

PACKAGE LEAFLET: INFORMATION FOR THE USER

Menotrophin Ferring 75 IU powder and solvent for solution for injection

Menotrophin

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

What is in this leaflet:

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

1. WHAT MENOTROPHIN FERRING IS AND WHAT IT IS USED FOR

MENOTROPHIN FERRING is provided as a powder which must be mixed with liquid (solvent) before it is used. It is given as an injection under the skin or in the muscle.

MENOTROPHIN FERRING contains two hormones called follicle stimulating hormone (FSH) and luteinizing hormone (LH). FSH and LH are natural hormones produced in both males and females. They help the reproductive organs to work normally. The FSH and LH in MENOTROPHIN FERRING are obtained from the urine of postmenopausal women. The active ingredient is highly purified, and is known as menotrophin.

MENOTROPHIN FERRING is used to treat female infertility in the following two situations:

- i. Women who cannot become pregnant because their ovaries do not produce eggs (including polycystic ovarian disease). MENOTROPHIN FERRING is used in women who have already been given a medicine called clomiphene citrate to treat their infertility, but this medicine has not helped.
- ii. Women in assisted reproductive technology programmes (ART) (including *in vitro* fertilisation/embryo transfer [IVF/ET], gamete intra-fallopian transfer [GIFT] and intracytoplasmic sperm injection [ICSI]). MENOTROPHIN FERRING helps the ovaries to develop many egg sacs (follicles) where an egg might develop (multiple follicular development).

2. WHAT YOU NEED TO KNOW BEFORE YOU USE MENOTROPHIN FERRING

Before starting treatment with MENOTROPHIN FERRING, you and your partner should be evaluated by a doctor for the causes of your fertility problems. In particular you should be checked for the following conditions so that any other appropriate treatment can be given:

- Underactive thyroid or adrenal glands
- High levels of a hormone called prolactin (hyperprolactinemia)
- Tumours of the pituitary gland (a gland located on the base of the brain)
- Tumours of the hypothalamus (an area located under the part of the brain called the thalamus)

If you know you have any of the conditions listed above, **please tell your doctor before starting treatment with MENOTROPHIN FERRING.**

Do not use MENOTROPHIN FERRING

- If you are allergic (hypersensitive) to menotrophin or any of the other ingredients of MENOTROPHIN FERRING (listed in section 6)
- If you have tumours of the womb (uterus), ovaries, breasts or parts of the brain like pituitary gland or hypothalamus
- If you have sacs of fluid cysts (ovarian cysts) on your ovaries or enlarged ovaries (unless caused by polycystic ovarian disease)
- If you have any physical defects of the womb (uterus) or other sexual organs
- If you suffer from bleeding from the vagina where the cause is not known
- If you have fibroids (benign tumours) of the womb (uterus)
- If you are pregnant or breastfeeding
- If you have experienced an early menopause

Warnings and precautions

Talk to your doctor

- If you get pain in the abdomen
- If you get swelling in the abdomen
- If you get nausea
- If you get vomiting
- If you get diarrhea
- If you gain weight
- If you get difficulty breathing
- If you get decreased urination.

Tell your doctor straight away, even if the symptoms develop some days after the last injection has been given. These can be signs of high levels of activity in the ovaries which might become severe.

If these symptoms become severe, the infertility treatment should be stopped and you should receive treatment in hospital.

Keeping to your recommended dose and careful monitoring of your treatment will reduce your chances of getting these symptoms.

If you stop using MENOTROPHIN FERRING you might still experience these symptoms. Please contact your doctor immediately if any of these symptoms occur.

While you are being treated with this medicine, your doctor will normally arrange for you to have **ultrasound scans** and sometimes **blood tests** to monitor your response to treatment.

Being treated with hormones like MENOTROPHIN FERRING can increase the risk of:

- Ectopic pregnancy (pregnancy outside of the womb) if you have a history of fallopian tube disease
- Miscarriage
- Multiple pregnancy (twins, triplets, etc)

- Congenital malformations (physical defects present in baby at birth).

