

**HIGHLIGHTS OF PRESCRIBING INFORMATION**

These highlights do not include all the information needed to use MECLIZINE HYDROCHLORIDE TABLETS safely and effectively. See full prescribing information for MECLIZINE HYDROCHLORIDE TABLETS.

MECLIZINE HYDROCHLORIDE tablets, for oral use

Rx Only

Initial U.S. Approval: 1957

**INDICATIONS AND USAGE**

Meclizine hydrochloride is indicated for the treatment of vertigo associated with diseases affecting the vestibular system in adults (1).

**DOSAGE AND ADMINISTRATION**

- Recommended dosage: 25 mg to 100 mg daily, in divided doses (2.1).
- Tablets: Swallow whole (2.2).

**DOSAGE FORMS AND STRENGTHS**

Tablets: 12.5 mg, and 25 mg (3).

**CONTRAINDICATIONS**

Meclizine hydrochloride is contraindicated in patients with hypersensitivity to meclizine or any of the inactive ingredients (4).

**WARNINGS AND PRECAUTIONS**

- May cause drowsiness: Use caution when driving a car or operating dangerous machinery (5.1).
- Potential anticholinergic action: this drug should be prescribed with care to patients with a history of asthma, glaucoma, or enlargement of the prostate gland (5.2).

**ADVERSE REACTIONS**

Common adverse reactions are anaphylactic reaction, drowsiness, dry mouth, headache, fatigue, and vomiting. On rare occasions blurred vision has been reported (6).

To report SUSPECTED ADVERSE REACTIONS, contact Jubilant Cadista Pharmaceuticals Inc. at 1-800-313-4623 or FDA at 1-800-FDA-1088 or [www.fda.gov/medwatch](http://www.fda.gov/medwatch).

**DRUG INTERACTIONS**

- Coadministration of Meclizine hydrochloride with other CNS depressants, including alcohol, may result in increased CNS depression (7.1).
- CYP2D6 inhibitors: As meclizine is metabolized by CYP2D6, there is a potential for drug-drug interactions between Meclizine hydrochloride and CYP2D6 inhibitors (7.2).

See 17 for PATIENT COUNSELING INFORMATION.

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\*Sections or subsections omitted from the full prescribing information are not listed.

**FULL PRESCRIBING INFORMATION**

**1 INDICATIONS AND USAGE**

Meclizine hydrochloride is indicated for the treatment of vertigo associated with diseases affecting the vestibular system in adults.

**2 DOSAGE AND ADMINISTRATION**

**2.1 Recommended Dosage**

The recommended dosage is 25 mg to 100 mg daily administered orally, in divided doses, depending upon clinical response.

**2.2 Administration Instructions**

Tablets

Meclizine hydrochloride tablets must be swallowed whole.

**3 DOSAGE FORMS AND STRENGTHS**

- Meclizine hydrochloride tablets USP, 12.5 mg (Blue, oval shaped tablets, debossed with "TL 122" with score on one side and plain on the other side.)
- Meclizine hydrochloride tablets USP, 25 mg (Yellow, oval shaped tablets, debossed with "TL 121" with score on one side and plain on the other side.)

**4 CONTRAINDICATIONS**

Meclizine hydrochloride is contraindicated in patients with a hypersensitivity to meclizine or any of the inactive ingredients [see Adverse Reactions (6) and Description (11)].

**5 WARNINGS AND PRECAUTIONS**

**5.1 Drowsiness**

Since drowsiness may occur with use of meclizine hydrochloride, patients should be warned of this possibility and cautioned against driving a car or operating dangerous machinery.

Patients should avoid alcoholic beverages while taking meclizine hydrochloride [see Drug Interactions (7.1)].

**5.2 Concurrent Medical Conditions**

Because of its potential anticholinergic action, meclizine hydrochloride should be used with caution in patients with asthma, glaucoma, or enlargement of the prostate gland.

**6 ADVERSE REACTIONS**

The following adverse reactions associated with the use of meclizine hydrochloride were identified in clinical studies or postmarketing reports. Because some of these reactions were 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.

Anaphylactic reaction, drowsiness, dry mouth, headache, fatigue, and vomiting. On rare occasions blurred vision has been reported.

