AUSTRALIAN PRODUCT INFORMATION

NAUSICALM (Cyclizine hydrochloride)

Tablets

1 NAME OF THE MEDICINE

Cyclizine hydrochloride

2 QUALITATIVE AND QUANTITATIVE COMPOSITION

Nausicalm tablets contain 50 mg of cyclizine hydrochloride.

Excipients with known effect: sugars as lactose.

For the full list of excipients, see Section 6.1 List of excipients.

3 PHARMCEUTICAL FORM

Nausicalm tablets are white, circular, biconvex, uncoated tablets with a score line on one side, plain on the other.

4 CLINICAL PARTICULARS

4.1 THERAPEUTIC INDICATIONS

Nausicalm is indicated for the prevention and treatment of nausea and vomiting associated with motion sickness and radiotherapy.

4.2 DOSE AND METHOD OF ADMINISTRATION

For the Treatment of nausea induced by radiotherapy

Adults and children over 12 Years: One tablet every 6 to 8 hours, as required with a little water (up to a maximum of 3 tablets in 24 hours)

Use in the Elderly: There have been no specific studies of cyclizine in the elderly. Experience has indicated that normal adult dosage is appropriate.

For the Prevention of Travel Sickness

Adults and children over 12 Years: One tablet every 6 to 8 hours (up to a maximum of 3 tablets in 24 hours), as required with a little water, first taken 1-2 hours before departure.

4.3 CONTRAINDICATIONS

Nausicalm should not be given to individuals with known hypersensitivity to cyclizine or in individuals with severe heart failure.

4.4 SPECIAL WARNINGS AND PRECAUTIONS FOR USE

Potential anticholinergic effects

Cyclizine should be used with caution in patients with glaucoma, gastrointestinal obstructive disorders, urinary retention/obstruction, asthma, chronic obstructive pulmonary disease and prostatic hypertrophy.

Porphyria

Cyclizine should be administered with caution in porphyria.

Epilepsy

Cyclizine should be administered with caution in patients with epilepsy.

Sunlight

Cyclizine may increase sensitivity to sunlight.

Use in the elderly

There have been no specific studies of cyclizine in the elderly. Experience has indicated that normal adult dosage is appropriate.

Paediatric use

Not recommended for use in children 12 years and under.

Effects on laboratory tests

No data available.

4.5 INTERACTIONS WITH OTHER MEDICINES AND OTHER FORMS OF INTERACTIONS

The following interactions with cyclizine have been noted:

- Cyclizine may have additive effects with alcohol and other central nervous system depressants e.g. hypnotics, tranquillisers.
- Cyclizine enhances the soporific effect of pethidine.
- Because of its anticholinergic activity cyclizine may enhance the side-effects of other anticholinergic drugs.

4.6 FERTILITY, PREGNANCY AND LACTATION

Effects on fertility

The effects of cyclizine on human fertility are unknown. There are no adequate nonclinical studies of the effects of cyclizine on fertility.

Use in pregnancy

Category B3

This medicine has only been taken by a limited number of pregnant women and women of childbearing age, without an increase in the frequency of malformation or other direct or indirect harmful effects on the human fetus having been observed.

Studies in animals have shown evidence of an increased occurrence of fetal damage, the significance of which is considered uncertain in humans.

Administration of cyclizine to rat, mice and rabbits during gestation was associated with malformations including cleft palate and various cephalic abnormalities; the no-effect doses determined in rats and rabbits were 50 and 25 mg/kg/day, respectively.

In the absence of any definitive human data, the use of cyclizine in pregnancy is not advised.

Use in lactation

It is not known whether cyclizine or its metabolites are excreted in human milk.

4.7 EFFECTS ON ABILITY TO DRIVE AND USE MACHINES

Studies designed to detect drowsiness did not reveal sedation in healthy adults who took a single oral therapeutic dose (50 mg) of cyclizine.

Patients should not drive or operate machinery until they have determined their own response.

Although there are no data available, patients should be cautioned that cyclizine may have additive effects with alcohol and other central nervous system depressants, e.g. hypnotics and tranquillisers.

4.8 ADVERSE EFFECTS (UNDESIRABLE EFFECTS)

Blood and lymphatic system disorders

Agranulocytosis.

Cardiac disorders

Tachycardia.

Eye disorders

Blurred vision, oculogyric crisis.

Gastrointestinal system disorders

Dryness of the mouth, nose and throat, constipation.

General disorders and administration site conditions

Asthenia.

Hepatobiliary disorders

Hepatic dysfunction, hypersensitivity hepatitis, cholestatic jaundice and cholestatic hepatitis have occurred in association with cyclizine.

Immune system disorders

Hypersensitivity reactions, including anaphylaxis have occurred.

Musculoskeletal and connective tissue disorders

Twitching, muscle spasms.

Nervous system disorders

Effects on the central nervous system have been reported with cyclizine: these include somnolence, headache, dystonia, dyskinesia, extrapyramidal motor disturbances, tremor, convulsions, dizziness, decreased consciousness, transient speech disorders, paraesthesia and generalised chorea.

