

(Once a day)  
Olopatadine  
Hydrochloride  
Ophthalmic  
Solution USP  
0.2%\*  
2.5 mL  
NDC 0093-7684-32

NDC 0093-7684-32

(Once a day)  
Olopatadine  
Hydrochloride  
Ophthalmic  
Solution USP  
0.2%\*

For Topical Application in  
the Eye

2.5 mL

Rx only

Sterile

TEVA

\* Each mL contains:

**Active:** olopatadine hydrochloride,  
USP 2.22 mg equivalent to  
olopatadine, USP 2 mg.

**Preservative:** benzalkonium  
chloride 0.01%.

**Inactives:** dibasic anhydrous  
sodium phosphate, edetate  
disodium, povidone, sodium  
chloride and water for injection.  
Hydrochloric acid and sodium  
hydroxide to adjust pH.

**Usual Dosage:** Instill one drop in  
each affected eye once a day.

See package insert.

NDC 0093-7684-32

(Once a day)  
Olopatadine  
Hydrochloride  
Ophthalmic  
Solution USP  
0.2%\*

For Topical Application in  
the Eye

2.5 mL

Rx only

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TEVA

Manufactured In Hungary For:  
TEVA PHARMACEUTICALS USA, INC.  
North Wales, PA 19454

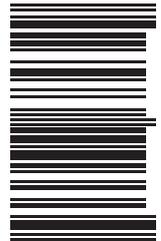
Store at 2° to 25°C (36° to 77°F).

**WARNING:** Do not touch dropper  
tip to any surface, as this may  
contaminate this solution.

**FOR TOPICAL APPLICATION IN  
THE EYE**

This package is not child  
resistant.

KEEP THIS AND ALL  
MEDICATIONS OUT OF THE  
REACH OF CHILDREN.



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0093-7684-32  
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Iss. 12/2014

NDC 0093-7684-32

(Once a day)

Olopatadine Hydrochloride

Ophthalmic Solution USP 0.2%\*

For Topical Application in the Eye

**Rx** only

Sterile

2.5 mL

\*Each mL contains: olopatadine HCl, USP 2.22 mg.

Usual Dosage: See package insert.

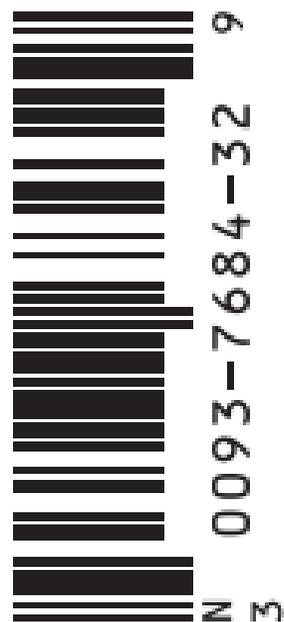
Store at 2° to 25°C (36° to 77°F).

Mfd. For TEVA PHARMACEUTICALS USA, INC.

North Wales, PA 19454

Iss. 12/2014

**TEVA**



LOT:

EXP:

**OLOPATADINE HYDROCHLORIDE**  
**Ophthalmic Solution USP 0.2%**  
Sterile

**Rx only**  
Iss. 12/2014

7684

**HIGHLIGHTS OF PRESCRIBING INFORMATION**

These highlights do not include all the information needed to use olopatadine hydrochloride ophthalmic solution USP safely and effectively. See full prescribing information for olopatadine hydrochloride ophthalmic solution USP.

**OLOPATADINE HYDROCHLORIDE ophthalmic solution USP 0.2%**  
**Initial U.S. Approval: 1996**

**INDICATIONS AND USAGE**  
Olopatadine hydrochloride ophthalmic solution USP is a mast cell stabilizer indicated for the treatment of ocular itching associated with allergic conjunctivitis. (1)

**DOSAGE AND ADMINISTRATION**  
The recommended dose is one drop in each affected eye once a day. (2)

**DOSAGE FORMS AND STRENGTHS**  
Ophthalmic solution 0.2%: each mL contains 2.22 mg of olopatadine hydrochloride. (3)

**WARNINGS AND PRECAUTIONS**  
For topical ocular use only. Not for injection or oral use. (5.1)

**ADVERSE REACTIONS**  
Symptoms similar to cold syndrome and pharyngitis were reported at an incidence of approximately 10%. (6)

To report SUSPECTED ADVERSE REACTIONS, contact TEVA USA, PHARMACOVIGILANCE at 1-866-832-8537 or drug.safety@tevapharm.com; or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

See 17 for PATIENT COUNSELING INFORMATION and FDA-approved patient labeling.

