

4. POSSIBLE SIDE EFFECTS

Like all medicines, this medicine can cause side effects, although not everybody gets them.

Severe allergic reactions

If you have any of these signs and symptoms, **tell your doctor or nurse straight away**. You may need urgent medical treatment. The signs and symptoms may include a sudden onset of:

- Severe rash, itching or hives on the skin.
- Swelling of the face, lips, tongue or other parts of the body.
- Shortness of breath, wheezing or trouble breathing.
- Serious skin reactions which include
 - o Serious hypersensitivity reactions involving fever, skin rash, and changes in the blood tests that check how the liver is working (increased levels of liver enzymes) and an increase in a type of white blood cell (eosinophilia) and enlarged lymph nodes. These may be signs of a multi-organ sensitivity disorder known as DRESS syndrome.
 - o Severe red scaly rash, skin bumps that contain pus, blisters or peeling of skin, which may be associated with a high fever and joint pain.
 - o Severe skin rashes that can appear as reddish circular patches often with central blisters on the trunk, skin peeling, ulcers of mouth, throat, nose, genitals and eyes and can be preceded by fever and flu-like symptoms (Stevens-Johnson syndrome) or a more severe form (toxic epidermal necrolysis).

Damage to red blood cells (not known)

The signs include:

- Being breathless when you do not expect it.
- Red or brown urine.

If you notice any of the above, **see a doctor straight away**.

Other possible side effects:

Common (may affect up to 1 in 10 people)

- Abdominal (stomach) pain.
- Feeling sick (nausea).
- Being sick (vomiting).
- Diarrhoea.
- Headache.
- Skin rash, itchy skin.
- Pain and inflammation.
- Increased numbers of platelets in your blood (shown in a blood test).
- Changes in blood tests, including tests that show how well your liver is working.

Uncommon (may affect up to 1 in 100 people)

- Changes in your blood. These include reduced numbers of platelets (which may make you bruise more easily), increased numbers of some white blood cells, decreased numbers of other white cells and increased amounts of a substance called 'bilirubin'. Your doctor may do blood tests from time to time.
- Changes in blood tests, including tests that show how well your kidney is working.
- Reduced levels of potassium in your blood (which can cause weakness, muscle cramps, tingling and heart rhythm disturbances).
- Liver problems. Yellowing of the skin and eyes, itchy skin, dark-coloured urine or light-coloured stool. If you notice these signs or symptoms, see a doctor straight away.
- A tingling feeling (pins and needles).
- Infections of the mouth or the vagina that are caused by a fungus (thrush).
- Inflammation of the bowel with diarrhoea.
- Sore veins where Meropenem injection/infusion is injected.
- Other changes in your blood. The symptoms include frequent infections, high temperature and sore throat. Your doctor may do blood tests from time to time.

Rare (may affect up to 1 in 1,000 people)

- Fits (convulsions).
- Acute disorientation and confusion (delirium).

Sudden chest pain, which may be a sign of a potentially serious allergic reaction called Kounis syndrome has been noted with other medicines of the same type. If this happens talk to a doctor or nurse immediately.

Reporting of side effects

If you get any side effects, talk to your doctor, pharmacist or nurse. This includes any possible side effects not listed in this leaflet. You can also report side effects directly via the Yellow Card Scheme at: www.mhra.gov.uk/yellowcard or search for MHRA Yellow Card in the Google Play or Apple App Store. By reporting side effects you can help provide more information on the safety of this medicine.

5. HOW TO STORE MEROPENEM INJECTION/ INFUSION

Keep this medicine out of the sight and reach of children.

Do not use this medicine after the expiry date which is stated on the container. The expiry date refers to the last day of that month.

This product does not require any special storage conditions.

Injection

After reconstitution: The reconstituted solutions for intravenous injection should be used immediately. The time interval between the beginning of reconstitution and the end of intravenous injection should not exceed:

- 3 hours when stored at up to 25 °C
- 12 hours when stored under refrigerated conditions (2 -8 °C).

