About your medicine

Your doctor has prescribed EMLA cream for you.

The cream contains two active ingredients, lignocaine and prilocaine.

Tegaderm dressings are supplied with the EMLA cream. Tegaderm dressings contain polyether polyurethane films, acrylate adhesives and paper liners. These dressings are hypoallergenic and do not contain latex.

What is this medicine used for?

Lignocaine and prilocaine are topical anaesthetics that are used to cause a temporary loss of feeling of the skin at the area where it is applied. It is used to numb the skin before procedures or injections.

How should I use this medicine?

For minor procedures on skin such as surgical treatment of lesions or having blood taken:

- Apply a thick layer of cream at the site of the procedure. Do not rub EMLA cream into the skin.
- After covering EMLA cream with an air-tight dressing, leave on for at least 1 hour.
- It is important to cover EMLA cream with an air-tight dressing to ensure that the cream penetrates the skin properly and numbness of the area is felt.

The numbing effect of EMLA starts working about 1hour after it is applied. You may still feel pressure and touch in the area where you apply EMLA. The numbness of the skin may continue to increase after the cream is removed, and will last for at least 2 hours following a 1-2 hour application.

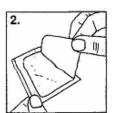
EMLA should only be used on normal, unbroken skin. Do not apply to damaged skin. Avoid getting EMLA cream in your eyes, nose, or mouth. If you get EMLA in your eyes, rinse them with plenty of water.

Wash your hands immediately after using EMLA.

Instructions for application on intact skin



Press out a sufficient quantity of the cream (about 2g or $\frac{1}{2}$ tube) at the site of the procedure.



Take one of the enclosed occlusive dressings and remove the centre cutout piece.



Peel the paper liner from the paper framed dressing.





Cover the EMLA cream so that you get a thick layer underneath. Do *not* spread out the cream. Smooth down the dressing edges carefully to avoid leakages.

Remove the paper frame. The time of application can easily be marked directly on the occlusive dressing.

EMLA must be applied at least 1 hour before the start of the procedure and may be left on for several hours with remaining effect.

Your doctor may use EMLA cream for specialized procedures. Follow your doctor's instructions for use.

What should I do if I forget a dose?

EMLA is usually only applied once prior to each procedure. It must be in contact with the skin for a period of time for it to work. If you applied this medicine later than directed, tell your health care professional before starting the procedure.

What possible side effects may it cause?

Certain side effects of this medicine are not unusual and may even disappear during treatment. If any of the following effects **persist or are severe**, consult your doctor.

- whitening or redness of the skin
- puffiness
- burning or itching on the skin, where EMLA is applied

Allergic reactions to the active ingredients have been seen but are rare.

Rare cases of small red dots (petechiae) at the application site have been reported, especially in children with skin problems (e.g., atopic dermatitis).

EMLA cream, in extremely rare cases, can affect the level of oxygen that the blood carries, resulting in an increase in the methaemoglobin level in your blood. This condition, known as methemoglobinemia, causes the colour of the skin to become brownish or greyish, especially around the lips, fingernails, and toenails.

What precautions should I take?

 Inform your doctor if you have dermatitis or any other skin problems, if you have glucose-6-phosphate dehydrogenase deficiency (G6PD), if you are allergic to lignocaine or prilocaine, if you think you may be sensitive or allergic to the Tegaderm dressing, or if you have any other allergies, or if there is an infection, skin rash or cut at, or near, the area where you want to apply EMLA cream.

- For women: Tell your doctor if you are pregnant, plan to become pregnant, or are breast-feeding
- Inform you doctor if you are taking other medication, especially, antiarrhythmic drugs for heart problems (e.g., amiodarone); other anaesthetics; other drugs which may trigger methaemoglobin formation (e.g., sulfonamides, chloroquine, dapsone).
- The skin on which EMLA cream is applied may stay numb for up to several hours after the cream is removed. For this reason, you should be careful to avoid accidental injury to the treated area, such as scratching, rubbing or exposure to extreme hot or cold temperatures, until complete sensation returns.
- Children should be closely observed during and after use of EMLA cream, as they are at greater risk than adults for serious side effects, such as methemoglobinemia (a blood disorder that causes the skin, especially around lips and nails, to turn brownish or greyish).

How do I store this medicine?

• Keep this medicine away from heat and direct sunlight in a cool, dry place, out of reach of children.

When in doubt, consult your doctor or pharmacist

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