Levemir® Penfill®

Insulin detemir (*rys*)

Consumer Medicine Information (CMI) summary

The full CMI on the next page has more details. If you are worried about using this medicine, speak to your doctor or pharmacist.

1. Why am I using Levemir® Penfill®?

Levemir® Penfill® contains the active ingredient insulin detemir (*rys*). Levemir® Penfill® is used to treat diabetes mellitus.

For more information, see Section 1. Why am I using Levemir® Penfill®? in the full CMI.

2. What should I know before I use Levemir® Penfill®?

Do not use if you have ever had an allergic reaction to insulin or any of the ingredients listed at the end of the CMI.

Do not use if you are experiencing low blood sugar ("hypo") when your dose is due.

Talk to your doctor if you have any other medical conditions, take any other medicines, or are pregnant or plan to become pregnant or are breastfeeding.

For more information, see Section 2. What should I know before I use Levemir® Penfill®? in the full CMI.

3. What if I am taking other medicines?

Some medicines may interfere with insulin and affect how it works.

A list of these medicines is in Section 3. What if I am taking other medicines? in the full CMI.

4. How do I use Levemir® Penfill®?

Carefully follow all instructions given to you by your doctor, nurse educator and pharmacist regarding how to use your medicine, including preparing and injecting it.

More instructions can be found in Section 4. How do I use Levemir® Penfill®? in the full CMI.

5. What should I know while using Levemir® Penfill®?

Things you should do	• Remind any doctor, dentist or pharmacist you visit that you are using insulin. • Monitor your blood sugar levels regularly. • Carry some sugary food or fruit juice with you, in case you experience hypoglycaemia ("a hypo").
Things you should not do	• Do not stop using this medicine unless directed to by your doctor. • Do not share your insulin or needles with anyone.
Driving or using machines	• If your blood sugar is low or high, your concentration and ability to react might be affected, and, therefore, also your ability to drive or operate machines.
Drinking alcohol	• Alcohol may mask the symptoms of hypos. If you drink alcohol, your need for insulin may change.
Looking after your medicine	• Store Levemir® Penfill® not being used in the fridge between 2 and 8°C • Do not keep in a refrigerator, Penfill® that you are using, or that you are carrying as a spare. You can use them up to 4 weeks after taking them out of the refrigerator. Discard any unused insulin after 4 weeks.

For more information, see Section 5. What should I know while using Levemir® Penfill®? in the full CMI.

6. Are there any side effects?

The most common side effect when using insulin is low blood sugar levels (a hypo). Tell your relatives, friends, close workmates, teachers or carers that you have diabetes. It is important that they can recognise the signs and symptoms of a hypo.

For more information, including what to do if you have any side effects, see Section 6. Are there any side effects? in the full CMI.

Levemir® Penfill®

Active ingredient: *insulin detemir (rys)*

Consumer Medicine Information (CMI)

This leaflet provides important information about using Levemir® Penfill®. **You should also speak to your doctor or pharmacist if you would like further information or if you have any concerns or questions about using Levemir® Penfill®.**

Where to find information in this leaflet:

1. Why am I using Levemir® Penfill®?
2. What should I know before I use Levemir® Penfill®?
3. What if I am taking other medicines?
4. How do I use Levemir® Penfill®?
5. What should I know while using Levemir® Penfill®?
6. Are there any side effects?
7. Product details

1. Why am I using Levemir® Penfill®?

Levemir® Penfill® contains the active ingredient insulin detemir (*rys*). Levemir® is a basal (background) insulin. The abbreviation "rys" indicates the method of genetic engineering used to manufacture this insulin.

Levemir® is a long-acting insulin used to treat diabetes mellitus.

Diabetes mellitus is a condition where your pancreas does not produce enough insulin to control your blood sugar (glucose) level. Extra insulin is therefore needed.

There are two types of diabetes mellitus:

Type 1 diabetes

Type 2 diabetes.

Patients with type 1 diabetes always require insulin to control their blood sugar levels.

Some patients with type 2 diabetes may also require insulin if initial treatment with diet, exercise and tablets is not enough.

Levemir® can be used with a fast-acting insulin in Type 1 diabetes, and as add-on therapy to some Type 2 diabetes medicines.

Levemir® lowers your blood sugar level after injection. The effect may last for up to 24 hours.

As with all insulins, the duration of action will vary according to the dose, injection site, blood flow, temperature and level of physical activity.

