SUMMARY OF PRODUCT CHARACTERISTICS

1 NAME OF THE MEDICINAL PRODUCT

BENLAXID 13,7 g poeder voor drank

2 QUALITATIVE AND QUANTITATIVE COMPOSITION

Each sachet of <Product name> contains the following active ingredients:

Macrogol 3350	13.125 g
Sodium chloride	0.3507 g
Sodium bicarbonate	0 . 1785 g
Potassium chloride	0.0466 g

The content of electrolyte ions per sachet when made up to 125 ml of solution is as follows:

Sodium	65 mmol/l
Chloride	53 mmol/l
Potassium	5.0 mmol/l
Bicarbonate	17 mmol/l

Excipients with known effect:
Each sachet contains 25 mg Aspartame (E951)

For the full list of excipients, see section 6.1.

3 PHARMACEUTICAL FORM

Powder for oral solution.
Free flowing white powder.

4 CLINICAL PARTICULARS

4.1 Therapeutic indications

For the treatment of chronic constipation. Benlaxid is also effective in resolving faecal impaction, defined as refractory constipation with faecal loading of the rectum and/or colon.

4.2 Posology and method of administration

Posology

Chronic constipation

A course of treatment for constipation with Benlaxid does not normally exceed 2 weeks, although this can be repeated if required.
As for all laxatives, prolonged use is not usually recommended. Extended use may be necessary in the care of patients with severe chronic or resistant constipation, secondary to multiple sclerosis or Parkinson's Disease, or induced by regular constipating

medication in particular opioids and antimuscarinics.

Adults, adolescents and the elderly: 1 –3 sachets daily in divided doses, according to individual response.

For extended use, the dose can be adjusted down to 1 or 2 sachets daily.

Children (below 12 years old): Not recommended. Alternative Benlaxid products are available for children.

Faecal impaction
A course of treatment for faecal impaction with Benlaxid does not normally exceed 3 days.

Adults, adolescents and the elderly: 8 sachets daily, all of which should be consumed within a 6 hour period.

Children (below 12 years old): Not recommended. Alternative Benlaxid products are available for children.

Patients with impaired cardiovascular function: For the treatment of faecal impaction the dose should be divided so that no more than two sachets are taken in any one hour.

Patients with renal insufficiency: No dosage change is necessary for treatment of either constipation or faecal impaction.

Method of administration
Each sachet should be dissolved in 125 ml water. For use in faecal impaction 8 sachets may be dissolved in 1 liter of water.

4.3 Contraindications

Intestinal perforation or obstruction due to structural or functional disorder of the gut wall, ileus, severe inflammatory conditions of the intestinal tract, such as Crohn's disease and ulcerative colitis and toxic megacolon.

Hypersensitivity to the active substances or to any of the excipients listed in section 6.1.

4.4 Special warnings and precautions for use

The fluid content of Benlaxid when re-constituted with water does not replace regular fluid intake and adequate fluid intake must be maintained.

Diagnosis of impaction/faecal loading of the rectum should be confirmed by physical or radiological examination of the abdomen and rectum.

Mild adverse drug reactions are possible as indicated in Section 4.8. If patients develop

any symptoms indicating shifts of fluids/electrolytes (e.g. oedema, shortness of breath, increasing fatigue, dehydration, cardiac failure) Benlaxid should be stopped immediately and electrolytes measured, and any abnormality should be treated appropriately.

The absorption of other medicinal products could transiently be reduced due to an increase in gastro-intestinal transit rate induced by Benlaxid (see section 4.5).

Special information about some of the ingredients
This medicinal product contains 186.8 mg sodium per sachet, equivalent to 9.34 % of the WHO recommended maximum daily intake for sodium.
The maximum daily dose of this product in patients with faecal impaction is equivalent to 74.7 % of the WHO recommended maximum daily intake for sodium.

The maximum daily dose of this product in patients with chronic constipation is equivalent to 27.9% of the WHO recommended maximum daily intake for sodium.

Benlaxid is considered high in sodium. This should be particularly taken into account for those on a low salt diet.

