

PACKAGE LEAFLET: INFORMATION FOR THE PATIENT

TEBONEVA 70 mg TABLETS AND 1 microgram CAPSULES, SOFT

alendronic acid and alfacalcidol

Read all of this leaflet carefully before you start taking 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 pharmacist.
- 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 pharmacist. This includes any possible side effects not listed in this leaflet.

In this leaflet:

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

1. WHAT TEBONEVA IS AND WHAT IT IS USED FOR

Teboneva is a medicine with two individual formulations: **alendronic acid tablets** and **alfacalcidol capsules**.

What is alendronic acid?

Alendronic acid belongs to a group of medicines known as bisphosphonates. Alendronic acid prevents the loss of bone mass occurring in women after the menopause and helps in bone regeneration. In this way, alendronic acid reduces the risk of bone fractures which commonly occur in association with osteoporosis, particularly spine and hip fractures. Alendronic acid is not a hormone preparation.

What is alfacalcidol?

Alfacalcidol belongs to a group of medicines known as “vitamin D analogues”, which regulate the amount of calcium and phosphate in the body.

Alfacalcidol causes increased uptake of calcium and phosphate from food in the small intestine and promotes the incorporation of minerals into bone. At the same time, alfacalcidol reduces the release of calcium from bone and prevents bone disintegration. In some clinical studies, alfacalcidol has been shown to reduce the risk of falls in the elderly.

Teboneva is used for the treatment of osteoporosis which is common in women after menopause.

2. WHAT YOU NEED TO KNOW BEFORE YOU TAKE TEBONEVA

Do not take Teboneva if:

- you are allergic (hypersensitive) to alfacalcidol, alendronic acid, to peanut or soya or other medicines of the bisphosphonate group or any of the other ingredients of this medicine (listed in section 6)
- you have a narrowing of the gullet, swallowing difficulties or other problems that obstruct the passage of food from the gullet into the stomach
- you are unable to stand or sit upright for at least 30 minutes. You must not lie down, as the gullet area may otherwise become irritated when taking **Teboneva**.
- your doctor has told you that your blood magnesium levels are too high
- your doctor has told you that your blood calcium levels are too low or too high
- you suffer from a condition known as milk-alkali syndrome or Burnett's syndrome. In this condition, certain blood counts (calcium levels and the calcium phosphate product) and blood pH values are increased (so-called alkalosis).
- you are known to suffer from vitamin D hypersensitivity
- you are suffering from vitamin D intoxication
- you have a kidney disorder and require dialysis treatment
- you have ever had kidney stones or if you have sarcoidosis (Boeck's disease), you are at greater risk if you take this medicine.

Teboneva should not be administered to children and adolescents less than 18 years of age.

If you think that one or more of these points applies to you, do not take this medicine. Talk to your doctor first and follow his/her advice

Warnings and precautions

Talk to your doctor or pharmacist before taking Teboneva if::

- you have a kidney disorder
- you suffer from allergies
- you have low blood calcium levels. These must firstly be corrected before you take **Teboneva**. Other disorders associated with calcium or phosphate imbalance within your body, such as an underactive parathyroid, may need to be treated first and require close monitoring whilst you are taking **Teboneva**.

- you have sarcoidosis (Boeck's disease), leukaemia or lymphoma, you are at greater risk if you take this medicine
- you are on high calcium diet; you may be at higher risk of hypercalcaemia
- you suffer from an upper gastrointestinal disorder, such as swallowing difficulties, oesophageal (gullet) disease, inflammation of the lining of the stomach or small intestine or ulcers, or if you have recently had (within the last year) a severe gastrointestinal disorder, such as a peptic ulcer or active gastrointestinal bleeding, or if you have had surgery on the upper gastrointestinal tract (other than pyloroplasty, a surgical procedure on the pylorus or gastric outlet)
- your doctor has told you that you have Barrett's oesophagus (a condition associated with changes in the cells that line the lower oesophagus)
- you have poor dental health, gum disease or you don't receive routine dental care
- you are scheduled to have a tooth removed
- you have cancer
- you are receiving chemotherapy or radiation treatment
- you are taking corticosteroids (such as prednisone or dexamethasone)
- you are or have been a smoker (as this may increase the risk of dental problems)

You may be advised to have a dental check-up before starting treatment with **Teboneva**.

