Safety Data Sheet
Venlafaxine Extended-Release Capsules

Strength: 37.5mg, 75mg and 150 mg  Pack Size: 30, 90,100, 500, 1000 Capsules per bottle  Revision No.: 02

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**EMERGENCY OVERVIEW**
Each Venlafaxine Extended-Release capsules intended for oral administration contains Venlafaxine hydrochloride and excipients generally considered to be non- toxic and non-hazardous in small quantities and under conditions of normal occupational exposure.

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**Section 1. Identification**

**Identification of the product**

**Product name:**Venlafaxine Extended-Release capsules

**Chemical Formula:**C₁₇H₂₁NO₂ HCl

**Chemical Name:**(R/S)-1-[2-(dimethylamino)-1-(4-methoxyphenyl)ethyl] cyclohexanol hydrochloride or (±)-1-[α-[(dimethylamino)methyl]-p-methoxybenzyl] cyclohexanol hydrochloride

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**Manufacturer / supplier identification**

**Company:**Cadila Healthcare Ltd. Ahmedabad, India


**Contact for information:**Tel.: +91 79 6868100  Fax: +91 79 3750319

**Emergency Telephone No.**Tel.: +91 79 6868100

**Recommended use / Therapeutic Category**Antidepressant
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Restriction on Use / Contraindications: Hypersensitivity to venlafaxine hydrochloride or to any excipients in the formulation. Concomitant use in patients taking monoamine oxidase inhibitors (MAOIs) is contraindicated.

Section 2. Hazard(s) Information

Dose and Administration

Labor and Delivery: The effect of venlafaxine on labor and delivery in Humans is unknown.

Nursing Mothers: Venlafaxine and ODV have been reported to be excreted in human milk. Because of the potential for serious adverse reactions in nursing infants from venlafaxine hydrochloride extended-release capsules, a decision should be made whether to discontinue nursing or to discontinue the drug, taking into account the importance of the drug to the mother.

Pediatric Use: Safety and effectiveness in the pediatric population have not been established.

Adverse Effects

- Hypersensitivity
- Suicidal Thoughts and Behaviors in Children, Adolescents, and Adults
- Serotonin Syndrome
- Elevations in Blood Pressure
- Abnormal Bleeding
- Angle Closure Glaucoma
- Activation of Mania/Hypomania
- Discontinuation Syndrome
- Renal Impairment
- Hepatic Impairment
- Seizure
- Hyponatremia
- Weight and Height changes in Pediatric Patients
- Appetite Changes in Pediatric Patients
- Interstitial Lung Disease and Eosinophilic Pneumonia

Other Adverse Reactions Observed in Clinical Studies

Body as a whole
Photosensitivity reaction
Cardiovascular system
Postural hypotension, syncope, hypotension, tachycardia
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Digestive system
Gastrointestinal hemorrhage

Hemic/Lymphatic system
Ecchymosis

Metabolic/Nutritional
Hypercholesterolemia, weight gain

Nervous system
Seizures, manic reaction, agitation, confusion, akathisia, hallucinations, hypertonia, myoclonus, depersonalization, apathy

Skin and appendages
Urticaria, pruritus, rash, alopecia

Special senses
Mydriasis, abnormality of accommodation, tinnitus, taste perversion

Urogenital system
Urinary retention, urination impaired, urinary incontinence, urinary frequency increased, menstrual disorders associated with increased bleeding or increased irregular bleeding (e.g., menorrhagia, metrorrhagia)

Over Dose Effect

Human Experience
During the premarketing evaluations of venlafaxine hydrochloride extended-release capsules (for MDD, SAD, and PD) and venlafaxine hydrochloride tablets (for MDD), there were twenty reports of acute overdosage with venlafaxine hydrochloride (6 and 14 reports in venlafaxine hydrochloride extended-release capsules and venlafaxine hydrochloride tablets patients, respectively), either alone or in combination with other drugs and/or alcohol.

Somnolence was the most commonly reported symptom. Among the other reported symptoms were paresthesia of all four limbs, moderate dizziness, nausea, numb hands and feet, and hot-cold spells 5 days after the overdose. In most cases, no signs or symptoms were associated with overdose. The majority of the reports involved ingestion in which the total dose of venlafaxine taken was estimated to be no more than several-fold higher than the usual therapeutic dose. One patient who ingested 2.75 g of venlafaxine was observed to have two generalized convulsions and a prolongation of QTc to 500 msec, compared with 405 msec at baseline. Mild sinus tachycardia was reported in two of the other patients.

