

# REMIFENTANIL MEDIS 1 mg – REMIFENTANIL MEDIS 5 mg

## Poudre lyophilisat pour solution injectable ou pour perfusion

### Rémifentanil Chlorhydrate

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**Veillez lire attentivement l'intégralité de cette notice avant de prendre ce médicament.**  
 1. **Gardez cette notice, vous pourrez avoir besoin de la relire.**  
 2. Si vous avez d'autres questions, vous devez en discuter avec votre médecin ou votre pharmacien.  
 3. Ce médicament vous est personnellement prescrit. Ne le donnez jamais à quelqu'un d'autre, même en cas de symptômes identiques, cela pourrait lui être nocif.  
 4. Si un effet indésirable vous est très grave ou si vous remarquez un effet indésirable non mentionné dans cette notice, parlez-en à votre médecin ou votre pharmacien.

**Dans cette notice :**  
 1. Quelles sont les informations à connaître avant de prendre REMIFENTANIL MEDIS 1 mg – 5 mg ?  
 2. Comment utiliser REMIFENTANIL MEDIS 1 mg – 5 mg ?  
 3. Quels sont les effets indésirables éventuels ?  
 4. Comment conserver REMIFENTANIL MEDIS 1 mg – 5 mg ?  
 5. Informations supplémentaires.  
**1. QUELQUES QUESTIONS REMIFENTANIL MEDIS 1 mg – 5 mg ET DANS QUEL CAS EST-IL UTILISÉ ?**  
 REMIFENTANIL MEDIS 1 mg – 5 mg est indiqué pour soulager l'analgésie et la sédation chez des patients sous ventilation assistée en soins intensifs et chez les adultes en soins palliatifs.  
**2. QUELLES SONT LES INFORMATIONS À CONNAÎTRE AVANT D'UTILISER REMIFENTANIL MEDIS 1 mg – 5 mg ?**  
 REMIFENTANIL MEDIS 1 mg – 5 mg est contre-indiqué dans les cas suivants :  
 - allergie à la substance active, à d'autres dérivés du fentanyl ou à l'un des excipients ;  
 - administration par voie périodale ou intrathécale ;  
 - utilisation comme unique traitement durant l'induction de l'anesthésie ;  
 - utilisation pendant la période de travail préalable à l'accouchement ;  
 - utilisation durant les éclamptiques.  
**3. Comment utiliser REMIFENTANIL MEDIS 1 mg – 5 mg ?**  
 Faites attention avec REMIFENTANIL MEDIS 1 mg – 5 mg :  
 - l'administration sera administrée exclusivement par des personnes spécialement formées à l'emploi des médicaments anesthésiques et dans des locaux spécialement équipés pour le monitoring et l'assistance des fonctions respiratoire et cardiovasculaire.  
 - Une technique de perfusion spécifique sera utilisée pour éviter toute administration accidentelle, notamment en cas d'anesthésie.  
 - Chez les patients ventilés, l'utilisation de ce médicament est ou peut être recommandée pour des durées supérieures à 2 jours.  
 Comme avec tous les morphiniques puissants, l'administration de ce produit s'accompagne d'une dépression respiratoire.  
 La surveillance d'une dépression respiratoire impose une prise en charge adéquate, incluant une diminution de 50 % du débit de perfusion ou une interruption temporaire de la perfusion.  
 4. **Précautions d'emploi :**  
 - utilisation pendant la période de travail préalable à l'accouchement ;  
 - utilisation durant les éclamptiques.

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Indication	Injection IV (bolus) (microgrammes/kg)	Perfusion Continue (microgrammes/kg/min)	
		Débit Initial	Intervalle posologique
Induction de l'anesthésie	1 (injecté en plus de 30 secondes)	0,5 à 1	-
Entretien de l'anesthésie chez les patients ventilés	-	0,40	0,10 à 2
- Propofol + azote (66%)	0,5 à 1	0,25	0,05 à 2
- Isoflurane (dose initiale : 0,3 CAM)	0,5 à 1	0,25	0,05 à 2
- Propofol (dose initiale : 10 microgrammes/kg)	0,5 à 1	0,25	0,05 à 2

