Package leaflet: Information for the user

Ropivacaine Altan 2 mg/ml solution for infusion

Ropivacaine hydrochloride

Read all of this leaflet carefully before you start using 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 Ropivacaine Altan is and what it is used for
- 2. What you need to know before you use Ropivacaine Altan
- 3. How to use Ropivacaine Altan
- 4. Possible side effects
- 5. How to store Ropivacaine Altan
- 6. Contents of the pack and other information

1. What Ropivacaine Altan is and what it is used for

Ropivacaine Altan contains ropivacaine hydrochloride which belongs to a group of medicines called local anaesthetics of the amide type.

Ropivacaine Altan is used in adults and children of all ages for acute pain management. It numbs (anaesthetises) parts of the body e.g. after surgery.

2. What you need to know before you use Ropivacaine Altan

Do not use Ropivacaine Altan

- If you are allergic to ropivacaine, other local anaesthetics of the amide type (such as lidocaine and bupivacaine) or any of the other ingredients of this medicine (listed in section 6).
- In case of intravenous regional anaesthesia (injection into a blood vessel to numb a specific area of your body), or obstretric paracervical anaesthesia (injection into the neck of the womb to relieve pain during childbirth).
- If you have been told that you have decreased volume of blood (hypovolaemia) as you can develop a decrease in the blood pressure.

If you are not sure if any of the above apply to you, talk to your doctor before you are given Ropivacaine Altan.

Warnings and precautions

Talk to your doctor, pharmacist or nurse before using Ropivacaine Altan:

- if you have heart, liver or kidney problems. Your doctor may need to adjust the dose of Ropivacaine.

- if you have ever been told that you or anyone in your family has a rare disease of the blood pigment called "porphyria". Your doctor may need to give you a different anaesthetic medicine.
- about any diseases or medical conditions that you have.

Children and adolescents

Use of Ropivacaine Altan in premature infants has not been studied.

Take special care with Ropivacaine Altan:

- in newborn children as they are more susceptible to Ropivacaine Altan.
- in children up to and including 12 years as some injections in order to numb parts of the body are not established in younger children.

Other medicines and Ropivacaine Altan

Tell your doctor if you are taking, have recently taken or might take any other medicines. This includes medicines that you buy without a prescription and herbal medicines. This is because Ropivacaine Altan can affect the way some medicines work and some medicines can have an effect on Ropivacaine Altan.

In particular, tell your doctor if you are taking any of the following medicines:

- Other local anaesthetics.
- Strong pain killers, such as morphine or codeine.
- Drugs used to treat an uneven heart beat (arrhythmia), such as lidocaine and mexiletine.

Your doctor needs to know about these medicines to be able to work out the correct dose of Ropivacaine Altan for you.

Also tell your doctor if you are taking any of the following medicines:

- Medicines for depression (such as fluvoxamine)
- Antibiotics to treat infections caused by bacteria (such as enoxacin).

This is because your body takes longer to get rid of Ropivacaine Altan if you are taking these medicines. If you are taking either of these medicines, prolonged use of Ropivacaine Altan should be avoided.

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, pharmacist or nurse for advice before this medicine is given to you.

Ropivacaine Altan should not be used during pregnancy and breast-feeding unless at the discretion of the doctor it is clearly necessary.

It is not known if ropivacaine hydrochloride affects pregnancy or passes into breast milk.

Driving and using machines

Ropivacaine Altan may make you feel sleepy and affect the speed of your reactions. After you have been given Ropivacaine Altan, you should not drive or use tools or machines until the next day.

Ropivacaine Altan contains sodium

This medicine contains 3.34 mg sodium (main component of cooking/table salt) in each ml. This is equivalent to 0.17% of the recommended maximum daily dietary intake of sodium for an adult.

3. How to use Ropivacaine Altan

Method of administration

Ropivacaine Altan will be given to you by a doctor or, occasionally, by a nurse under medical supervision.

Doses

The dose that your doctor gives you will depend on the type of pain relief that you need. It will also depend on your body size, age, and physical condition.

Ropivacaine Altan will be given to you as an infusion. The part of the body where it will be used will depend on why you are being given Ropivacaine Altan. Your doctor will give you Ropivacaine Altan in one of the following places:

- The part of the body that needs to be numbed.
- Near to the part of the body that needs to be numbed.
- In an area away from the part of the body that needs to be numbed. This is the case if you are given an epidural injection or infusion (into the area around the spinal cord).

When Ropivacaine Altan is used in one of these ways, it stops the nerves from being able to pass pain messages to the brain. It will stop you feeling pain, heat or cold in where it is used however you may still have other feelings like pressure or touch.

Your doctor will know the correct way to give you this medicine.

