VARIBAR® THIN LIQUID
(BARIUM SULFATE) FOR ORAL SUSPENSION, 81% w/w

HIGHLIGHTS OF PRESCRIBING INFORMATION
These highlights do not include all the information needed to use VARIBAR THIN LIQUID safely and effectively. See full prescribing information for VARIBAR THIN LIQUID.

VARIBAR THIN LIQUID (barium sulfate) for oral suspension.

Initial U.S. Approval: 2016

INDICATIONS AND USAGE
VARIBAR THIN LIQUID is a radiopaque contrast agent indicated for use in modified barium swallow examinations to evaluate the oral and pharyngeal function and morphology in adult and pediatric patients.

DOSAGE AND ADMINISTRATION
For oral use only—once reconstituted, administer by infant bottle, syringe, spoon, or cup. The recommended dose is:
- Adults: 5 mL
- Pediatric patients 6 months and older: 1 to 3 mL
- Pediatric patients younger than 6 months of age: 0.5 mL to 1 mL

During a single modified barium swallow examination, multiple doses may be administered
- Maximum dose: 80 mL (2.1)
- Must reconstitute supplied powder with water prior to use. See Full Prescribing Information for reconstitution instructions (2.2)

FOR ORAL SUSPENSION: 120 grams of barium sulfate (81% w/w) supplied in a multiple-dose bottle for reconstitution (3)

ADVERSE REACTIONS

WARS AND PRECAUTIONS
Hypersensitivity reactions: Emergency equipment and trained personnel should be immediately available (5.1)

Aspiration pneumonitis: Aspiration may occur following barium sulfate procedure to avoid aspiration or impaction (5.3)

- Asthma or bronchospasm: bronchospasm

ADVERSE REACTIONS

Full prescribing information are not listed

CONTRAINDICATIONS
- Known or suspected perforation of the gastrointestinal (GI) tract (4)
- Conditions associated with high risk of GI perforation or aspiration (4)
- Known hypersensitivity to barium or any of the excipients of VARIBAR THIN LIQUID (4)

CONTRAINDICATIONS
VARIBAR THIN LIQUID is contraindicated in patients with:
- known or suspected perforation of the gastrointestinal (GI) tract
- known obstruction of the GI tract
- high risk of GI perforation such as those with a recent GI perforation, acute GI hemorrhage or ischemia, toxic megacolon, severe ileus, post GI surgery or biopsy, acute GI injury or burn, or recent radiotherapy to the pelvis
- high risk of aspiration such as those with known or suspected tracheo-esophageal fistula or obtundation
- known severe hypersensitivity to barium sulfate or any of the excipients of VARIBAR THIN LIQUID

WARNINGS AND PRECAUTIONS

5.1 Hypersensitivity Reactions

Barium sulfate preparations contain a number of excipients, including natural and artificial flavors and may induce serious hypersensitivity reactions. The manifestations include hypotension, bronchospasm and other respiratory impairments, and dermatological reactions including rash, urticaria and itching. A history of bronchial asthma, atopy, food allergies, or a previous reaction to a contrast agent may increase the risk for hypersensitivity reactions. Emergency equipment and trained personnel should be immediately available for treatment of a hypersensitivity reaction.

5.2 Intra-abdominal Barium Leakage

The use of VARIBAR THIN LIQUID is contraindicated in patients at high risk of perforation of the GI tract (see Contraindications (4)). Administration of VARIBAR THIN LIQUID may result in leakage of barium from the GI tract in the presence of conditions such as carcinomas, GI fistula, inflammatory bowel disease, gastric or duodenal ulcer, appendicitis, or diverticulitis, and in patients with a severe stenosis at any level of the GI tract, especially if it is distal to the stomach. The barium leakage has been associated with peritonitis and granuloma formation.

5.3 Delayed Gastrointestinal Transit and Obstruction

Orally administered barium sulfate may accumulate proximal to a constricting lesion of the colon, causing obstruction or impaction with development of baroliths (inspissated barium associated with feces) and may lead to abdominal pain, appendicitis, bowel obstruction, or rarely perforation. Patients with the following conditions are at higher risk for developing obstruction or baroliths: severe stenosis at any level of the GI tract, impaired GI motility, electrolyte imbalance, dehydration, on a low residue diet, taking medications that delay GI motility, constipation, pediatric patients with cystic fibrosis or Hirschsprung disease, and the elderly (see Use in Specific Populations (8.4, 8.5)). To reduce the risk of delayed GI transit and obstruction, patients should maintain adequate hydration after the barium sulfate procedure.

5.4 Aspiration Pneumonitis

The use of VARIBAR THIN LIQUID is contraindicated in patients with trachea-esophageal fistula (see Contraindications (4)). Oral administration of barium is associated with aspiration pneumonitis, especially in patients with a history of food aspiration or with compromised swallowing mechanism. Vomiting following oral administration of barium sulfate may lead to aspiration pneumonitis.

