### Alert
Unapproved medicine in Australia and New Zealand. Available only through Special Access Scheme Category C Pathway.

### Indication
Mydriatic (dilates the pupil) and cycloplegic (prevents accommodation of the eye) for ophthalmic examinations and therapeutic procedures.

### Action
Contains cyclopentolate hydrochloride 0.2% and phenylephrine hydrochloride 1%. Cyclopentolate hydrochloride is an anticholinergic drug and phenylephrine hydrochloride is an adrenergic drug. This combination induces mydriasis that is greater than that of either drug alone at its respective concentration. The concentrations of cyclopentolate and phenylephrine have been selected to induce mydriasis with little accompanying cycloplegia.

### Drug Type
Antimuscarinic (cyclopentolate) and sympathomimetic (phenylephrine).

### Trade Name
Cyclomydril

### Presentation
2 mL DROP-TAINER® dispenser.
Each mL contains: Cyclopentolate hydrochloride 0.2%, phenylephrine hydrochloride 1%. Preservative: Benzalkonium chloride 0.01%. Inactives: Edetate disodium, boric acid, hydrochloric acid and/or sodium carbonate (to adjust pH), purified water.

### Dosage/Interval
Instil one drop into each eye 30–60 minutes prior to procedure. Dark irises may require additional drops. Instillation of one drop into each eye, may be repeated up to three times (maximum of four drops), at least 5 minutes apart.

### Maximum dose
Four drops into each eye.

### Route
Topical instillation into the eyes.

### Preparation/Dilution
N/A

### Administration
Apply pressure to the lacrimal sac during and for 2 minutes after instillation of eye drop to minimise systemic absorption. Wipe away excess medication.

### Monitoring
Observe infants for at least 30 minutes up to 120 minutes. Blood pressure, heart rate and oxygen saturation. Signs of ileus.

### Contraindications
Concurrent use with beta-blockers. Acute stage of necrotising enterocolitis (NEC).

### Precautions
To minimise systemic absorption, apply pressure over the nasolacrimal sac for 2 to 3 minutes following instillation. Bronchopulmonary dysplasia. Feeding intolerance. Severe neurological impairment.

### Drug Interactions
Propranolol: An enhanced pressor response to phenylephrine has been shown in patients on propranolol (blocks the beta-adrenergic vasodilation that normally reduces the blood pressure effect).

### Adverse Reactions
These usually only occur with excess dosing. Anticholinergic side effects include fever, tachycardia, vasodilation, dry mouth, restlessness, delayed gastric emptying and decreased gastrointestinal motility, and urinary retention.
Alpha-adrenergic side effects include decreased pulmonary compliance, tidal volume and peak airflow in babies with bronchopulmonary dysplasia. Increased heart rate and blood pressure.

### Compatibility
N/A

### Incompatibility
N/A

### Stability
Single use only. Discard after use.

### Storage
Store at room temperature < 25°C.

### Special Comments
Cyclomydril is an unapproved medicine in Australia and New Zealand.

### Evidence summary
Refer to full version.

### References
Refer to full version.