Some women who have been given infertility treatment with multiple medicine have developed tumours in the ovaries and other reproductive organs. It is not yet known if treatment with hormones like MENOTROPHIN FERRING causes these problems.

Blood formation inside the blood vessels (veins or arteries) are more likely to occur in women who are pregnant. Infertility treatment can increase the chances of this happening, especially if you are overweight or known with blood clotting disease (thrombophilia) or if you or someone in your family (blood relative) has had blood clots. Tell your doctor if you think this applies to you.

Children

There is no relevant use of MENOTROPHIN FERRING in children.

Other medicines and MENOTROPHIN FERRING

Tell your doctor if you are taking or have recently taken or might take any other medicines, including medicines obtained without a prescription.

Clomiphene citrate is another medicine used in the treatment of infertility. If MENOTROPHIN FERRING is used at the same time as clomiphene citrate the effect on the ovaries may be increased.

Pregnancy and breast-feeding

MENOTROPHIN FERRING should not be used during pregnancy or breastfeeding.

Driving and using machines

MENOTROPHIN FERRING is unlikely to affect your ability to drive and use machines.

Important information about some of the ingredients of MENOTROPHIN FERRING

MENOTROPHIN FERRING contains less than 1 mmol sodium (23 mg) per dose, so it is essentially 'sodium-free'.

3. HOW TO USE MENOTROPHIN FERRING

Always use MENOTROPHIN FERRING exactly as your doctor has told you. You should check with your doctor if you are not sure.

i. Women who are not ovulating (not producing eggs):

Treatment should start within the first 7 days of the menstrual cycle (day 1 is the first day of your period). Treatment should be given every day for at least 7 days.

The starting dose is normally 75-150 IU daily (1 to 2 vial of powder) but this may be adjusted depending on your response (up to a maximum of 225 IU – 3 vials of powders per day). A particular dose should be given for at least 7 days before the dose is changed by your doctor. It is recommended that the dose should be increased by 37.5 IU (half a vial of powder) per adjustment (and not more than 75 IU). The cycle of treatment should be abandoned if there is no response after 4 weeks.

When a good response is obtained a single injection of another hormone called human chorionic gonadotrophin (hCG), at a dose of 5,000 to 10,000 IU, should be given 1 day following the last MENOTROPHIN FERRING injection. It is recommended to have sexual intercourse on the day of the hCG injection and the day after. Alternatively, artificial insemination (injection of sperm directly into the womb) may be performed. Your doctor will closely monitor your progress for at least 2 weeks after you have received the hCG injection.

Your doctor will monitor the effect of MENOTROPHIN FERRING treatment. Depending on your progress, your doctor may decide to stop treatment with MENOTROPHIN FERRING and not give you

the hCG injection. In this case, you will be instructed to use a barrier method of contraception (e.g. condom) or not have sexual intercourse until your next period has started.

ii. Women in assisted reproduction programs:

If you are also receiving treatment with a GnRH agonist (a medicine which helps a hormone called Gonadotropin Releasing Hormone (GnRH) to work), MENOTROPHIN FERRING should be started approximately 2 weeks after the start of the GnRH agonist therapy.

If you are also receiving treatment with a GnRH antagonist, MENOTROPHIN FERRING treatment should be started on day 2 or 3 of the menstrual cycle (day 1 is the first day of your period).

MENOTROPHIN FERRING should be given every day for at least 5 days. The initial dose of MENOTROPHIN FERRING is normally 150 - 225 IU (2 or 3 vials of powder). This dose may be increased according to your response to the treatment up to a maximum of 450 IU (6 vials of powder) per day. The dose should not be increased by more than 150 IU per adjustment. Normally treatment should not continue for more than 20 days.

If enough egg sacs are present, you will be given a single injection of a medicine called human chorionic gonadotrophin (hCG) at a dose of up to 10,000 IU to induce ovulation (release of an egg).