En fonction de votre réponse au traitement, votre médecin anesthésiste pourra ajuster la posologie durant l'entretien de l'anesthésie, toutes les 5 à 15 minutes.  
**Administration en mode «AVOVC» (Anesthésie Ultra Vélocité à Objectif de Concentration) :**  
 1. **Indications et contre-indications :**  
 - **Indications :** REMIFENTANIL MEDIS 1 mg – 5 mg doit être utilisé en association avec un agent hypnotique inhalé administré par voie intraveineuse (après avoir préalablement vérifié les patients ventilés) ;  
 - **Contre-indications :** allergie aux anesthésiques généraux, association avec des agents anesthésiques inhalés, utilisation de ce médicament et de la chirurgie peut généralement être obtenue avec des concentrations plasmatiques cibles en rémifentanil allant de 3 à 8 nanogrammes/ml. La dose de REMIFENTANIL MEDIS 1 mg – 5 mg doit être adaptée (titration) en fonction de votre réponse. Certains cas chirurgicaux particulièrement douloureux peuvent nécessiter des concentrations sanguines cibles allant jusqu'à 15 nanogrammes/ml. Les données sont insuffisantes pour établir des recommandations sur l'utilisation de REMIFENTANIL MEDIS 1 mg – 5 mg en mode «AVOVC» pour l'anesthésie des patients en ventilation spontanée.  
**2. Recommandations pour poursuivre/arrêter durant la période post-opératoire immédiate :**  
 En mode «AVOVC» à la fin de l'acte chirurgical, lorsque la perfusion de REMIFENTANIL MEDIS 1 mg – 5 mg est arrêtée ou lorsque sa concentration cible est réduite, votre respiration spontanée doit se rétablir à des concentrations de rémifentanil calculées allant de 1 à 2 nanogrammes/ml. Le temps nécessaire pour atteindre ces concentrations sera déterminé par l'analyse post-opératoire dont elle démarre avant la fin de l'intervention chirurgicale à l'aide d'analgesiques de longue durée d'action.  
 Les données sont insuffisantes pour établir des recommandations sur l'utilisation de REMIFENTANIL MEDIS 1 mg – 5 mg en mode «AVOVC» pour le contrôle de l'analgésie post-opératoire.  
**3. CHEZ L'ENFANT (AGE DE 14 A 12 ANS)**

Agents Anesthésiques associés (*)	Injection IV (bolus) (microgrammes/kg)	PERFUSION CONTINUE (microgrammes/kg/min)	
		Débit Initial	Intervalle posologique
Halothane (dose initiale : 0,3 CAM)	1	0,25	0,05 à 1,3
Sévoflurane (dose initiale : 0,3 CAM)	1	0,25	0,05 à 0,9
Isoflurane (dose initiale : 0,3 CAM)	1	0,25	0,06 à 0,9

(\*) Avec administration concomitante d'un mélange de protoxyde d'azote/oxygène dans un rapport de 2:1.  
 \*\* Chez les nouveau-nés et les nourissons âgés de moins de 1 an, les données disponibles sont insuffisantes pour recommander une perfusion continue.  
 \* En l'absence de données, l'administration en mode «AVOVC» n'est pas recommandée chez l'enfant et le nouveau-né.  
**4. INFORMATIONS GÉNÉRALES :**  
**Administration par perfusion en mode manuel :**

Indications ASSOCIÉES (*)	INJECTION IV (bolus) (microgrammes/kg)	PERFUSION CONTINUE (microgrammes/kg/min)		Principe actif :	REMIFENTANIL MEDIS 1 mg	REMIFENTANIL MEDIS 5 mg
		Débit Initial	Intervalle posologique			
Inhalation	Non recommandée	-	-	Excipients	1 mg	5 mg
Entretien de l'anesthésie - Isoflurane (dose initiale : 0,3 CAM) - Propofol (dose initiale : 10 microgrammes/kg)	0,5 à 1	1	0,003 à 4	Glycine, Hydroxyde de sodium, acide chlorhydrique	-	0,5
Préparation de l'utilisation en perfusion post-opératoire - Isoflurane (dose initiale : 0,3 CAM)	0,5 à 1	1	0,01 à 4			

