

## **PACKAGE LEAFLET: INFORMATION FOR THE USER**

Vantas 50 mg implant  
histrelin acetate

**Read all of this leaflet carefully before you start using 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 symptoms are the same as yours.
- If you get any side effects, talk to your doctor. This includes any possible side effects not listed on this leaflet. See section 4.

### **What is in this leaflet:**

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

### **1. What Vantas is and what it is used for**

- Vantas is a medicine delivery system which is surgically placed (or implanted) under the skin.
- It is used for the treatment of advanced prostate cancer because it may help to relieve your prostate cancer symptoms.
- The active substance is histrelin acetate. Each Vantas implant contains approximately 50 milligrams of histrelin acetate. After insertion under your skin, it releases 41 micrograms of histrelin (equivalent to 50 micrograms of histrelin acetate) per day into your body, over a period of 12 months.
- Histrelin blocks your body from making and secreting hormones so that testosterone levels are reduced or cannot be detected in your blood.

### **2. What you need to know before you use Vantas**

#### **Do not use Vantas:**

- If you are **allergic** (hypersensitive) to the active substance, histrelin acetate, to other medicines called GnRH (Gonadotropin Releasing Hormone) agonists or to any of the other ingredients. (**See section 6** for a list of **other ingredients**.)
- If you are a woman. Vantas has not been studied in women and is not for use in women.
- If you are a child (under 18). Vantas has not been studied in children and is not for use in children.

If you think any of these apply to you, talk to your doctor before having the implant. Then follow the advice given to you.

### **Warnings and precautions**

It is possible that your symptoms may get worse or new symptoms occur during the first week of treatment (See Section 4 – Possible side effects). If this happens, **phone your doctor immediately**.

Please tell your doctor if you might be at risk or you have any of the following:

- Any heart or blood vessel conditions, including heart rhythm problems (arrhythmia), or are being treated with medicines for these conditions. The risk of heart rhythm problems may be increased when using Vantas.
- metabolic disease
- diabetes.

There have been reports of depression in patients taking Vantas which may be severe. If you are using Vantas and develop depressed mood, inform your doctor.

### **Other medicines and Vantas**

Please tell your doctor or pharmacist if you are taking, or have recently taken, or are thinking of taking **any other** medicines, **including** medicines obtained without a prescription. It is not known whether Vantas and other medicines can affect one another.

Vantas might interfere with some medicines used to treat heart rhythm problems (e.g. quinidine, procainamide, amiodarone and sotalol) or might increase the risk of heart rhythm problems when used with some other drugs (e.g. methadone (used for pain relief and part of drug addiction detoxification), moxifloxacin (an antibiotic), antipsychotics used for serious mental illnesses).

### **Pregnancy and breast-feeding**

Vantas has not been studied in pregnant or breast-feeding women as it is not for use in women.

### **Driving and using machines**

Immediately after receiving the implant, extra care should be taken when driving, because of the cut and stitches which you have just had.

There have been no studies completed on the effects of Vantas on driving.

### **Important information about some of the ingredients of Vantas**

The container of this medicinal product contains latex rubber. May cause severe allergic reactions.

## **3. How to use Vantas**

- Only Vantas implantation device can be used for insertion of the implant.
- The implant is placed under the skin of the inside of your upper arm by your doctor.
- Your doctor will numb your arm, make a small cut (incision) and place the implant under the skin.

- The cut will be closed with stitches and special surgical tape and then covered with a bandage.

#### **During the first week:**

- **Keep** the bandage in place for at least one day.
- **Do not** remove the surgical steri-strips. Steri-strips look like thread and your doctor used them to close the cut which he made in your skin in order to put the implant in. They will drop off by themselves.
- **Avoid** heavy lifting and exercising of the treated arm for 7 days after the insertion of the implant.
- For 24 hours after the insertion of the implant, keep the treated arm clean and dry. Do not bathe or swim for 24 hours.