Your doctor will closely monitor your progress for at least 2 weeks after you have received the hCG injection.

Your doctor will monitor the effect of MENOTROPHIN FERRING treatment. Depending on your progress, your doctor may decide to stop treatment with MENOTROPHIN FERRING and not give you the hCG injection. In this case, you will be instructed to use a barrier method of contraception (e.g. condom) or not have sexual intercourse until your next period has started.

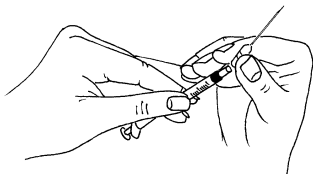
INSTRUCTIONS FOR USE

If your clinic has asked you to inject MENOTROPHIN FERRING yourself, you should follow any instructions they provide.

The first injection of MENOTROPHIN FERRING should be given under the supervision of a doctor.

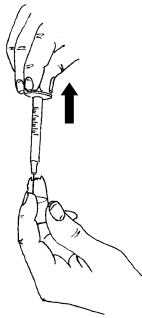
DISSOLVING MENOTROPHIN FERRING:

MENOTROPHIN FERRING is provided as a powder, and should be dissolved before use. The solvent (liquid) that you should use for dissolving is provided together with the powder. Dissolve MENOTROPHIN FERRING right before use. Do as follows:



- Firmly attach a long, thick needle (drawing up/reconstitution needle) to the syringe.

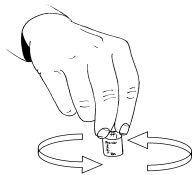
- Break the liquid (solvent) ampoule with the dot pointing towards yourself
- Insert the needle in the liquid ampoule.



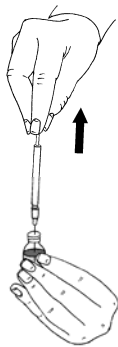
- Draw up all of the liquid from the ampoule into the syringe.

- Insert the needle through the rubber stopper of the powder vial and slowly inject all of the liquid. Aim at the side of the vial, to avoid creating bubbles.

- The powder should quickly dissolve (within 2 minutes) to form a clear solution. This normally happens when only few drops of solvent have been added.



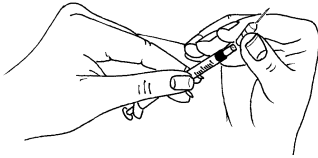
- To help the powder dissolve, swirl the solution. **Do not shake** as this will cause air bubbles to form. *If the solution is not clear or if it contains particles it should not be used.*



- Draw up the solution back into the syringe.

If you have been prescribed more than one vial of MENOTROPHIN FERRING powder per injection, you can draw up the solution (the first MENOTROPHIN FERRING dilution) back into the syringe and inject it into a second vial of powder. You can do this with up to three vials of powder in total – but only do as your doctor has told you.

INJECTING MENOTROPHIN FERRING:



- Once you have your prescribed dose drawn up into the syringe, change the needle to a short, thin needle (the injection needle).
- Turn the syringe with the needle upwards and flick it gently so that any air bubbles collect in the tip. Depress the plunger carefully until the first drop of fluid comes out.

- Your doctor or nurse will tell you where to inject (e.g. front of the thigh, abdomen etc.)
- Disinfect the injection site.



- To inject, pinch the skin to produce a fold, and insert the needle in one swift motion at 90 degrees to the body. Press down on the plunger to inject the solution, and then remove the needle.

- After removing the syringe, apply pressure to the injection site to stop any bleeding. Gently massaging the injection site will help to disperse the solution under the skin.
- Do not put used items into normal domestic water; these should be disposed of appropriately.

If you take more MENOTROPHIN FERRING than you should

Please tell a nurse or doctor.

If you forget to take MENOTROPHIN FERRING

Do not take a double dose to make up for a forgotten dose. Please tell a nurse or doctor.

4. POSSIBLE SIDE EFFECTS

Like all medicines, MENOTROPHIN FERRING can cause side effects, although not everybody gets them.

