PACKAGE LEAFLET

Package leaflet: Information for the user

Cholurso 250 mg film-coated tablets
Cholurso 500 mg film-coated tablets
Ursodeoxycholic acid

Read all of this leaflet carefully before you start taking this medicine because it contains important information for you.
- Keep this leaflet. You may need to read it again.
- If you have any further questions, ask your doctor, pharmacist or nurse.
- This medicine has been prescribed for you only. Do not pass it on to others. It may harm them, even if their signs of illness are the same as yours.
- If you get any side effects, talk to your doctor, pharmacist or nurse. This includes any possible side effects not listed in this leaflet. See section 4.

What is in this leaflet

1. What Cholurso 250 mg or 500 mg film-coated tablets are and what they are used for

Cholurso contains the active substance ursodeoxycholic acid.
Ursodeoxycholic acid is a chemical present naturally in the body and it helps to control the amount of cholesterol in the blood.

Cholurso is used
– to dissolve gallstones caused by excess cholesterol in the gall bladder (in patients for whom surgery is not an option), where the gallstones are not visible on a plain x-ray (gallstones that are visible will not dissolve) and not more than 15 mm in diameter. The gall bladder should still be working despite the gallstone(s).
– for the treatment of a condition where the bile ducts in the liver become damaged leading to a build-up of bile. This may cause scarring of the liver. The liver should not be so damaged that it is not functioning properly. This condition is called primary biliary cholangitis.
– for the treatment of liver disease associated with a condition called cystic fibrosis in children and adolescents aged 6 to 18 years.

2. What you need to know before you take Cholurso 250 mg or 500 mg film-coated tablets

Do not take Cholurso:
– if you are allergic to bile acids like ursodeoxycholic acid or any of the other ingredients of this medicine (listed in section 6);
– if you are allergic to peanut or soya, because Cholurso contains soya lecithin;
– if your gall bladder does not work properly;
– if you have gallstones that are visible on an x-ray;
– if you have acute inflammation of the gall bladder or biliary tract;
– if you have an obstruction of the biliary tract (blockage of the common bile duct or a cystic duct);
– if you suffer from frequent cramp-like pains in the upper abdomen (biliary colic);
– if you have hardening of the gallstones caused by a build-up of calcium;

– if you are a child with biliary atresia and have poor bile flow, even after surgery.

Ask your doctor about any of the conditions mentioned above. You should also ask if you have previously had any of these conditions or if you are unsure whether you have any of them.

Warning and precautions
Talk to your doctor, pharmacist or nurse before taking Cholurso.
Cholurso must be used under medical supervision.
Your doctor should test your liver function regularly every 4 weeks for the first 3 months of treatment. After this time, it should be monitored at 3 month intervals.
If you are taking Cholurso for dissolution of gallstones, you should use an effective non-hormonal method of contraception, since hormonal contraceptives may increase biliary lithiasis (see "Other medicines and Cholurso" and "Pregnancy, breast-feeding and fertility").
Inform your doctor immediately if you have diarrhoea as this may require a reduction in the dose or stopping the treatment.
Colestyramine, charcoal, colestipol (to lower blood lipids) or antacids containing aluminium hydroxide or smectite (aluminium oxide) should not be used simultaneously with Cholurso (see other medicines and Cholurso).

Other medicines and Cholurso
Tell your doctor, pharmacist or nurse if you are taking, have recently taken or might take any other medicines, even if they are obtainable without a prescription. Treatment with Cholurso may still be allowed. Your doctor will know what is right for you.

A **reduction in the effects** of the following medicines is possible when taking Cholurso:
– colestyramine, charcoal, colestipol (to lower blood lipids) or antacids containing aluminium hydroxide or smectite (aluminium oxide). If you must take medicines that contain any of these ingredients, you should take these at least two hours before or after Cholurso.
– ciprofloxacin and dapsone (antibiotics), nitrendipine (used to treat high blood pressure). It may be necessary for your doctor to change the dose of these medicines.