Insulin is not addictive. Insulin is available only with a doctor's prescription.

2. What should I know before I use Levemir® Penfill®?

Warnings

Do not use Levemir® Penfill®:

- if you are allergic to insulin detemir, or any of the ingredients listed at the end of this leaflet.
- if you are experiencing a low blood sugar level (a hypo) when your dose is due.
- if the expiry date printed on the pack has passed, or if the packaging is torn or shows signs of tampering.
- in insulin pumps

Do not inject Levemir® directly into a vein or muscle.

Check with your doctor if you:

- are experiencing a lot of hypos, and follow their advice
- have any other medical conditions, such as: kidney liver, adrenal gland, pituitary gland or thyroid gland problems
- take any medicines for any other condition
- have an infection or fever
- are planning to travel.

During treatment, you may be at risk of developing certain side effects. It is important you understand these risks and how to monitor for them. See additional information under Section 6. Are there any side effects?

Pregnancy and breastfeeding

Check with your doctor if you are pregnant or intend to become pregnant. Pregnancy can make managing your diabetes more difficult, and may require adjustment of how much insulin you need.

Talk to your doctor if you are breastfeeding or intend to breastfeed.

Heart disease or a history of stroke

Tell your doctor as soon as possible if you experience signs of heart failure such as unusual shortness of breath or rapid increase in weight or localised swelling (oedema).

Some patients with long-standing type 2 diabetes mellitus and heart disease or previous stroke, and who are treated with a class of medicines known as thiazolidinediones in combination with insulin can develop heart failure.

3. What if I am taking other medicines?

Tell your doctor or pharmacist if you are taking any other medicines, including any medicines, vitamins or supplements that you buy without a prescription from your pharmacy, supermarket or health food shop.

Some medicines may interfere with insulin and affect how it works.

Medicines that may <u>increase</u> the effect of insulin, and therefore reduce insulin requirements include:

- other medicines used to treat type 2 diabetes
- octreotide - used to treat gastrointestinal endocrine tumours and enlargement of parts of the body (e.g. hands, feet, head) caused by abnormal growth hormone levels
- lanreotide - used to treat enlargement of parts of the body (e.g. hands, feet, head) caused by abnormal hormone levels
- monoamine oxidase inhibitors (MAOIs) - used to treat depression
- non-selective beta-blockers - used to treat certain heart conditions and high blood pressure
- alpha-blockers - used to treat high blood pressure and to relieve difficulty in passing urine caused by an enlarged prostate
- angiotensin converting enzyme (ACE) inhibitors - used to treat certain heart conditions, high blood pressure and elevated protein/albumin in the urine
- salicylates, e.g. aspirin - used to relieve pain and lower fever
- anabolic steroids - used to promote growth
- quinine - used to treat malaria and relieve muscle cramps
- quinidine - used to treat heart problems
- sulphonamides - a type of antibiotic used to treat bacterial infections.

Medicines that may <u>reduce</u> the effect of insulin, and increase insulin requirements include:

- oral contraceptives ("the pill") - used for birth control
- thiazides, frusemide or ethacrynic acid - used to treat high blood pressure or fluid retention (oedema)
- glucocorticoids (except when applied locally) - used to treat inflammatory conditions
- thyroid hormones - used to treat malfunction of the thyroid gland
- sympathomimetics - used to treat asthma
- octreotide - used to treat gastrointestinal endocrine tumours and enlargement of parts of the body (e.g. hands, feet, head) caused by abnormal growth hormone levels
- lanreotide - used to treat enlargement of parts of the body (e.g. hands, feet, head) caused by abnormal hormone levels
- growth hormone - used to treat growth disorders
- diazoxide - used to treat high blood pressure
- asparaginase - used to treat leukaemia and lymph gland tumours
- nicotinic acid - used to treat high cholesterol levels in the blood
- oxymetholone - used to treat certain blood disorders
- danazol - used to treat endometriosis, menorrhagia, fibrocystic breast disease and hereditary angioedema.

Check with your doctor or pharmacist if you are not sure about what medicines, vitamins or supplements you are taking and if these affect Levemir®.

4. How do I use Levemir® Penfill®?

Your doctor, diabetes education nurse or pharmacist will have given you advice on how to use your medicine. Carefully follow all the directions.

They may differ from the information contained in this leaflet.

If you are blind or have poor eyesight and cannot read the dose counter on your insulin delivery device, get help from a person with good eyesight who is trained to use the device.

