Package leaflet: Information for the user

Bupeaze 35 micrograms/h Transdermal Patches Bupeaze 52.5 micrograms/h Transdermal Patches Bupeaze 70 micrograms/h Transdermal Patches Buprenorphine

Important things you need to know about Bupeaze

- These patches contain a strong pain killer.
- Ensure that old patches are removed before applying a new one.
- Patches must not be cut.
- Do not expose the patches to a heat source (such as a hot water bottle).
- Do not soak in a hot bath or take a hot shower whilst wearing a patch.
- If you develop a fever tell your doctor immediately.
- Follow the dosage instructions carefully and only change your patch twice a week at the chosen times.
- If your breathing becomes shallow and weak take the patch off and seek medical help.

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 or pharmacist.
- 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 or pharmacist. This includes any possible side effects not listed in this leaflet. See section 4.

What is in this leaflet:

- 1. What Bupeaze is and what it is used for
- 2. What you need to know before you use Bupeaze
- **3.** How to use Bupeaze
- 4. Possible side effects
- 5. How to store Bupeaze
- 6. Contents of the pack and other information

1. What Bupeaze is and what it is used for

The active substance of Bupeaze is buprenorphine.

Bupeaze is an analgesic (a pain-relieving medicine) intended to relieve moderate to severe cancer pain and severe pain that has not responded to other types of painkillers. Bupeaze acts through the skin. When the transdermal patch is applied to the skin, the active substance buprenorphine passes through the skin into the blood. Buprenorphine is an opioid (strong pain reliever), which reduces pain by acting on the central nervous system (specific nerve cells in the spinal cord and in the brain). The effect of the transdermal patch lasts for up to four days. Bupeaze is not suitable for the treatment of acute (short-lasting) pain.

2. What you need to know before you use Bupeaze

Do not use Bupeaze

- if you are allergic to buprenorphine or any of the other ingredients of this medicine (listed in section 6)
- if you are dependent on strong pain relievers (opioids)
- if you suffer from a disease in which you have or may have great difficulty breathing
- if you are taking monoamine oxidase (MAO) inhibitors (certain medicines used to treat depression) or you have taken this type of medicine in the last two weeks (see "Other medicines and Bupeaze")
- if you suffer from myasthenia gravis (a certain type of severe muscle weakness)

- if you suffer from delirium tremens (confusion and trembling caused by abstinence from alcohol following habitual excessive drinking or occurring during an episode of heavy alcohol consumption)
- if you are pregnant
- if you have pain which lasts only for a short period or pain after having an operation because of the increased risk of dependence and developing serious breathing problems.

Bupeaze must not be used to treat withdrawal symptoms in drug-dependent persons.

Warnings and precautions

Talk to your doctor or pharmacist before using Bupeaze

- if you have recently drunk a lot of alcohol
- if you suffer from seizures or convulsions (fits)
- if your consciousness is disturbed (feeling light-headed or faint) for an unknown reason
- if you are in a state of shock (cold sweat might be a sign of it)
- if the pressure in your skull is increased (for instance after head injury or in brain disease), and artificial respiration is not possible
- if you have difficulty breathing or are taking other medicines that may make you breathe more slowly or weakly (see "Other medicines and Bupeaze")
- if your liver does not work properly
- if you have depression or other conditions that are treated with antidepressants The use of these medicines together with Bupeaze can lead to serotonin syndrome, a potentially life-threatening condition (see "Other medicines and Bupeaze")
- if you are going to have an operation, or have just had an operation, please tell the doctor at the hospital if you are currently treated with Bupeaze transdermal patch to discuss your pain management.

Tolerance, dependence, and addiction

This medicine contains buprenorphine which is an opioid medicine. Repeated use of opioids can result in the drug being less effective (you become accustomed to it, known as tolerance). Repeated use of Bupeaze can also lead to dependence, abuse, and addiction, which may result in life-threatening overdose. The risk of these side effects can increase with a higher dose and longer duration of use.

Dependence or addiction can make you feel that you are no longer in control of how much medicine you need to take or how often you need to take it.

The risk of becoming dependent or addicted varies from person to person. You may have a greater risk of becoming dependent on or addicted to Bupeaze if:

- You or anyone in your family have ever abused or been dependent on alcohol, prescription medicines or illegal drugs ("addiction").
- You are a smoker.
- You have ever had problems with your mood (depression, anxiety, or a personality disorder) or have been treated by a psychiatrist for other mental illnesses.