This medicinal product contains 25.0 mg aspartame per sachet. Neither non-clinical nor clinical data are available to assess aspartame use in infants below 12 weeks of age.
Aspartame is a source of phenylalanine. It may be harmful if you have phenylketonuria (PKU), a rare genetic disorder in which phenylalanine builds up because the body cannot remove it properly

This medicine contains 5.0 mmol potassium per sachet. To be taken into consideration by patients with reduced kidney function or patients on a controlled potassium diet

In patients with swallowing problems, who need the addition of a thickener to solutions to enhance an appropriate intake, interactions should be considered, see section 4.5.

4.5 Interaction with other medicinal products and other forms of interaction

Macrogol raises the solubility of medicinal products that are soluble in alcohol and relatively insoluble in water.

There is a possibility that the absorption of other medicinal products could be transiently reduced during use with *Benlaxid* (see section 4.4). There have been isolated reports of decreased efficacy with some concomitantly administered medicinal products, e.g. anti-epileptics.

Benlaxid may result in a potential interactive effect if used with starch-based food thickeners. Macrogol ingredient counteracts the thickening effect of starch, effectively liquefying preparations that need to remain thick for people with swallowing problems.
It is recommended to wait at least 2 hours between the intake of <Product name> and other medicinal product.

4.6 Fertility, pregnancy and lactation

Pregnancy

There are limited amount of data from the use of Benlaxid in pregnant women. Studies in animals have shown indirect reproductive toxicity (see section 5.3). Clinically, no effects during pregnancy are anticipated, since systemic exposure to macrogol 3350 is negligible.

Benlaxid can be used during pregnancy.

Breastfeeding

No effects on the breastfed newborn/infant are anticipated since the systemic exposure of the breast-feeding woman to Macrogol 3350 is negligible.
Benlaxid can be used during breast-feeding.

Fertility

There are no data on the effects of Benlaxid on fertility in humans. There were no effects on fertility in studies in male and female rats (see section 5.3).

4.7 Effects on ability to drive and use machines

Movicol has no influence on the ability to drive and use machines.

4.8 Undesirable effects

Reactions related to the gastrointestinal tract occur most commonly.
These reactions may occur as a consequence of expansion of the contents of the gastrointestinal tract, and an increase in motility due to the pharmacologic effects of Benlaxid.

In the treatment of chronic constipation, diarrhoea or loose stools normally respond to a reduction in dose.
Diarrhoea, abdominal distension, anorectal discomfort and mild vomiting are more often observed during the treatment for faecal impaction. Vomiting may be resolved if the dose is reduced or delayed.

The frequency of the adverse reactions listed below is defined using the following convention: very common (≥1/10); common (≥1/100, <1/10); uncommon (≥1/1,000, <1/100); rare (≥1/10,000, <1/1000); and very rare (<1/10,000); not known (cannot be estimated from the available data).

System Organ Class	**Frequency**	***Adverse event***
Immune system disorders	Rare	Allergic reactions including anaphylactic reaction.
	Not known	Dyspnoea and skin reaction (see below)
Skin and subcutaneous tissue disorders	Not Known	Allergic skin reactions including angioedema, urticaria, pruritus, rash, erythema

Metabolism and nutrition disorders	Not known	Electrolyte disturbances, particularly hyperkalaemia and hypokalaemia.
Nervous system disorders	Not known	Headache.
Gastrointestinal disorders	Very common	Abdominal pain, borborygmi.
	Common	Diarrhoea, vomiting, nausea and anorectal discomfort.
	Uncommon	Abdominal distension, flatulence.
	Not known	Dyspepsia and peri-anal inflammation.
General disorders and administration site conditions	Not known	Peripheral oedema.

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 the national reporting system listed in Appendix V

4.9 Overdose

Severe abdominal pain or distension can be treated by nasogastric aspiration. Extensive fluid loss by diarrhoea or vomiting may require correction of electrolyte disturbances.

