Azzalure®

Botulinum toxin type A

Patient Consent Form

Ensure patients understand what they are consenting to.

Azzalure® is indicated for the temporary improvement in the appearance of moderate to severe glabellar lines (vertical lines between the eyebrows) seen at frown and/or lateral canthal lines (crow's feet lines) seen at maximum smile, in adult patients under 65 years, when the severity of these lineshas an important psychological impact on the patient. The consent forms in this pack should be given to patients to complete once they have been informed that their treatment will be performed specifically with Azzalure®

For Healthcare Professional use only.
Prescribing Information can be found overleaf

GB-ALD-2300007 DOP June 2023

GALDERMA

EST. 1981

Azzalure Prescribing Information (UK)

Presentation: Botulinum toxin type A (*Clostridium botulinum* toxin A haemagglutinin complex) 125 Speywood units (powder for solution for injection) **Indications:** Temporary improvement in appearance of moderate to severe:

- Glabellar lines seen at maximum frown, and/or
- lateral canthal lines (crow's feet lines) seen at maximum smile in adult patients under 65 years, when severity of these lines has an important psychological impact on the patient.

Dosage & Administration: Azzalure should only be administered by a healthcare practitioner with appropriate qualifications and expertise in this treatment and having the required equipment, in accordance with national guidelines. Botulinum toxin units are different depending on the medicinal products. Speywood units are specific to this preparation and are not interchangeable with other botulinum toxins. Reconstitute prior to injection. Intramuscular injections should be performed using a sterile suitable gauge needle. Glabellar lines: recommended dose is 50 Speywood units divided equally into 5 injection sites, 10 Speywood units to be administered intramuscularly, at right angles to the skin; 2 injections into each *corrugator* muscle and one into the *procerus* muscle near the nasofrontal angle. Lateral canthal lines: recommended dose per side is 30 Speywood units divided into 3 injection sites; 10 Speywood units to be administered intramuscularly into each injection point, injected lateral (20 - 30° angle) to the skin and very superficial. All injection points should be at the external part of the *orbicularis oculi* muscle and sufficiently far from the orbital rim (approximately 1 - 2 cm); (See summary of product characteristics for full technique). Treatment interval should not be more frequent than every three months. The efficacy and safety of repeat injections of Azzalure has been evaluated in Glabellar lines up to 24 months and up to 8 repeat treatment cycles and for Lateral Canthal lines up to 12 months and up to 5 repeat treatment cycles. Not recommended for use in individuals under 18 years of age. **Contraindications:** Hypersensitivity to botulinum toxin A or to any of the excipients. In the presence of infection at the proposed injection sites, myasthenia gravis, Eaton Lambert Syndrome or amyotrophic lateral sclerosis. **Special warnings and precautions for use:** Care should be taken to ensure that Azzalure is not injected into a blood vessel. Use with caution in patients with a risk of, or clinical evidence of, marked defective neuro-muscular transmission, in the presence of inflammation at the proposed injection site(s) or when the targeted muscle shows excessive weakness or atrophy. Patients treated with therapeutic doses may experience exaggerated muscle weakness. Not recommended in patients with history of dysphagia, aspiration or with prolonged bleeding time. Seek immediate medical care if swallowing, speech or respiratory difficulties arise. Facial asymmetry, ptosis, excessive dermatochalasis, scarring and any alterations to facial anatomy, as a result of previous surgical interventions should be taken into consideration prior to injection. Dry eye has been reported with the use of Azzalure in the treatment of glabellar lines and lateral canthal lines. Reduced tear production, reduced blinking, and corneal disorders, may occur with the use of botulinum toxins, including Azzalure. Injections at more frequent intervals/higher doses can increase the risk of antibody formation to botulinum toxin. Clinically, the formation of neutralising antibodies may reduce the effectiveness of subsequent treatment. Botulinum toxin units are not interchangeable from one product to another. Doses recommended in Speywood units are different from other botulinum toxin preparations. To be used for one single patient treatment only during a single session. In order to improve the traceability of biological medicinal products, the name and the batch number of the administered product should be clearly recorded. There is a potential risk of localised muscle weakness, visual disturbances or asthenia linked with the use of this medicinal product which may temporarily impair the ability to drive or operate machinery. **Interactions:** Concomitant treatment with aminoglycosides or other agents interfering with neuromuscular transmission (e.g. curare-like agents) may potentiate effect of botulinum toxin. **Pregnancy, Breast-feeding and Fertility:** *Pregnancy:* Azzalure should not be used during pregnancy. There are no adequate data from the use of botulinum toxin type A in pregnant women. Studies in animals have shown reproductive toxicity at high doses. The potential risk for humans is unknown. *Breast-feeding:* There is no information on whether Azzalure is excreted in human milk. The use of Azzalure during lactation cannot be recommended. *Fertility:* There are no clinical data from the use of Azzalure on fertility. There is no evidence of direct effect of Azzalure on fertility in animal studies. **Side Effects:** Most frequently occurring related reactions are headache and injection site reactions for glabellar lines and; headache, injection site reactions and eyelid oedema for lateral canthal lines. Generally, treatment/injection technique related reactions occur within first week following injection and are transient. Undesirable effects may be related to the active substance, the injection procedure, or a combination of both. For glabellar lines: Very Common (≥ 1/10): Headache, Injection site reactions (e.g. erythema, oedema, irritation, rash, pruritus, paraesthesia, pain, discomfort, stinging and haematoma). Common (≥ 1/100 to < 1/10): Temporary facial paresis (due to temporary paresis of facial muscles proximal to injection sites, predominantly describes brow paresis), Asthenopia, Eyelid ptosis, Eyelid oedema, Lacrimation increase, Dry eye, Muscle twitching (twitching of muscles around the eyes). Uncommon (≥ 1/1,000 to <1/100): Dizziness, Visual impairment, Vision blurred, Diplopia, Pruritus, Rash, Hypersensitivity, Rare (≥ 1/10,000 to < 1/1,000): Urticaria, Eye movement disorder. For lateral canthal lines: Common (≥ 1/100 to < 1/10): Headache, Temporary facial paresis (due to temporary paresis of facial muscles proximal to injection sites), Eyelid ptosis, Eyelid oedema and Injection site reactions (e.g. haematoma, pruritus and oedema). Uncommon (≥ 1/1,000 to <1/100): Dry eye. Post-marketing experience: frequency not known (cannot be estimated from the available data): asthenia, fatigue, influenza-like illness, hypersensitivity, hypoaesthesia and muscle atrophy.