It is important to maintain good oral hygiene when being treated with **Teboneva**. You should have routine dental check-ups throughout your treatment and you should contact your doctor or dentist if you experience any problems with your mouth or teeth such as loose teeth, pain or swelling.

Irritation, inflammation or ulceration of the gullet (oesophagus – the tube that connects your mouth with your stomach) may occur whilst taking **Teboneva**, which may be followed by narrowing of the gullet in rare cases. These are often associated with symptoms such as chest pain, heartburn or swallowing difficulties/pain on swallowing and may be so serious that hospitalisation is required.

Such problems occur less often if you drink a full glass of water (at least 200 ml, **not** mineral water) when taking alendronic acid tablets and/or if you avoid lying down for 30 minutes after taking alendronic acid tablets. Please note that these side effects may get worse if you continue to take alendronic acid tablets after such symptoms have appeared. As the risk of such side effects is also increased if you do not take the medicine correctly, please follow the instructions in section 3 "How to take Teboneva" at all times.

Other medicines and Teboneva

Tell your doctor or pharmacist if you are taking, have recently taken or might take any other medicines.

Medicines that interfere with the effect of alendronic acid:

- If taken at the same time, dietary supplements containing calcium, antacids (stomach acid neutralisers) and some other oral medications (taken by mouth) may affect the absorption of alendronic acid tablets into the body. It is therefore important that you follow the instructions given in section 3 "How to take Teboneva".

- Certain medicines for rheumatism or long-term pain called NSAIDs (e.g. aspirin or ibuprofen) might cause digestive problems. Therefore, caution should be used when these medicines are taken at the same time as **Teboneva**.

Medicines that interfere with the effect of alfacalcidol:

- Vitamin D and its derivatives must not be taken at the same time as alfacalcidol, as alfacalcidol itself is a highly potent vitamin D derivative. Co-administration with other vitamin D derivatives can greatly increase the risk of hypercalcaemia (high blood calcium levels). Very high blood calcium levels can be life-threatening.
- The risk of high calcium levels may be increased by preparations containing calcium, thiazides (certain dehydrating tablets - “diuretics”) and other medicines that increase blood calcium levels.
- In patients taking digitalis medication, even a slight rise in blood calcium levels can cause heart rhythm disorders. For this reason, patients taking digitalis and alfacalcidol capsules must be strictly monitored.
- If you are also taking any barbiturates (potent sleeping pills or medication used to treat seizures) or any other medicines used to treat seizures (anticonvulsants), please tell your doctor, so that he/she can adjust the amount of alfacalcidol you are taking, as appropriate.

The following group of medicines can also impair the effect of alfacalcidol:

- Glucocorticoids (cortisone and related substances)
- Bile acid-binding agents (cholestyramine, colestipol)
- Sucralfate (a medicine used to protect the stomach lining)
- Antacids (stomach acid neutralisers) with a high aluminium content. Alfacalcidol capsules and antacids containing aluminium should therefore be taken 2 hours apart and not at the same time.
- If, due to the menopause, you are taking hormones containing oestrogen, these may enhance the effect of alfacalcidol.

Teboneva with food and drink

Food and drink (even mineral water) will probably reduce the effectiveness of alendronic acid tablets, if consumed together. It is therefore important you follow the instructions given in section 3 “How to take Teboneva”.

Pregnancy, breast-feeding and fertility

You should not take Teboneva if you are pregnant or if you think you are pregnant. Similarly, you should not take Teboneva if you are breast-feeding.

Teboneva is solely intended for use in women after the menopause.

Driving and using machines

There have been side effects (including blurred vision, dizziness and severe bone, muscle or joint pain) reported with alendronic acid that may affect your ability to drive or operate machinery. Individual responses may vary (see section 'Possible side effects').

Important information about some of the ingredients of Teboneva

Teboneva contains arachis oil (peanut oil). If you are allergic to peanut or soya, do not use this medicinal product.

Teboneva contains sorbitol. If you have been told that you have an intolerance to some sugars, please contact your doctor before taking Teboneva.

