

# Summary of Product Characteristics

## 1 NAME OF THE MEDICINAL PRODUCT

Otrivine-Antistin Eye Drops

## 2 QUALITATIVE AND QUANTITATIVE COMPOSITION

Xylometazoline hydrochloride 0.05 % w/v

Antazoline sulphate 0.5 % w/v

Excipients with known effect: Benzalkonium chloride (0.1 mg/ml), boric acid (30 mg/ml).

For the full list of excipients, see section 6.1.

## 3 PHARMACEUTICAL FORM

Eye drops solution (Eye Drops).

Clear, colourless aqueous eye drops solution.

## 4 CLINICAL PARTICULARS

### 4.1 Therapeutic indications

For the symptomatic relief of conjunctival hyperaemia and oedema associated with conjunctivitis of allergic origin.

### 4.2 Posology and method of administration

#### Posology

##### *Adults*

1 or 2 drops instilled 2 - 3 times a day.

##### *Paediatric population*

*Children aged 12 years and over*: 1 drop instilled 2 to 3 times a day.

No specific studies are available in this patient group. Due to possible systemic effects, Otrivine-Antistin is not recommended for use in children younger than 12 years of age (*see also section 4.4*).

##### *Elderly*

1 drop instilled 2 to 3 times a day.

#### Method of administration

For local administration to the eye.

The dispenser remains sterile until the original closure is broken. Patients must be instructed to avoid allowing the tip of the dispensing container to contact the eye or surrounding structures as this may contaminate the solution.

If more than one medication needs to be instilled into the eye, an interval of 5 minutes between application of the different medicinal products must be allowed.

### 4.3 Contraindications

- o Hypersensitivity to the active substances or to any of the excipients listed in section 6.1
- o Presence of narrow angle glaucoma
- o Use with contact lenses
- o Use in patients receiving monoamine oxidase inhibitors or within 14 days of stopping such treatment

#### 4.4 Special warnings and precautions for use

Like other topically applied ophthalmic drugs, Otrivine-Antistin may be absorbed systemically and occasionally cause systemic sympathomimetic effects such as hypertension, nervousness, nausea, dizziness, headache, insomnia, palpitations, tachycardia and arrhythmia.

Otrivine-Antistin should be used with caution in elderly patients with severe cardiovascular disease, including arrhythmia, poorly controlled hypertension or diabetes.

Use with caution in the presence of hypertension, cardiac irregularities, hyperthyroidism, diabetes mellitus or pheochromocytomas.

Patients with long QT syndrome treated with xylometazoline may be at increased risk of serious ventricular arrhythmias.

Otrivine-Antistin should also be used with caution in patients with conditions causing urinary retention such as prostatic hypertrophy and should also be used in caution in patients who are currently receiving other sympathomimetic drugs.

Not suitable for patients suffering from dry eyes without first seeking medical advice. Rebound hyperaemia may follow prolonged frequent use. Otrivine-Antistin should not be used without supervision over a long period of time.

If symptoms do not improve after 2 days, medical advice should be sought to rule out the possibility of a bacterial infection. Inflammation arising from infection should receive appropriate anti-bacterial therapy.

Eye drops are not for injection. They should never be injected subconjunctivally, nor should they be directly introduced into the anterior chamber of the eye.

This medicine contains 2.8 micrograms benzalkonium chloride in each drop, which is equivalent to 0.1 mg/ml.

Benzalkonium chloride may cause eye irritation, especially with dry eyes or disorders of the cornea. Patients should be instructed to talk to a doctor if they feel abnormal eye sensation, stinging or pain in the eye after using this medicine.

This medicine contains boric acid.

This medicine should not be given to a child younger than 2 years without medical advice, as it contains boron and may impair fertility in the future.

#### 4.5 Interaction with other medicinal products and other forms of interaction

This product should not be used in patients receiving monoamine oxidase inhibitors or within 14 days of stopping such treatment (*see section 4.3*)

Sedating anti-histamines can enhance the sedating effects of CNS depressants including alcohol, hypnotics, opioid analgesics, anxiolytic sedatives, anti-psychotics. They also have an additive anti-muscarinic action with other anti-muscarinic drugs, such as atropine and some antidepressants. Otrivine-Antistin should be used with caution in patients receiving other medications such as digitalis, beta-adrenergic blockers, guanethidine, reserpine, methyldopa or anti-hypertensive agents. Concurrent use with halogenated anaesthetic agents such as chloroform, cyclopropane, halothane, enflurane or isoflurane may provoke or worsen ventricular arrhythmias.

#### 4.6 Fertility, pregnancy and lactation

In line with common practice, the use of medication during pregnancy is not recommended unless considered essential.

It is not known whether the active ingredients are distributed in human milk. It should therefore not be administered to nursing mothers, or breast feeding should be interrupted for 48 hours after administration.