Adverse reactions resulting from distribution of the effects of the toxin to sites remote from the site of injection have been very rarely reported with botulinum toxin (excessive muscle weakness, dysphagia, aspiration pneumonia with fatal outcome in some cases).

Prescribers should consult the summary of product characteristics in relation to other side effects.

Packaging Quantities & Cost: 2 Vial Pack (2 x 125u) £126.00 (RRP)
Marketing Authorisation Number: PL 06958/0031
Legal Category: POM
Further information is available from:
Galderma (UK) Limited, Evergreen House North,
Grafton Place, London, NW1 2DX, UK.
Tel: +44 (0) 300 3035674
Date of Revision: August 2022

Adverse events should be reported.
Reporting forms and information can be found at
www.mhra.gov.uk/yellowcard
or search for Yellow Card in the Google Play or Apple App Store.
Adverse events should also be reported to Galderma (UK) Ltd,
E-mail: medinfo.uk@galderma.com Tel: +44 (0) 300 3035674

Azzalure® Consent Form

Name: _____ Ms/Miss/Mrs/Mr (delete as appropriate)

Address: _____

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Postcode: _____ Date of birth: _____

I CONFIRM I HAVE BEEN INFORMED THAT:

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Azzalure® (Botulinum Toxin Type A) is licensed for the temporary improvement of moderate to severe vertical lines between the eyebrows (glabellar lines) seen at maximum frown and/or lateral canthal lines (crow's feet lines) seen at maximum smile and is injected because the severity of your lines has had an important psychological impact on you.

