LUPIN LIMITED

SAFETY DATA SHEET

Section 1: Identification

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Material	**Naproxen and Esomeprazole Magnesium Delayed-Release Tablets 375 mg/20 mg and 500 mg/ 20 mg**
Manufacturer	Patheon Pharmaceuticals Inc., 2110 E Galbraith Rd., Cincinnati, Ohio (OH) 45237 United States (USA) Packaged at: Nutra-Med Packaging Inc. 118 Algonquin Parkway,Whippany, NJ 07981
Distributor	Lupin Pharmaceuticals, Inc. 111 South Calvert Street, Harborplace Tower, 21st Floor, Baltimore, Maryland 21202 United States Tel. 001-410-576-2000 Fax. 001-410-576-2221

Section 2: Hazard(s) Identification

Section 2, Hazard(s) identification

Fire and Explosion

Expected to be non-combustible.

Health

Naproxen and esomeprazole magnesium delayed-release tablets are contraindicated in the following patients:

- Known hypersensitivity (e.g., anaphylactic reactions and serious skin reactions) to naproxen, esomeprazole magnesium, substituted benzimidazoles, or to any components of the drug product, including omeprazole. Hypersensitivity reactions to esomeprazole may include anaphylaxis, anaphylactic shock, angioedema, bronchospasm, acute interstitial nephritis, and urticaria.
- History of asthma, urticaria, or allergic-type reactions after taking aspirin or other NSAIDs. Severe, sometimes fatal, anaphylactic reactions to NSAIDs have been reported in such patients.
- In the setting of coronary artery bypass graft (CABG) surgery.
- Proton pump inhibitors (PPIs), including esomeprazole magnesium, are contraindicated in patients receiving rilpivirine-containing products.

Environment

No information is available about the potential of this product to produce adverse environmental effects.

Section 3: Composition / Information on Ingredients

Section 3, Composition/information on ingredients

Ingredients	**CAS**

Esomeprazole magnesium trihydrate	217087-09-7
Naproxen	22204-53-1

Section 4: First-Aid Measures

Section 4, First-aid measures

Ingestion	Rinse mouth. Call a doctor/physician if you feel unwell. Do NOT induce vomiting.
Inhalation	Remove victim to fresh air and keep at rest in a position comfortable for breathing. Call a doctor/physician if you feel unwell.
Skin Contact	Wash with plenty of soap and water. If skin irritation or rash occurs: Get medical advice/attention. Wash contaminated clothing before reuse.
Eye Contact	Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing. If eye irritation persists: Get medical advice/attention.

NOTES TO HEALTH PROFESSIONALS

Medical Treatment	Treat according to locally accepted protocols. For additional guidance, refer to the current prescribing information or to the local poison control information center. Protect the patient's airway and support ventilation and perfusion. Meticulously monitor and maintain, within acceptable limits, the patient's vital signs, blood gases, serum electrolytes, etc.
OVERDOSAGE	There is no clinical data on overdosage with naproxen and esomeprazole magnesium delayed-release tablets. <u>Overdosage of naproxen:</u> Symptoms following acute NSAID overdosages have been typically limited to lethargy, drowsiness, nausea, vomiting, and epigastric pain, which have been generally reversible with supportive care. Gastrointestinal bleeding has occurred. Hypertension, acute renal failure, respiratory depression, and coma have occurred but were rare. A few patients have experienced seizures, but it is not clear whether or not these were drug- related. It is not known what dose of the drug would be life threatening. The oral LD50 of the drug is 500 mg/kg in rats, 1200 mg/kg in mice, 4000 mg/kg in hamsters and greater than 1000 mg/kg in dogs. In animals 0.5 g/kg of activated charcoal was effective in reducing plasma levels of naproxen. Manage patients with symptomatic and supportive care following an NSAID overdosage. There are no specific antidotes. Hemodialysis does not decrease the plasma concentration of naproxen because of the high degree of its protein binding. Consider emesis and/or activated charcoal (60 to 100 grams in adults, 1 to 2 grams per kg of body weight in pediatric patients) and/or osmotic cathartic in symptomatic patients seen within four hours of ingestion or in patients with a large overdosage (5 to 10 times the recommended dosage). Forced diuresis, alkalinization of urine, hemodialysis, or hemoperfusion may not be useful due to high protein binding. <u>Overdosage of esomeprazole*:*</u> A single oral dose of esomeprazole at 510 mg/kg (about 124 times the