An **increase in the effects** of the following medicines is possible when taking Cholurso:
– ciclosporin (to reduce the activity of the immune system). If you are being treated with ciclosporin, your doctor should check the amount of ciclosporin in your blood. Your doctor will adjust its dose, if necessary.

Inform your doctor if you are taking any blood cholesterol lowering agents such as clofibrate or medicines that contain oestrogen (estrogen), especially if you are taking Cholurso for the dissolution of gallstones, as they may stimulate the formation of gallstones.

Pregnancy, breast-feeding and fertility
If you are pregnant or breast-feeding, think you may be pregnant or are planning to have a baby, ask your doctor or pharmacist for advice before taking this medicine.
– You should not take this medicine during pregnancy unless your doctor thinks it is absolutely necessary. Use of Cholurso during the first three months of pregnancy may affect the foetus.
– Check that you are not pregnant before taking this medicine.
– Use a reliable method of contraception – non-hormonal contraceptives (barrier methods) or low-oestrogen oral contraceptives are recommended. If you are taking this medicine for dissolution of gallstones, only use non-hormonal contraceptives, as hormonal oral contraceptives may stimulate the formation of gallstones.
– Do not take this medicine if you are breast-feeding as the active ingredient in this medicine may pass into breast milk. If treatment with Cholurso is necessary, then stop breast-feeding.
– The data available so far does not suggest any effect on fertility from this treatment.

Driving and using machines

No particular precautions are necessary.

Important information about some of the ingredients of Cholurso
Cholurso contains soya lecithin. If you are allergic to peanut or soya, do not use this medicinal product.
This medicine contains less than 1 mmol sodium (23 mg) per tablet, that is to say essentially 'sodium-free'.

3. How to take Cholurso 250 mg or 500 mg film-coated tablets

Always take this medicine exactly as your doctor or pharmacist has told you. Check with your doctor or pharmacist if you are not sure.
The tablet of Cholurso 500 mg can be divided into equal doses.
Swallow the tablets with a drink of water or other liquid. Do not crush or chew the tablets.
Take the tablets regularly.
The daily dose below serves as an example of how you can take the tablets.

<u>Use in patients with damage to liver tissue by impaired bile flow (Primary Biliary Cholangitis)</u>
Dosage
For Cholurso 250 mg film-coated tablets
Your doctor will determine your dose depending on your body weight. During the first 3 months of treatment, you should take 3-7 tablets in divided doses throughout the day at mealtime.
As the liver function improves, the total daily dose can be taken once, in the evening.

Primary Biliary Cholangitis Stage I-III				
Daily dose (total number of tablets)	**First 3 months** (how many tablets to take throughout the day)			**Subsequently**
	Morning	**Midday**	**Evening**	**Evening (once daily)**
3 tablets	1	1	1	3
4 tablets	1	1	2	4
5 tablets	1	2	2	5
6 tablets	2	2	2	6
7 tablets	2	2	3	7

Primary Biliary Cholangitis Stage IV		
Daily dose (total number of tablets)	**How many tablets to take throughout the day**	
	Morning	**Evening**
2 tablets	1	1
3 tablets	1	2

If you do not experience any problems at this dose (after blood tests and/or according to an evaluation), your doctor will prescribe you a higher dose (dosage in accordance with the treatment of stage I-III).

For Cholurso 500 mg film-coated tablets
Your doctor will determine your dose depending on your body weight. During the first 3 months of treatment, you should take 1½-3½ tablets in divided doses throughout the day at mealtime.
As the liver function improves, the total daily dose can be taken once, in the evening.