This medicinal product contains small amounts of ethanol (alcohol), less than 100mg per capsule.

3. HOW TO TAKE TEBONEVA

Teboneva consists of alendronic acid tablets and alfacalcidol capsules.

The alendronic acid tablet should be taken in the morning while the alfacalcidol capsules should be taken in the evening.

Always take **Teboneva** exactly as your doctor has told you. Check with your doctor or pharmacist if you are not sure.

The usual dose is:

Alendronic acid tablets

Take one tablet **once a week**.

Choose a day of the week that best fits in with your general timetable. Take one tablet every week on your selected day.

Alendronic acid tablets can cause irritation of the mouth and gullet. To reduce the risk of mucous membrane irritation, please follow the instructions below at all times when taking alendronic acid tablets:

1. Take the alendronic acid tablet after getting up on your selected day of the week, before having anything to eat or drink and before taking other medications. Swallow the alendronic acid tablet and then drink a full glass of water **immediately** (at least 200 ml). You must **not** chew the tablet or allow it to dissolve in your mouth.
 - Do **not** take the tablet with mineral water (either carbonated or non-carbonated).
 - Do **not** take the tablet with coffee or tea.
 - Do **not** take the tablet with juice or milk.
2. Do **not** lie down after taking the tablet; keep your upper body in an upright position (sitting, standing or walking) for at least 30 minutes after taking the tablet. After this

time, do not lie down without having had a meal. In this way, you will prevent the tablets from leaving the stomach and re-entering the gullet, where they cause irritation.

3. However, wait for at least 30 minutes after taking the alendronic acid tablet until you have your first food, drink or other medications of the day [including antacids (stomach acid neutralisers), dietary supplements containing calcium and vitamins]. Alendronic acid tablets are effective only if you take them on an empty stomach.
4. Do not take alendronic acid tablets before going to bed or before getting up for the day.
5. If you experience difficulties or pain when swallowing, chest pain, sudden heartburn or if you notice any worsening of frequent existing heartburn, you must stop taking the alendronic acid tablets and tell your doctor.

Alfacalcidol capsules

Take one capsule **once daily**.

1. Take each alfacalcidol capsule in the evening.
2. Swallow the capsule whole with sufficient liquid.
3. Your doctor should regularly measure calcium levels in your blood. If there is any rise in these levels, you may have to stop taking calcium-containing products altogether or just temporarily stop taking the alfacalcidol capsules until your blood calcium levels have returned to normal.

Use in children and adolescents

Teboneva should not be administered to children and adolescents less than 18 years of age.

It is important that you continue to take **Teboneva** for as long as your doctor prescribes. **Teboneva** can only improve your osteoporosis if you take both the tablets and capsules. The duration of treatment depends on osteoporotic fracture risk; your doctor will decide for how long you will need to take **Teboneva**.

If you take more Teboneva than you should

If you have taken more Teboneva as prescribed, you should inform your doctor or your local poison control center immediately.

If you take more alendronic acid tablets than you should

Drink a full glass of milk or take an antacid. Do not force yourself to be sick and do not lie down. Inform your doctor or go to your nearest hospital immediately. The following symptoms may occur: reduced calcium and phosphate in the blood and upper gastrointestinal adverse events, such as upset stomach, heartburn, oesophagitis, gastritis or ulcers.

If you take more alfacalcidol capsules than you should

In the event of a long-term overdose with alfacalcidol, life-threatening hypercalcaemia (high blood calcium levels) may sometimes occur.

Symptoms of this disorder may be gradual in onset and may be confused with malaise (generally feeling unwell). Possible signs are:

- weakness, tiredness, exhaustion, headache
- digestive complaints such as nausea, vomiting, constipation or diarrhoea
- heartburn, dry mouth
- muscle, bone and joint pain

- itching or palpitations.

If your kidneys are no longer able to concentrate urine, the following disorders may also occur:

- increased urine output, increased thirst and drinking, night-time urinary urgency
- protein in the urine.

Contact your doctor if you have taken too many alfacalcidol capsules or if, based on the symptoms above, you think that your blood calcium levels might be too high.

If you forget to take your alendronic acid tablets

If you forget an alendronic acid tablet, take one on the following morning, after you realise.