#### **During the first year:**

- **Remember** to see your doctor for routine checks, which are offered to make sure that the implant is still in place and is still working.
- The implant could work its way out of your body through the cut where it was originally put in. This does not happen often. You may actually notice it coming out, or, rarely, it may come out without you noticing it. If you think it has come out, **phone your doctor**.
- Your doctor will do blood tests to confirm that you are responding to the treatment, for example by having your prostate specific antigen (PSA) or testosterone levels checked.
- After 12 months, the implant must be removed.
- The implant may be difficult to feel under your skin. If it cannot be felt under your skin at the time when it is to be removed, your doctor may order a special test, such as ultrasound or a CT scan, in order to locate it.
- After removal, your doctor may then insert a new implant to continue your treatment.

#### **If you use more Vantas than you should**

There have been no reported cases of overdose. The implant is given to you under strict medical supervision.

#### **If you stop using Vantas**

If you wish to stop taking this medicine, please talk to your doctor.

If you have any further questions about the use of this medicine, please ask your doctor.

#### **4. Possible side effects**

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

This medicine can cause an increase in testosterone during the first week after insertion. Your symptoms may get worse for a few weeks. You may get new symptoms.

Contact your doctor **immediately** if you:

- get new, or worse, bone pain;

- feel weak;
- get feelings of weakness in your legs;
- have blood in your urine;
- have problems urinating or cannot urinate.

You may get some pain, bruising and redness at the place where the implant is inserted, at the time it is being inserted or removed and for a while afterwards. These reactions usually go away within two weeks, without any treatment.

If your incision is not healing but looks and feels as if it is getting worse (bleeding, redness, soreness), contact your doctor.

If you notice any of the following side effects, contact your doctor:

**The frequencies are defined as:**

<i>very common: may affect more than 1 user in 10</i>
<i>common: may affect 1 to 10 users in 100</i>
<i>uncommon: may affect 1 to 10 users in 1,000</i>
<i>rare: may affect 1 to 10 users in 10,000</i>
<i>very rare: may affect less than 1 user in 10,000</i>
<i>not known: frequency cannot be estimated from the available data</i>

**Very common side effects are:**

- hot flushes (reddening of the face and/or neck).

**Common side effects are:**

- the kidneys not working as well as they should, frequent urinating;
- difficulties in passing any urine;
- shortness of breath after exercising;
- mood changes, depression, problems getting to sleep, less interest in sex;
- dizziness, headache;
- blushing;
- testicles becoming smaller, enlargement of breasts, impotence;
- skin reactions where the implant was inserted, such as pain, tenderness, redness;
- other reactions to the implantation procedure, such as weakness and tiredness;
- some temporary damage to the liver cells;
- pain in the joints, pain in the arms and legs;
- constipation;
- weight gain, raised blood sugar level;
- growth of excess hair.

**Uncommon side effect are:**

- anaemia;
- abdominal discomfort, nausea;

- fluid retention, food cravings, high calcium levels, high cholesterol, increased appetite;
- irritability;
- shaking;
- weight loss;
- irregular heart beating and/or a premature beat of the heart (palpitations);
- abnormal bleeding;
- bruising, night sweats, itching, excessive sweating;
- back pain, muscle spasms, muscle infiltration, neck pain;
- painful and difficult urination, blood in urine, kidney stone, kidney failure;
- breast pain, breast tenderness, genital itching, sexual dysfunction;
- feelings of cold, tiredness, feeling unwell, peripheral oedema, pain, swelling;
- ureteral stent occlusion;
- bruising;
- detectable as a result of various blood tests, including: higher liver enzymes (elevated aspartate-aminotransferase), elevated blood lactate dehydrogenase, elevated blood testosterone, abnormality in kidney function tests (lowered creatinine clearance), elevated acid phosphatase in the prostate.

**Rare side effects are:**

- skin infection;
- application site inflammation.

**Side effects, frequency not known:**

- glucose intolerance, worsening of existing diabetes;
- cardiovascular disease, heart problems, e.g. heart rhythm problems, changes in ECG (QT prolongation);
- rash;
- loss in bone mineral density, frailty of the bones (osteoporosis).

