## PRESCRIBING INFORMATION

# PICO-SALAX®

Magnesium oxide, citric acid and sodium picosulfate Powder for oral solution Purgative

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## PICO-SALAX®

Magnesium oxide, citric acid and sodium picosulfate Powder for oral solution Purgative

## PART I: HEALTH PROFESSIONAL INFORMATION

#### SUMMARY PRODUCT INFORMATION

Route of Administration	Dosage Form/Strength	Clinically Relevant Nonmedicinal Ingredients
Oral	Each sachet contains: Powder :citric acid 12g; magnesium oxide 3.5 g; sodium picosulfate 10 mg	None. For a complete listing see the Dosage Forms, Composition and Packaging section of the product monograph.

#### General

The active components of PICO-SALAX® are sodium picosulfate and magnesium citrate.

Picosulfate (a pro-drug) is a stimulant cathartic active locally in the colon.

Magnesium citrate (magnesium oxide and citric acid) acts as an osmotic laxative by retaining moisture in the colon. The action is of a powerful "washing out" effect combined with peristaltic stimulation to clear the bowel prior to radiography, colonoscopy or surgery. Full doses of the saline cathartics (15 g of magnesium sulfate or its equivalent) produces a semi-fluid or watery evacuation within 3-6 hours or less.

The product is not intended for routine use as a laxative.

Some absorption of the component ions of the saline cathartics does occur, and in certain instances they may produce systemic toxicity. This is especially true for magnesium salts, since 20% or more of the administered cation is absorbed. If renal function is normal, the absorbed magnesium is rapidly excreted. However, if a magnesium cation is given to an individual with impaired renal function, the accumulation of magnesium ion in the body fluids may be sufficient to cause magnesium intoxication.

In most instances, salts that gain access to the systemic circulation are rapidly excreted by the kidneys.

#### INDICATIONS AND CLINICAL USE

PICO-SALAX is indicated for clearance of the bowel prior to x-ray examination, endoscopy or surgery.

#### **CONTRAINDICATIONS**

PICO-SALAX is contraindicated in:

- Patients who are hypersensitive to this drug or to any ingredient in the formulation or component of the container. For a complete listing, see the DOSAGE FORMS, COMPOSITION AND PACKAGING section of this document.
- Patients with congestive cardiac failure, gastric retention, gastro-intestinal ulceration, toxic colitis, toxic megacolon, ileus, nausea and vomiting, acute surgical abdominal conditions such as acute appendicitis and known or suspected gastro-intestinal obstruction or perforation.
- Patients with severely reduced renal function, accumulation of magnesium in plasma may occur. Another preparation should be used in such cases.

#### WARNINGS AND PRECAUTIONS

## General

Care should also be taken in patients with recent gastro-intestinal surgery, renal impairment, heart disease or inflammatory bowel disease.

Use with caution in patients on drugs that might affect water and/or electrolyte balance e.g. diuretics, corticosteroids, lithium [see *Drug Interactions and Adverse Reactions*].

PICO-SALAX may modify the absorption of regularly prescribed oral medication and should be used with caution e.g. there have been isolated reports of seizures in patients on antiepileptics, with previously controlled epilepsy [see *Drug Interactions and Adverse Reactions*].

Patients should avoid taking oral iron preparations for a week before colonoscopy. Constipating drugs (e.g. cholinergics, opioids) should be suspended for a few days before the procedure, after consulting with your doctor.

An inadequate oral intake of water and electrolytes could create clinically significant deficiencies, particularly in less fit patients. In this regard, the elderly, debilitated individuals and patients at risk of hypokalaemia may need particular attention. Prompt corrective action

should be taken to restore fluid/electrolyte balance in patients with signs or symptoms of hyponatraemia.

The period of bowel cleansing should not exceed 24 hours because longer preparation time may increase the risk of water and electrolyte imbalance.

## Serious Fluid and Serum Chemistry Abnormalities

Advise patients to hydrate adequately before, during and after the use of PICO-SALAX. Use caution in patients with congestive heart failure when replacing fluids. If a patient develops significant vomiting or signs of dehydration including signs of orthostatic hypotension after taking PICO-SALAX, consider performing post-colonoscopy lab tests (electrolytes, creatinine and BUN) and treat accordingly. Approximately 20% of patients in clinical trials had orthostatic changes (changes in blood pressure and/or heart rate) on the day of colonoscopy; however these changes were not clinically relevant. In clinical trials orthostatic changes were documented out to seven days post colonoscopy [see Adverse Reactions].