**Administration en mode «AVOVC» :**  
 - Indications et contre-indications de l'anesthésie chez les patients ventilés ;  
 - Un médicament est un produit mais pas comme les autres.  
 - Un médicament est un produit qui agit sur votre santé et sa consommation non-conforme aux prescriptions vous expose à un danger.  
 - Respectez rigoureusement l'ordonnance de votre médecin et le mode d'emploi qui il vous a prescrit, suivez les conseils de votre pharmacien.  
 - Votre médecin et votre pharmacien connaissent le médicament, ses indications et ses contre-indications.  
 - N'arrêtez pas de votre propre initiative le traitement durant la période prescrite.  
 - N'en reprenez pas, n'augmentez pas les doses sans consulter votre médecin.  
**Gardez les médicaments hors de portée des enfants**



NOUGESSI VOI

# REMIFENTANIL MEDIS 1 mg – REMIFENTANIL MEDIS 5 mg

## Powder for solution for injection or infusion

### Remifentanil Hydrochloride

Read all of this leaflet carefully before you start using this medicine. 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. Do not pass it on to others. It may harm them, even if their symptoms are the same as yours. If any of the side effects gets serious, or if you notice any side effects not listed in this leaflet, please tell your doctor or pharmacist.

- In this leaflet:**
1. What Remifentanil MEDIS 1 mg – 5 mg is and what it is used for
  2. What you should know about Remifentanil MEDIS 1 mg – 5 mg
  3. How to use Remifentanil MEDIS 1 mg – 5 mg
  4. Possible side effects
  5. How to store Remifentanil MEDIS 1 mg – 5 mg
  6. Further information

**1. WHAT REMIFENTANIL MEDIS 1 mg – 5 mg IS AND WHAT IT IS USED FOR**  
Remifentanil is an anaesthetic used for induction and/or maintenance of general anaesthesia under close supervision. Remifentanil is indicated to relieve pain and sedation in patient under controlled mechanical ventilation in an Intensive Care Unit for up to 30 days of age and weight.

**2. WHAT YOU SHOULD KNOW BEFORE YOU HAVE REMIFENTANIL MEDIS 1 mg – 5 mg**  
You should not be given Remifentanil MEDIS 1 mg – 5 mg in the following cases:  
- If you are allergic to the active substance, or Fentanyl (derivatives or any of the other ingredients).  
- Administration epidurally or intrathecally, because it contains glycerine.  
- Use as a single treatment during induction of anaesthesia.  
- Use during the work period before delivery.  
- Use during caesarean section.

**3. HOW TO USE REMIFENTANIL MEDIS 1 mg – 5 mg**  
This medicine SHOULD NOT BE USED GENERALLY, unless otherwise directed by your doctor during pregnancy.  
**Take special care with REMIFENTANIL MEDIS 1 mg – 5 mg**  
This drug will be administered only by specially trained persons to the use of anaesthetics and drugs in facilities entirely equipped for the monitoring and support of respiratory and cardiovascular functions.  
A perfusion technique will be used specifically to prevent inadvertent administration, particularly at the end of anaesthesia.  
In ventilated patients, the use of this drug is not recommended for periods longer than 3 days.  
As with all powerful opioids, the administration of this product is accompanied by respiratory depression.  
The occurrence of respiratory depression requires a proper management, including a 50% reduction in the infusion rate or temporary interruption of the infusion.  
Your doctor will ensure that you have fully regained consciousness and recovered a satisfactory respiratory before letting you leave the recovery room.

At recommended doses, muscle rigidity may occur. As with other opioids, the incidence of muscle rigidity depends on the dose and rate of administration. This is why intravenous slow bolus form should not be performed in less than 30 seconds. Modalities of care depend on the intensity of muscle stiffness, your general condition and phase of anaesthesia during which the rigidity appears. Similar to a decrease in blood pressure or heart rate, a specific treatment will be performed.  
The duration of action of remifentanil is very short: the residual analgesic activity does not persist more than 5 to 10 minutes after stopping. Similar to a decrease in blood pressure or heart rate, a specific treatment will be performed.  
Remifentanil should be administered prior to discontinuation of the infusion of Remifentanil. Sufficient time must be respected for the long-term analgesic effect of the drug after the administration of Remifentanil and the level of postoperative monitoring.  
**Like other opioids, this drug can induce dependence.**  
The maximum step-down administration of remifentanil and particularly after prolonged administration of more than 3 days, symptoms such as tachycardia (rapid heartbeat), hypertension (increased blood pressure) or agitation may occur infrequently.