Any change in dose or type of insulin should be made cautiously and only under medical supervision.

If you change the type of insulin that you use, you may have to use more or less than before. This may happen with the first dose or over a period of time.

If you do not understand the instructions, ask your doctor, diabetes education nurse or pharmacist for help.

How much to use

Carefully follow all instructions given to you by your doctor, nurse educator and pharmacist regarding how to use your medicine.

- Your doctor or diabetes education nurse will tell you how much of this medicine you need to use each day.
- It is very important that you manage your diabetes carefully. Too much or too little insulin can cause serious effects.

When to use Levemir® Penfill®

Levemir® is either injected once or twice daily. If you require twice daily dosing, the evening dose can be administered either with the evening meal, at bedtime, or 12 hours after the morning dose. Your doctor will tell you when to inject your medicine.

How to inject Levemir® Penfill®

- Penfill® cartridges are designed to be used with Novo Nordisk insulin delivery devices (such as NovoPen®), and NovoFine® needles.
- Make sure you are using the correct type and strength of insulin.
- Carefully follow the instructions on how to use your Penfill® in the Novo Nordisk insulin delivery device.
- If you use more than one type of insulin in a Penfill®, you must use a separate insulin delivery device for each type.
- Do not use the insulin level indicator on the device to measure your dose of insulin.
- Inject insulin under the skin (subcutaneous injection) as shown to you by your doctor or diabetes education nurse.
- Take care not to drop or knock the device that contains Penfill®.

Checking your Penfill® before injection

- **Check your Penfill® every time you are preparing your injection to make sure you are using the correct type and strength of insulin.**
- **Do not use your Levemir® Penfill® if the insulin is thickened, coloured, or if it has solid bits in it.**
- Do not use your Penfill® if you notice any damage, including any damage to the rubber plunger (stopper) or if there is a gap between the plunger and the white label band.

Preparing your Penfill® for injection

- If Penfill® is already inside your insulin delivery device, check the amount of insulin remaining. If there is insufficient insulin for your dose, follow the relevant instructions in the device user manual.
- Alternatively, or if your insulin delivery device does not already carry a Penfill® cartridge, load a new Levemir® Penfill®.
- Disinfect the rubber membrane of Penfill® with an alcohol swab.
- Attach a new NovoFine® needle.

Checking for insulin flow

- Always check your Novo Nordisk insulin delivery device for insulin flow (priming) before each injection, as described in the Instructions for Use.
- The priming procedure may highlight a malfunction with your insulin delivery device. Priming also removes any air bubbles and helps indicate whether or not a needle is broken.
- Only dial up your required dose after you see a drop of insulin at the needle tip.
- After priming, if you need to put the insulin delivery device down, make sure the needle does not touch anything.

Choose a site for injection

- **Inject the medicine into the abdomen, thighs, upper arms or buttocks.**
- Change the injection site so that the same position is not used more often than once a month. This reduces the risk of developing lumps or skin pitting.
- Pinch the skin between two fingers, push the needle into the raised skin, and inject the full dose of insulin under the skin.
- Slowly count to 6 before pulling the needle out.
- Keep the push button fully depressed until the needle has been withdrawn.
- Apply gentle pressure over the injection site for several seconds
- Do not rub the area.

After injecting

Using the outer needle cap, remove the used needle and dispose of it safely into a yellow plastic sharps container.

If you do not remove it, temperature changes may cause liquid to leak out of the needle.

Health care professionals, relatives and other carers should follow general precautionary measures for removal and disposal of needles, to eliminate the risk of needlestick injury.

Do not share needles, insulin or insulin delivery devices.

Leave Penfill® in the insulin delivery device until it needs to be replaced.

How long to use Levemir® Penfill

Do not stop using Levemir® unless your doctor tells you to.

If you forget to inject your insulin - hyperglycaemia

Levemir® Penfill® must be used strictly as advised by your doctor or nurse educator.

If you forget your insulin dose, test your blood sugar level as soon as possible.

If you are not sure what to do, talk to your doctor, diabetes education nurse or pharmacist.

Do not use a double dose of your insulin.

If it is almost time for your next dose, skip the dose you missed and inject your next dose when you are meant to.

Otherwise, use it as soon as you remember and then go back to using it as you would normally.

If you use too much insulin - hypoglycaemia

If you think that you have used too much insulin, you may need urgent medical attention.