Fluid and electrolyte disturbances can lead to serious adverse events including cardiac arrhythmias or seizures and renal impairment. Fluid and electrolyte abnormalities should be corrected before treatment with PICO-SALAX. In addition, use caution when prescribing PICO-SALAX for patients who have conditions or who are using medications that increase the risk for fluid and electrolyte disturbances or that may increase the risk of adverse events of seizure, arrhythmia, and renal impairment.

#### Seizures

There have been reports of generalized tonic-clonic seizures with the use of bowel preparation products in patients with no prior history of seizures. Seizures were associated with electrolyte abnormalities (e.g. hyponatremia, hypokalemia, hypokalemia and hypomagnesemia) and low serum osmolality. Neurologic abnormalities resolved with correction of fluid and electrolyte abnormalities.

Use caution when prescribing PICO-SALAX for patients with a history of seizures and in patients at risk of seizure, such as patients taking medications that lower the seizure threshold (e.g. tricyclic antidepressants), patients withdraw from alcohol or benzodiazepines, patients with known or suspected hyponatremia. [see Adverse Reactions]

## **Use in Patients with Renal Impairment**

As in other magnesium containing bowel preparations, use caution when prescribing PICO-SALAX for patients with impaired renal function or patients taking concomitant medications that may affect renal function (such as diuretics, angiotensin converting enzyme inhibitors, angiotensin receptor blockers, or non-steroidal anti-inflammatory drugs). These patients may be at increased risk for renal injury. Advise these patients of the importance of adequate hydration before, during and after the use of PICO-SALAX. Consider performing baseline and post-colonoscopy laboratory tests (electrolytes, creatinine and BUN) in these patients. In patients with severely reduced renal function (creatinine clearance < 30 mL/min), accumulation of magnesium in plasma may occur.

## **Cardiac Arrhythmias**

There have been rare reports of serious arrhythmias associated with the use of ionic osmotic laxative products for bowel preparation. Use caution when prescribing PICO-SALAX for patients at increased risk of arrhythmias (e.g. patients with a history of prolonged QT, uncontrolled arrhythmias, recent myocardial infarction, unstable angina, congestive heart failure, or cardiomyopathy).

## Colonic Mucosal Ulceration, Ischemic Colitis and Ulcerative Colitis

Osmotic laxatives may produce colonic mucosal aphthous ulceration and there have been reports of more serious cases of ischemic colitis requiring hospitalization. Concurrent use of additional stimulant laxatives with PICO-SALAX may increase this risk. The potential for mucosal ulceration should be considered when interpreting colonoscopy findings in patients with known or suspected inflammatory bowel disease [see Adverse Reactions].

## **Use in Patients with Significant Gastrointestinal Disease**

If gastrointestinal obstruction or perforation is suspected, perform appropriate diagnostic studies to rule out these conditions before administering PICO-SALAX. Use with caution in patients with severe active ulcerative colitis.

## Aspiration

Patients with an impaired gag reflex and patients prone to regurgitation or aspiration should be observed during the administration of PICO-SALAX. Use with caution in these patients.

## **Not for Direct Ingestion**

Each packet must be dissolved in 150 mL (5 oz) of cold water and administered at separate times according to the dosing regimen. Direct ingestion of the undissolved powder may increase the risk of nausea, vomiting, dehydration, and electrolyte disturbances.

## **Pregnancy and Lactation**

Reproduction studies with sodium picosulfate performed in animals have revealed no evidence of a harmful action on the fetus. However, clinical experience of the use of PICO-SALAX® during pregnancy is limited and caution should be observed, particularly during the first trimester.

It is not known whether this drug is excreted in human milk. Because many drugs are excreted in human milk, caution should be exercised when PICO-SALAX is administered to a nursing woman.

#### Geriatrics ( $\geq$ 65 years of age)

In controlled clinical trials of PICO-SALAX, 215 of 1201 (18%) patients were 65 years of age or older. The overall incidence of treatment-emergent adverse events was similar among patients ≥65 years of age (73%) and patients <65 years of age (71%).