If you notice any side effects not mentioned in this leaflet, please contact your doctor.

**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](http://www.hpra.ie); or E-mail: [medsafety@hpra.ie](mailto:medsafety@hpra.ie). By reporting side effects you can help provide more information on the safety of this medicine.

**5. How to store Vantas**

- Keep this medicine out of the sight and reach of children.
- Do not use this medicine after the expiry date, which is stated on the carton and vial label after EXP:.. The expiry date refers to the last day of the month.
- Store *implant* in a refrigerator (2 °C – 8 °C). Do not freeze.
- Store *implant* in the original package in order to protect from light.
- Do not store implantation device above 25 °C. Do not refrigerate or freeze.
- Store implantation device in the original package in order to protect from light.

- Dispose of vial and implantation device after use. Single use only.

Do not throw away any medicines via wastewater or household waste. Ask your pharmacist how to throw away medicines you no longer use. These measures will help protect the environment.

## 6. Contents of the pack and other information

### What Vantas contains:

- The **active** substance is histrelin acetate. Each implant contains approximately 50 mg histrelin acetate corresponding to 41 mg histrelin.
- The **other ingredients** are in the medicine core pellet. This contains the ingredient stearic acid (E570). There are four drug core pellets inserted into an acrylic co-polymer shell. This acrylic co-polymer shell consists of 2-hydroxyethyl methacrylate, 2-hydroxypropyl methacrylate and trimethylolpropane trimethacrylate. All of these are plastics which have been used previously in implants.
- Sterile storage solution of the implant consists of sodium chloride and water for injections.

### What Vantas looks like and contents of the pack

Vantas is an implant and is supplied in a carton containing an amber plastic pouch, which in turn carries the vial containing 1 Vantas implant.

The implantation device is contained in a polyethylene sachet, which is placed in a carton.

The glass vial containing the implant has a Teflon-coated stopper (chlorobutyl isoprene rubber) and an aluminium seal. The stopper contains latex rubber. The implant is immersed in 2 ml of 1.8% sterile sodium chloride solution and looks like a thin tube.

A Package Insert, with insertion and removal instructions for your doctor, together with this Package Leaflet is provided with the product.

### Marketing Authorisation Holder

Orion Corporation  
Orionintie 1  
FI-02200 Espoo  
Finland

### Manufacturer

Orion Corporation Orion Pharma  
Orionintie 1  
FI-02200 Espoo  
Finland

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

Austria, Denmark, Germany, Ireland, Latvia, Lithuania, Slovenia, Spain, Sweden, UK: Vantas

**This leaflet was last revised in: February 2015**

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**THE FOLLOWING INFORMATION IS INTENDED FOR HEALTHCARE PROFESSIONALS ONLY:**

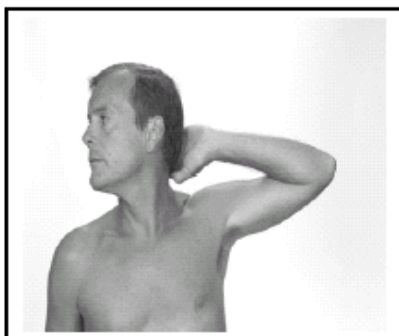
**Instructions for Insertion and Removal**

Vantas is supplied in a sterile vial within an opaque plastic bag, which in turn is in a carton. The implantation device is contained in a polyethylene sachet, which is placed in a carton.

It is important to use aseptic techniques to minimize any chance of infection. Sterile gloves are required for the insertion procedure and subsequent removal of the implant.

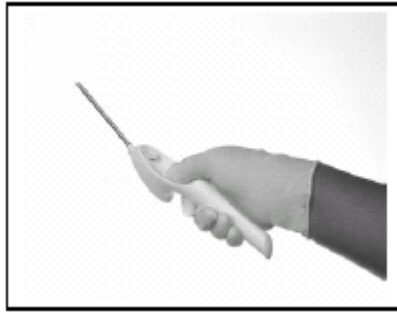
*Identifying the insertion site*

The patient should be on his back, with the arm least used (e.g. left arm of a right-handed person) flexed so the physician has ready access to the inner part of the upper arm. Prop the arm with pillows so the patient can easily hold that position. The optimum site for insertion is approximately half way between the shoulder and the elbow and in the crease between the biceps and triceps.