Psychiatric disorders

Disorientation, restlessness, nervousness, insomnia and auditory and visual hallucinations have been reported, particularly when dosage recommendations have been exceeded.

Renal and urinary disorders

Urinary retention.

Respiratory, thoracic and mediastinal disorders

Bronchospasm, apnoea.

Skin and subcutaneous tissue disorders

Urticaria, drug rash, angioedema, allergic skin reactions, fixed drug eruption.

Vascular disorders

Hypertension.

Reporting suspected adverse effects

Reporting suspected adverse reactions after registration of the medicinal product is important. It allows continued monitoring of the benefit-risk balance of the medicinal product. Healthcare professionals are asked to report any suspected adverse reactions at www.tga.gov.au/reporting-problems.

4.9 OVERDOSE

Symptoms of acute toxicity from cyclizine arise from peripheral anticholinergic effects and effects on the central nervous system.

Peripheral anticholinergic symptoms include, dry mouth, nose and throat, blurred vision, tachycardia and urinary retention. Central nervous system effects include drowsiness, dizziness, incoordination, ataxia, weakness, hyper-excitability, disorientation, impaired judgement, hallucinations, hyperkinesia, extrapyramidal motor disturbances, convulsions, hyperpyrexia and respiratory depression.

An oral dose of 5 mg/kg is likely to be associated with at least one of the clinical symptoms stated above. Younger children are more susceptible to convulsions. The incidence of convulsions, in children less than 5 years, is about 60% when the oral dose ingested exceeds 40 mg/kg.

Treatment

In the management of acute overdosage with cyclizine, supportive measures for respiration and circulation should be performed if necessary. Convulsions should be controlled in the usual way with parenteral anticonvulsant therapy.

For information on the management of overdose, contact the Poisons information Centre on 131126 (Australia).

5 PHARMACOLOGICAL PROPERTIES

5.1 PHARMACODYNAMIC PROPERTIES

Mechanism of action

Cyclizine is a piperazine derivative with the general properties of H1-blocking drugs but is used as an anti-emetic in a variety of clinical situations including drug-induced and motion sickness, vertigo, post-operative vomiting and radiation sickness. The mechanism of the anti- emetic effect is unclear. Cyclizine also possesses anticholinergic activity but does not have marked sedative effects.

Clinical trials

No data available

5.2 PHARMACOKINETIC PROPERTIES

The bioavailability of Nausicalm tablets is approximately 40%.

In fasted, healthy male subjects given an oral dose of one single 50 mg cyclizine tablet, peak plasma concentration of cyclizine was 15 ± 10 ng/mL, with a T_{max} of 4 ± 2 hours, $AUC_{0\text{-}inf}$ of 409 ± 196 ng.hr/mL, and elimination half-life of 26 ± 7 hours.

Cyclizine is extensively N-demethylated to the largely inactive metabolite norcyclizine, which is widely distributed throughout the tissues and has a plasma half-life of less than one day.

5.3 PRECLINICAL SAFETY DATA

Genotoxicity

No data available.

Carcinogenicity

No data available

6 PHARMACEUTICAL PARTICULARS

6.1 LIST OF EXCIPIENTS

Potato starch

Lactose monohydrate

Gum acacia

Magnesium stearate

6.2 INCOMPATIBILITIES

Incompatibilities were either not assessed or not identified as part of the registration of this medicine.

6.3 SHELF LIFE

In Australia, information on the shelf life can be found on the public summary of the Australian Register of Therapeutic Goods (ARTG).

The expiry date can be found on the packaging.

6.4 SPECIAL PRECAUTIONS FOR STORAGE

Store below 30°C.

Store in a safe place out of the reach of children.

6.5 NATURE AND CONTENTS OF CONTAINER

Nausicalm tablets are supplied in a PVC/PVDC/Al blister pack of 6, 50 and 100 tablets.

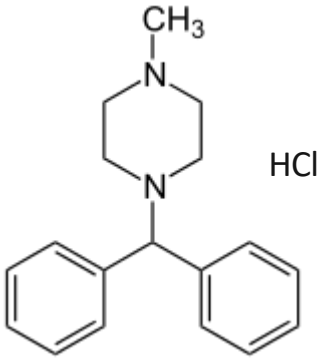
6.6 SPECIAL PRECAUTIONS FOR DISPOSAL

In Australia, any unused medicine or waste material should be disposed of in accordance with local requirements.

6.7 PHYSICOCHEMICAL PROPERTIES

Cyclizine hydrochloride is a white to almost white crystalline powder. It is slightly soluble in water and in ethanol (96%).

Chemical structure



It has the chemical formula $C_{18}H_{22}N_2$.HCl with a molecular weight of 302.84.

CAS number

82-92-8

7 MEDICINE SCHEDULE (POISONS STANDARD)

S3 Pharmacist Only Medicine – 6's

S4 Prescription Only Medicine – 50's and 100's

8 SPONSOR

AFT Pharmaceuticals Pty Ltd.

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9 DATE OF FIRST APPROVAL

28/11/2014

10 DATE OF REVISION

9 May 2024

Summary table of changes

Section changed	Summary of change
All	Reformat to new TGA template