#### ADVERSE REACTIONS

## **Clinical Trials Experience**

Because clinical trials are conducted under widely varying conditions, adverse reaction rates observed in the clinical trials of a drug cannot be directly compared to rates in clinical trials of another drug and may not reflect the rates observed in practice.

In randomized, multicenter, controlled clinical trials, nausea, headache and vomiting were the most common adverse reactions (>1%) following PICO-SALAX administration. The patients were not blinded to the study drug. Since abdominal bloating, distension, pain/cramping and watery diarrhea are known to occur in response to colon cleansing preparations, these effects were documented as adverse events in the clinical trials only if they required medical intervention (such as a change in study drug or led to study discontinuation, therapeutic or diagnostic procedures, met the criteria for a serious adverse event), or showed clinically significant worsening during the study that was not in the frame of the usual clinical course, as determined by the investigator.

#### **Post-marketing Experience**

The following spontaneous reports have been identified during use of formulations similar to PICO-SALAX. Because these events are reported voluntarily from a population of uncertain size, it is not always possible to reliably estimate their frequency or establish a causal relationship to drug exposure.

## Allergic reactions

Cases of hypersensitivity reactions including rash, urticaria and purpura have been reported.

#### Electrolyte abnormalities

There have been reports of hypokalemia, hyponatremia and hypermagnesemia with the use of PICO-SALAX for colon preparation prior to colonoscopy.

## Gastrointestinal

Abdominal pain, diarrhea, fecal incontinence and proctalgia have been reported with the use of PICO-SALAX for colon preparation prior to colonoscopy. There have been isolated reports of reversible aphthoid ileal ulcers. Ischemic colitis has been reported with the use of PICO-SALAX for colon preparation prior to colonoscopy. However, a causal relationship between these ischemic colitis cases and the use of PICO-SALAX has not been established.

#### Neurologic

There have been reports of generalized tonic-clonic seizures associated with and without hyponatremia in epileptic patients.

#### DRUG INTERACTIONS

As a purgative, PICO-SALAX increases the gastrointestinal transit rate therefore the absorption of other orally administered medicines (e.g. anti-epileptics, contraceptives, anti-diabetics, antibiotics) may be modified during the treatment period (see *Warnings and Precautions for Use*).

The efficacy of PICO-SALAX is lowered by bulk-forming laxatives.

## **Drugs That May Increase Risks of Fluid and Electrolyte Abnormalities**

Use caution when prescribing PICO-SALAX for patients with conditions or who are using medications that increase the risk for fluid and electrolyte disturbances, or may increase the risk of seizure, arrhythmias, and prolonged QT in the setting of fluid and electrolyte abnormalities. This includes patients receiving drugs which may be associated with hypokalemia (such as diuretics or corticosteroids, or drugs where hypokalemia is a particular risk, such as cardiac glycosides) or hyponatremia. Use caution when PICO-SALAX is used in patients on non-steroidal anti-inflammatory drugs (NSAIDS) or drugs known to induce Antidiuretic Hormone Secretion (SIADH), such as tricyclic antidepressants, selective serotonin re-uptake inhibitors, antipsychotic drugs and carbamazepine, as these drugs may increase the risk of water retention and/or electrolyte imbalance. Consider additional patient evaluations as appropriate [see Adverse Reactions].

## **Potential for Altered Drug Absorption**

Oral medication administered within one hour of the start of administration of PICO-SALAX solution may be flushed from the GI tract and the medication may not be absorbed.

Tetracycline and fluoroquinolone antibiotics, digoxin, chlorpromazine and penicillamine, should be taken at least 2 hours before and not less than 6 hours after administration of PICO-SALAX to avoid chelation with magnesium.

#### DOSAGE AND ADMINISTRATION

#### **PRE-DOSING INSTRUCTIONS:**

• At least 3 days prior to the patients procedure, advise the patient to not consume seeds or nuts due to digestive residue or fresh fruits or raw vegetables (i.e. no salads) and no multigrain bread

#### **ADULT DOSING INSTRUCTIONS:**

Fill a mug with 150 ml (5 oz) of cold water. Empty contents of one sachet in the mug (rarely, mixture may heat up - allow to cool before drinking). Stir for 2 -3 minutes until completely dissolved. The solution should now become an off-white, cloudy liquid. Following each dose, advise the patient to drink 1.5 to 2 Litres of a variety of clear fluids over 4 hours.

