimatoprost in the elderly (subjects 65 years or older) were significantly higher than 0,0218 ng•hr/ml in young healthy adults. However, this finding is not clinically relevant as systemic exposure for both elderly and young subjects remained very low from ocular dosing. There was no accumulation of bimatoprost in the blood over time and the safety profile was similar in elderly and young patients.

INDICATIONS

Reduction of elevated intraocular pressure in chronic open-angle glaucoma and ocular hypertension (as monotherapy or as adjunctive therapy to beta-blockers).

CONTRA-INDICATIONS

Hypersensitivity to bimatoprost or to any of the excipients.

WARNINGS AND SPECIAL PRECAUTIONS

LUMIGAN 0,01 % should be used with caution in patients with active intraocular inflammation (e.g. uveitis) because the inflammation may be exacerbated.

Before treatment is initiated, patients should be informed of the possibility of eyelash growth since this has been observed during treatment with prostaglandin analogues, including LUMIGAN 0,01 %.

Increased iris pigmentation has occurred when LUMIGAN 0,01 % has been administered. Patients should be advised about the potential for increased brown iris pigmentation which is likely to be permanent. The pigmentation change is due to increased melanin content in the melanocytes rather than to an increase in the number of melanosites. The long term effects of increased iridial pigmentation are not known. Iris colour changes seen with the ophthalmic administration of LUMIGAN 0,01 % may not be noticeable for several months to years. Neither nevi nor freckles of the iris appear to be affected by treatment.

Some of these changes may be permanent and may lead to differences in appearance between the eyes when only one eye is treated.

Bimatoprost ophthalmic solution has been reported to cause changes to pigmented tissues. When bimatoprost 0,03 % (multi-dose) was instilled directly into the eye (for treatment of elevated IOP), the most frequently reported pigmentary changes have been increased pigmentation of periorbital tissue (eyelid), eyelashes and the iris.

There is the potential for hair growth to occur in areas where LUMIGAN 0,01 % solution comes repeatedly in contact with the skin surface. Thus, it is important to apply LUMIGAN 0,01 % as instructed and to avoid it running onto the cheek or other skin areas.

Macular oedema, including cystoid macular oedema, has been reported following treatment with bimatoprost 0,03 % ophthalmic solution for elevated IOP. LUMIGAN 0,01 % should be used with caution in aphakic patients, in pseudophakic patients with a torn posterior lens capsule, or in patients with known risk factors for macular oedema (e.g. intraocular surgery, retinal vein occlusions, ocular inflammatory disease and diabetic retinopathy).

There have been reports of bacterial keratitis associated with the use of multiple dose containers of topical ophthalmic products. These containers had been inadvertently contaminated by patients who, in most cases, had a concurrent ocular disease. Patients with a disruption of the ocular epithelial surface are at greater risk of developing bacterial keratitis.

Patients should be instructed to avoid allowing the tip of the dispensing container to contact the eye or surrounding structures to avoid eye injury and contamination of the solution.

LUMIGAN 0,01 % has not been studied in patients with inflammatory ocular conditions, neovascular, inflammatory, angle-closure glaucoma, congenital glaucoma or narrow-angle glaucoma.

In bimatoprost 0,03 % studies in patients with glaucoma or ocular hypertension, it has been shown that more frequent exposure of the eye to more than one dose of bimatoprost daily may decrease the IOP-lowering effect. Patients using LUMIGAN® 0,01 % with other prostaglandin analogues should be monitored for changes to their intraocular pressure.

LUMIGAN 0,01 % has not been studied in patients with compromised respiratory function and should therefore be used with caution in such patients. In clinical studies of 0,03 % bimatoprost, in those patients with a history of compromised respiratory function, no significant untoward respiratory effects have been seen.

LUMIGAN 0,01 % has not been studied in patients with heart block more severe than first degree or uncontrolled congestive heart failure.

LUMIGAN 0,01 % contains the preservative benzalkonium chloride, which may be absorbed by and cause discolouration of soft contact lenses. Patients wearing soft (hydrophilic) contact lenses should be instructed to remove contact lenses prior to administration of LUMIGAN 0,01 % and wait at least 15 minutes following administration before reinserting contact lenses. LUMIGAN 0,01 % should not be administered while wearing contact lenses.

Due to the possibility of corneal permeability and the danger of disruption of the corneal epithelium with prolonged or repeated usage of benzalkonium chloride, regular ophthalmological examinations are required.

Caution should be exercised in the use of benzalkonium chloride over an extended period in patients with extensive ocular surface disease.

Effects on ability to drive and use machines

If transient blurred vision occurs at instillation, the patient should wait until the vision clears before driving or using machinery.

INTERACTIONS

No interaction studies have been performed

Bimatoprost is biotransformed by multiple enzymes and pathways, and no effects on hepatic medicine metabolising enzymes were observed in pre-clinical studies.

In clinical studies, bimatoprost 0,03 % eye drops (multi-dose) was used concomitantly with a number of different ophthalmic beta-blocking agents without evidence of medicine interactions.

Concomitant use of LUMIGAN 0,01 % and anti-glaucoma agents other than topical beta-blockers has not been evaluated during adjunctive glaucoma therapy.