Primary Biliary Cholangitis Stage I-III				
Daily dose (total number of tablets)	**First 3 months** (how many tablets to take throughout the day)			**Subsequently**
	Morning	**Midday**	**Evening**	**Evening (once daily)**
1½ tablet	½	½	½	1½
2 tablets	½	½	1	2
2½ tablets	½	1	1	2½
3 tablets	1	1	1	3
3½ tablets	1	1	1½	3½

Primary Biliary Cholangitis Stage IV		
Daily dose (total number of tablets)	**How many tablets to take throughout the day**	
	Morning	**Evening**
1 tablet	½	½
1½ tablet	½	1

If you do not experience any problems at this dose (after blood tests and/or according to an evaluation), your doctor will prescribe you a higher dose (dosage in accordance with the treatment of stage I-III).

Duration of treatment
Your doctor will determine the duration of treatment. It may be necessary to get your blood checked regularly by the laboratory. Cholurso may be continued indefinitely in cases of primary biliary cholangitis.

Note:
In patients with primary biliary cholangitis, the symptoms may worsen at the start of treatment, for example the itching may increase. This only occurs in rare cases. If this happens, therapy can be continued with a lower daily dose of Cholurso. Each week, your doctor will then gradually increase the daily dose, until you reach the required dose.

Use in patients with gallstones
Dosage
The recommended dose is approximately 10 mg ursodeoxycholic acid per kg body weight per day, taken as follows:

Patients with gallstones		
Body weight (kg)	**How many tablets to take in the evening before bedtime for**	
	Cholurso 250 mg film-coated tablets	**Cholurso 500 mg film-coated tablets**
Up to 60 kg	2 tablets	1 tablet
61-80 kg	3 tablets	1½ tablets
81-100 kg	4 tablets	2 tablets
More than 100 kg	5 tablets	2½ tablets

Duration of treatment
It generally takes 6-24 months to dissolve gallstones. The duration of your treatment depends on the size of the existing gallstones at the beginning of the treatment. Even if your symptoms have disappeared, you should continue with the treatment. Stopping treatment may result in the extension of

the total treatment time. After the gallstones have been dissolved, the treatment should be continued for 3-4 months. If there is no reduction in the size of the gallstones after 12 months, therapy should be stopped.

Every 6 months, your doctor should check whether the treatment is working. At each of these follow-up examinations, it should be checked whether a build-up of calcium causing hardening of the stones has occurred since the last time. If this happens, your doctor will stop the treatment.

If you feel that the effect of Cholurso is too strong or too weak, talk to your doctor or pharmacist.

Use in children and adolescents (6 to 18 years) for the treatment of liver disease associated with cystic fibrosis

Dosage

The recommended daily dose is 20 mg/kg of body weight, divided into 2-3 doses. Your doctor may want to increase the dose further to 30 mg per kg body weight daily if necessary.

For Cholurso 250 mg film-coated tablets

Body weight (kg)	Daily dose (mg/kg of body weight)	Cholurso 250 mg film-coated tablets		
		Morning	Midday	Evening
20 -29 kg	17-25	1	--	1
30 – 39 kg	19-25	1	1	1
40 – 49 kg	20-25	1	1	2
50 – 59 kg	21-25	1	2	2
60 – 69 kg	22-25	2	2	2
70 – 79 kg	22-25	2	2	3
80 – 89 kg	22-25	2	3	3
90 – 99 kg	23-25	3	3	3
100 – 109 kg	23-25	3	3	4
More than 110 kg		3	4	4

For Cholurso 500 mg film-coated tablets

Body weight (kg)	Daily dose (mg/kg of body weight)	Cholurso 500 mg film-coated tablets		
		Morning	Midday	Evening
20 -29 kg	17-25	½	--	½
30 – 39 kg	19-25	½	½	½
40 – 49 kg	20-25	½	½	1
50 – 59 kg	21-25	½	1	1
60 – 69 kg	22-25	1	1	1
70 – 79 kg	22-25	1	1	1½
80 – 89 kg	22-25	1	1½	1½
90 – 99 kg	23-25	1½	1½	1½
100 – 109 kg	23-25	1½	1½	2
More than 110 kg		1½	2	2

If you feel that the effect of Cholurso is too strong or too weak, please talk to your doctor or pharmacist.