5 PHARMACOLOGICAL PROPERTIES

5.1 Pharmacodynamic properties

Pharmacotherapeutic group: Osmotically acting laxatives. ATC code: A06A D65

Macrogol 3350 acts by virtue of its osmotic action in the gut, which induces a laxative effect. Macrogol 3350 increases the stool volume, which triggers colon motility via neuromuscular pathways. The physiological consequence is an improved propulsive colonic transportation of the softened stools and a facilitation of the defaecation. Electrolytes combined with macrogol 3350 are exchanged across the intestinal barrier (mucosa) with serum electrolytes and excreted in faecal water without net gain or loss of sodium, potassium and water.

For the indication of faecal impaction controlled comparative studies have not been performed with other treatments (e.g. enemas). In a non-comparative study in 27 adult patients, Movicol cleared the faecal impaction in 12/27 (44%) after 1 day's treatment; 23/27 (85%) after 2 days' treatment and 24/27 (89%) at the end of 3 days.

Clinical studies in the use of Benlaxid in chronic constipation have shown that the dose needed to produce normal formed stools tends to reduce over time. Many patients

respond to between 1 and 2 sachets a day, but this dose should be adjusted depending on individual response.

5.2 Pharmacokinetic properties

Macrogol 3350 is metabolised along the gastro-intestinal tract. It is virtually unabsorbed from the gastrointestinal tract due to its heavy molecular weight. Any macrogol 3350 that is absorbed (≤ 0,1%) is excreted via the urine.

5.3 Preclinical safety data

Preclinical studies provide evidence that macrogol 3350 has no significant systemic toxicity potential, based on conventional studies of pharmacology, repeated dose toxicity and genotoxicity.

There were no direct embryotoxic or teratogenic effects in rats even at maternally toxic levels that are a multiple of 66 x the maximum recommended dose in humans for chronic constipation and 25 x for faecal impaction.
Indirect embryofetal effects, including reduction in fetal and placental weights, reduced fetal viability, increased limb and paw hyperflexion and abortions, were noted in the rabbit at a maternally toxic dose that was 3.3 x the maximum recommended dose in humans for treatment of chronic constipation and 1.3 x for faecal impaction. Rabbits are a sensitive animal test species to the effects of GI-acting substances and the studies were conducted under exaggerated conditions with high dose volumes administered, which are not clinically relevant. The findings may have been a consequence of an indirect effect of *Benlaxid* related to poor maternal condition as the result of an exaggerated pharmacodynamic response in the rabbit. There was no indication of a teratogenic effect**.**

There are long-term animal toxicity and carcinogenicity studies involving macrogol 3350. Results from these and other toxicity studies using high levels of orally administered high molecular weight macrogols provide evidence of safety at the recommended therapeutic dose.

6 PHARMACEUTICAL PARTICULARS

6.1 List of excipients

Orange Flavour :
- Maltodextrin (maize),
- Arabic gum (E414),
- Citric acid (E330),
- Butylated hydroxyanisole (E320)
- Other flavouring substances

Lemon Flavour
- Maize maltodextrin,
- Flavouring preparations,
- Flavouring substances ,
- Natural flavouring substances,

Alpha-tocophero(E307)
Aspartame (E951)
Sucralose

6.2 Incompatibilities

Not applicable

6.3 Shelf life

3 years.

Reconstituted solution: 24 hours.

6.4 Special precautions for storage

This medicinal product does not require any special storage conditions.

Reconstituted solution: Store in a refrigerator (2ºC – 8ºC) or at room temperature (19ºC-25ºC)

6.5 Nature and contents of container

Sachets: laminate consisting of four layers: low density polyethylene, aluminium, low density polyethylene and paper.

Pack sizes: boxes 20 or 30 sachets.

Not all pack sizes may be marketed.

6.6 Special precautions for disposal

Any unused medicinal product or waste material should be disposed of in accordance with local requirements
Any unused solution should be discarded within 24 hours.

7 MARKETING AUTHORISATION HOLDER

Italfarmaco, S.A.
Calle San Rafael 3
28108 Alcobendas, Madrid
Spanje

8 MARKETING AUTHORISATION NUMBER(S)

RVG 128631

9 DATE OF FIRST AUTHORISATION/RENEWAL OF THE AUTHORISATION

Datum van eerste verlening van de vergunning: 18 oktober 2022

10 DATE OF REVISION OF THE TEXT