**7 DRUG INTERACTIONS**

**7.1 CNS Depressants**

There may be increased CNS depression when meclizine hydrochloride is administered concurrently with other CNS depressants, including alcohol [see Warnings and Precautions (5.1)].

**7.2 CYP2D6 Inhibitors**

Based on *in-vitro* evaluation, meclizine is metabolized by CYP2D6. Therefore, there is a possibility for a drug interaction between meclizine hydrochloride and CYP2D6 inhibitors. Therefore, monitor for adverse reactions and clinical effect accordingly.

**8 USE IN SPECIFIC POPULATIONS**

**8.1 Pregnancy**

Risk Summary

Data from epidemiological studies have not generally indicated a drug-associated risk of major birth



defects with meclizine during pregnancy. However, in a published study, an increased incidence of fetal malformations was observed following oral administration of meclizine to pregnant rats during the period of organogenesis, at doses similar to those used clinically.

In the U.S. general population, the estimated background risk of major birth defects and miscarriage in clinically recognized pregnancies is 2 to 4% and 15 to 20%, respectively. The background risk of major birth defects and miscarriage for the indicated population is unknown.

#### Data

##### Human Data

Epidemiological studies reporting on pregnancies exposed to meclizine have not identified an association between the use of meclizine during pregnancy and an increased risk of major birth defects.

##### Animal Data

In a published study, oral administration of meclizine (25-250 mg/kg) to pregnant rats during the period of organogenesis resulted in a high incidence of fetal malformations. These effects occurred at doses as low as 25 mg/kg, which is approximately 2 times the maximum recommended human dose (100 mg) on a body surface area (mg/m<sup>2</sup>) basis.

## 8.2 Lactation

### Risk Summary

There are no data on the presence of meclizine in human milk, the effects on the breastfed infant, or the effects on milk production. The developmental and health benefits of breastfeeding should be considered along with the mother's clinical need for meclizine hydrochloride and any potential adverse effects on the breastfed infant from Meclizine hydrochloride or from the underlying maternal condition.

## 8.4 Pediatric Use

Safety and effectiveness in pediatric patients have not been established.

## 8.5 Geriatric Use

In general, dose selection for an elderly patient should be cautious, usually starting at the low end of the dosing range, reflecting the greater frequency of decreased hepatic, renal, or cardiac function, and of concomitant disease or other drug therapy.

## 8.6 Hepatic Impairment

The effect of hepatic impairment on the pharmacokinetics of meclizine has not been evaluated. As meclizine hydrochloride undergoes metabolism, hepatic impairment may result in increased systemic exposure of meclizine. Treatment with meclizine hydrochloride should be administered with caution in patients with hepatic impairment.

## 8.7 Renal Impairment

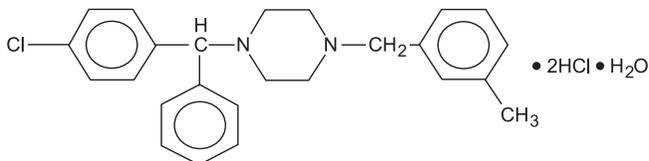
The effect of renal impairment on the pharmacokinetics of meclizine has not been evaluated. Because of a potential for drug/metabolite accumulation, meclizine hydrochloride should be administered with caution in patients with renal impairment and in the elderly, as renal function generally declines with age.

## 8.8 Genetic CYP2D6 Polymorphism

The genetic polymorphism of CYP2D6 that results in poor-, intermediate-, extensive-, and ultrarapid metabolizer phenotypes could contribute to large inter-individual variability in meclizine exposure. Therefore, when meclizine hydrochloride is administered to patients with CYP2D6 polymorphism, monitor for adverse reactions and clinical effect accordingly.

## 11 DESCRIPTION

Meclizine hydrochloride, USP is a histamine (H1) receptor antagonist, is a white or slightly yellowish, crystalline powder. It has the following structural formula:



Chemically, meclizine hydrochloride is 1-(p-chloro- $\alpha$ -phenylbenzyl)-4-(m-methylbenzyl) piperazine dihydrochloride monohydrate.