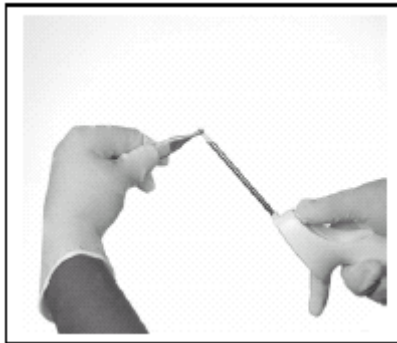
*Loading the implantation device*

Load the implantation device prior to prepping the insertion field and insertion. Remove the implantation device from its sterile bag. The device is shipped with the cannula fully extended. Verify this by inspecting the position of the green retraction button. The button should be all the way forward, towards the cannula, away from the handle.



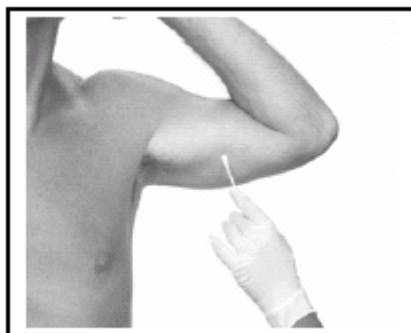
Remove the metal band from the vial, remove the rubber stopper and use a mosquito clamp to grasp either tip of the implant. Avoid grabbing or clamping the middle of the implant to prevent distortion of the implant.

Insert the implant into the implantation device. It will seat in cannula so that just the tip is visible at the bottom of the bevel.



### **Inserting the Implant**

Swab the insertion site with povidone-iodine swabs, then lay a fenestrated drape over the insertion site (for clarity of illustration, not shown in the accompanying photograph).



### ***Anesthetic***

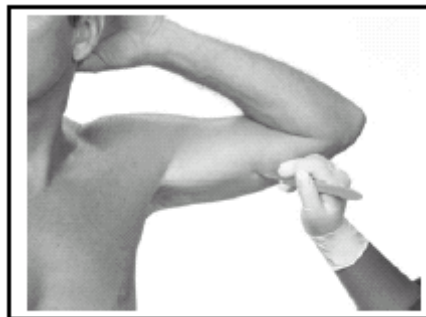
Determine that the patient has no lidocaine/epinephrine (adrenaline) allergies. Inject a few ml's of anesthetic, starting at the planned incision site, then infiltrating up to the length of the implant, 32 mm, in a fan like fashion.





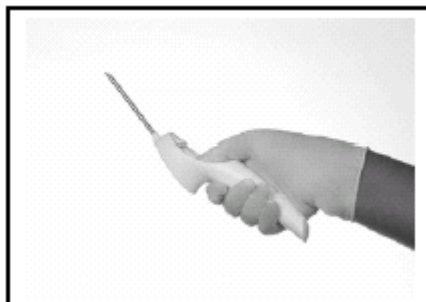
### *Incision*

Using a scalpel make a 2-3 mm shallow skin incision on in the inner aspect of the upper arm perpendicular to length of the biceps.

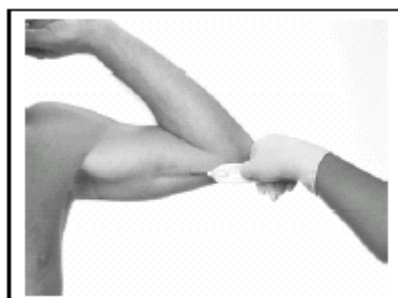


### **Insertion**

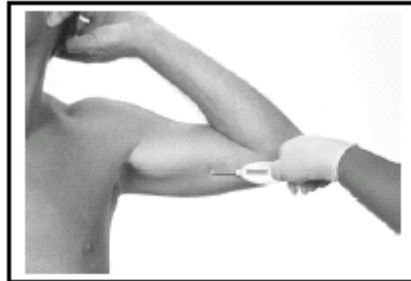
Grasp the implantation device by its handle, as shown.