**Advise the patient TO NOT DRINK JUST WATER ALONE.** Patients should also drink a balanced electrolyte solution. Drinking only water to replace the fluid losses may lead to electrolyte imbalance, particularly to hyponatremia and possibly seizures.

Recommended clear fluids include Gatorade<sup>†</sup>, fruit juices, clear both, tea or coffee (black, sweetened to taste, **no** milk, cream or soy), clear sodas (e.g. ginger ale), plain Jell-O<sup>†</sup> (not red or purple), Popsicles<sup>†</sup> (not red or purple) and water.

Diabetics can use a fibre-free supplement/meal replacement.

One day before the procedure the patient should have clear fluids ONLY and no solid food.

Morning colonoscopy - before 12:00 pm (noon);

One day before procedure: Take 1 sachet (first dose) at 5:00 pm followed by 1.5 to 2 Litres of a variety of clear fluids.

**Six (6) hours prior to procedure:** Take **1 sachet** (second dose) followed by 1.5 to 2 Litres of a variety of clear fluids.

No fluid should be taken at least 2 hours prior to the procedure.

Afternoon colonoscopy - 12:00 pm (noon) or later:

One day before procedure: Take 1 sachet (first dose) at 7:00 pm followed by 1.5 to 2 Litres of a variety of clear fluids.

On the same day as procedure: Take 1 sachet (second dose) in the morning, 6 hours prior to procedure (time to be confirmed by the physician), followed by 1.5 to 2 Litres of a variety of clear fluids.

In order to replace fluid lost from the body, advise patients to drink plenty of clear fluids throughout the treatment with PICO-SALAX until bowel movements have ceased.

No fluid should be taken at least 2 hours prior to the procedure.

## PEDIATRIC DOSING INSTRUCTIONS:

Fill a mug with 150 ml (5 oz) of cold water. Empty contents of one sachet in the mug (rarely, mixture may heat up - allow to cool before drinking). Stir until completely dissolved.

It is recommended that PICO-SALAX should be given at least 5-6 hours before bedtime to avoid interference with sleep. Splitting the dose over two days is recommended as follows:

(1 to 6 years old): One day before procedure: Take ¼ of the prepared solution as per **DOSING INSTRUCTIONS** (first dose) at 6:00 pm followed by one cup of clear liquid (250

mL, 8 oz) every hour while the child is awake. **No solid food should be taken after 6:00 PM.** 

On the same day as procedure: Take \(^1\)/4 of the prepared solution as per DOSING INSTRUCTIONS (second dose) at 8:00 am, followed by one cup of clear liquid (250 mL, 8 oz) <a href="every hour">every hour</a> up to 2 hours prior to the child's procedure.

(6-12 years old): One day before procedure: Take ½ of the prepared solution as per DOSING INSTRUCTIONS (first dose) at 6:00 pm followed by one cup of clear liquid (250 mL, 8 oz) every hour while the child is awake. No solid food should be taken after 6:00 PM.

On the <u>same day</u> as procedure: Take ½ of the prepared solution as per DOSING INSTRUCTIONS (second dose) at 8:00 am, followed by one cup of clear liquid (250 mL, 8 oz) every hour up to 2 hours prior to the child's procedure.

In order to replace fluid lost from the body, it is important to drink plenty of clear fluids throughout the treatment with PICO-SALAX® until bowel movements have ceased. In general, patients should drink about 250 mL of water or clear fluid **and/or a balanced electrolyte solution** (e.g.: Gastrolyte®, Pedialyte®) <u>every hour</u> while they feel the effects of PICO-SALAX®.

No fluid should be taken at least 2 hours prior to the procedure

#### **OVERDOSAGE**

For management of a suspected drug overdose, contact your Regional Poison Control Centre.

Overdose would lead to profuse diarrhoea. Treatment is by general supportive measures and correction of fluid and electrolyte balance.

#### ACTION AND CLINICAL PHARMACOLOGY

Picosulfate (a pro-drug) is a stimulant cathartic active locally in the colon.

Magnesium citrate (magnesium oxide and citric acid) acts as an osmotic laxative by retaining moisture in the colon. The action is of a powerful "washing out" effect combined with peristaltic stimulation to clear the bowel prior to radiography, colonoscopy or surgery. Full doses of the saline cathartics (15 g of magnesium sulfate or its equivalent) produces a semi-fluid of watery evacuation within 3-6 hours or less.