**Precautions:**  
When you receive Remifentanil (tell your doctor):  
- A history of adverse and/or unexpected drug reactions;  
- Are allergic to any drugs that have been used in a previous transaction;  
- Respiratory problems (shortness of breath, asthma);  
- Heart problems: slow or irregular heartbeat, low blood pressure;  
- Severe hepatic impairment;  
- Pregnant or breastfeeding.  
**Using other medicines:**  
Please tell your doctor or pharmacist if you are taking, or have recently taken, any other medicines, including medicines you can buy without a prescription.  
**Pregnancy and breast-feeding:**  
If you are pregnant or breastfeeding, Remifentanil should not be used to prevent or treat labour pain.  
If you are breastfeeding, Remifentanil should not be given to you. Stop breast-feeding at least 1 hour after Remifentanil has been given to you. Ask your doctor or pharmacist for advice before taking any medicine.  
**Sports:**  
The attention of athletes is drawn to the fact that this drug contains an active ingredient that can cause a positive reaction to tests performed during doping controls.

**Driving and using machines:**  
Do not drive or operate any machinery, should not drive or operate machinery until your doctor has decided the time of resumption of these activities. It is a patient that you are accompanied when you return home and don't consuming any alcoholic beverage.  
**How to use REMIFENTANIL MEDIS 1 mg – 5 mg?**  
Remifentanil MEDIS must only be given under carefully controlled conditions and emergency equipment has to be available. Remifentanil MEDIS will be given by or under the supervision of an experienced doctor who is familiar with the use and action of the type of medicine.  
Remifentanil MEDIS is given to you by a person who is qualified to do so, as well as in the diagnosis and management of expected adverse effects of opioids, providing including respiratory and cardiac resuscitation.  
The dosage should be adjusted according to your operation and effects obtained during anaesthesia.  
Your doctor will recommend the appropriate dosage.  
**ADULTS**

**Administration by infusion in manual mode:**

Indication	IV Injection (bolus) (microgram/kg)	Continuous infusion (micrograms / kg / min)	
		Starting Rate	Range
Induction of anaesthesia	1 (injected over 30 seconds)	0.5 to 1	0.10 to 2
Maintenance of anaesthesia in			
- Nitrous Oxide (66%)	0.5 to 1	0.40	0.10 to 2
- Isoflurane (Starting dose: 0.5 MAC)	0.5 to 1	0.25	0.05 to 2
- Propofol (starting dose: 100 micrograms/kg)	0.5 to 1	0.25	0.05 to 2

Depending on your response to treatment, your doctor may adjust the dosage anaesthetics during maintenance of anaesthesia, every 2 to 3 minutes.  
**Administration mode «TCI» (Intra Venous Anaesthesia at Target Concentration):**  
Induction and maintenance of anaesthesia in ventilated patients:  
Remifentanil MEDIS 1 mg – 5 mg should be used in combination with a hypnotic agent inhaled or intravenously ventilated adult patients. In combination with these agents, adequate analgesia for induction of anaesthesia and surgery can usually be obtained with Remifentanil target plasma concentrations from March to August ranging from 1 to 2 micrograms / ml.  
The dose of Remifentanil MEDIS 1 mg – 5 mg should be adapted (titration) depending on your response. Some particularly painful surgical procedures may require target blood concentrations up to 12 micrograms / ml.  
There are insufficient data to make recommendations on the use of Remifentanil MEDIS 1 mg – 5 mg mode «TCI» for anaesthesia in children.  
**Precautions:**  
- Recommendations for continuing / stopping during the immediate post-operative:  
Mode «TCI» at the end of surgery, when the Remifentanil infusion MEDIS 1 mg – 5 mg is stopped and when the target concentration is reduced, you must restore spontaneous respiration at concentrations of Remifentanil calculated from 12 in nanograms / ml. As in the case of maintenance of anaesthesia, respiration should be started before the end of surgery with analgesics long duration of action.  
There are insufficient data to make recommendations on the use of Remifentanil MEDIS 1 mg – 5 mg mode «TCI» for the control of postoperative analgesia.