Insert the tip of the implantation device into the incision with the bevel up and advance the device subcutaneously along the path of the anesthetic, up to the inscribed line on the cannula. To ensure subcutaneous placement, the implanter should visibly raise the skin at all times during insertion. Be sure that the implanter does not enter muscle tissue.



Hold the implantation device in place as you move your thumb to the green retraction button. Press the button down to release the locking mechanism, then draw the button back to the back stop all the while holding the device in place. The cannula will withdraw from the incision, leaving the implant in the dermis. Withdraw the implanter from the incision. Release of the implant can be checked by palpation.



Note: Do not try to push the device in deeper once the retraction process has started to avoid severing the implant. If you wish to re-start the process, withdraw the device, grasp the implant by the tip to extract it, reset the retraction button to its most forward position, reload the implant and start again.

### ***Closing the incision***

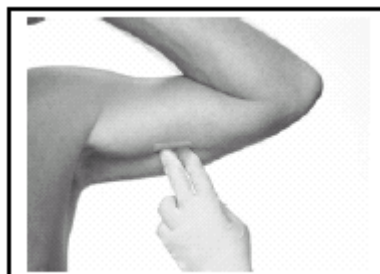
To close the incision, use one or two sutures (optional), knots facing inside the incision. Apply light coating of antibiotic ointment directly onto the incision. Close with two surgical strips. Apply a 4" gauze pad over the incision and secure with a bandage.

### **Removal procedure and new implant insertion**

The Vantas implant must be removed after 12 months of therapy.

#### ***Locating the implant***

The implant may be located by palpating the area near the incision from the prior year. Generally, the implant is readily palpated. Press the distal end of the implant to determine the location of the proximal tip relative to the old incision.



In the event the implant is difficult to locate, ultrasound can be used. If ultrasound fails to locate the implant, other imaging techniques such as CT or MRI may be used to locate it.

#### ***Preparing the site***

Patient position and site preparation are the same as for the initial insertion. Swab the area above and around the implant with povidone-iodine swabs. Drape the area with a fenestrated drape.

### *Anesthetic*

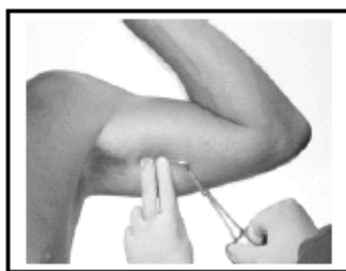
After determining the absence of known allergies to lidocaine/epinephrine (adrenaline), press down on the implant tip furthest from the old incision. Inject a small amount of lidocaine/epinephrine at the tip near the incision, then advance the needle along the length, but beneath the implant, steadily injecting a small amount of anesthetic along the way. The anesthetic will raise up the implant within the dermis. If you are inserting a new implant, you have the option of either putting the new one in the same “pocket” as the removed one, or using the same incision, insert the new implant in the opposite direction. If you are placing the implant in the opposite direction, apply anesthetic along the length of the path for the new implant prior to explantation.

### *Incision/explantation*

Using a #11 scalpel, make a 2-3 mm incision near the tip and about 1-2 mm deep. Generally, the tip of the implant will be visible through a thin pseudo- capsule of tissue. If not, push down on the distal tip of the implant and massage it forward towards the incision. Carefully “nick” the pseudo capsule to reveal the polymer tip.



Grasp the tip with a mosquito clamp and extract the implant.



If inserting a new implant, proceed according to the initial insertion instructions. The new implant may be placed through the same incision site. Alternatively, the contralateral arm may be used.

### *Storage*

The implantation device supplied is sterile in its pouch. Do not store above 25 °C. Do not refrigerate or freeze. Store in the original package in order to protect from light.

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