If you have been given more Ropivacaine Altan than you should

Serious side effects from getting too much Ropivacaine Altan need special treatment and the doctor treating you is trained to deal with these situations. The first signs of being given too much Ropivacaine Altan are usually as follows:

- Feeling dizzy or light-headed.
- Numbness of the lips and around the mouth.
- Numbness of the tongue.
- Hearing problems.
- Problems with your sight (vision).

To reduce the risk of serious side effects, your doctor will stop giving you Ropivacaine Altan as soon as these signs appear. This means that if any of these happen to you, or you think you have received too much Ropivacaine Altan, **tell your doctor immediately**.

More serious side effects from being given too much Ropivacaine Altan include problems with your speech, twitching of your muscles, tremors, trembling, fits (seizures), and loss of consciousness.

If you experience any of these symptoms or you think you may have received too much Ropivacaine Altan tell to your doctor or healthcare personnel immediately.

In case of acute toxicity, healthcare personnel will take the appropriate corrective measures immediately.

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.

Important side effects to look out for:

Sudden life-threatening allergic reactions (such as anaphylaxis, including anaphylactic shock) are rare, affecting 1 to 10 users in 10,000. Possible symptoms include sudden onset of rash, itching or

lumpy rash (hives); swelling of the face, lips, tongue or other parts of the body; shortness of breath, wheezing or difficulty breathing; a feeling of loss of consciousness. If you think that Ropivacaine Altan is causing an allergic reaction, tell your doctor immediately.

Other possible side effects:

Very common (affects more than 1 patients in 10)

- Low blood pressure (hypotension). This might make you feel dizzy or light-headed.
- Feeling sick (nausea).

Common: (affects 1 to 10 patients in 100)

- Headache.
- Tingling or abnormal sensation of the sensitivity (parestesia).
- Feeling dizzy.
- Slow or fast heart beat (bradycardia, tachycardia).
- High blood pressure (hypertension).
- Being sick (vomiting).
- Difficulty in passing urine (urinary retention).
- High temperature (fever) or shivering (chills).
- Back pain.

Uncommon (affects 1 to 10 patients in 1,000)

- Anxiety.
- Some symptoms can happen if the injection was given into a blood vessel by mistake, or if you have been given too much Ropivacaine Altan (see also section 3 'If you have been given more Ropivacaine Altan than you should' above). These include fits (seizures), feeling dizzy or light-headed, numbness of the lips and around the mouth, numbness of the tongue, hearing problems, problems with your sight (vision), problems with your speech (dysarthria), stiff muscles and trembling.
- Decrease in the sense of touch (hypoestesia).
- Fainting (syncope).
- Difficulty breathing (dyspnoea).
- Low body temperature (hypothermia).

Rare (affects 1 to 10 patients in 10,000)

- Heart attack (cardic arrest).
- Uneven heart beat (arrhythmias).

Not known (frequency cannot be estimated from the available data) Horner's syndrome.

Other possible side effects include:

- Numbness, due to nerve irritation caused by the needle or the injection. This does not usually last for long.
- Involuntary muscle movements (dyskinesia).

Possible side effects observed with other local anaesthetics that may also been produced by Ropivacaine Altan include:

- Damaged nerves. Rarely (affecting 1 to 10 users in 10,000) this may cause permanent problems.
- If too much Ropivacaine Altan is given into the spinal fluid, the whole body may become numbed (anaesthetised).
- Receiving an epidural injection (injection into the space around your spinal nerves) may
 cause a disruption of a nerve pathway from the brain to the head and neck, especially in
 pregnant women, which may sometimes result in a condition called Horner's syndrome.
 This is characterized by decrease in the size of the pupil, drooping of the upper eyelid,
 and failure of the sweat glands to make sweat. It will resolve on its own when the
 treatment is stopped.

Children

In children, the side effects are the same as in adults except for low blood pressure which happens less often in children (affecting 1 to 10 children in 100) and being sick which happens more often in children (affecting more than 1 in 10 children).

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 Yellow Card Scheme, Website: www.mhra.gov.uk/yellowcard. By reporting side effects you can help provide more information on the safety of this medicine.

5. How to store Ropivacaine Altan

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

Do not freeze.

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

From a microbiological point of view, unless the method of opening precludes the risk of microbial 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 throw away any medicines via wastewater or household waste. Any unused medicinal product or waste material should be disposed of in accordance with local requirements.

6. Contents of the pack and other information

What Ropivacaine Altan contains

-The active substance is ropivacaine hydrochloride.

Each 100 ml bag contains 200 mg ropivacaine hydrochloride.

Each 200 ml bag contains 400 mg ropivacaine hydrochloride.