The product is not intended for routine use as a laxative.

Some absorption of the component ions of the saline cathartics does occur, and in certain instances they may produce systemic toxicity. This is especially true for magnesium salts, since 20% or more of the administered cation is absorbed. If renal function is normal, the absorbed magnesium is rapidly excreted. However, if a magnesium cation is given to an individual with impaired renal function, the accumulation of magnesium ion in the body fluids may be sufficient to cause magnesium intoxication.

In most instances, salts that gain access to the systemic circulation are rapidly excreted by the kidneys.

## STORAGE AND STABILITY

Store at 15 °C - 25 °C.

Keep out of the reach of children.

## DOSAGE FORMS, COMPOSITION AND PACKAGING

PICO-SALAX is supplied in a carton containing 1 or 2 sachets, each holding 16.1 grams of powder for oral solution. Each packet contains 10 mg sodium picosulfate, 3.5 g magnesium oxide and 12 g anhydrous citric acid. The excipients include potassium bicarbonate, sodium saccharin, orange or cranberry flavour.

#### PART II: CONSUMER INFORMATION

#### PICO-SALAX®

Magnesiumoxide, citric acid and sodiumpicosulfate
Powder for oral solution
Purgative

This leaflet is designed specifically for Consumers. This leaflet is a summary and will not tell you everything about PICO-SALAX. Contact your doctor or pharmacist if you have any questions about the drug.

## ABOUT THIS MEDICATION

#### What the medication is used for:

PICO-SALAX is a white powder. It is a very strong purgative (i.e. to empty bowels). PICO-SALAX is used to cleanse the bowel of faecal matter and secretions prior to x-ray examination, endoscopy or surgery. This product is not intended for routine use as a laxative.

#### When it should not be used:

- 1. If you are allergic to any of the ingredients (see above).
- 2. If you have any of the following; gastric retention (reduced ability of the stomach to empty), gastric or intestinal ulcers, appendicitis, gastrointestinal blockage or perforation.
- 3. If you have ileus (intestinal blockage or failure of normal movements), toxic colitis (damage to intestinal wall) or toxic megacolon (acute dilatation of the large bowel). In these conditions, transit of the contents of the bowel may be impaired or prevented. Symptoms include nausea, vomiting, diarrhoea, abdominal pain, tenderness or swelling, colicky pain and fever.
- 4. If you have congestive cardiac failure (the heart is unable to pump blood efficiently around the body).
- 5. If you have severely reduced kidney function.

## What it does:

Magnesium oxide and citric acid combine together (chemical reaction) in water to form magnesium citrate, which works as an os motic laxative drawing water into the bowel to help make the stool soft and more watery. Sodium picosulfate works as a stimulant laxative to increase the bowel movements to move the contents along. Together they work to empty the bowel prior to medical procedures.

#### What the medicinal ingredient is:

Each sachet contains 16.1 g of powder which has three active ingredients: sodium picosulfate 10 mg, magnesium oxide 3.5 g and citric acid 12 g;, the later two form magnesium citrate in solution.

#### What the important nonmedicinal ingredients are:

Natural orange or synthetic cranberry flavour, potassium bicarbonate and saccharin sodium

#### What dosage forms it comes in:

Powder

#### WARNINGS AND PRECAUTIONS

# Please consult your doctor before taking PICO-SALAX® if you:

- Have recently had gastrointestinal surgery,
- Have a medical condition affecting the heart or kidneys,
- Have inflammatory bowel disease such as ulcerative colitis or Crohn's disease,
- Are using bulk forming laxatives e.g. bran.
- Have heart problems such as a recent heart attack, irregular or fast heartbeat (arrhythmia), lengthened heart beat (QT prolongation) or angina
- Have a history of seizures
- Have an impaired gag reflex

**Pregnancy or Breast-Feeding:** If you are pregnant or are breast-feeding, ask your doctor or pharmacist for advice before taking PICO-SALAX.