In patients at risk for aspiration, begin the procedure with a small ingested volume of VARIBAR THIN LIQUID. Monitor the patient closely for aspiration, discontinue administration of VARIBAR THIN LIQUID if aspiration is suspected, and monitor for development of aspiration pneumonitis.

5.5 Systemic Embolization

Barium sulfate products may occasionally intravasate into the venous drainage of the GI tract and enter the circulation as a “barium embolus” leading to potentially fatal complications which include systemic and pulmonary embolism, disseminated intravascular coagulation, septicemia and prolonged severe hypotension. Although this complication is exceedingly uncommon after oral administration of a barium sulfate suspension, monitor patients for potential intravasation when administering barium sulfate.

ADVERSE REACTIONS

The following adverse reactions have been identified from spontaneous reporting or clinical studies of barium sulfate administered orally. Because the reactions are reported voluntarily from a population of uncertain size, it is not always possible to reliably estimate their frequency or to establish a causal relationship to drug exposure.
Nausea, vomiting, diarrhea and abdominal cramping
Serious adverse reactions and fatalities include aspiration pneumonitis, barium sulfate impaction, intestinal perforation with consequent peritonitis and granuloma formation, vasovagal and syncopal episodes

8 USE IN SPECIFIC POPULATIONS
8.1 Pregnancy
Risk Summary
VARIBAR THIN LIQUID is not absorbed systemically following oral administration, and maternal use is not expected to result in fetal exposure to the drug.

8.2 Lactation
Risk Summary
VARIBAR THIN LIQUID is not absorbed systemically by the mother following oral administration, and breastfeeding is not expected to result in exposure of the infant to the drug.

8.4 Pediatric Use
The efficacy of VARIBAR THIN LIQUID in pediatric patients is based on successful opacification of the pharynx during modified barium swallow examinations [see Clinical Pharmacology (12.1)]. Safety and dosing recommendations in pediatric patients are based on clinical experience.

VARIBAR THIN LIQUID is contraindicated in pediatric patients with trachea-esophageal fistula [see Contraindications (4)]. Pediatric patients with a history of asthma or food allergies may be at increased risk for development of hypersensitivity reactions [see Warnings and Precautions (5.1)]. Monitor patients with cystic fibrosis or Hirschsprung disease for bowel obstruction after use [see Warnings and Precautions (5.3)].

8.5 Geriatric Use
Clinical studies of VARIBAR THIN LIQUID did not include sufficient numbers of subjects aged 65 and over to determine whether they respond differently from younger subjects. Other reported clinical experience has not identified differences in responses between the elderly and younger patients. In general, dose selection for an elderly patient should be cautious, usually starting at the low end of the dosing range, reflecting the greater frequency of decreased hepatic, renal, or cardiac function, and of concomitant disease or other drug therapy.

11 DESCRIPTION
VARIBAR THIN LIQUID (barium sulfate) is a radiographic contrast agent that is supplied as a white to lightly colored powder for suspension (81% w/w) with an apple aroma for oral administration. The active ingredient barium sulfate is designated chemically as BaSO₄, with a molecular weight of 233.4 g/mol, a density of 4.5 g/cm³, and the following chemical structure:

VARIBAR THIN LIQUID has a viscosity of <15 cPs when reconstituted and contains the following excipients: carboxymethylcellulose sodium, citric acid, maltodextrin, natural and artificial apple flavor, polysorbate 80, saccharin sodium, simethicone, sodium citrate, sorbitol and xylitol.

12 CLINICAL PHARMACOLOGY
12.1 Mechanism of Action
Due to its high atomic number, barium (the active ingredient in VARIBAR THIN LIQUID) is opaque to x-rays and therefore acts as a positive contrast agent for radiographic studies.

12.2 Pharmacodynamics
Barium sulfate is biologically inert and has no known pharmacological effects.

12.3 Pharmacokinetics
Under physiological conditions, barium sulfate passes through the gastrointestinal tract in an unchanged form and is absorbed only in small, pharmacologically insignificant amounts.

13 NONCLINICAL TOXICOLOGY
13.1 Carcinogenesis, Mutagenesis, Impairment of Fertility
No animal studies have been performed to evaluate the carcinogenic potential of barium sulfate or potential effects on fertility.

16 HOW SUPPLIED/STORAGE AND HANDLING
16.1 How Supplied
VARIBAR THIN LIQUID is supplied as a white to lightly colored powder in a multiple-dose polyethylene bottle containing 120 grams of barium sulfate (81% w/w).
Provided as: 24 x 148 g bottles (NDC 32909-105-10)

16.2 Storage and Handling
Store at USP controlled room temperature 20° to 25°C (68° to 77°F).

17 PATIENT COUNSELING INFORMATION
After administration, advise patients to:
• Maintain adequate hydration [see Dosage and Administration (2.2) and Warnings and Precautions (5.3)].
• Seek medical attention for worsening of constipation or slow gastrointestinal passage [see Warnings and Precautions (5.3)].
• Seek medical attention for any delayed onset of hypersensitivity: rash, urticaria, or respiratory difficulty [see Warnings and Precautions (5.1)].