human dose on a body surface area basis) was lethal to rats. The major signs of acute toxicity were reduced motor activity, changes in respiratory frequency, tremor, ataxia, and intermittent clonic convulsions. The symptoms described in connection with deliberate esomeprazole overdose (limited experience of doses in excess of 240 mg/day) are transient. Single doses of 80 mg of esomeprazole were uneventful. Reports of overdosage with omeprazole in humans may also be relevant. Doses ranged up to 2,400 mg (120 times the usual recommended clinical dose).
Manifestations were variable, but included confusion, drowsiness, blurred vision, tachycardia, nausea, diaphoresis, flushing, headache, dry mouth, and other adverse reactions similar to those seen in normal clinical experience (see omeprazole package insert - *Adverse Reactions*). No specific antidote for esomeprazole is known. Since esomeprazole is extensively protein bound, it is not expected to be removed by dialysis. In the event of overdosage, treatment should be symptomatic and supportive.

If over-exposure occurs, call your Poison Control Center at 1-800-222-1222 for current information on the management of poisoning or overdosage.

Section 5: Fire-Fighting Measures

Section 5, Fire-fighting measures

Fire and Explosion Hazards	Assume that this product is capable of sustaining combustion.
Extinguishing Media	Water spray, carbon dioxide, dry chemical powder or appropriate foam.
Special Firefighting Procedures	For single units (packages): No special requirements needed. For larger amounts (multiple packages/pallets) of product: Since toxic, corrosive or flammable vapors might be evolved from fires involving this product and associated packaging, self-contained breathing apparatus and full protective equipment are recommended for firefighters.
Hazardous Combustion Products	Hazardous combustion or decomposition products are expected when the product is exposed to fire.

Section 6: Accidental Release Measures

Section 6, Accidental release measures

Personal Precautions	Wear protective clothing and equipment consistent with the degree of hazard.
Environmental Precautions	For large spills, take precautions to prevent entry into waterways, sewers, or surface drainage systems.
Clean-up Methods	Collect and place it in a suitable, properly labeled container for recovery or disposal.

Section 7: Handling and Storage

Section 7, Handling and storage

Handling	No special control measures required for the normal handling of this product. Normal room ventilation is expected to be adequate for routine handling of

this product.

Storage

Store at 25°C (77°F); excursions permitted to 15-30°C (59-86°F) [see USP Controlled Room Temperature]. Store in the original container and keep the bottle tightly closed to protect from moisture. Dispense in a tight container if package is subdivided.

Section 8: Exposure Controls/Personal Protection

Section 8, Exposure controls/personal protection

Wear appropriate clothing to avoid skin contact. Wash hands and arms thoroughly after handling.

Section 9: Physical and Chemical Properties

Section 9, Physical and chemical properties

Physical Form

Naproxen and esomeprazole magnesium delayed-release tablets, 375 mg/20 mg are oval, yellow film-coated tablets printed with 375/20 in black ink, supplied as:

NDC 70748-215-07	Bottles of 60 tablets

Naproxen and esomeprazole magnesium delayed-release tablets, 500 mg/ 20 mg are oval, yellow film-coated tablets printed with 500/20 in black ink, supplied as:

NDC 70748-216-07	Bottles of 60 tablets

Section 10: Stability and Reactivity

Section 10, Stability and reactivity

Stable under recommended storage conditions.

