

First aid for a convulsive seizure

EPISTATUS[®]
10 mg Oromucosal Solution
Midazolam (as maleate)

How to administer Epistatus

If you see someone having a convulsive seizure you should:

- Note the time the seizure started
- Keep calm
- Stay with the person
- Move things like chairs and other objects away from them so that they don't hurt themselves
- If you can, put something soft such as a cushion or jumper under their head
- **DO NOT** move the person unless they are in immediate danger from their surroundings, for example from a fire or open road.
- Reassure the person throughout the seizure and when it is over
- **DO NOT** try to physically stop the seizure or try to restrain the person
- **DO NOT** put anything between the teeth
- Stay with the person until the seizure is over and try to place them in the recovery position
- **DO NOT** give more than the amount of medicine prescribed by a doctor for the patient. Only one syringe should be used unless prior medical advice has been received. If in doubt, call for immediate medical help (see reverse)
- Note the time the seizure ends

Reporting of side effects

If you get any side effects, talk to your doctor, pharmacist or nurse. 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. Side effects should also be reported to Veriton Pharma Ltd at the address below.

Veriton Pharma Ltd

Unit 16, Trade City, Avro Way, Brooklands
Business Park, Weybridge, Surrey
KT13 0YF United Kingdom
Tel: + 44 (0)1932 690325
Fax: + 44 (0)1932 341091
www.veritonpharma.com

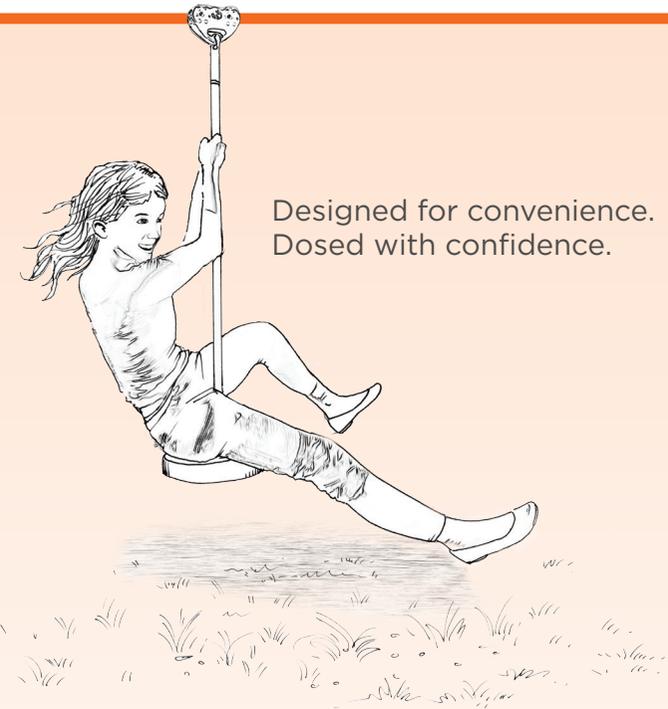
Scan QR code to
visit epistatus.co.uk



Reference

1. Epistatus 10mg oromucosal solution Midazolam Package Leaflet: Information for the User

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Designed for convenience.
Dosed with confidence.

A guide for patients and their carers after **Epistatus** has been prescribed¹

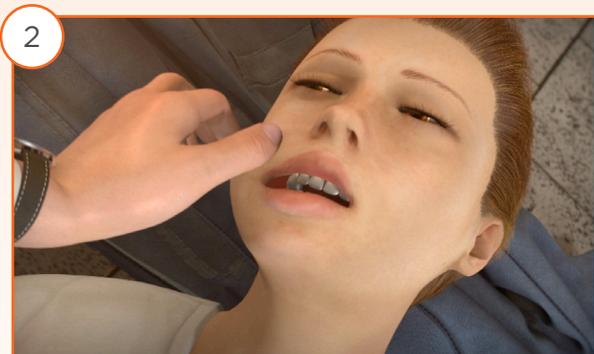
EPISTATUS[®]
10 mg Oromucosal Solution
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Epistatus® is used to stop **convulsive seizures lasting greater than 5 minutes** in patients aged 10 to less than 18 years, who have been diagnosed with epilepsy. Use this medicine exactly as directed by your doctor or epilepsy nurse.

When to call an ambulance



Remove the syringe from its outer case. Unscrew the amber sheath cap and dispose of it responsibly. Do not use if the syringe is damaged, if the expiry date has passed, or if the solution looks cloudy or has white particles in it.



Using your finger and thumb, gently pinch and pull back the patient's cheek to locate the buccal cavity which is the area between the cheek and lower jaw.



Insert the syringe into the buccal cavity. Do not place the syringe between the patient's teeth as the syringe may be bitten.



Slowly administer half the liquid in the syringe by pushing the plunger downwards. Then repeat on the other side, pressing the syringe plunger until it stops. If access to the second cheek is not possible, administer the full dose into the available buccal cavity.

Refer to the patient's care plan. There is often no need to call an ambulance unless:

- The seizure does not stop within 10 minutes
- The seizure lasts longer than usual for the individual
- The person has repeated seizures
- The person has sustained an injury
- The person has had a seizure in the sea or a swimming pool
- The patient's breathing slows down or stops e.g. slow or shallow breathing or blue lips
- You observe signs of a heart attack which may include chest pain or pain that spreads to the neck and shoulders and down the left arm
- The patient experiences an allergic reaction which may include a sudden rash, itching or lumpy rash (hives) and swelling of the face, lips, tongue or other parts of the body
- You give too much Epistatus® and there are signs of overdose which include:
 - Feeling drowsy, lethargic or confused
 - Losing their co-ordination
 - Developing muscle weakness
 - Breathing difficulties (slow or shallow breathing)
 - Low blood pressure (giddiness and feeling faint)
 - Coma

Keep the syringe to show the ambulance staff or doctor.