



MITOXANTRONE – DRUG SAFETY INFORMATION

Form: Mitoxantrone Hydrochloride 2mg/mL solution for Intravenous Infusion

General:

- If there is evidence of damage to the packaging in transit please contact us prior to administration.
- Keep out of the reach and sight of children.
- Protect product from light and store at ambient temperature below 25°C until ready to use.
- The expiry date for the product under the recommended storage conditions will be stated on the label.
- **Single use only:** discard any unused contents
- Any unused product or chemotherapy waste materials should be disposed of in accordance with local requirements for handling of cytotoxic waste.

Handling and administration:

Do not eat, drink or smoke in chemotherapy handling or administration areas.

Mitoxantrone is a cytotoxic drug and should only be handled by adequately trained personnel wearing appropriate personal protective equipment (PPE). Staff members who are pregnant or trying to conceive should not be involved in the administration of the medication or be present in the immediate work environment when the drug is being administered. Likewise they should not come into contact with the patient's urine, faeces, saliva or vomitus after treatment. Nursing staff involved in the care of hospitalised patients that have received chemotherapy should wear appropriate PPE for handling.

Mitoxantrone is administered with 0.9% sodium chloride as an intravenous infusion over 5 minutes. Preparation of the infusion should be performed in a designated, 'low traffic' area.

Incompatibilities:

Administration equipment and intravenous catheters should not be flushed with heparin containing solutions due to the potential for physical incompatibility with mitoxantrone.

Prevention of contamination:

- Routes of exposure to chemotherapy agents include ingestion, inhalation, and absorption through the skin and mucous membranes.
- PPE (eye protection, face mask, gloves and protective gowns) should be worn by vet and handler during drug administration and disposal of contaminated waste.
- The work surface under the patient should be covered with a disposable plastic-backed work mat.
- Skin accidentally exposed to mitoxantrone should be rinsed copiously with warm water and if the eyes are involved standard irrigation techniques should be used. Medical advice should be sought immediately.

Spill management:

If mitoxantrone is spilled on equipment or environmental surfaces, non essential personnel should be instructed not to enter the area. Wearing appropriate PPE and observing health and safety precautions, prepare a 50% solution of fresh concentrated bleach. Wet absorbent tissues in the bleach solution and apply the wetted tissues to the spillage. The spillage is deactivated when the blue colour has been fully discharged. Collect up the tissues with dry tissues. Wash the area with water and soak up the water with dry tissues. Absorbent materials and PPE should be disposed of as contaminated cytotoxic waste.

Disposal:

Syringes, administration equipment, absorbent materials and disposables that have potentially come into contact with mitoxantrone should be disposed of in appropriate cytotoxic waste containers prior to incineration.

Warnings and contraindications:

(At risk groups include pregnant or lactating women, women or men trying to conceive, young children, the elderly or patients receiving chemotherapy themselves).

- Similar to all chemotherapy agents, treatment with mitoxantrone is associated with toxicity in normal tissues. For this drug, these include bone marrow suppression (myelosuppression), gastrointestinal toxicity, reproductive failure and alopecia in certain breeds.
- Mitoxantrone is potentially a vesicant and extravasation injury must be avoided.
- In the event of extravasation, stop the infusion immediately, attempt to withdraw any drug from the tissues by aspirating the catheter and call immediately for advice.
- Concurrent use of other myelosuppressive drugs should be avoided unless clinically indicated.
- Peripheral blood counts, with particular attention to neutrophil and platelet numbers should be monitored closely during treatment.
- Treatment with mitoxantrone can result in blue discolouration of the urine and the sclera of the eyes.
- Drug residues may be found in the urine and faeces of treated patients for a minimum of **8 days** after treatment and owners must be warned about this hazard. Individuals in at risk groups should be particularly careful to avoid contact with patient excreta and saliva.
- For canine patients, faeces should be double bagged for clean-up and water should be poured over areas where a pet urinates outdoors to dilute any residues. For cats, the litter box should be cleaned every day taking adequate care when handling and bagging any contaminated litter material.

Further information:

Further information is available on request by contacting us at info@chemopet.co.uk or by telephone: 01928 250052.