-The other ingredients (excipients) are: sodium chloride, sodium hydroxide (to adjust pH), hydrochloric acid (to adjust pH) and water for injections.

What Ropivacaine Altan looks like and contents of the pack

Ropivacaine Altan is a clear, colourless solution for infusion.

Each container contains 5 bags of 100 ml or 5 bags of 200 ml with non-sterile surface.

Although the solution is sterile, the protocols related to the use of product should take into account that the outside of the bag is not sterile in his overwrapping. The removable overwrapping aims at photoprotection and allows a mechanical and physical protection of the sterile solution.

Not all pack sizes may be marketed.

Marketing Authorisation Holder and Manufacturer

Marketing Authorisation Holder
Altan Pharmaceuticals S.A.
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Las Rozas, 28230 Madrid, Spain

Manufacturer

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The following information is intended for healthcare professionals only:

Posology

Adults and adolescents above 12 years of age:

The following table is a guide to dosage for the more commonly used blocks. The smallest dose required to produce an effective block should be used. The clinician's experience and knowledge of the patient's physical status are of importance when deciding the dose.

	Conc.	Volume	Dose	Onset	Duration
	mg/ml	ml	mg	minutes	hours
ACUTE PAIN MANAGEMENT			·		
Lumbar Epidural Administration					
Continuous infusion e.g. labour pain	2.0	6–10 ml/h	12-20 mg/h	n/a ⁽¹⁾	n/a ⁽¹⁾
Postoperative pain management	2.0	6–14 ml/h	12-28 mg/h	n/a ⁽¹⁾	n/a ⁽¹⁾
Thoracic Epidural Administration					
Continuous infusion (postoperative pain management)	2.0	6–14 ml/h	12-28 mg/h	n/a ⁽¹⁾	n/a ⁽¹⁾
Peripheral nerve block (Femoral or interscalene block)					
Continuous infusion or intermittent injections (e.g. postoperative pain management)	2.0	5–10 ml/h	10-20 mg/h	n/a ⁽¹⁾	n/a ⁽¹⁾

The doses in the table are those considered to be necessary to produce a successful block and should be regarded as guidelines for use in adults. Individual variations in onset and duration occur. The figures in the column 'Dose' reflect the expected average dose range needed. Standard textbooks should be consulted for both factors affecting specific block techniques and individual patient requirements.

(1) n/a = not applicable.

Method of administration

Perineural and epidural use.

Careful aspiration before and during injection is recommended to prevent intravascular injection. When a large dose is to be injected, a test dose of 3–5 ml lidocaine (lignocaine) with adrenaline (epinephrine) is recommended. An inadvertent intravascular injection may be recognised by a temporary increase in heart rate and an accidental intrathecal injection by signs of a spinal block with apnea and hypotension.

Aspiration should be performed prior to and during administration of the main dose, which should be injected slowly or in incremental doses, at a rate of 25–50 mg/min, while closely observing the patient's vital functions and maintaining verbal contact. If toxic symptoms occur, the injection should be stopped immediately.

When prolonged blocks are used, either through continuous infusion or through repeated bolus administration, the risks of reaching a toxic plasma concentration or inducing local neural injury must be considered. Cumulative doses up to 675 mg ropivacaine for surgery and postoperative analgesia administered over 24 hours were well tolerated in adults, as were postoperative continuous epidural infusions at rates up to 28 mg/hour for 72 hours. In a limited number of patients, higher doses of up to 800 mg/day have been administered with relatively few adverse reactions.

For treatment of postoperative pain, the following technique can be recommended: Unless preoperatively instituted, an epidural block with a concentration of 7.5 mg/ml is induced via an epidural catheter. Analgesia is maintained with Ropivacaine Altan 2 mg/ml infusion. Infusion rates of 6–14 ml (12–28 mg) per hour provide adequate analgesia with only slight and non-progressive motor block in most cases of moderate to severe postoperative pain. The maximum duration of epidural block is 3 days. However, close monitoring of analgesic effect should be performed in order to remove the catheter as soon as the pain condition allows it. With this technique a significant reduction in the need for opioids has been observed.

In clinical studies an epidural infusion of Ropivacaine 2 mg/ml alone or mixed with fentanyl 1-4 µg/ml has been given for postoperative pain management for up to 72 hours. The combination of Ropivacaine and fentanyl provided improved pain relief but caused opioid side effects. The combination of Ropivacaine and fentanyl has been investigated only for Ropivacaine 2 mg/ml.