#### 4.7 Effects on ability to drive and use machines

Patients with blurred vision should not drive or operate machinery.

#### 4.8 Undesirable effects

The following adverse events have been reported and are categorised by frequency as follows: very common ( $\geq 1/10$ ), common ( $\geq 1/100$  to  $< 1/10$ ), uncommon ( $\geq 1/1,000$  to  $< 1/100$ ), rare ( $\geq 1/10,000$  to  $< 1/1,000$ ), very rare ( $< 1/10,000$ ), and not known (frequency cannot be estimated from the available data).

System Organ Class	Very Common $\geq 1/10$	Common $\geq 1/100$ to $< 1/10$	Uncommon $\geq 1/1,000$ to $< 1/100$	Rare $\geq 1/10,000$ to $< 1/1,000$	Very Rare $< 1/10,000$	Not Known
Immune system disorders						Hypersensitivity
Nervous system disorders						Headache; Drowsiness
Eye disorders						Stinging sensation in eyes; Blurred vision; Mydriasis; Eye irritation; Ocular hyperaemia
Cardiac disorders						Tachycardia; Palpitation; Arrhythmia
Vascular disorders						Hypertension; Pallor
Respiratory, thoracic and mediastinal disorders			Epistaxis			
Gastrointestinal disorders						Nausea
Skin and subcutaneous tissue disorders						Sweating

Local allergic reactions (e.g. rash, oedema, pruritus) have been reported post-marketing.

Although administered via the topical route, systematic side effects may occur in sensitive patients:

- tachycardia (especially in small children), palpitations, arrhythmia, hypertension,
- occipital headache,
- nausea, paleness and sweating.

#### Reporting of suspected adverse reactions

Reporting suspected adverse reactions after authorisation of the medicinal product is important. It allows continued monitoring of the benefit/risk balance of the medicinal product. Healthcare professionals are asked to report any suspected adverse reactions via

HPRA Pharmacovigilance

Website: [www.hpra.ie](http://www.hpra.ie)

#### 4.9 Overdose

Excessive dosage and/or prolonged or too frequent use of xylometazoline hydrochloride, especially in children, may cause adverse systemic effects. Excessive dosage in children may cause profound CNS depression possibly necessitating intensive supportive care. CNS depression, shock-like hypotension, and coma have occurred following overdose of naphazoline and tetrahydrozoline; the possibility that this may occur with xylometazoline should be kept in mind.

## 5 PHARMACOLOGICAL PROPERTIES

### 5.1 Pharmacodynamic properties

Pharmacotherapeutic group: Sensory organs, ophthalmologicals, decongestants and antiallergics, sympathomimetics used as decongestants, ATC code: S01GA53.

Otrivine-Antistin is a combination of a long acting vasoconstrictor, xylometazoline and an antihistamine, antazoline.

Xylometazoline is a sympathomimetic agent with marked alpha-adrenergic activity. It acts as a vasoconstrictor which reduces eye redness.

Antazoline is an H<sub>1</sub> receptor antagonist. It has antihistaminic, anticholinergic and local anaesthetic properties. The primary mediator of inflammation in allergic conjunctivitis appears to be histamine. Antazoline reduces histamine induced responses including itching. In clinical studies, Otrivine-Antistin was shown to cause a small mydriatic response but no change in intraocular pressure. The mydriatic response is too small to be of clinical significance or to impose any risk of pupil block or irido-corneal angle glaucoma, even in susceptible subjects.

### 5.2 Pharmacokinetic properties

No formal studies have been conducted. The absence of systemic effects following ocular administration to rabbits may indicate that there is little systemic absorption following ocular instillation.

### 5.3 Preclinical safety data

Nothing of clinical relevance.

## 6 PHARMACEUTICAL PARTICULARS

### 6.1 List of excipients

Benzalkonium chloride  
Boric acid  
Disodium edetate  
Sodium tetraborate  
Water for injections

### 6.2 Incompatibilities

Not applicable.

### 6.3 Shelf life

Unopened: 24 months  
Opened: 28 days

### 6.4 Special precautions for storage

Do not store above 25°C. Protect from heat.

### 6.5 Nature and contents of container

10 ml Polyethylene dropper bottle.

### 6.6 Special precautions for disposal of a used medicinal product or waste materials derived from such medicinal product and other handling of the product

No special requirements.

**7 MARKETING AUTHORISATION HOLDER**

Laboratoires Thea  
Zone Industrielle Du Brezet  
12 Rue Louis Bleriot  
Clermont Ferrand  
63100  
France

**8 MARKETING AUTHORISATION NUMBER**

PA1107/008/001

**9 DATE OF FIRST AUTHORISATION/RENEWAL OF THE AUTHORISATION**

Date of first authorisation: 01 April 1983

Date of last renewal: 17 December 2006

**10 DATE OF REVISION OF THE TEXT**

June 2025