Do not take two tablets in one day. Afterwards, continue with your usual treatment schedule, taking one alendronic acid tablet again as usual on your selected day of the week.

If you forget to take your alfacalcidol capsules

If you forget to take the alfacalcidol capsules, take them as soon as you realise. Do not take a double dose to make up for a forgotten dose. Then simply continue taking the capsules as per your treatment schedule.

If you stop taking Teboneva

You should not decide to suspend your treatment with **Teboneva**, or end it before you should, without talking to your treating doctor. If you are required to suspend your treatment or end it early on medical grounds, please follow the instructions given by your doctor.

If you have any further questions on the use of this medicine, ask your doctor or pharmacist.

4. POSSIBLE-UNDESIRABLE EFFECTS

Like all medicines, this medicine can cause side effects, although not everybody gets them.

If you are affected by any of the side effects listed below, stop taking **Teboneva** and consult your doctor as soon as possible.

Possible side effects of alendronic acid tablets

Very common (may affect more than 1 in 10 people): bone, muscle and/or joint pain which is sometimes severe.

Common (may affect up to 1 in 10 people): heartburn; difficulty swallowing; pain upon swallowing; ulceration of the gullet (oesophagus - the tube that connects your mouth with your stomach) which can cause chest pain, heartburn or difficulty or pain upon swallowing, joint swelling, abdominal pain, uncomfortable feeling in the stomach or belching after eating, constipation, full or bloated feeling in the stomach, diarrhoea, flatulence, hair loss, itching, headache, dizziness, tiredness, swelling in the hands or legs.

Uncommon (may affect up to 1 in 100 people): nausea, vomiting, irritation or inflammation of the gullet (oesophagus – the tube that connects your mouth with your stomach) or stomach, black or tar-like stools, blurred vision, pain or redness in the eye, rash, redness of the skin, transient flu-like symptoms, such as aching muscles, generally feeling unwell and sometimes with fever usually at the start of treatment, taste disturbance.

Rare (may affect up to 1 in 1,000 people): allergic reactions such as hives; swelling of the face, lips, tongue and/or throat, possibly causing difficulty breathing or swallowing, symptoms of low blood calcium levels including muscle cramps or spasms and/or tingling sensation in the fingers or around the mouth, stomach or peptic ulcers (sometimes severe or with bleeding), narrowing of the gullet (oesophagus – the tube that connects your mouth with your stomach), mouth ulcers when the

tablets have been chewed or sucked, rash made worse by sunlight, severe skin reactions, pain in the mouth, and/or jaw, swelling or sores inside the mouth, numbness or a feeling of heaviness in the jaw, or loosening of a tooth. These could be signs of bone damage in the jaw (osteonecrosis) generally associated with delayed healing and infection, often following tooth extraction. Contact your doctor and dentist if you experience such symptoms.

Unusual fracture of the thigh bone particularly in patients on long-term treatment for osteoporosis may occur rarely. Contact your doctor if you experience pain, weakness or discomfort in your thigh, hip or groin as this may be an early indication of a possible fracture of the thigh bone.

Possible side effects of alfacalcidol capsules

Rare (may affect up to 1 in 1,000 people): allergic reactions, anaphylactic shock (caused mainly by the peanut oil which is one of the ingredients in the capsules), increases in blood phosphate levels, hypercalcaemia (increased blood calcium concentration). The clinical symptoms of hypercalcaemia are uncharacteristic (e.g. weakness, tiredness, feeling thirsty, gastrointestinal symptoms and itching). If you experience such signs, you should consult your doctor, so that he/she can monitor your blood calcium levels. Such an increase in calcium levels is particularly dangerous if you are also taking digitalis for heart failure (for further details, see also section 2 “Taking other medicines”).

Very rare (may affect up to 1 in 10,000 people): calcium deposits have been reported in tissue, e.g. in the cornea of the eye or blood vessels, in patients taking alfacalcidol and have been shown to be reversible.

For Teboneva

Both components of **Teboneva**, alendronic acid and alfacalcidol, can both affect calcium levels in your blood: alendronic acid may reduce them, whilst alfacalcidol may increase them. Thus, the risk of calcium imbalance is reduced.