Revised: 12/2014

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**FULL PRESCRIBING INFORMATION**

**1 INDICATIONS AND USAGE**

Olopatadine hydrochloride ophthalmic solution USP is indicated for the treatment of ocular itching associated with allergic conjunctivitis.

**2 DOSAGE AND ADMINISTRATION**

The recommended dose is one drop in each affected eye once a day.

**3 DOSAGE FORMS AND STRENGTHS**

Ophthalmic solution 0.2%: each mL contains 2.22 mg of olopatadine hydrochloride USP.

**4 CONTRAINDICATIONS**

None.

**5 WARNINGS AND PRECAUTIONS**

**5.1 For Topical Ocular Use Only**

Not for injection or oral use.

**5.2 Contamination of Tip and Solution**

As with any eye drop, to prevent contaminating the dropper tip and solution, care should be taken not to touch the eyelids or surrounding areas with the dropper tip of the bottle. Keep bottle tightly closed when not in use.

**5.3 Contact Lens Use**

Patients should be advised not to wear a contact lens if their eye is red.

Olopatadine hydrochloride ophthalmic solution 0.2% should not be used to treat contact lens related irritation.

The preservative in olopatadine hydrochloride ophthalmic solution, benzalkonium chloride, may be absorbed by soft contact lenses. Patients who wear soft contact lenses and whose eyes are not red, should be instructed to wait at least ten minutes after instilling olopatadine hydrochloride ophthalmic solution 0.2% before they insert their contact lenses.

**6 ADVERSE REACTIONS**

Symptoms similar to cold syndrome and pharyngitis were reported at an incidence of approximately 10%.

The following adverse experiences have been reported in 5% or less of patients:

*Ocular:* blurred vision, burning or stinging, conjunctivitis, dry eye, foreign body sensation, hyperemia, hypersensitivity, keratitis, lid edema, pain and ocular pruritus.

*Non-ocular:* asthenia, back pain, flu syndrome, headache, increased cough, infection, nausea, rhinitis, sinusitis and taste perversion.

Some of these events were similar to the underlying disease being studied.

**8 USE IN SPECIFIC POPULATIONS**

**8.1 Pregnancy**

**Teratogenic Effects**

*Pregnancy Category C*

Olopatadine was found not to be teratogenic in rats and rabbits. However, rats treated at 600 mg/kg/day, or 150,000 times the MROHD and rabbits treated at 400 mg/kg/day, or approximately 100,000 times the MROHD, during organogenesis showed a decrease in live fetuses. In addition, rats treated with 600 mg/kg/day of olopatadine during organogenesis showed a decrease in fetal weight. Further, rats treated with 600 mg/kg/day of olopatadine during late gestation through the lactation period showed a decrease in neonatal survival and body weight. There are, however, no adequate and well-controlled studies in pregnant women. Because animal studies are not always predictive of human responses, this drug should be used in pregnant women only if the potential benefit to the mother justifies the potential risk to the embryo or fetus.

**8.3 Nursing Mothers**

Olopatadine has been identified in the milk of nursing rats following oral administration. It is not known whether topical ocular administration could result in sufficient systemic absorption to produce detectable quantities in the human breast milk. Nevertheless, caution should be exercised when olopatadine hydrochloride ophthalmic solution 0.2% is administered to a nursing mother.

**8.4 Pediatric Use**

Safety and effectiveness in pediatric patients below the age of 2 years have not been established.

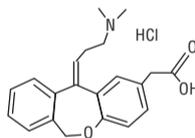
**8.5 Geriatric Use**

No overall differences in safety and effectiveness have been observed between elderly and younger patients.

**11 DESCRIPTION**

Olopatadine hydrochloride ophthalmic solution USP 0.2% is a sterile ophthalmic solution containing olopatadine for topical administration to the eyes. Olopatadine hydrochloride USP is a white or whitish, crystalline, water-soluble powder.