## INTERACTIONS WITH THIS MEDICATION

#### **Taking Other Medicines:**

Please informyour doctor or pharmacist:

- If you are taking or have recently taken or used any other medicines even those that are available without a prescription.
- If you are taking anti-epileptics, contraceptives, antibiotics, diabetes medications and cardiac glycosides as they may be affected during treatment with PICO-SALAX.
- If you are taking diuretics, corticosteroids and lithium as these drugs may affect electrolyte balance.
- If you are taking nonsteroidal anti-inflammatory drugs (NSAIDS), tricyclic antidepressants, antipsychotic drugs or carbamazapine as these drugs may add to the electrolyte imbalance.
- If you are taking oral iron preparations for a week before colonoscopy.
- If you are taking constipating drugs (e.g. cholinergics, opioids); they should be temporarily discontinued for a few days before the procedure.
- If you are taking Tetracycline and fluoroquinolone antibiotics, digoxin, chlorpromazine and penicillamine they should be taken 2 hours before or not less than 6 hours after taking Pico-Salax, to avoid loss of effectiveness of these other medications

#### PROPER USE OF THIS MEDICATION

#### PRE-DOSING INSTRUCTIONS:

If you have special dietary requirements, please discuss this with your doctor.

#### At least 3 days prior to your procedure:

- Do not consume seeds or nuts due to digestive residue
- Do not consume any fresh fruits or raw vegetables (i.e. no salads) and no multigrain bread

#### **ADULT DOSING INSTRUCTIONS:**

Fill a mug with 150 ml (5 oz) of cold water. Empty contents of one sachet in the mug (rarely, mixture may heat up - allow to cool before drinking). Stir for 2-3 minutes until completely dissolved before you drink. The solution should now become an off-white, cloudy liquid. Following each sachet, drink 1.5 to 2 Litres of a variety of clear fluids over 4 hours.

**DO NOT DRINK JUST WATER ALONE.** Drinking only water to replace the fluid losses may lead to electrolyte imbalance, particularly to hyponatremia and possibly seizures. A good option is to also drink a balanced electrolyte solution (e.g. <u>Gastrolyte</u><sup>†</sup>, <u>Pedialyte</u><sup>†</sup>) as recommended by a health professional to replace fluid losses.

Recommended clear fluids include any fluid that you <u>can see</u> through, that is <u>not red or purple</u>; such as sports drinks (e.g. Gatorade<sup>†</sup>), Gastrolyte<sup>†</sup>, Pedialyte<sup>†</sup>, Kool-Aid<sup>†</sup>, clear broth (chicken, vegetable or beef stock with no noodles, meat or vegetables), fruit juices (e.g. apple, white (not red) cranberry, white (not purple) grape), tea or coffee (black, sweetened to taste, **no** milk, creamor soy), clear sodas (e.g. ginger ale), plain Jell-O<sup>†</sup> (not red or purple), Popsicles<sup>†</sup> (not red or purple) and water.

Diabetics can use a fibre-free supplement/meal replacement.

One day before your procedure you should have clear fluids ONLY and no solid food. See list above.

#### Morning colonoscopy - before 12:00 pm (noon):

One day before your procedure: Take 1 sachet (<u>first dose</u>) at 5:00 pm followed by 1.5 to 2 Litres of a variety of clear fluids.

**Six** (6) hours before your procedure: Take 1 sachet (second dose) followed by 1.5 to 2 Litres of a variety of clear fluids.

No fluid should be taken at least 2 hours prior to your procedure.

#### Afternoon colonoscopy - 12:00 pm (noon) or later:

One day before your procedure: Take 1 sachet (first dose) at 7:00 pm followed by 1.5 to 2 Litres of a variety of clear fluids.

On the same day as your procedure: Take 1 sachet (second dose) in the morning, 6 hours before your procedure (time to

**be confirmed by the physician),** followed by 1.5 to 2 Litres of a variety of clear fluids.

In order to replace fluid lost from the body, it is important to drink plenty of clear fluids throughout the treatment with PICO-SALAX until bowel movements have ceased.

No fluid should be taken at least 2 hours prior to your procedure.

#### PEDIATRIC DOSING INSTRUCTIONS:

Fill a mug with 150 ml (5 oz) of cold water. Empty contents of one sachet in the mug (rarely, mixture may heat upallow to cool before drinking). Stir for 2-3 minutes until completely dissolved before you drink.