Treatment with MENOTROPHIN FERRING may cause high levels of activity in the ovaries leading to a disease called Ovarian Hyperstimulation Syndrome (OHSS), especially in women with polycystic ovaries. Symptoms include: pain in the abdomen, swelling in the abdomen, nausea, vomiting, diarrhoea and weight gain. In cases of severe OHSS accumulation of fluid in abdomen, pelvis and/or chest cavity, difficulty in breathing, decreased urination, formation of blood clots in blood vessels (thromboembolism) and twisting of ovaries (ovarian torsion) have been reported as rare complications. If you experience any of these symptoms contact your doctor immediately, even if they develop some days after the last injection has been given.

Allergic (hypersensitivity) reactions may occur when using this medicine. Symptoms of these reactions might include: **rash, itching, swelling of the throat and difficulty breathing**. If you experience any of these symptoms, contact your doctor immediately.

The following common side effects affect between 1 to 10 of every 100 patients treated:

- Pain in the abdomen
- Headache
- Nausea
- Swelling in the abdomen
- Pelvic pain
- Overstimulation of the ovaries resulting into high levels of activity (ovarian hyperstimulation syndrome)
- Local reactions at the injection site (such as pain, redness, bruising, swelling and/or itching)

The following uncommon side effects affect between 1 to 10 of every 1,000 patients treated:

- Vomiting
- Discomfort in abdomen
- Diarrhoea
- Fatigue
- Dizziness
- Sacs of fluid within ovaries (ovarian cysts)
- Breast complaints (include breast pain, breast tenderness, breast discomfort, nipple pain and breast swelling)
- Hot flush

The following rare side effects affect between 1 to 10 of every 10,000 patients treated:

- Acne
- Rash

In addition to above the following side effects were seen after MENOTROPHIN FERRING was marketed and frequency of these side effects is unknown:

- Eyesight disturbances
- Fever
- Feeling sick
- Allergic reactions
- Increase in weight
- Pains in muscle and joint (e.g. back pain, neck pain and pain in arms and legs)
- Twisting of ovary (ovarian torsion) as a complication of increased activity of ovaries due to overstimulation
- Itching
- Hives
- Blood clots as a complication of increased activity of ovaries due to overstimulation

If you get any side effects, talk to your doctor or nurse. This includes any side effects not listed in this leaflet.

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 HPRC Pharmacovigilance, Website: www.hpra.ie.

By reporting side effects you can help provide more information on the safety of this medicine.

5. HOW TO STORE MENOTROPHIN FERRING

Do not store above 25°C. Do not freeze.
Store in the original package in order to protect from light.

For immediate and single use following reconstitution.

Keep this medicine out of sight and reach of children.

Do not use MENOTROPHIN FERRING after the expiry date which is stated on the carton. The expiry date refers to the last day of that month.

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 MENOTROPHIN FERRING contains

The active substance is highly purified menotrophin (human menopausal gonadotrophin, HMG) corresponding to follicle stimulating hormone activity FSH 75 IU and luteinizing hormone activity LH 75 IU.

The other ingredients in the powder are:

- Lactose monohydrate
- Polysorbate 20
- Sodium hydroxide
- Hydrochloride acid

The ingredients in the solvent are:

- Water
- Hydrochloric acid
- Sodium chloride

What MENOTROPHIN FERRING looks like and contents of the pack

MENOTROPHIN FERRING is a powder and solvent for solution for injection.

The carton contains five or ten clear glass vials which contain a white to off-white powder. The carton also contains an equal number of clear glass ampoules containing a colourless solvent.

Not all pack sizes may be marketed.

Marketing Authorisation Holder

Ferring Ireland Limited
United Drug House
Magna Drive
Magna Business Park
Citywest Road
Dublin 24

Manufacturer

Ferring GmbH
Wittland 11, D-24109 Kiel, Germany

This leaflet was last revised in October 2022.

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