The structural formula of olopatadine hydrochloride USP is:



**Chemical Name:** 11-[(Z)-3-(Dimethylamino) propylidene]-6-11-dihydrodibenz[b,e] oxepin-2-acetic acid, hydrochloride.

Each mL of olopatadine hydrochloride ophthalmic solution USP for topical ocular use only, contains 2.22 mg olopatadine hydrochloride USP equivalent to 2 mg olopatadine and has the following inactive ingredients: dibasic anhydrous sodium phosphate, edetate disodium, povidone, sodium chloride; benzalkonium chloride 0.01% (preservative); hydrochloric acid/sodium hydroxide (adjust pH); and water for injection.

It has a pH of approximately 7 and an osmolality of approximately 300 mOsm/kg.

**12 CLINICAL PHARMACOLOGY**

**12.1 Mechanism of Action**

Olopatadine is a mast cell stabilizer and a histamine H1 antagonist. Decreased chemotaxis and inhibition of eosinophil activation has also been demonstrated.

**12.3 Pharmacokinetics**

Systemic bioavailability data upon topical ocular administration of olopatadine hydrochloride ophthalmic solution are not available. Following topical ocular administration of olopatadine 0.15% ophthalmic solution in man, olopatadine was shown to have a low systemic exposure. Two studies in normal volunteers (totaling 24 subjects) dosed bilaterally with olopatadine 0.15% ophthalmic solution once every 12 hours for 2 weeks demonstrated plasma concentrations to be generally below the quantitation limit of the assay (< 0.5 ng/mL). Samples in which olopatadine was quantifiable were typically found within 2 hours of dosing and ranged from 0.5 to 1.3 ng/mL. The elimination half-life in plasma following oral dosing was 8 to 12 hours, and elimination was predominantly through renal excretion. Approximately 60 to 70% of the dose was recovered in the urine as parent drug. Two metabolites, the mono-desmethyl and the N-oxide, were detected at low concentrations in the urine.

**13 NONCLINICAL TOXICOLOGY**

**13.1 Carcinogenesis, Mutagenesis, Impairment of Fertility**

Olopatadine administered orally was not carcinogenic in mice and rats in doses up to 500 mg/kg/day and 200 mg/kg/day, respectively. Based on a 40 µL drop size and a 50 kg person, these doses were approximately 150,000 and 50,000 times higher than the maximum recommended ocular human dose (MROHD). No mutagenic potential was observed when olopatadine was tested in an *in vitro* bacterial reverse mutation (Ames) test, an *in vitro* mammalian chromosome aberration assay or an *in vivo* mouse micronucleus test. Olopatadine administered to male and female rats at oral doses of approximately 100,000 times MROHD level resulted in a slight decrease in the fertility index and reduced implantation rate; no effects on reproductive function were observed at doses of approximately 15,000 times the MROHD level.

**14 CLINICAL STUDIES**

Results from clinical studies of up to 12 weeks duration demonstrate that olopatadine hydrochloride ophthalmic solution when dosed once a day is effective in the treatment of ocular itching associated with allergic conjunctivitis.

**16 HOW SUPPLIED/STORAGE AND HANDLING**

Olopatadine hydrochloride ophthalmic solution USP 0.2% is a clear, colorless to light yellow solution supplied in a white, low density polyethylene (LDPE) dispenser with a clear dropper tip, a high density polyethylene cap for the dropper tip and a low density polyethylene over cap for the dropper-tip cap.

2.5 mL fill in 5 mL bottle (0093-7684-32)

**Storage**

Store at 2°C to 25°C (36°F to 77°F)

KEEP THIS AND ALL MEDICATIONS OUT OF THE REACH OF CHILDREN.

**17 PATIENT COUNSELING INFORMATION**

**17.1 Topical Ophthalmic Use Only**

For topical ophthalmic administration only.

**17.2 Sterility of Dropper Tip**

Patients should be advised to not touch dropper tip to any surface, as this may contaminate the contents.

**17.3 Concomitant Use of Contact Lenses**

Patients should be advised not to wear a contact lens if their eyes are red. Patients should be advised that olopatadine hydrochloride ophthalmic solution should not be used to treat contact lens related irritation. Patients should also be advised to remove contact lenses prior to instillation of olopatadine hydrochloride ophthalmic solution. The preservative in olopatadine hydrochloride ophthalmic solution, benzalkonium chloride, may be absorbed by soft contact lenses. Lenses may be reinserted following administration of olopatadine hydrochloride ophthalmic solution.

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