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.

Reporting of side effects

If you get any side effects, talk to your doctor, pharmacist or nurse. This includes any possible side effects not listed in this leaflet. You can also report side effects directly via HPRA Pharmacovigilance, Earlsfort Terrace, IRL - Dublin 2; Tel: +353 1 6764971; Fax: +353 1 6762517. Website: www.hpra.ie; E-mail: medsafety@hpra.ie. By reporting side effects you can help provide more information on the safety of this medicine.

5. HOW TO STORE TEBONEVA

Keep out of the reach and sight of children.

Do not use **this medicine** after the expiry date which is stated on the blister and outer packaging after EXP. The expiry date refers to the last date that month.

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

Medicines should not be disposed of via wastewater or household waste. Ask your pharmacist how to dispose of medicines no longer required. These measures will help to protect the environment.

6. CONTENTS OF THE PACK AND OTHER INFORMATION

What Teboneva contains

The active substances are alendronate monosodium monohydrate and alfacalcidol.

One tablet contains 70 mg alendronic acid (as alendronate monosodium monohydrate).

One capsule, soft contains 1 microgram alfacalcidol.

The other ingredients are:

Tablets: Microcrystalline cellulose, croscarmellose sodium, magnesium stearate.

Capsules, soft: citric acid anhydrous, propyl gallate, all-rac- α -tocopherol (vitamin E), ethanol anhydrous and arachis oil (peanut oil) refined.

Capsule shell: gelatine, glycerol 85%, anidrisorb 85/70 (which consists of: sorbitol, sorbitan anhydrides, mannitol, higher polyols and water) and titanium dioxide (E171).

Printing ink: shellac and iron oxide black (E172).

What Teboneva looks like and contents of the pack:

This medicinal product is presented as tablet (alendronic acid) and soft capsule (alfacalcidol).

The tablets are white to off-white, round tablets, flat on both sides and with bevelled edges. They are stamped with “T” on one side and without marking on the other side.

The capsules are opaque, white to off-white oval capsules, soft, imprinted with “1.0” in black ink.

Each blister contains one alendronic acid tablet and seven alfacalcidol capsules.

Teboneva is available in packs of:

2 blisters: 2 alendronic acid tablets and 14 alfacalcidol capsules, soft

4 blisters: 4 alendronic acid tablets and 28 alfacalcidol capsules, soft

12 blisters: 12 alendronic acid tablets and 84 alfacalcidol capsules, soft

Not all pack sizes may be marketed.

Marketing authorisation holder and manufacturer

Marketing authorisation holder

Teva Pharma B.V.
Computerweg 10
3542 DR Utrecht
Netherlands

Manufacturer

TEVA UK Ltd
Brampton Road, Hampden Park, Eastbourne,
East Sussex,
BN22 9AG
United Kingdom

Pharmachemie B.V.
Swensweg 5,
2031 GA Haarlem
The Netherlands

This medicinal product is authorised in the Member States of the EEA under the following names:

Germany	Valebo 70 mg Tabletten und 1 Mikrogramm Weichkapseln
Austria	Tevabone 70 mg Tabletten und 1 Mikrogramm Weichkapseln
Belgium	Valebo 70 mg + 1 microgram tabletten + capsules, zacht
Bulgaria	Tevabone 70 mg таблетки и 1 microgram меки капсули
Denmark	Tevabone 70 mg tabletter og 1 mikrogram bløde kapsler
Spain	Valebo 70 mg comprimidos y 1 µg capsulas blandas
France	Tevabone 70 mg, comprimés et de doux capsules de 1 microgramme
Hungary	Tevabone 70 mg tableta és 1 mikrogramm lágy kapszula
Ireland	Teboneva 70 mg tablets and 1 microgram capsules, soft
Netherlands	Tevabone 70 mg tabletten en 1 microgram zachte capsules
Portugal	Tevabone
Slovenia	Valebo 70 mg tablete in 1 mikrogram mehke kapsule v kombiniranem pakiranju
Slovakia	Tevabone 70 mg tablety a 1 mikrogram mäkké kapsuly
UK	Valebo 70 mg + 1 microgram Tablets + Capsules, soft

This leaflet was last approved in November 2014.