#### CHILDREN (AGES 1 TO 12 YEARS)

Anesthetic agents associated (*)	IV Injection (bolus) (microgram/kg)	CONTINUOUS INFUSION (microgram per infusion)	
		saturating rate	Range
Halothane (starting dose: 0.2 MAC)	1	0.25	0.05 to 1.3
Sevoflurane (starting dose: 0.2 MAC)	1	0.25	0.05 to 0.9
Isoflurane (starting dose: 0.5 MAC)	1	0.25	0.06 to 0.9

(\*) With concomitant administration of a mixture of nitrous oxide / oxygen in a ratio of 2/1.  
In neonates and infants less than 1 year, the available data are insufficient to recommend a posology.  
In the absence of data, the administration mode «TCI» is not recommended in children and neonates.

#### GENERAL ANAESTHESIA FOR CARDIAC SURGERY ANESTHESIA

**Administration by perfusion in manual mode:**

Associated Indication (*)	INJECTION IV (bolus) (microgram/kg)	CONTINUOUS PERFUSION (microgram/kg/min)	
		saturating rate	Range
Intubation	not recommended	1	-
Maintenance of anaesthesia: Isoflurane (starting dose: 0.4 MAC) Propofol (starting dose: 50 microgram / kg / min)	0.5 to 1	1	0.003 to 0.4 0.1 to 0.3
continuation of postoperative analgesia prior to extubation	not recommended	1	0 to 1

**Administration in mode «TCI»:**  
Induction and maintenance of anaesthesia in ventilated patients:  
Remifentanil MEDIS 1 mg – 5 mg should be used in combination with a hypnotic agent inhaled or intravenously ventilated adult patients. In combination with these agents, adequate analgesia for induction of anaesthesia and surgery can usually be obtained with Remifentanil target plasma concentrations higher than those used in case of general surgery.  
- The dose of REMIFENTANIL MEDIS 1 mg – 5 mg should be adapted (titration) depending on your response. Blood concentrations of Remifentanil MEDIS 1 mg – 5 mg should be adapted (titration) depending on your response.  
There are insufficient data to make recommendations on the use of Remifentanil MEDIS 1 mg – 5 mg mode «TCI» for anaesthesia in children.  
**Recommendations for continuing / stopping during the immediate post-operative:**  
Mode «TCI» at the end of surgery, when the Remifentanil infusion MEDIS 1 mg – 5 mg is stopped and when the target concentration is reduced, you must restore spontaneous respiration at concentrations of remifentanil calculated from 12 in nanograms / ml. As in the case of maintenance of anaesthesia, respiration should be started before the end of surgery with analgesics long duration of action.  
There are insufficient data to make recommendations on the use of Remifentanil MEDIS 1 mg – 5 mg mode «TCI» for the control of postoperative analgesia.

#### USE IN INTENSIVE CARE UNITS

Continuous infusion (microgram / kg / h)		
starting rate	Range	
0.1 (0.10 to 0.15 (0.9))	0.006 (0.38) to 0.74 (44.6)	

The administration of REMIFENTANIL MEDIS 1 mg – 5 mg bolus is not recommended for patients in Intensive Care Unit. In the absence of data, the administration mode «TCI» is not recommended in patients in Intensive Care Unit.  
When REMIFENTANIL MEDIS 1 mg – 5 mg is administered with other sedative agents, the use of REMIFENTANIL MEDIS 1 mg – 5 mg reduces doses of these agents.  
**The usual initial dose of sedative agents is given below:**

sedative agents	Bolus (mg/kg)	infusion (mg/kg/h)
Propofol	To 0.5	0.5
Midazolam	To 0.03	0.03

Sedative agents are to be administered separately so that their assay is possible.  
For ventilated patients undergoing painful stimuli, increased infusion rate of REMIFENTANIL MEDIS 1 mg – 5 mg may be necessary to provide additional analgesic cover.  
Patients in intensive care unit, the safety and efficacy of Remifentanil have been established in clinical trials for treatment durations of up to 3 days.  
If you are over 65, the recommended starting dosage in adults should be reduced by half, and adapted to your needs. Mode «TCI» initial target concentration should be 1.5 to 4.4 nanograms / ml, and tailored to your needs.  
For patients ASA class III / IV, it is recommended to reduce the dose and subsequently adapt the flow until the desired effect.  
In case of obesity, the dosage should be reduced based on the theoretical ideal weight. Mode «TCI» to avoid under-dose.  
The dosage should be carefully tailored to the individual response.  
For patients with renal impairment, it is not necessary to adjust the dosage.  
The severe hepatic impairment requires special monitoring.