### Tablets

Meclizine hydrochloride tablets, USP are available in two different strengths: 12.5 mg and 25 mg. In addition, each tablet contains the following inactive ingredients: colloidal silicone dioxide, croscarmellose sodium, lactose monohydrate, magnesium stearate, microcrystalline cellulose. Also, meclizine hydrochloride tablets USP, 12.5 mg contains FD&C blue #1 aluminum lake (11-13%) and meclizine hydrochloride tablets USP, 25 mg contains D&C yellow #10 aluminum lake (15 to 20%).

Each meclizine hydrochloride 12.5 mg tablet contains 12.5 mg of meclizine dihydrochloride equivalent to 10.53 mg of meclizine free base.

Each meclizine hydrochloride 25 mg tablet contains 25 mg of meclizine dihydrochloride equivalent to 21.07 mg of meclizine free base.

## 12 CLINICAL PHARMACOLOGY

### 12.1 Mechanism of Action

The precise mechanism by which meclizine exerts its therapeutic effect is unknown but is presumed to involve antagonism of the histamine H1 receptor.

### 12.2 Pharmacodynamics

There are no relevant pharmacodynamic data regarding meclizine.

### 12.3 Pharmacokinetics

The available pharmacokinetic information for meclizine following oral administration has been summarized from published literature.

### Absorption

Meclizine is absorbed after oral administration with maximum plasma concentrations reaching at a

median T<sub>max</sub> value of 3 hours post-dose (range: 1.5 to 6 hours) for the tablet dosage form.

### Distribution

Drug distribution characteristics for meclizine in humans are unknown.

### Elimination

Meclizine has a plasma elimination half-life of about 5-6 hours in humans.

### Metabolism

In an *in vitro* metabolic study using human hepatic microsome and recombinant CYP enzyme, CYP2D6 was found to be the dominant enzyme for metabolism of meclizine.

## 13 NONCLINICAL TOXICOLOGY

### 13.1 Carcinogenesis, Mutagenesis, Impairment of Fertility

#### Carcinogenesis

Animal studies to assess the carcinogenic potential of meclizine have not been conducted.

#### Mutagenesis

Genetic toxicology studies of meclizine have not been conducted.

#### Impairment of Fertility

Animal studies to assess the effects of meclizine on fertility and early embryonic development have not been conducted.

## 16 HOW SUPPLIED/STORAGE AND HANDLING

### 16.1 How Supplied

Meclizine hydrochloride tablets, USP are available in the following strengths and package sizes: 12.5 mg (Blue, oval shaped tablets, debossed with "TL 122" with score on one side and plain on the other side.)

Bottles of 100	NDC 59746-122-06
Bottles of 1000	NDC 59746-122-10

25 mg (Yellow, oval shaped tablets, debossed with "TL 121" with score on one side and plain on the other side.)

Bottles of 100	NDC 59746-121-06
Bottles of 1000	NDC 59746-121-10

### 16.2 Storage and Handling

Store at 20°C to 25°C (68°F to 77°F) [See USP Controlled Room Temperature].

Dispense in a tight, light-resistant container (USP).

## 17 PATIENT COUNSELING INFORMATION

### Administration Instructions

Advise patients that the tablets must be swallowed whole [see *Dosage and Administration* (2.1)].

### Adverse Reactions

Advise patients that meclizine hydrochloride may cause anaphylactic reaction, drowsiness, dry mouth, headache, fatigue, vomiting and, on rare occasions, blurred vision [see *Warnings and Precautions* (5.1), *Adverse Reactions* (6)].

Inform patients that meclizine hydrochloride may impair their ability to engage in potentially dangerous activities, such as operating machinery or vehicles.

### Concomitant Drug Interactions

Advise patients regarding medications that should not be taken in combination with meclizine hydrochloride or that may necessitate increased monitoring [see *Drug Interactions* (7.1, 7.2)]. Inform patients that alcohol may increase adverse reactions.

### Concurrent Medical Conditions

Advise patients to notify their healthcare provider about all of their medical conditions, including if they are pregnant or plan to become pregnant or if they are breastfeeding [see *Warnings and Precautions* (5.2), *Use in Specific Populations* (8.1, 8.2)].

### Manufactured by:

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