Section 11: Toxicological Information

Section 11, Toxicological information

Carcinogenesis, Mutagenesis, and Impairment of Fertility

A 2-year study was performed in rats to evaluate the carcinogenic potential of naproxen at rat doses of 8, 16, and 24 mg/kg/day (0.05, 0.1, and 0.16 times the maximum recommended human daily dose of 1500 mg/day based on a body surface area comparison). The maximum dose used was 0.28 times the highest recommended human dose. No evidence of tumorigenicity was found.

The carcinogenic potential of esomeprazole was assessed using omeprazole studies, of which esomeprazole is an enantiomer. In two 24-month oral carcinogenicity studies in rats, omeprazole at daily doses of 1.7, 3.4, 13.8, 44 and 140.8 mg/kg/day (about 0.41 to 34.2 times the human dose of 40 mg/day expressed on a body surface area

basis) produced gastric ECL cell carcinoids in a dose-related manner in both male and female rats; the incidence of this effect was markedly higher in female rats, which had higher blood levels of omeprazole. Gastric carcinoids seldom occur in the untreated rat. In addition, ECL cell hyperplasia was present in all treated groups of both sexes. In one of these studies, female rats were treated with 13.8 mg omeprazole/kg/day (about 3.36 times the human dose of 40 mg/day on a body surface area basis) for 1 year, then followed for an additional year without the drug. No carcinoids were seen in these rats. An increased incidence of treatment-related ECL cell hyperplasia was observed at the end of 1 year (94% treated vs 10% controls). By the second year the difference between treated and control rats was much smaller (46% vs 26%) but still showed more hyperplasia in the treated group. Gastric adenocarcinoma was seen in one rat (2%). No similar tumor was seen in male or female rats treated for 2 years. For this strain of rat no similar tumor has been noted historically, but a finding involving only one tumor is difficult to interpret. A 78-week mouse carcinogenicity study of omeprazole did not show increased tumor occurrence, but the study was not conclusive.

Esomeprazole was negative in the Ames mutation test, in the *in vivo* rat bone marrow cell chromosome aberration test, and the *in vivo* mouse micronucleus test. Esomeprazole, however, was positive in the *in vitro* human lymphocyte chromosome aberration test. Omeprazole was positive in the *in vitro* human lymphocyte chromosome aberration test, the *in vivo* mouse bone marrow cell chromosome aberration test, and the *in vivo* mouse micronucleus test.

The potential effects of esomeprazole on fertility and reproductive performance were assessed using omeprazole studies. Omeprazole at oral doses up to 138 mg/kg/day in rats (about 33.6 times the human dose of 40 mg/day on a body surface area basis) was found to have no effect on reproductive performance of parental animals.

Studies to evaluate the impact of naproxen on male or female fertility have not been completed.

Section 12: Ecological Information

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No relevant studies identified.

Section 13: Disposal Considerations

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Incinerate in an approved facility. Follow all federal state and local environmental regulations.

Section 14: Transport Information

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IATA/ICAO - Not Regulated

IATA Proper shipping Name	:	N/A
IATA UN/ID No	:	N/A
IATA Hazard Class	:	N/A
IATA Packaging Group	:	N/A
IATA Label	:	N/A

IMDG - Not Regulated

IMDG Proper shipping Name	:	N/A
IMDG UN/ID No	:	N/A
IMDG Hazard Class	:	N/A
IMDG Flash Point	:	N/A
IMDG Label	:	N/A

DOT - Not Regulated

DOT Proper shipping Name	:	N/A
DOT UN/ID No	:	N/A
DOT Hazard Class	:	N/A
DOT Flash Point	:	N/A
DOT Packing Group	:	N/A
DOT Label	:	N/A

Section 15: Regulatory Information

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This Section Contains Information relevant to compliance with other Federal and/or state laws.

Section 16: Other Information

Section 16, Other information

The above information is believed to be correct but does not purport to be all-inclusive and shall be used only as a guide. Nothing herein shall be deemed to create any warranty, express or implied. It is the responsibility of the user to determine the applicability of this information and the suitability of the material or product for any particular purpose.

Lupin shall not be held liable for any damage resulting from handling or from contact with the above product. Lupin reserves the right to revise this SDS.