Actions taken to treat the overdose included no treatment, hospitalization and symptomatic treatment, and hospitalization plus treatment with activated charcoal. All patients recovered.
In postmarketing experience, overdose with venlafaxine has occurred predominantly in combination with alcohol and/or other drugs. The most commonly reported events in overdose include tachycardia, changes in level of consciousness (ranging from somnolence to coma), mydriasis, seizures, and vomiting. Electrocardiogram changes (e.g., prolongation of QT interval, bundle branch block, QRS prolongation), ventricular tachycardia, bradycardia, hypotension, rhabdomyolysis, vertigo, liver necrosis, serotonin syndrome, and death have been reported.

Published retrospective studies report that venlafaxine overdose may be associated with an increased risk of fatal outcomes compared to that observed with SSRI antidepressant products, but lower than that for tricyclic antidepressants. Epidemiological studies have shown that venlafaxine-treated patients have a higher preexisting burden of suicide risk factors than SSRI-treated patients. The extent to which the finding of an increased risk of fatal outcomes can be attributed to the toxicity of venlafaxine in overdose, as opposed to some characteristic(s) of venlafaxine-treated patients, is not clear. Prescriptions for venlafaxine hydrochloride extended-release capsules should be written for the smallest quantity of capsules consistent with good patient management, in order to reduce the risk of overdose.

### Medical Conditions
- Thoughts about suicide or dying
- Attempts to commit suicide
- New or worse depression
- New or worse anxiety
- Feeling very agitated or restless
- Panic attacks
- Trouble sleeping (insomnia)
- New or worse irritability
- Acting aggressive, being angry, or violent
- Acting on dangerous impulses
- An extreme increase in activity and talking (mania)
- Other unusual changes in behavior or mood

### Contraindications
- Hypersensitivity to venlafaxine hydrochloride or to any excipients in the formulation concomitant use in patients taking monoamine oxidase inhibitors (MAOIs) is contraindicated.

### Pregnancy Comments
- Patients should be advised to notify their physician if they become pregnant or intend to become pregnant during therapy.
- Nursing: Patients should be advised to notify their physician if they are breast-feeding an infant.

### Pregnancy Category
- C
Section 3. Composition / information on ingredient

<table>
<thead>
<tr>
<th>Component</th>
<th>Exposure Limit</th>
<th>CAS No.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Principle Component:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Venlafaxine HCl</td>
<td>Not Found</td>
<td>99300-78-4</td>
</tr>
<tr>
<td><strong>Inactive Ingredients:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Colloidal anhydrous silica</td>
<td>Not Found</td>
<td>7631-86-9</td>
</tr>
<tr>
<td>Cetostearal alcohol</td>
<td>Not Found</td>
<td>36653-82-4</td>
</tr>
<tr>
<td>Gelatin</td>
<td>Not Found</td>
<td>NA</td>
</tr>
<tr>
<td>Hypermellose</td>
<td>Not Found</td>
<td>9004-65-3</td>
</tr>
<tr>
<td>Microcrystalline cellulose</td>
<td>Not Found</td>
<td>9004-34-6</td>
</tr>
<tr>
<td>Polyacrylate dispersion</td>
<td>Not Found</td>
<td>NA</td>
</tr>
<tr>
<td>Sodium lauryl sulfate</td>
<td>Not Found</td>
<td>151-21-3</td>
</tr>
<tr>
<td>Talc</td>
<td>Not Found</td>
<td>14807-96-6</td>
</tr>
<tr>
<td>Titanium dioxide</td>
<td>Not Found</td>
<td>13463-67-7</td>
</tr>
</tbody>
</table>

Section 4. First-aid measures

**General**

- **Inhalation**
  Remove to fresh air. If not breathing give artificial respiration. If breathing is difficult, give oxygen. Seek medical attention.

- **Contact with skin**
  Immediately wash skin with soap and copious amounts of water for at least 15 minutes. If irritation persists, seek medical attention.

- **Contact with eyes**
  Immediately flush eyes with copious amounts of water for at least 15 minutes. Seek medical advice

- **Ingestion**
  If swallowed, wash out mouth with water, provided person is conscious. Seek medical advice

- Remove and wash/dispose of contaminated clothing promptly.
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Overdose Treatment
Ensure an adequate airway, oxygenation, and ventilation. Monitor cardiac rhythm and vital signs. General supportive and symptomatic measures are also recommended. Induction of emesis is not recommended. Gastric lavage with a large bore orogastric tube with appropriate airway protection, if needed, may be indicated if performed soon after ingestion or in symptomatic patients.

Activated charcoal should be administered. Due to the large volume of distribution of this drug, forced diuresis, dialysis, hemoperfusion, and exchange transfusion are unlikely to be of benefit. No specific antidotes for venlafaxine are known.