Infusion

After reconstitution: The reconstituted solutions for intravenous infusion should be used immediately. The time interval between the beginning of reconstitution and the end of intravenous infusion should not exceed:

- 3 hours when stored at up to 25 °C when Meropenem injection/infusion is dissolved in sodium chloride;
- 24 hours when stored under refrigerated conditions (2-8 °C) when Meropenem injection/infusion is dissolved in sodium chloride;
- 1 hour when Meropenem injection/infusion is dissolved in glucose.

From a microbiological point of view, unless the method of opening/reconstitution/ dilution precludes the risk of microbiological contamination, the product should be used immediately.

If not used immediately in-use storage times and conditions are the responsibility of the user. Do not freeze the reconstituted solution.

Do not throw away any medicines via wastewater or household waste. Ask your pharmacist how to throw away medicines you no longer use. These measures will help to protect the environment.

6. CONTENTS OF THE PACK AND OTHER INFORMATION

What Meropenem injection/infusion contains

Meropenem 500 mg: The active substance is meropenem trihydrate equivalent to 500 mg anhydrous meropenem.

Meropenem 1 g: The active substance is meropenem trihydrate equivalent to 1 g anhydrous meropenem.

The other ingredient is sodium carbonate.

What Meropenem injection/infusion looks like and contents of the pack

Meropenem injection/infusion is a white to light yellow powder for solution for injection or infusion in a vial.

Pack size: 10 vials in a box.

Marketing Authorisation Holder

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Nexus, Gloucester Business Park,
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Manufacturer

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Advice/medical education

Antibiotics are used to treat infections caused by bacteria. They have no effect against infections caused by viruses.

Sometimes an infection caused by bacteria does not respond to a course of an antibiotic. One of the commonest reasons for this to occur is because the bacteria causing the infection are resistant to the antibiotic that is being taken. This means that they can survive and even multiply despite the antibiotic.

Bacteria can become resistant to antibiotics for many reasons. Using antibiotics carefully can help to reduce the chance of bacteria becoming resistant to them.

When your doctor prescribes a course of an antibiotic it is intended to treat only your current illness. Paying attention to the following advice will help prevent the emergence of resistant bacteria that could stop the antibiotic working.

1. It is very important that you take the antibiotic at the right dose, at the right times and for the right number of days. Read the instructions on the label and if you do not understand anything ask your doctor or pharmacist to explain.
2. You should not take an antibiotic unless it has been prescribed specifically for you and you should use it only to treat the infection for which it was prescribed.
3. You should not take antibiotics that have been prescribed for other people even if they had an infection that was similar to yours.
4. You should not give antibiotics that were prescribed for you to other people.
5. If you have any antibiotic left over when you have taken the course as directed by your doctor you should take the remainder to a pharmacy for appropriate disposal.

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Giving the injection

You can either give this medicine through a short cannula or venflon, or through a port or central line.

Giving Meropenem injection/infusion through a short cannula or venflon

1. Remove the needle from the syringe and throw the needle away carefully in your sharps bin.
2. Wipe the end of the short cannula or venflon with an alcohol wipe and allow it to dry. Open the cap on your cannula and connect the syringe.
3. Slowly push the plunger of the syringe to give the antibiotic steadily over about 5 minutes.
4. Once you have finished giving the antibiotic and the syringe is empty, remove the syringe and use a flush as recommended by your doctor or nurse.
5. Close the cap of your cannula and carefully throw the syringe away in your sharps bin.

Giving Meropenem injection/infusion through a port or central line

1. Remove the cap on the port or line, clean the end of the line with an alcohol wipe and allow it to dry.
2. Connect the syringe and slowly push the plunger on the syringe to give the antibiotic steadily over about 5 minutes.
3. Once you have finished giving the antibiotic, remove the syringe and use a flush as recommended by your doctor or nurse.
4. Place a new clean cap on your central line and carefully throw the syringe away in your sharps bin.