You should immediately:

- phone the Poisons Information Centre (**by calling 13 11 26**), or
- contact your doctor, or
- go to the Emergency Department at your nearest hospital.

You should do this even if there are no signs of discomfort or poisoning.

5. What should I know while using Levemir® Penfill®?

Hypoglycaemia

Your blood sugar level may become too low (you may experience hypoglycaemia (a hypo) if you:

- accidentally use too much of this medicine
- undertake too much or unexpected exercise
- delay eating meals or snacks
- eat too little food
- are ill.

The first symptoms of mild to moderate hypos can come on suddenly. They may include:

- cold sweat, cool pale skin
- fatigue, drowsiness, unusual tiredness and weakness
- nervousness, feeling anxious, tremor, rapid heart beat
- confusion, difficulty concentrating
- excessive hunger
- vision changes

- headache, nausea.

Always carry some sugary food or fruit juice with you.

Do not inject any insulin if you feel a hypo coming on.

Tell your relatives, friends, close workmates or carers that you have diabetes. It is important that they recognise the signs and symptoms of a hypo.

Make sure they know to give you some sugary food or fruit juice for mild to moderate symptoms of a hypo.

If you lose consciousness, make sure they know:

- to turn you on your side and get medical help immediately
- not to give you anything to eat or drink as you may choke.

An injection of the hormone glucagon may speed up recovery from unconsciousness. This can be given by a relative, friend, workmate or carer who knows how to give it.

If glucagon is used, eat some sugary food or have a sugary drink as soon as you are conscious again.

If you do not feel better after this, contact your doctor, diabetes education nurse, or the closest hospital.

See your doctor if you keep having hypo reactions, or if you have ever become unconscious after using insulin.

Your insulin dose may need to be changed.

If a severe hypo is not treated, it can cause convulsions, brain damage and even death.

Hyperglycaemia

Your blood sugar levels may become high (hyperglycaemia) if you:

- miss doses of insulin or use less insulin than you need
- have uncontrolled diabetes
- exercise less than usual
- eat more carbohydrates than usual
- are ill or stressed.

High blood sugar levels over a long period of time can lead to too much acid in the blood (diabetic ketoacidosis).

Contact your doctor immediately if your blood sugar level is high or you recognise any of the following symptoms.

Symptoms of mild to moderate hyperglycaemia include:

- drowsy feeling
- flushed face
- thirst, loss of appetite
- fruity odour on the breath
- blurred vision
- passing larger amounts of urine than usual
- getting up at night more often than usual to pass urine
- high levels of glucose and acetone in the urine.

Symptoms of severe hyperglycaemia include:

- heavy breathing
- fast pulse
- nausea, vomiting
- dehydration
- loss of consciousness.

Severe hyperglycaemia can lead to unconsciousness and in extreme cases death if untreated.

Things you should do

Measure your blood sugar levels regularly.

Make sure all friends, relatives, workmates or carers know that you have diabetes.

If your child has diabetes, it is important to tell their teachers and carers.

Keep using your insulin even if you feel well. It helps to control your diabetes, but does not cure it.

Always carry some sugary food or fruit juice with you.

Tell your doctor if you are feeling sick, especially if you are experiencing nausea or vomiting.

Tell your doctor if you have trouble recognising the symptoms of hypos.

Remind any doctor, dentist or pharmacist you visit that you are using Levemir® Penfill® .

Tell your doctor if your diet changes or you are exercising more.

Tell your doctor if you notice any skin changes at the injection site.

The injection site should be rotated to help prevent changes to the fatty tissue under the skin, such as skin thickening, skin shrinking or lumps under the skin. The insulin may not work very well if you inject into a lumpy, shrunken or thickened area. Change the injection site with each injection to help prevent these skin changes.

Tell your doctor, diabetes education nurse or pharmacist if you are travelling. Ask them for a letter explaining why you are taking injecting devices with you. Each country you visit will need to see this letter, so you should take several copies.

You may need to inject your insulin and eat your meals at different times because of time differences in and between countries.

You may not be able to get the same type of insulin in the country you are visiting. Your doctor, diabetes education nurse or pharmacist can provide you with some helpful information.

Things you should not do

- **Do not stop using your insulin unless your doctor tells you to.**
- **Do not give your insulin to anyone else, even if they have diabetes.**
- **Do not share needles**
- **Do not refill your Levemir® Penfill® .**

Driving or using machines

Be careful before you drive or use any machines or tools until you know how the insulin affects you.

