SCHEDULING STATUS:

S3

PROPRIETARY NAME AND DOSAGE FORM:

MELOXICAM UNICORN 7,5 tablets

MELOXICAM UNICORN 15 tablets

COMPOSITION:

Each **MELOXICAM UNICORN 7,5** tablet contains 7,5 mg meloxicam.

Each **MELOXICAM UNICORN 15** tablet contains 15 mg meloxicam.

PHARMACOLOGICAL CLASSIFICATION:

A 3.1 Antirheumatics (anti-inflammatory agents)

PHARMACOLOGICAL ACTION:

Meloxicam, an oxicam (enolic acid) derivative, is a non-steroidal anti-inflammatory compound (NSAID) with analgesic, antipyretic and anti-inflammatory activities. The action of meloxicam is related to inhibition of the enzyme cyclo-oxygenase (COX), resulting in the decreased formation of prostaglandins (mediators of inflammation) and thromboxanes. A selective COX-2 inhibitory (anti-inflammatory effect) *in vitro* in relation to COX-1 has been demonstrated. Inhibition of COX-1 (gastrointestinal, renal and platelet effects) *in vivo* occurs. It is suggested that the

extent of inhibition of COX-1 *in vivo* is a function of dose and inter-individual variability of meloxicam concentrations.

Pharmacokinetics:

The extent of absorption after oral administration is 89% and concomitant administration with food does not affect absorption. Meloxicam is 99% protein bound and has an elimination half-life of 15-20 hours. Meloxicam is extensively metabolised in the liver (mainly by oxidation) and less than 5% of the daily dose is excreted unchanged in the faeces and urine.

INDICATIONS:

MELOXICAM UNICORN is indicated for the symptomatic treatment of:

- Rheumatoid arthritis
- Painful osteoarthritis
- Ankylosing spondylitis
- Episodes of acute sciatica

CONTRA-INDICATIONS:

- Hypersensitivity to **MELOXICAM UNICORN** or to any components of the formulation.
- Patients in whom attacks of asthma, urticaria, nasal polyps or acute rhinitis are precipitated by acetylsalicylic acid (aspirin) or by other non-steroidal anti-inflammatory agents.
- Active peptic ulcer disease.

- Severe hepatic impairment.
- Severe non dialysed renal impairment.
- Pregnancy. (see PREGNANCY AND LACTATION)
- Heart failure
- History of gastrointestinal bleeding or perforation (PUBs) related to previous NSAIDs.
- Active of history of recurrent ulcer/haemorrhage/perforations

WARNINGS:

- Children under the age of 18 years- Safety and efficacy have not been established.
- **MELOXICAM UNICORN** should be used with caution in patients with: -
- Gastrointestinal bleeding.
- Hepatic impairment – Increases risk of renal decompensation.
- Renal impairment – Increases risk of renal decompensation.
- Congestive heart failure – Increase risk of renal decompensation.
- Caution is required in patients with a history or hypertension and/or heart failure as fluid retention and oedema have been reported in association with **MELOXICAM UNICORN** treatment.
- Elderly: The elderly have an increased frequency of adverse reactions to NSAIDs, especially gastrointestinal bleeding and perforation (PUBs) which may be fatal.

- The risk of gastrointestinal bleeding or perforation (PUBs) is higher with increasing doses of **MELOXICAM UNICORN,** in patients with a history of ulcers, and the elderly.

- When gastrointestinal bleeding or ulceration occurs in patients receiving **MELOXICAM UNICORN,** treatment with **MELOXICAM UNICORN** should be stopped.

- **MELOXICAM UNICORN** should be given with caution to patients with a history of gastrointestinal disease (e.g. ulcerative colitis, Crohn's disease, hiatus hernia, gastro-oesophageal reflux disease, angiodysplasia) as the condition may be exacerbated.

- Serious skin reactions, some of them fatal, including exfoliative dermatitis, Stevens-Johnson syndrome, and toxic epidermal necrolysis have been reported. **MELOXICAM UNICORN** should be discontinued at the first appearance of skin rash, mucosal lesions, or any other sign of hypersensitivity.

