

### ● SIDE-EFFECTS

- ▶ **Common or very common** Epistaxis · gastrointestinal motility disorder · headache · nasal complaints · throat complaints
- ▶ **Uncommon** Corneal oedema · eye disorders · eye pain · nausea · respiratory disorders · stomatitis · vision disorders
- ▶ **Rare or very rare** Palpitations

● **ALLERGY AND CROSS-SENSITIVITY** Contra-indicated in patients with hypersensitivity to atropine or its derivatives.

● **PREGNANCY** Manufacturer advises only use if potential benefit outweighs the risk.

● **BREAST FEEDING** No information available—manufacturer advises only use if potential benefit outweighs risk.

● **PATIENT AND CARER ADVICE** Patients or carers should be counselled on appropriate administration technique and warned against accidental contact with the eye (due to risk of ocular complications).

**Driving and skilled tasks** Manufacturer advises patients and carers should be counselled on the effects on driving and performance of skilled tasks—increased risk of dizziness and vision disorders.

● **MEDICINAL FORMS** There can be variation in the licensing of different medicines containing the same drug.

#### **Spray**

EXCIPIENTS: May contain Benzalkonium chloride, disodium edetate

▶ **Rinatec** (Sanofi)

**Ipratropium bromide 21 microgram per 1 dose** Rinatec  
21micrograms/dose nasal spray | 180 dose [PoM] £6.54 DT = £6.54

## CORTICOSTEROIDS

### Corticosteroids (intranasal)

#### **IMPORTANT SAFETY INFORMATION**

MHRA/CHM ADVICE: CORTICOSTEROIDS: RARE RISK OF CENTRAL SEROUS CHORIORETINOPATHY WITH LOCAL AS WELL AS SYSTEMIC ADMINISTRATION (AUGUST 2017)

Central serous chorioretinopathy is a retinal disorder that has been linked to the systemic use of corticosteroids. Recently, it has also been reported after local administration of corticosteroids via inhaled and intranasal, epidural, intra-articular, topical dermal, and perocular routes. The MHRA recommends that patients should be advised to report any blurred vision or other visual disturbances with corticosteroid treatment given by any route; consider referral to an ophthalmologist for evaluation of possible causes if a patient presents with vision problems.

● **CAUTIONS** Avoid after nasal surgery (until healing has occurred) · avoid in pulmonary tuberculosis · avoid in the presence of untreated nasal infections · patients transferred from systemic corticosteroids may experience exacerbation of some symptoms

#### **CAUTIONS, FURTHER INFORMATION**

▶ **Systemic absorption** Systemic absorption may follow nasal administration particularly if high doses are used or if treatment is prolonged; therefore also consider the cautions and side-effects of systemic corticosteroids. The risk of systemic effects may be greater with nasal drops than with nasal sprays; drops are administered incorrectly more often than sprays.

### ● SIDE-EFFECTS

- ▶ **Common or very common** Altered smell sensation · epistaxis · headache · nasal complaints · taste altered · throat irritation
- ▶ **Rare or very rare** Glaucoma · nasal septum perforation (more common following nasal surgery) · vision blurred

**SIDE-EFFECTS, FURTHER INFORMATION** Systemic absorption may follow nasal administration particularly if high doses are used or if treatment is prolonged. Therefore also consider the side-effects of systemic corticosteroids.

● **MONITORING REQUIREMENTS** The height of children receiving prolonged treatment with nasal corticosteroids should be monitored; if growth is slowed, referral to a paediatrician should be considered.

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### Beclometasone dipropionate

04-Jan-2016

(Beclomethasone dipropionate)

#### ● INDICATIONS AND DOSE

**Prophylaxis and treatment of allergic and vasomotor rhinitis**

▶ **BY INTRNASAL ADMINISTRATION**

- ▶ Child 6–17 years: 100 micrograms twice daily, dose to be administered into each nostril, reduced to 50 micrograms twice daily, dose to be administered into each nostril, dose to be reduced when symptoms controlled; maximum 400 micrograms per day

● **INTERACTIONS** → Appendix 1: corticosteroids

● **MEDICINAL FORMS** There can be variation in the licensing of different medicines containing the same drug.

#### **Spray**

EXCIPIENTS: May contain Benzalkonium chloride, polysorbates

▶ **Beclometasone dipropionate (Non-proprietary)**

**Beclometasone dipropionate 50 microgram per 1 dose** Beclometasone 50micrograms/dose nasal spray | 200 dose [PoM] DT = £3.02

▶ **Beconase** (GlaxoSmithKline UK Ltd, Omega Pharma Ltd)

**Beclometasone dipropionate 50 microgram per 1 dose** Beconase Aqueous 50micrograms/dose nasal spray | 200 dose [PoM] £2.63 DT = £3.02

▶ **Nasobec** (Teva UK Ltd)

**Beclometasone dipropionate 50 microgram per 1 dose** Nasobec Aqueous 50micrograms/dose nasal spray | 200 dose [PoM] £3.06 DT = £3.02

above

### Betamethasone

21-Dec-2017

#### ● INDICATIONS AND DOSE

**BETNESOL®**

**Non-infected inflammatory conditions of nose**

▶ **BY INTRNASAL ADMINISTRATION**

- ▶ Child: Apply 2–3 drops 2–3 times a day, dose to be applied into each nostril

**VISTAMETHASONE®**

**Non-infected inflammatory conditions of nose**

▶ **BY INTRNASAL ADMINISTRATION**

- ▶ Child: Apply 2–3 drops twice daily, dose to be applied into each nostril

● **INTERACTIONS** → Appendix 1: corticosteroids

● **MEDICINAL FORMS** There can be variation in the licensing of different medicines containing the same drug.

#### **Ear/eye/nose drops solution**

EXCIPIENTS: May contain Benzalkonium chloride, disodium edetate

▶ **Betnesol** (RPH Pharmaceuticals AB)

**Betamethasone sodium phosphate 1 mg per 1 ml** Betnesol 0.1% eye/ear/nose drops | 10 ml [PoM] £2.32 DT = £2.32

▶ **Vistamethasone** (Martindale Pharmaceuticals Ltd)

**Betamethasone sodium phosphate 1 mg per 1 ml** Vistamethasone 0.1% ear/eye/nose drops | 5 ml [PoM] £1.02 | 10 ml [PoM] £1.16 DT = £2.32