If your blood sugar is low or high, your concentration and ability to react might be affected, and, therefore, also your ability to drive or operate a machine.

Bear in mind that you could endanger yourself or others. Please ask your doctor whether you can drive a car, especially if:

• you have frequent hypos

• you find it hard to recognise hypos.

Drinking alcohol

Tell your doctor if you drink alcohol.

Alcohol may mask the signs of a hypo. Carefully monitor your blood sugar levels when drinking.

Looking after your medicine

- Store Levemir® Penfill® cartridges that are not being used between 2°C and 8°C in the refrigerator (away from the cooling element).
- Penfill® cartridges that you are using, or that you are carrying as a spare, should not be kept in a refrigerator.
- **Protect the insulin from light by keeping it in the carton when not in use.**
- Do not allow cartridges to be frozen, or exposed to excessive heat and light.
- **Never use Levemir® Penfill® if the solution is not clear and colourless.**

Keep it where young children cannot reach it.

When to discard your medicine

You can use Levemir® Penfill® for up to 4 weeks after taking it out of the refrigerator if kept below 30°C.

Discard Levemir® Penfill® cartridges after 4 weeks even if there is still some insulin left in it.

Getting rid of any unwanted medicine

If you no longer need to use this medicine or it is out of date, take it to any pharmacy for safe disposal.

Never use insulin after the expiry date printed on the cartridge label and carton after 'Expiry'. The expiry date refers to the last day of that month.

6. Are there any side effects?

All medicines can have side effects. If you do experience any side effects, most of them are minor and temporary. However, some side effects may need medical attention.

See the information below and, if you need to, ask your doctor or pharmacist if you have any further questions about side effects.

Less serious side effects

Less serious side effects	What to do
Hypoglycaemia (mild to moderate): • cold sweat, cool pale skin • fatigue, drowsiness, unusual tiredness and weakness • nervousness, anxious feeling, tremor, rapid heart beat • confusion, difficulty concentrating • excessive hunger • vision changes • headache, nausea. **Injection site reactions:** • redness, swelling or itching at the injection site • a depression or thickening of the skin around the injection site. Other effects when you first start using insulin: • visual problems • swelling of your hands • swelling of your feet.	**Speak to your doctor if you have any of these less serious side effects and they worry you.**

Serious side effects

Serious side effects	What to do
Hypoglycaemia (severe): • disorientation • seizures, fits, convulsions • loss of consciousness. **Severe allergy - anaphylaxis:** • skin rashes over a large part of the body • shortness of breath, wheezing • swelling of the face, lips or tongue • fast pulse • sweating.	**Call your doctor straight away, or go straight to the Emergency Department at your nearest hospital if you notice any of these serious side effects.**

Tell your doctor or pharmacist if you notice anything else that may be making you feel unwell.

Other side effects not listed here may occur in some people.

Reporting side effects

After you have received medical advice for any side effects you experience, you can report side effects to the Therapeutic Goods Administration online at www.tga.gov.au/reporting-problems. By reporting side effects, you can help provide more information on the safety of this medicine.

Always make sure you speak to your doctor or pharmacist before you decide to stop taking any of your medicines.

7. Product details

This medicine is only available with a doctor's prescription.

What Levemir® Penfill® contains

Active ingredient (main ingredient)	insulin detemir (*rys*) 100 U/mL

Other ingredients **(inactive ingredients)**	glycerol phenol metacresol zinc acetate dibasic sodium phosphate dihydrate sodium chloride Water for Injection hydrochloric acid and sodium hydroxide to adjust the pH
Potential allergens	metacresol

Do not take this medicine if you are allergic to any of these ingredients.

What Levemir® Penfill® looks like

Levemir® is a clear, colourless solution for subcutaneous injection. Levemir® Penfill® is a 3mL glass cartridge.

(AUST R 172213)

Who distributes Levemir® Penfill®

Levemir® Penfill® is supplied in Australia by:

Novo Nordisk Pharmaceuticals Pty Ltd

Level 10

118 Mount Street

North Sydney NSW 2060

Australia

Further information

For further information call Novo Nordisk Medical Information on 1800 668 626.

www.novonordisk.com.au

You can also get more information about diabetes from

Diabetes Australia:

- freecall helpline 1300 136 588
- www.diabetesaustralia.com.au

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