Section 5. Fire - fighting measures

Flash point: Not Found  Upper Flammable Limit: Not Found
Auto-Ignition Temperature: Not Found  Lower Flammable Limit: Not Found
Extinguishing Media: Water Spray, dry chemical, carbon dioxide or foam as appropriate for surrounding fire and material.  Fire and Explosion Hazard: This material is assumed to be combustible. As with all dry powders it is advisable to ground mechanical equipment in contact with the dry material to dissipate the potential build-up of static electricity.

Fire Fighting Procedure: As with all fires, evacuate personnel to a safe area. Fire fighter should use self- contained breathing equipment and protective clothing.

Section 6. Accidental Release Measures

Spill Response: Wear approved respiratory protection, chemically compatible gloves and protective clothing. Wipe up spillage or collect spillage using high efficiency vacuum cleaner. Avoid breathing dust. Place spillage in appropriately labelled container for disposal. Wash spill site.

Section 7. Handling and Storage
Storage: Store at 20°C to 25°C (68°F to 77°F) in a dry place.
## Section 8. Exposure controls / personal protection

<table>
<thead>
<tr>
<th>Protection</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Respiratory Protection</td>
<td>Protection from inhalation is not normally necessary. If ventilation is inadequate or dust is likely to generate, use of suitable dust mask would be appropriate.</td>
</tr>
<tr>
<td>Skin Protection</td>
<td>Skin protection is not normally necessary, however it is good practice to avoid contact with chemical to use suitable gloves when handling.</td>
</tr>
<tr>
<td>Eye protection</td>
<td>Eye protection is not normally necessary. If concerned wear protective goggles or glasses. Wash hands prior to touching eye and in particular handling contact lenses.</td>
</tr>
<tr>
<td>Protective Clothing</td>
<td>Protective clothing is not normally necessary, however it is good practice to use apron.</td>
</tr>
<tr>
<td>Engineering Control</td>
<td>Engineering controls should be used as the primary means to control exposures. General room ventilation is adequate unless the process generates dust, mist or fumes. Keep airborne contamination levels below the exposure limits listed above in this section.</td>
</tr>
</tbody>
</table>

## Section 9. Physical and chemical properties

### Appearance
Venlafaxine Hydrochloride Extended-release Capsules, 37.5 mg are white to off-white free flowing pellets filled in size ‘3’ hard gelatin capsules with grey colored cap printed with “ZA-35” in black ink & white body printed with “37.5 mg” in black ink.

Venlafaxine Hydrochloride Extended-release Capsules, 75 mg are white to off-white free flowing pellets filled in size ‘1’ hard gelatin capsules with peach colored cap printed with “ZA-36” in black ink & white body printed with “75 mg” in black ink.

Venlafaxine Hydrochloride Extended-release Capsules, 150 mg are white to off-white free flowing pellets filled in size ‘0’ hard gelatin capsules with dark orange colored cap printed with “ZA-37” in black ink & white body printed with “150 mg” in black ink.

### Solubility in water
No Data Available

### Odour
Odourless

### Boiling point
No Data Available

### Melting Point
No Data Available

### Evaporation rate
No Data Available

### Vapour density
No Data Available

### Reactivity in water
No Data Available

### Evaporation rate
No Data Available

### Specific gravity
No Data Available

### Vapour pressure
No Data Available

### % Volatile by volume
No Data Available

### Vapour pressure
No Data Available

### Other information
Venlafaxine hydrochloride is a white to off-white crystalline powder; soluble in
methanol and in water. Its octanol:water (0.2 M sodium chloride) partition coefficient is 0.43.

**Section 10. Stability and Reactivity**

**Condition to avoid**
Avoid exposure to extreme heat, light and moisture.

**Stable**
Stable under normal ambient and anticipated storage and handling conditions.

**Decomposition Products**
No Data Available

**Hazardous Reaction**
No data available.

**Incompatibilities:**
No Data available

**Section 11. Toxicological information**

**General**
Handling of formulated product is not expected to cause any toxicological affects. The data pertains to the ingredient in formulations, rather than this specie formulation.

**Target organ**
Eye contact, Skin contact and inhalation is not great risk as this product is tablet.

**Other**
Not applicable

**Section 12. Ecological information**

Do not allow product to enter drinking water supplies, waste water or soil

**Section 13. Disposal Consideration**
Dispose the waste in accordance with all applicable Federal, State and local laws.

**Section 14. Transport Information**
The product is not hazardous when shipping via air (IATA), ground (DOT), or sea (IMDG).

**Section 15. Regulatory Information**
Generic Medicine. Approved by USFDA & the ANDA Number is 090174

**Section 16. Other information**
None

**Date of issue:** 28/05/2015

**Supersedes edition of:** 01

The information contained herein is based on the state of our knowledge. It characterises the product with regard to the appropriate safety precautions. It does not represent a guarantee of the properties of the product.