INTERACTIONS:

- **Acetylsalicylic acid (Aspirin) and other NSAIDS –** May result in an increase in gastric ulceration and/or bleeding.
- **Warfarin and other anticoagulants –** Increase the risk of bleeding complications.
- **Lithium –** May result in an increase in plasma lithium concentrations. Monitor lithium plasma concentrations carefully when therapy with **MELOXICAM UNICORN** is initiated or withdrawn.
- **Methotrexate –** May result in increased haematological toxicity due to methotrexate toxicity.
- **Angiotensin-converting enzyme (ACE) inhibitors and other anti-hypersensitivity agents –** May result in a decrease in antihypertensive

effects and an increased risk of renal failure.

- **Cholestyramine -** May result in a reduced therapeutic effect of **MELOXICAM UNICORN.**
- **Cyclosporin –** Increases the risk of nephrotoxicity.
- **Alcohol -** Simultaneous intake may increase the risk of bleeding.
- **Diuretics –** May result in renal impairment if the patient is dehydrated (see Precautions).
- **Intrauterine device –** NSAIDS may decrease the efficacy of intrauterine devices.
- **Corticosteroids** – increased risk of gastrointestinal ulceration or bleeding (PUBs)
- **Anti-platelet agents and selective serotonin reuptake inhibitors (SSRIs):** increased risk of gastrointestinal bleeding.

PREGNANCY AND LACTATION:

Safety and efficacy in pregnancy and lactation has not been established. The use of **MELOXICAM UNICORN** during the third trimester is not recommended because of possible adverse effects on the foetus, such as premature closure of the ductus arteriosus, which may lead to persistent pulmonary hypertension in the newborn. See CONTRA-INDICATIONS.

DOSAGE AND DIRECTIONS FOR USE:

Use the lowest effective dose for the shortest possible duration of treatment.
Safety and efficacy in children under the age of 18 years has not been established.

The tablet should be taken with a glass of water and together with a meal.

The dose of **MELOXICAM UNICORN** in patients with end stage renal disease on haemodialysis should not be greater than 7,5 mg/day. (No dosage reduction is necessary in patients with mild to moderate renal impairment).

Adults:

The maximum daily dose of **MELOXICAM UNICORN** is 15 mg.

Acute sciatica: 7,5 mg once daily. If there is no improvement the dose can be increased to 15 mg a day.

Ankylosing spondylitis: 15 mg once daily

Osteoarthritis: 7,5 mg once daily. Increase to 15 mg if necessary.

Rheumatoid arthritis: 15 mg once daily. Reduce dose if possible (provided therapeutic response is maintained).

SIDE EFFECTS AND SPECIAL PRECAUTIONS:

Side effects:

Haematological:

- *Frequent*: Anaemia
- *Less frequent*: Thrombocytopenia, neutropenia, eosinophilia, agranulocytosis, leukopenia

Cardiovascular:

- *Frequent*: Peripheral oedema
- *Less frequent*: Palpitations, hypertension
- *The following have been reported but the frequency is unknown*: Congestive heart failure

Neurological:

- *Frequent*: Headache, dizziness, light-headedness
- *Less frequent*: Vertigo, confusion, drowsiness, insomnia, nightmares

Gastrointestinal:

- *Frequent*: Dyspepsia, nausea and vomiting, diarrhoea, flatulence, constipation and abdominal pain
- *Less frequent*: Gastrointestinal bleeding, perforation or ulceration (generally more serious in the elderly), induction or exacerbation of colitis, gastritis
- *The following have been reported but the frequency is unknown*: Melaena; haematemesis ulcerative stomatitis; exacerabation of Crohn's disease

Kidney/Genitourinary:

- *Less frequent*: Nephrotic syndrome, glomerulonephritis, interstitial nephritis and papillary necrosis, renal failure

Liver:

- *Less frequent*: Hepatitis

Ocular:

- *Less frequent*: Visual disturbances (such as blurred vision), conjunctivitis

Respiratory:

- *Less frequent*: Bronchospasm (see other)

Skin:

- *Frequent*: Pruritus, rash
- *Less frequent*: Flushing, urticaria, stomatitis, photosensitivity, bullous