There is a potential for the IOP-lowering effect of prostaglandin analogues (e.g. LUMIGAN 0,01 %) to be reduced in patients with glaucoma or ocular hypertension when used with other prostaglandin analogues (WARNINGS AND SPECIAL PRECAUTIONS).

PREGNANCY AND LACTATION

The safety of LUMIGAN 0,01 % during pregnancy and lactation has not been established. LUMIGAN 0,01 % should not be used during pregnancy unless clearly necessary.

It is not known whether LUMIGAN 0,01 % is excreted in human milk, although in animal studies, bimatoprost has been shown to be excreted in breast milk. It is recommended that it not be used in breastfeeding mothers.

DOSAGE AND DIRECTIONS FOR USE

When used as monotherapy or as adjunctive therapy, the recommended dose is one drop of LUMIGAN 0,01 % in the affected eye(s) once daily, administered in the evening.

The dose should not exceed once daily as more frequent administration may lessen the intraocular pressure lowering effect.

To prevent contamination of the dropper tip and solution, care should be taken not to touch the eyelids, surrounding areas or other surfaces with the dropper tip of the bottle.

If more than one topical ophthalmic medication is being used, the medicines should be administered at least 5 minutes apart.

Use in elderly

No dosage adjustment in elderly patients is necessary.

Use in children and adolescents (under the age of 18)

LUMIGAN 0,01 % has only been studied in adults and therefore its use is not recommended in children or adolescents.

Use in hepatic and renal impairment

LUMIGAN 0,01 % has not been studied in patients with renal or moderate to severe hepatic impairment and should therefore be used with caution in such patients. In patients with a history of mild liver disease or abnormal ALT, AST and/or bilirubin at baseline, bimatoprost 0,03 % had no adverse effect on liver function over 24 months.

SIDE EFFECTS

In clinical studies with LUMIGAN 0,01 % the most common adverse event was conjunctival hyperaemia (25 %). Approximately 0,5 % of patients discontinued therapy due to conjunctival hyperaemia with LUMIGAN 0,01 % eye drops.

The following side effects were reported during clinical trials with LUMIGAN 0,01 % and were considered to be treatment-related.

The frequency is defined as follows: *Very Common* ($\geq 1/10$); *Common* ($\geq 1/100$ to $< 1/10$); *Uncommon* ($\geq 1/1\ 000$ to $< 1/100$); *Rare* ($\geq 1/10\ 000$ to $< 1/1\ 000$); *Very Rare* ($< 1/10\ 000$).

Eye disorders

Very common: Ocular/conjunctival hyperaemia

Common: Eye irritation, erythema of eyelid, punctate keratitis, eye pruritus, eyelids pruritus, growth of eyelashes

Uncommon: Asthenopia, conjunctival disorder, conjunctival oedema, eyelid margin crusting, madarosis, vision blurred

Skin and subcutaneous tissue disorders

Common: Abnormal hair growth around the eyes (hypertrichosis), skin hyperpigmentation

Uncommon: Pruritus

General disorders and administration site conditions

Common: Instillation site irritation

Gastro-intestinal disorders

Uncommon: Nausea

Additional adverse events that have been seen with 0,03 % bimatoprost and may potentially occur also with LUMIGAN 0,01 %:

Eye disorders

Allergic conjunctivitis, blepharitis, blepharospasm, cataract, corneal erosion, cystoid macular oedema, eyelash darkening, iritis, ocular burning, photophobia, pigmentation of

peri-ocular skin, retinal haemorrhage, uveitis, visual disturbance, worsening of visual acuity, erythema (periorbital)

Nervous system disorders

Dizziness

Respiratory, thoracic and mediastinal disorders

Infection (primarily colds and upper respiratory symptoms)

Investigations

Liver function test (LFT) abnormal

Vascular disorders

Hypertension

General disorders and administration site condition

Asthenia, peripheral oedema

Skin and subcutaneous tissue disorders

Hirsutism, abnormal hair growth

Post-marketing experience

The following adverse reactions have been identified during post-marketing use of LUMIGAN 0,01 %. Because post-marketing reporting is voluntary and from a population of uncertain size, it is not possible to reliably estimate the frequency of these reactions:

Eye disorders

Blepharal pigmentation, dry eye, eye discharge, eye oedema, eyelid oedema, eye pain, foreign body sensation in eyes, iris hyperpigmentation, increased lacrimation, periorbital and lid changes including deepening of the eyelid sulcus, macular oedema

Immune system disorders

Hypersensitivity reaction including signs and symptoms of eye allergy and allergic dermatitis

Nervous system disorders

Headache

Respiratory, thoracic and mediastinal disorders

Asthma, exacerbation of asthma, dyspnoea

KNOWN SYMPTOMS OF OVERDOSAGE AND PARTICULARS OF ITS TREATMENT

No information is available on overdosage in humans. If overdosage occurs, treatment should be symptomatic and supportive.

IDENTIFICATION

A clear colourless solution with no foreign particles.

PRESENTATION

2,5 ml filled in 5 ml; 5 ml and 7,5 ml filled in 10 ml white opaque low density polyethylene bottles with a turquoise polystyrene screw cap. Each bottle is packed into an outer carton.

STORAGE INSTRUCTIONS

Store at or below 25 °C. Do not use more than 30 days after opening. Keep bottle tightly closed when not in use. **KEEP OUT OF REACH OF CHILDREN**

REGISTRATION NUMBER

42/15.4/0835

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