The administration of Cholurso film-coated tablets is based on body weight and the medical condition. If the patient cannot swallow tablets or has a bodyweight below 47 kg, other pharmaceutical forms with ursodeoxycholic acid (suspension) should be checked for availability.

If you take more Cholurso than you should
If you or anyone else take too many film-coated tablets, seek immediate medical attention.

If you forget to take Cholurso
Do not take a double dose to make up for a forgotten dose.

If you stop taking Cholurso
Always speak to your doctor before you decide to interrupt treatment with Cholurso or to stop your treatment early.
If you have any further questions on the use of this medicine, ask your doctor, pharmacist or nurse.

4. Possible side effects

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

Contact your doctor immediately if you experience any of the following symptoms after taking Cholurso:

Common side effects (may affect up to 1 in 10 people):
– soft, loose stools or diarrhoea. Inform your doctor immediately if you have persistent diarrhoea, as this may require a reduction in the dose of your medicine. If you do suffer from diarrhoea, make sure you drink enough liquids to replace your fluid and salt balance.

Diarrhoea may also occur as a result of overdose.

Very rare side effects (may affect up to 1 in 10,000 people):
– during the treatment of primary biliary cholangitis: severe right-sided upper abdominal pain, severe worsening of liver scarring - this partially improves after treatment is stopped;
– hardening of gallstones due to build up of calcium. There are no additional symptoms of this but it will show up in tests;
– nettle rash (urticaria).

Not known (frequency cannot be estimated from the available data):
– vomiting;
– in patients with cirrhosis, exacerbation (increase in severity) of pruritus (itching) at the beginning of the treatment cannot be completely ruled out;
– in patients with stage IV primary biliary cholangitis, there may be an increase in the concentration of certain enzymes (alkaline phosphates, gamma-glutamyltransferase) and bilirubin;
- Jaundice.

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 Cholurso 250 mg or 500 mg film-coated tablets

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 blister label and carton after 'EXP'. The expiry date refers to the last day of that month.

This medicinal product does not require any special storage conditions.

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 protect the environment.

6. Contents of the pack and other information

What Cholurso 250 mg or 500 mg film-coated tablets contain

- The active substance is ursodeoxycholic acid.

For Cholurso 250 mg film-coated tablets
Each film-coated tablet contains 250 mg ursodeoxycholic acid.

For Cholurso 500 mg film-coated tablets
Each film-coated tablet contains 500 mg ursodeoxycholic acid.

- The other ingredients are:
Core
Maize starch, sodium laurilsulfate, povidone K30 (E1201), anhydrous colloidal silica, magnesium stearate.
Film-coat
Lecithin (Soya) (E322), macrogol 3350 (E1521), polyvinyl alcohol (E1203), talc (E553b), titanium dioxide (E171).

What CHOLURSO 250 mg, film-coated tablets look like and contents of the pack

Cholurso 250 mg film-coated tablets are white, round and biconvex.
Pack size: 20, 30, 50, 60 or 100 tablets in blister packs (PVC / PVDC / Aluminium).
Not all pack sizes may be marketed.

What CHOLURSO 500 mg, film-coated tablets look like and contents of the pack

Cholurso 500 mg film-coated tablets are white and oblong with a score line on each side.
The tablet can be divided into equal doses.
Pack size: 20, 30, 50, 60 or 100 tablets in blister packs (PVC / PVDC / Aluminium).
Not all pack sizes may be marketed.

Marketing Authorisation Holder
Laboratoires MAYOLY SPINDLER
6, avenue de l'Europe
78400 Chatou
France

Manufacturer
CENEXI
52, Rue Marcel et Jacques Gaucher
94120 Fontenay sous Bois

FRANCE

This medicine is authorised in the Member States of the European Economic Area and in the United Kingdom (Northern Ireland) under the following names:
Belgium, France, Germany, Hungary, Italy: Dozurso
Ireland, United Kingdom (Northern Ireland): Cholurso.

Distributed in the UK by:
MAYOLY UK Limited

This leaflet was last revised in 10/2021.