This medication will be administered intravenously either by slow bolus (administered over at least 30 seconds) or by infusion. Continuous infusions of Remifentanil should be administered using an infusion system at a controlled rate and through a pipe fast flow (the face catheter tubing is reserved for this drug. These pipes must be connected directly or adjacently to the venous catheter to minimize the dead space potential.  
Remifentanil can be administered by intravenous anaesthesia with target concentration («TCI») using approved equipment including Minto pharmacokinetic model taking into account your age and your body weight.  
Care must be taken to avoid these tubes are blocked or disconnected.  
A sufficient amount of Remifentanil may be present in the dead space of the tubing or catheter to cause respiratory depression, apnea, and / or muscle rigidity if the bolus is rinsed with a solution or with other injectable drugs.  
This can be prevented by administering the drug in a pipe with a rapid rate through a pipe reserved for this drug to be disconnected and stop its administration.

**Incompatibilities:**  
This drug must be reconstituted or diluted only with the recommended injectable solutions. It should not be reconstituted or mixed with lactated Ringer's injection or lactated Ringer's and glucose 50 mg/ml (5%) solution for injection. This medication should not be mixed with propofol or placed in the same intravenous admixture solution.  
Administration of Remifentanil in the same intravenous line with blood/serum/plasma is not recommended.  
Remifentanil should not be mixed with other therapeutic agents prior to administration.  
**Instructions, instructions for handling:**  
REMIFENTANIL MEDIS 1 mg – 5 mg must be reconstituted by adding respectively 1 ml or 5 ml solution for injection to obtain a reconstituted solution with a concentration of remifentanil of approximately 1 mg / ml.  
After reconstitution, remifentanil should not be administered without further dilution. For infusions made in manual mode, remifentanil can be diluted to concentration ranging from 20 to 250 micrograms / ml (the recommended dilution is 50 micrograms / ml in adults and 20 to 25 micrograms / ml in children 1 year or more).  
In infusion «TCI», the recommended dilution of remifentanil is from 20 to 50 micrograms / ml.  
**Reconstitution and dilution of the solution of remifentanil can be performed with one of the following solutions:**  
- water for injections;  
- solution of 5% glucose;  
- solution of glucose (5%) sodium (0.9%);  
- solution of sodium chloride 0.9%;  
- solution of sodium chloride at 0.45%.

Dilution will depend on the technical characteristics of the equipment and infusion needs for the patient.  
This drug is compatible with lactated Ringer's injections and lactated Ringer's and glucose 50 mg/ml (5%) solution for injection. Remifentanil is compatible with propofol when administered into a running IV catheter.  
**Frequency of administration:**  
The administration of REMIFENTANIL MEDIS 1 mg – 5 mg will be adjusted according to your operation and effects obtained during anaesthesia.  
**If you use more REMIFENTANIL MEDIS 1 mg – 5 mg, than you should.**  
Due to the very short duration of action of remifentanil, the potential for deleterious effects due to overdose is limited to the immediate time period following medicinal product administration. Response to discontinuation of the medicinal product is rapid, with return to baseline within ten minutes.  
In the event of overdose, or suspected overdose, take the following actions: discontinue administration of Remifentanil, maintain a patent airway, initiate assisted or controlled ventilation with oxygen, and maintain adequate cardiovascular function. If depressed respiration is associated with muscle rigidity, a neuromuscular blocking agent may be required to facilitate assisted or controlled respiration. Intravenous fluids and vasopressor agents for the treatment of hypotension and other supportive measures may be employed. Intravenous administration of an opioid antagonist such as naloxone may be used as a specific antidote in addition to ventilatory support to manage severe respiratory depression. The duration of respiratory depression following overdose with Remifentanil is unlikely to exceed the duration of action of the opioid antagonist.  
If you stop using remifentanil MEDIS 1 mg – 5 mg:  
As with all opioids, this drug may produce dependency.