If you notice any of the following signs whilst taking Bupeaze, it could be a sign that you have become dependent or addicted:

- You need to take the medicine for longer than advised by your doctor
- You need to take more than the recommended dose
- You might feel that you need to carry on taking your medicine, even when it doesn't help to relieve your pain.
- You are using the medicine for reasons other than prescribed, for instance, 'to stay calm' or 'help you sleep'
- You have made repeated, unsuccessful attempts to quit or control the use of the medicine
- When you stop taking the medicine you feel unwell, and you feel better once taking the medicine again ('withdrawal effects')

If you notice any of these signs, speak to your doctor to discuss the best treatment pathway for you, including when it is appropriate to stop and how to stop safely (see section 3. If you stop taking Bupeaze.

Also, please be aware of the following precautions:

• Fever and external heat may lead to larger quantities of buprenorphine in the blood than normal. Also, external heat may prevent the transdermal patch from sticking properly. Therefore, do not expose yourself to external heat (e.g. sauna, infra-red lamps, electric blankets, hot water bottles) and consult your doctor if you have fever.

Athletes should be aware that this medicine may cause a positive reaction to sports doping control tests.

Sleep-related breathing disorders

Bupeaze can cause sleep-related breathing disorders such as sleep apnoea (breathing pauses during sleep) and sleep related hypoxemia (low oxygen level in the blood). The symptoms can include breathing pauses during sleep, night awakening due to shortness of breath, difficulties to maintain sleep or excessive drowsiness during the day. If you or another person observe these symptoms, contact your doctor. A dose reduction may be considered by your doctor.

The risk of experiencing central sleep apnea is dependent on the dose of opioids. Your doctor may consider decreasing your total opioid dosage if you experience central sleep apnea.

Children and adolescents

Bupeaze should not be used in persons below the age of 18 years, because no experience has so far been gained in this age group.

Other medicines and Bupeaze

Tell your doctor or pharmacist if you are taking, have recently taken or might take any other medicines.

- Bupeaze must not be used together with monoamine oxidase (MAO) inhibitors (certain medicines used to treat depression), or if you have taken this type of medicine for the last 2 weeks.
- Bupeaze may make some people feel drowsy, sick, or faint or make them breathe more slowly or weakly. These side effects may be intensified if other medicines that may produce the same effects are taken at the same time. These other medicines include other strong pain relievers (opioids), certain sleeping pills, anaesthetics, and medicines used to treat certain psychological diseases such as tranquillizers, anti-depressants, and neuroleptics.
- Gapapentin or pregabalin to treat epilepsy or pain due to nerve problems (neuropathic pain).
- Concomitant use of Bupeaze and sedative medicines such as benzodiazepines or related drugs increases the risk of drowsiness, difficulties in breathing (respiratory depression), coma and may be life-threatening. Because of this, concomitant use should only be considered when other treatment options are not possible.

However if your doctor does prescribe Bupeaze together with sedative medicines the dose and duration of concomitant treatment should be limited by your doctor. Please tell your doctor about all sedative medicines you are taking, and follow your doctor's dose

recommendation closely. It could be helpful to inform friends or relatives to be aware of the signs and symptoms stated above. Contact your doctor when experiencing such symptoms.

- antidepressants such as moclobemide, tranylcypromine, citalopram, escitalopram, fluoxetine, fluvoxamine, paroxetine, sertraline, duloxetine, venlafaxine, amitriptyline, doxepine, or trimipramine. These medicines may interact with Bupeaze and you may experience symptoms such as involuntary, rhythmic contractions of muscles, including the muscles that control movement of the eye, agitation, hallucinations, coma, excessive sweating, tremor, exaggeration of reflexes, increased muscle tension, body temperature above 38°C. Contact your doctor when experiencing such symptoms.
- If Bupeaze is used together with some medicines, the effects of the transdermal patch may be increased. These medicines include e.g. certain anti-infectives/anti-fungals (e.g. containing erythromycin or ketoconazole) or HIV medicines (e.g. containing ritonavir).
- If Bupeaze is used together with other medicines, the effects of the transdermal patch may be reduced. These medicines include certain products, e.g. dexamethasone; medicines to treat epilepsy (e.g. containing carbamazepine, or phenytoin) or medicines for tuberculosis (e.g. rifampicin).

- medicines used to treat allergies, travel sickness or nausea (antihistamines or antiemetics).
- muscle relaxants
- medicines to treat Parkinson's disease.

Bupeaze with food, drink and alcohol

You should not drink alcohol while using Bupeaze. Alcohol may intensify certain side effects of the transdermal patch and you may feel unwell. Drinking grapefruit juice may intensify the effects of Bupeaze.