If possible, it is recommended that PICO-SALAX should be given at least 5-6 hours before bedtime to avoid interference with sleep. Therefore, splitting the dose over two days is recommended for children as follows:

#### (1 to 6 years old):

One day before your procedure: Take ¼ of the prepared solution as per DOSING INSTRUCTIONS (first dose) at 6:00 pm followed by one cup of clear liquid (250 mL, 8 o z) every hour while the child is awake. No solid food should be taken after 6:00 PM.

On the same day as your procedure: Take ¼ of the prepared solution as per DOSING INSTRUCTIONS (second dose) at 8:00 am, followed by one cup of clear liquid (250 mL, 8 oz) every hour up to 2 hours prior to your child's procedure.

#### (6-12 years old):

One day before your procedure: Take ½ of the prepared solution as per DOSING INSTRUCTIONS (first dose) at 6:00 pm followed by one cup of clear liquid (250 mL, 8 oz) every hour while the child is awake. No solid food should be taken after 6:00 PM.

On the same day as your procedure: Take ½ of the prepared solution as per DOSING INSTRUCTIONS (second dose) at 8:00 am, followed by one cup of clear liquid (250 mL, 8 oz) every hour up to 2 hours prior to your child's procedure.

In order to replace fluid lost from the body, it is important to drink plenty of clear fluids throughout the treatment with PICO-SALAX until bowel movements have ceased. In general, patients should drink about 250 mL of water or clear fluid and/or a balanced electrolyte solution (e.g.: Gastrolyte $^\dagger$ , Pedialyte $^\dagger$ ) as recommended by a health care professional, every hour while they feel the effects of PICO-SALAX.

No fluid should be taken at least 2 hours prior to your procedure

## Overdose:

In case of drug overdose, contact a health care practitioner, hospital emergency department or regional Poison Control Centre immediately, even if there are no symptoms.

Overdose would lead to profuse diarrhoea. Treatment is by general supportive measures and correction of fluid and electrolyte balance.

#### SIDE EFFECTS AND WHAT TO DO ABOUT THEM

Like all medicines, PICO-SALAX can cause side effects, although not everybody gets them. Adverse reactions to PICO-SALAX are very rare (< 1 in 10, 000). Some examples include: hyponatraemia, epilepsy, grand mal convulsions, nausea, rash, headache, anaphylactoid reaction, hypersensitivity.

If any side effects become serious or persist, or if you notice any side effects not listed in this leaflet, please tell your doctor or pharmacist.

SERIOUS SIDE EFFECTS, HOW OFTEN THEY HAPPEN AND WHAT TO DO ABOUT THEM					
Symptom / effect		Talk with your doctor or pharmacist		Stop taking drug and call your doctor	
		Only if severe	In all cases	or pharmacist	
Uncommon	Hyponatraemia is a metabolic condition in which there is not enough sodium (salt) in the body fluids outside the cells. Symptoms can include vomiting, confusion, fatigue and irritability.		7	1	
	Convulsion, epilepsy, confusional state, headache.		7	1	
	Vomiting, diarrhea, abdominal pain, nausea.		7		

This is not a complete list of side effects. For any unexpected effects while taking PICO-SALAX, contact your doctor or pharmacist.

PICO-SALAX (sodium pico sulfate, magnesium oxide and citric acid)

## HOW TO STORE IT

Store at roomtemperature (15°C to 25°C).

Keep out of reach of children.

#### REPORTING SUSPECTED SIDE EFFECTS

You can report any suspected adverse reactions associated with the use of health products to the Canada Vigilance Program by one of the following 3 ways:

- Report online at www.healthcanada.gc.ca/medeffect
- Call toll-free at 1-866-234-2345
- Complete a Canada Vigilance Reporting Form and:
  - Fax toll-free to 1-866-678-6789, or
  - Mail to: Canada Vigilance Program Health Canada Postal Locator 0701D Ottawa, Ontario K1A 0K9

Postage paid labels, Canada Vigilance Reporting Form and the adverse reaction reporting guidelines are available on the MedEffect<sup>™</sup> Canada Web site at www.healthcanada.gc.ca/medeffect.

NOTE: Should you require information related to the management of side effects, contact your health professional. The Canada Vigilance Program does not provide medical advice.

## MORE INFORMATION

This document plus the full product monograph, prepared for health professionals, can be provided by contacting the manufacturer, Ferring Inc., at: 1-866-384-1314.

This leaflet was prepared by Ferring Inc.



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