Comparative Table: GLYCERYL TRINITRATE INJECTION*

| Brand | GLYCERYL TRINITRATE WOCKHARDT | DBL GLYCERYL TRINITRATE, HOSPIRA GLYCERYL TRINITRATE |
|--|-------------------------------|---|
| Container Type and Volume | 50mL glass vial | 10mL glass ampoule |
| Content GTN | 50mg (1mg per mL) | 50mg (5mg per mL) |
| Preservative Free | Yes | Yes |
| Route of Administration | i.v. | i.v. |
| Ethanol Content | Ethanol free | 6.69mL Absolute Ethanol per 10mL (66.9%) |
| Other Excipients | Glucose | Propylene Glycol |
| | Glucose monohydrate | Water for Injections |
| | Propylene Glycol | |
| | Water for Injections | |
| Adverse Effects (differences) | | Alcohol intoxication has been reported in patients receiving high dose intravenous infusions. |
| *as per TGA Approved Product Information at the time of publication (May 2019) | | |



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Before prescribing, please review full Product Information (PI) available on request from InterPharma.

GLYCERYL TRINITRATE WOCKHARDT (Glyceryl trinitrate 50mg/50mL) CONCENTRATED solution for Injection

Minimum Product Information: Indications: Blood pressure control in perioperative hypertension; congestive heart failure due to acute myocardial infarction; angina pectoris in patients non-responsive to organic nitrates/beta blocker; controlled hypertension in neurosurgical/orthopaedic surgery procedures. Contraindications: Hypersensitivity to glyceryl trinitrate/organic nitrates or excipients; hypotension/uncorrected hypovolemia; increased intracranial pressure; constrictive pericarditis and pericardial tamponade; severe anaemia or arterial hypoxaemia; coadministration of sildenafil and soluble guanylate cyclase stimulator; obstructive cardiomyopathy (especially with aortic or mitral stenosis/constrictive pericarditis). Precautions: Not for intravenous injection; dilute in 5% glucose OR 0.9% sodium chloride pre-infusion; administration set used affects active amount delivered; only use in acute myocardial infarction for treating definite left ventricular failure; careful dose titration required to avoid precipitous blood pressure decrease; avoid excess hypotension and for prolonged periods; vasodilators use in hypertensive patients suspected of causing acute blindness; tolerance/cross tolerance may occur with long term/repeated use of organic nitrates; nitrate dependence; caution in patients with severe ischaemic heart disease/pulmonary disease due to hypoxaemia; methaemoglobinaemia; patients with malnutrition, hypothermia, hypothyroidism, hyperthyroidism, severe hepatic/renal disease, elderly patients; not recommended in children; contains glucose; may affect certain laboratory tests (refer PI for details). Interactions: Alcohol, levodopa, pancuronium, morphine, ergot alkaloids, tricyclic antidepressants, anticholinergics, vasodilators, antihypertensives, major tranquillisers, opioids; aspirin, non-steroidal antiinflammatory drugs, noradrenaline, sympathomimetics, heparin. Pregnancy Category B2: Caution with lactation. Adverse Events: Generally dose related: headache, tachycardia, nausea, vomiting, apprehension, restlessness, muscle twitching, retrosternal discomfort, palpitations, dizziness and abdominal pain; hypotension, bradycardia; hyperosmolarity due to propylene glycol solvent. **Dosage:** Initially 5µg/min (for non-absorbing tubing) then titrated at 5µg/min increments every 3-5 mins according to clinical situation and until response noted. If no response at 20µg/min, use 10µg/min then 20µg/min increments. Once partial response observed, reduce dose increase and lengthen dosage increment interval. No fixed optimum dose; continuous monitoring of physiologic parameters required. Administration: Initial dilution in 450mL of 5% glucose or 0.9% sodium chloride for final concentration of 100 µg/mL. Refer PI for maintenance dilution instructions. Based on Product Information dated 7 May 2019.



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