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 using this medicine.

There is not sufficient experience regarding the use of Bupeaze in pregnant women. Therefore, do not use Bupeaze if you are pregnant.

Buprenorphine, the active substance contained in the transdermal patch, inhibits milk formation and passes into the breast milk. Therefore, do not use Bupeaze if you are breast-feeding.

Driving and using machines

Bupeaze may make you feel dizzy or drowsy or experience blurred or double vision and affect your reactions to such an extent that you may not react adequately or quickly enough in the event of unexpected or sudden occurrences. This applies particularly

- at the beginning of treatment
- when your dose is changed
- when you switch to Bupeaze from another pain reliever
- if you also use other medicines that act on the brain
- if you drink alcohol.

If you are affected, you should not drive or operate machinery whilst using Bupeaze. This applies also at the end of treatment with Bupeaze. Do not drive or operate machinery for at least 24 hours after the patch has been removed.

Discuss with your doctor or pharmacist if you are unsure about anything.

The medicine can affect your ability to drive as it may make you sleepy or dizzy.

- Do not drive while taking this medicine until you know how it affects you.
- It is an offence to drive while you have this medicine in your body over a specified limit unless you have a defence (called the 'statutory defence').
- This defence applies when:
 - the medicine has been prescribed to treat a medical or dental problem; and
 - you have taken it according to the instructions given by the prescriber and in the information provided with the medicine.
- Please note that it is still an offence to drive if you are unfit because of the medicine (i.e. your ability to drive is being affected).

Details regarding a new driving offence concerning driving after drugs have been taken in the UK may be found here:

https://www.gov.uk/drug-driving-law

Talk to your doctor or pharmacist if you are not sure whether it is safe for you to drive while taking this medicine.

3. How to use Bupeaze

Always use this medicine exactly as your doctor has told you. Check with your doctor or pharmacist if you are not sure.

Before starting treatment and regularly during treatment, your doctor will discuss with you what you

may expect from using Bupeaze, when and how long you need to take it, when to contact your doctor, and when you need to stop it (see also, If you stop taking Bupeaze.

Bupeaze is available in three strengths: Bupeaze 35 micrograms/h Transdermal Patches, Bupeaze 52.5 micrograms/h Transdermal Patches and Bupeaze 70 micrograms/h Transdermal Patches.

The choice of which strength of Bupeaze will suit you best will be made by your doctor. During treatment your doctor may change which transdermal patch you use to a smaller or larger one if necessary.

The recommended dose is:

Adults

Unless your doctor has told you differently, attach one Bupeaze transdermal patch (as described in detail below) and change it after 4 days at the latest. For convenience of use, you can change the transdermal patch twice a week at the same days, e.g. always on Monday mornings and Thursday evenings. To help you remember when to change your transdermal patch, you should make a note on the calendar on the outer packaging. If your doctor has advised you to take other pain relievers in addition to the transdermal patch, strictly follow the doctor's instructions, otherwise you will not fully benefit from treatment with Bupeaze.

Apply/change your patch in morning of		Apply/change your patch in evening of
Monday	->	Thursday
	<-	
Tuesday	->	Friday
	<-	
Wednesday	->	Saturday
	<-	
Thursday	->	Sunday
	<-	
Friday	->	Monday
	<-	
Saturday	->	Tuesday
	<-	
Sunday	->	Wednesday
	<-	

The following table shows you when to change your patch.

Use in children and adolescents

Bupeaze should not be used in persons below the age of 18 years, because no experience has so far been gained in this age group.

Elderly patients

No dosage adjustment is needed for elderly patients.

Patients with kidney disease / dialysis patients

In patients with kidney disease and in dialysis patients, no dosage adjustment is necessary.

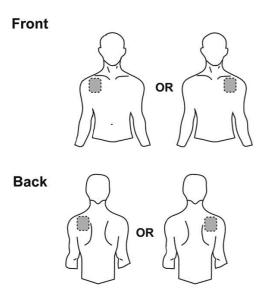
Patients with liver disease

In patients with liver disease, the intensity and duration of action of Bupeaze may be affected. If this applies to you, your doctor will check on you more closely.

Method of administration

Before applying the transdermal patch

• Choose an area of skin which is flat, clean, free from cuts or scars and hairless on your upper body, preferably on the chest below the collar-bone or on the upper part of the back (see adjacent illustrations). Call assistance if you cannot apply the transdermal patch yourself.