Treatment is not recommended if you are pregnant or breastfeeding.

After treatment with Azzalure® for glabellar lines you should start to see an improvement within 2 to 3 days. However the full effect can take up to 30 days. The benefits of treatment usually lasts between 4 and 6 months for glabellar lines, but can vary depending on your individual response. For lateral canthal lines, the benefit of treatment usually last between 3 to 4 months.

The most common side effects of Azzalure® in the glabellar lines are headache and injection site reactions (e.g. redness, swelling, irritation, rash, itching, numbness, pain, discomfort, stinging, brusing and bleeding) and for lateral canthal lines; headache, injection site reactions and eyelid oedema. Normally these reactions are mild to moderate, reversible and occur in the first week after treatment. There is also a small possibility of slight drooping of the eyelid or visual problems.

Very rarely, botulinum toxin may result in muscle weakness away from the site of injection.

Other side effects are listed in the Patient Information Leaflet (please ask if you have not been given this).

Azzalure® may cause temporary blurred vision or muscle weakness. If affected, you should not drive or use machinery.

Azzalure® contains a very small amount of albumin, which comes from human blood. It is very unlikely that this could pass on an infection, but it cannot be entirely ruled out.

Reporting of side effects: If you get any side effects, talk to your your treating healthcare professional. This includes any possible side effects not listed in the package leaflet. You can also report side effects directly via the Yellow Card Scheme at www.mhra.gov.uk/yellowcard. By reporting side effects you can help provide more information on the safety of this medicine.

I have been fully informed about the risks and benefits of treatment with Azzalure®.

The practitioner has provided me with sufficient information about the treatment in order to make an informed decision.

I have been given the opportunity to ask all remaining questions I may have about the treatment, and I am happy with the answers provided.

I have been given the time to consider the treatment and have been informed of alternative treatment options, which includes no treatment.

Patient's signature: _____ Date: _____

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Very rarely, botulinum toxin may result in muscle weakness away from the site of injection.

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Azzalure® may cause temporary blurred vision or muscle weakness. If affected, you should not drive or use machinery.

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The practitioner has provided me with sufficient information about the treatment in order to make an informed decision.

I have been given the opportunity to ask all remaining questions I may have about the treatment, and I am happy with the answers provided.

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Practitioner signature: _____ Date: _____

Name of Injector: _____ Job title: _____

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Azzalure® Consent Form

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I CONFIRM I HAVE BEEN INFORMED THAT:

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Azzalure® (Botulinum Toxin Type A) is licensed for the temporary improvement of moderate to severe vertical lines between the eyebrows (glabellar lines) seen at maximum frown and/or lateral canthal lines (crow's feet lines) seen at maximum smile and is injected because the severity of your lines has had an important psychological impact on you.

Treatment is not recommended if you are pregnant or breastfeeding.

After treatment with Azzalure® for glabellar lines you should start to see an improvement within 2 to 3 days. However the full effect can take up to 30 days. The benefits of treatment usually lasts between 4 and 6 months for glabellar lines, but can vary depending on your individual response. For lateral canthal lines, the benefit of treatment usually last between 3 to 4 months.

The most common side effects of Azzalure® in the glabellar lines are headache and injection site reactions (e.g. redness, swelling, irritation, rash, itching, numbness, pain, discomfort, stinging, brusing and bleeding) and for lateral canthal lines; headache, injection site reactions and eyelid oedema. Normally these reactions are mild to moderate, reversible and occur in the first week after treatment. There is also a small possibility of slight drooping of the eyelid or visual problems.

Very rarely, botulinum toxin may result in muscle weakness away from the site of injection.

Other side effects are listed in the Patient Information Leaflet (please ask if you have not been given this).

Azzalure® may cause temporary blurred vision or muscle weakness. If affected, you should not drive or use machinery.

Azzalure® contains a very small amount of albumin, which comes from human blood. It is very unlikely that this could pass on an infection, but it cannot be entirely ruled out.

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