When prolonged peripheral nerve blocks are applied, either through continuous infusion or through repeated injections, the risks of reaching a toxic plasma concentration or inducing local neural injury must be considered. In clinical studies, femoral nerve block was established with 300 mg Ropivacaine 7.5 mg/ml and interscalene block with 225 mg Ropivacaine 7.5 mg/ml, respectively, before surgery. Analgesia was then maintained with Ropivacaine 2 mg/ml. Infusion rates or intermittent injections of 10–20 mg per hour for 48 hours provided adequate analgesia and were well tolerated.

Epidural Block: Paediatric patients from 0 up to and including 12 years of age:

	Conc.	Volume	Dose
	mg/ml	ml/kg	mg/kg
ACUTE PAIN MANAGEMENT (per- and postoperative)			
Continuous Epidural Infusion			

In children with a body weight up to 25 kg			
0 up to 6 months Infusion up to 72 hours	2.0	0.1 ml/kg/h	0.2 mg/kg/h
6 up to 12 months Infusion up to 72 hours	2.0	0.2 ml/kg/h	0.4 mg/kg/h
1 to 12 years Infusion up to 72 hours	2.0	0.2 ml/kg/h	0.4 mg/kg/h

The dose in the table should be regarded as guidelines for use in paediatrics. Individual variations occur. In children with a high body weight, a gradual reduction of the dosage is often necessary and should be based on the ideal body weight. The volume for single caudal epidural block and the volume for epidural bolus doses should not exceed 25 ml in any patient. Standard textbooks should be consulted for factors affecting specific block techniques and for individual patient requirements.

Peripheral nerve blocks: Infants and children aged 1-12 years:

	Concentration mg/ml	Volume ml/kg	Dose mg/kg
ACUTE PAIN MANAGEMENT (per- and postoperative)	-		
Continuous infusion for peripheral nerve block in children 1 to 12 years.	2.0	0.1-0.3 ml/kg/h	0.2-0.6 ml/kg/h
Infusion up to 72 hours			

The dose in the table should be regarded as guidelines for use in paediatrics. Individual variations occur. In children with a high body weight a gradual reduction of the dosage is often necessary and should be based on the ideal body weight. Standard textbooks should be consulted for factors affecting specific block techniques and for individual patient requirements.

The doses for peripheral block in infants and children provide guidelines for use in children without severe disease. More conservative doses and close monitoring are recommended for children with severe disease.

The use of ropivacaine in premature children has not been documented.

Method of administration

Perineural and epidural use.

Careful aspiration before and during injection is recommended to prevent intravascular injection. The patient's vital functions should be observed closely during the injection. If toxic symptoms occur, the injection should be stopped immediately.

A single caudal epidural injection of ropivacaine 2 mg/ml produces adequate postoperative analgesia below T12 in the majority of patients when a dose of 2 mg/kg is used in a volume of 1 ml/kg. The volume of the caudal epidural injection may be adjusted to achieve a different distribution of sensory block, as recommended in standard textbooks. In children above 4 years of age, doses up to 3 mg/kg of a concentration of ropivacaine 3 mg/ml have been studied. However, this concentration is associated with a higher incidence of motor block.

Fractionation of the calculated local anaesthetic dose is recommended, whatever route of administration.

Incompatibilities

In the absence of compatibility studies, this medicinal product must not be mixed with other medicinal products.

In alkaline solutions precipitation may occur as ropivacaine shows poor solubility at pH > 6.0.

Remove the overwrapping immediately before administration.

Ropivacaine Altan are preservative-free and are intended for single use only. Discard any unused solution.

Prior to administration the solution should be visually inspected. Do not use unless the solution is clear and colourless and the container is not damaged.

The intact container must not be re-autoclaved.

Ropivacaine Altan solution for infusion in infusion bags is chemically and physically compatible with the following drugs:

Concentration of ROPIVACAINE: 1–2 mg/ml		
Additive	Concentration*	
Fentanyl citrate	1–10 microgram/ml	
Sufentanil citrate	0.4–4 microgram/ml	
Morphine sulphate	20–100 microgram/ml	
Clonidine hydrochloride	5–50 microgram/ml	

^{*} The concentration ranges stated in the table are wider than those used in clinical practice. Epidural infusions of Ropivacaine Altan/sufentanil citrate, Ropivacaine Altan/morphine sulphate and Ropivacaine Altan/clonidine hydrochloride have not been evaluated in clinical studies.

The mixtures are chemically and physically stable for 30 days at 20 to 30° C. From a microbiological point of view, the mixtures should be used immediately. If not used immediately, in-use storage times and conditions prior to use are the responsibility of the user and would normally not be longer than 24 hours at 2 to 8° C.

Other presentations:

Ropivacaine Altan 2 mg/ml solution for injection: 10 ml ampoules Ropivacaine Altan 7.5 mg/ml solution for injection: 10 ml ampoules Ropivacaine Altan 10 mg/ml solution for injection: 10 ml ampoules