- If the chosen area has hairs, cut them off with a pair of scissors. Do not shave them off!
- Avoid skin which is red, irritated or has any other blemishes, for instance large scars.
- The area of skin you choose must be dry and clean. If necessary, wash it with cold or lukewarm water. Do not use soap or other detergents. After a hot bath or shower, wait until your skin is completely dry and cool. Do not apply lotion, cream or ointment to the chosen area. This might prevent your transdermal patch from sticking properly.

Applying the transdermal patch

Step 1: Each transdermal patch is sealed in a sachet. Cut the child-resistant sachet along the sealed edge with scissors. Be careful not to damage the transdermal patches. Take out the transdermal patch.

Step 2: The sticky side of the transdermal patch is covered with a transparent protective foil. Carefully peel off **half** the foil. Try not to touch the sticky part of the transdermal patch.

Step 3: Stick the transdermal patch onto the area of skin you have chosen and remove the remaining foil.



Step 4: Press the transdermal patch against your skin with the palm of your hand for about 30 to 60 seconds. Make sure that the whole transdermal patch is in contact with your skin, especially at the edges.

Step 5: Wash your hands after using the transdermal patch. Do not use any cleansing products.

Wearing the transdermal patch

You may wear the transdermal patch for up to 4 days. Provided that you have applied the transdermal patch correctly, there is little risk of it coming off. You may shower, bathe or swim while wearing it. However, do not expose the transdermal patch to extreme heat (e.g. sauna baths, infra-red lamps, electric blankets, hot water bottles).

In the unlikely event that your transdermal patch falls off before it needs changing, do not use the same transdermal patch again. Stick a new one on straight away (see "Changing the transdermal patch" below).

Changing the transdermal patch

- Take the old transdermal patch off.
- Fold it in half with the sticky side inwards.
- Throw it away carefully, out of the sight and reach of children.
- Stick a new transdermal patch on a different skin site (as described above). Wait at least one week before using the same site again.

How long will you use the patch for

Your doctor will tell you how long you may use Bupeaze. Do not stop using Bupeaze on your own account, because pain may return and you may feel unwell (see also "If you stop using Bupeaze" below).

If you have the impression that the effect of the Bupeaze transdermal patch is too weak or too strong, tell your doctor or pharmacist.

If you use more Bupeaze than you should

If this happens there may be signs of an overdose of the substance buprenorphine. An overdose may intensify the side effects of buprenorphine such as drowsiness, nausea, and vomiting. You may get pin-point pupils and breathing may become slow and weak. You may also get cardiovascular collapse.

As soon as you discover that you have used more transdermal patches than you should, remove the excess transdermal patches and talk to a doctor or pharmacist.

If you forget to use Bupeaze

If you forget an application, stick a new transdermal patch on as soon as you remember. You will then need to change your routine, e.g. if you usually apply your transdermal patches on Mondays and Thursdays, but you forget and don't stick on a new transdermal patch until Wednesday, you will need to change your transdermal patches on Wednesdays and Saturdays from then on. Make a note of the new pair of days on the calendar on the outer packaging. If you are very late changing your transdermal patch, pain may return. In this case please contact your doctor.

Never apply twice the number of transdermal patches to make up for the forgotten application!

If you stop using Bupeaze

If you interrupt or finish using Bupeaze too soon, pain may return. If you wish to stop use on account of unpleasant side effects, please consult your doctor. He/she will tell you what can be done and whether you can be treated with other medicines.

Some people may experience withdrawal-effects when they have used strong pain relievers for a long time and stop using them. The risk of having effects after you stop using Bupeaze is very low. However, if you feel agitated, anxious, nervous or shaky, if you are overactive, have difficulty sleeping or digestion problems, tell your doctor.

If you have any further questions on the use of this medicine, ask your doctor or pharmacist.

4. Possible side effects

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

If you experience swelling of the hands, feet, ankles, face, lips, mouth, or throat which may cause difficulty in swallowing or breathing, hives, fainting, yellowing of the skin and eyes (also called jaundice), remove the transdermal patch and call your doctor immediately or seek help at the casualty department of the nearest hospital. These can be symptoms of a very rare serious allergic reaction.