**4. POSSIBLE SIDE EFFECTS**  
Like all drugs, REMIFENTANIL MEDIS 1 mg – 5 mg can cause side effects, although not everybody gets them.  
Very common:  
- muscle stiffness;  
- low blood pressure;  
- Nausea, vomiting, - Common :  
- High blood pressure after the operation;  
- a slow heartbeat;  
- shivering after the operation  
Respiratory problems;  
- Itching/itchiness  
- pain after the operation;  
- Constipation;  
- A feeling of fatigue, drowsiness;  
- oxygen deficiency;  
- A systolic cardiac arrest (in combination with other anaesthetics).  
Very rarely:  
- severe allergic reactions in patients receiving Remifentanil with one or more anaesthetic medicine  
- Seizures, heart rhythm disorders, dependence and addiction were also observed following the use of Remifentanil.  
If you notice any side effects not listed in this leaflet, or if any of the side effects become serious, please tell your doctor or pharmacist.  
**5. HOW TO STORE REMIFENTANIL MEDIS 1 mg – REMIFENTANIL MEDIS 5 mg?**  
Keep out of the sight and reach of children.  
REMIFENTANIL MEDIS 1 mg – 5 mg should not be used after the expiry date which is stated on the carton and label.  
**Before reconstitution:**  
Store at a temperature not exceeding 25 ° C.  
After reconstitution:  
The chemical and physical use stability has been demonstrated for 24 hours at 25 ° C. From a microbiological point of view, the product 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, unless reconstitution has taken place in controlled and validated aseptic conditions.  
After dilution:  
Any mixture of the reconstituted solution, REMIFENTANIL MEDIS 1 mg – 5 mg with injectable liquids should be used immediately. Any remaining solution should be discarded.  
Medicines should not be disposed of as wastewater or household waste. Ask your pharmacist how to dispose of medicines no longer required. These measures will help to protect the environment.

**6. FURTHER INFORMATION**  
a. What REMIFENTANIL MEDIS 1 mg – 5 mg contains:  
Active substance : REMIFENTANIL MEDIS 1 mg REMIFENTANIL MEDIS 5 mg  
Remifentanil (hydrochloride form) 1 mg 5 mg  
Excipients : Glycine, sodium hydroxide, hydrochloric acid - 0.9.

b. What REMIFENTANIL MEDIS 1 mg – 5 mg looks like and contents of the pack.  
REMIFENTANIL MEDIS 1 mg is a narcotic.  
REMIFENTANIL MEDIS 5 mg : vial of a Powder for solution for injection or infusion. Box of 05 vials and Box of 10 vials.  
REMIFENTANIL MEDIS 5 mg is a narcotic.  
REMIFENTANIL MEDIS 5 mg : vial of a Powder for solution for injection or infusion. Box of 05 vials and Box of 10 vials.  
**c. MARKETING AUTHORISATION HOLDER AND MANUFACTURER**  
Marketing authorisation holder: Les Laboratoires MEDIS – route de Tuisin Km 7 – BP206 – 8000 Nabel.  
Manufacturer: Les Laboratoires MEDIS – route de Tuisin Km 7 – BP206 – 8000 Nabel.  
Tel: (216) 723 20 06 - Fax: (216) 723 21 06  
d. THE LAST DATE THIS LEAFLET WAS APPROVED (MONTH / YEAR):  
- August 2012 - version 09-

### This is a drug

- A drug is a product but it is different from the other products.  
- A drug is a product which acts on your health and its non appropriate consumption can expose you to danger.  
- Rigorously respect your doctor's prescription and the mode of administration he prescribed. Follow your pharmacist's advices.  
- Your doctor and your pharmacist know drugs, their indications and contra-indications.  
- Do not stop on your own initiative the treatment during the prescribed period  
- Do not retake, do not increase doses without consulting your doctor.  
**KEEP ANY DRUG OUT OF THE REACH OF CHILDREN.**