The following side effects have been reported:

Very common (may affect more than 1 in 10 people):

- nausea (feeling sick)
- redness, itching

Common (may affect up to 1 in 10 people):

- dizziness, headache
- shortness of breath
- vomiting, constipation
- skin changes (exanthema, generally on repeated use), sweating
- oedema (e.g. swelling of the legs), tiredness

Uncommon (may affect up to 1 in 100 people):

- confusion, sleep disorder, restlessness
- various degrees of sedation (calmness), ranging from tiredness to muzziness
- circulation disorders (such as low blood pressure or, rarely, even circulatory collapse)
- dry mouth
- rash
- difficulty in passing water, urinary retention (less urine than normal)
- weariness

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

- loss of appetite
- illusions such as hallucinations, anxiety and nightmares, reduced sex drive
- difficulties concentrating, speech disorder, muzziness, disturbed balance, abnormal skin sensations (numbness, prickling or burning sensations)
- visual disturbance, blurred vision, swollen eyelids
- hot flushes
- difficulty breathing (respiratory depression)
- heartburn
- hives
- erection difficulties
- withdrawal symptoms (see below), administration site reactions

Very rare (may affect up to 1 in 10,000 people):

- serious allergic reactions (see below)
- dependence, mood swings
- muscle twitching, taste disorders
- pin-point pupils
- ear pain
- abnormally rapid breathing, hiccups
- retching
- pustules, small blisters
- chest pain

Not known (Frequency cannot be estimated from the available data)

• dermatitis contact (skin rash with inflammation which may include burning sensation), skin discolouration

If you notice any of the side effects listed above, tell your doctor as soon as possible.

In some cases delayed allergic reactions occurred with marked signs of inflammation. In such a case you should stop using Bupeaze after you have talked to your doctor.

Some people may have withdrawal symptoms when they have used strong pain relievers for a long time and stop using them. The risk of having withdrawal effects when you stop using Bupeaze is low. However, if you feel agitated, anxious, nervous or shaky, if you are overactive, have difficulty sleeping or digestion problems, tell your doctor.

Reporting of side effects

If you get any side effects, talk to your doctor or pharmacist. This includes any possible side effects not listed in this leaflet. You can also report side effects directly via the Yellow Card Scheme website 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 Bupeaze

- Keep this medicine out of the sight and reach of children.
- Store this medicine in a safe and secure place, where people cannot access it. It can cause serious harm and be fatal to people who may take this medicine by accident, or intentionally when it has not been prescribed for them.
- Do not use this medicine after the expiry date which is stated on the carton and sachet after EXP. The expiry date refers to the last day of that month.
- This medicine does not require any special storage conditions.
- After removing a patch, fold it in half with the sticky sides inwards and press them together. Return the used patch to its sachet and carefully dispose the transdermal patch.
- Do not throw away medicines via wastewater. 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 Bupeaze contains

- The active substance is buprenorphine.
 Each 35 micrograms/h transdermal patch of 25 cm² contains 20 mg of buprenorphine and releases 35 micrograms of buprenorphine per hour.
 Each 52.5 micrograms/h transdermal patch of 37.5 cm² contains 30 mg of buprenorphine and releases 52.5 micrograms of buprenorphine per hour.
 Each 70 micrograms/h transdermal patch of 50 cm² contains 40 mg of buprenorphine and releases 70 micrograms of buprenorphine per hour.
- The other ingredients are:

Adhesive matrix (containing buprenorphine): povidone K90, levulinic acid, oleyl oleate, Poly[acrylic acid-co-butylacrylate-co-(2-ethylhexyl)acrylate-co-vinylacetate] (5:15:75:5) Adhesive matrix (without buprenorphine): Poly[(2-ethylhexyl)acrylate-co-glycidylmethacrylateco-(2-hydroxyethyl)acrylate-co-vinylacetate] (68:0,15:5:27) Separating foil between adhesive matrices with and without buprenorphine: Polyethylene terephthalate film Backing foil: polyester Release liner: Polyethylene terephthalate film, siliconised Blue printing ink

What Bupeaze looks like and contents of the pack

Each transdermal patch is rectangular beige coloured with rounded corners and is imprinted (35 micrograms/h patch) "Buprenorphin" and "35 μ g/h", (52.5 micrograms/h patch) "Buprenorphin" and "52.5 μ g/h" and (70 micrograms/h patch) "Buprenorphin" and "70 μ g/h".

Each transdermal patch is sealed in one child-resistant sachet. The patches are available in packs containing 3, 4, 5, 6, 8, 10, 12, 16, 18, 20 or 24 transdermal patches.

Not all pack sizes may be marketed.

Marketing Authorisation Holder

Dr. Reddy's Laboratories (UK) Ltd., 410 Cambridge Science Park, Milton Road, Cambridge, CB4 0PE, United Kingdom

Manufacturer

betapharm Arzneimittel GmbH, Kobelweg 95, Augsburg, 86156, Germany

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