



INTRODUCING



EluciremTM ▽
Gadopichlenol

The next generation GBCA from Guerbet, designed to reveal high-quality images at half the conventional gadolinium dose¹

This medicinal product is for diagnostic use only.

Elucirem is indicated in adults and children aged 2 years and older for contrast-enhanced magnetic resonance imaging (MRI) to improve detection and visualization of pathologies with disruption of the blood-brain-barrier (BBB) and/or abnormal vascularity of:

- the brain, spine, and associated tissues of the central nervous system (CNS);
- the liver, kidney, pancreas, breast, lung, prostate, and musculoskeletal system.

It should be used only when diagnostic information is essential and not available with unenhanced MRI.

Reporting suspected adverse reactions after authorisation of the medicinal product is important. It allows continued monitoring of the benefit/risk balance of the medicinal product. Healthcare professionals are asked to report any suspected adverse reactions via the Yellow Card Scheme Website: www.mhra.gov.uk/yellowcard or search for **MHRA Yellow Card** in the Google Play or Apple App Store. Adverse events should also be reported to Guerbet Laboratories Ltd. via uk.info@guerbet.com

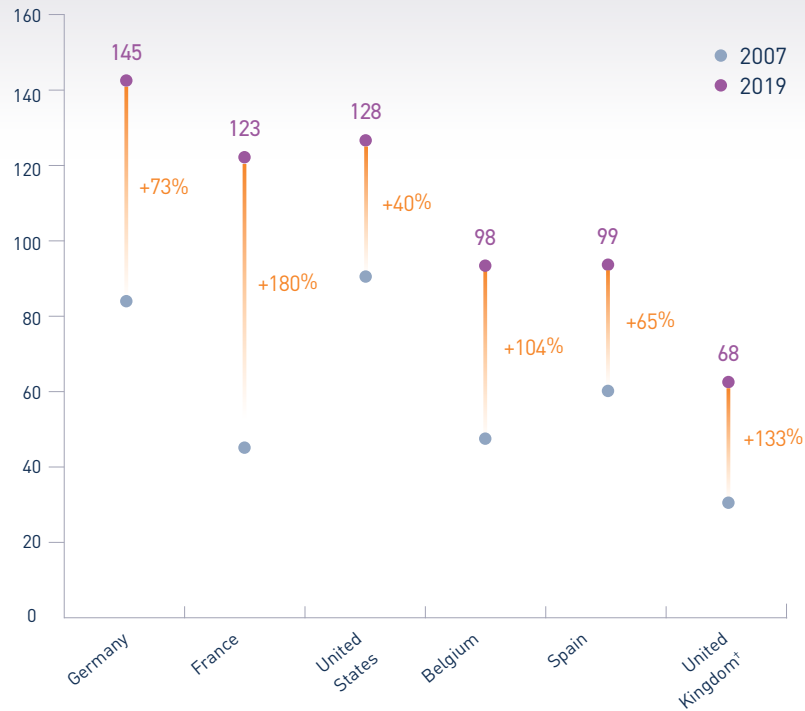
This information is intended only for UK healthcare professionals. Prescribing Information can be found at the end of the brochure.

Inspired by the two water molecule exchange sites of Elucirem.
GBCA: Gadolinium-Based Contrast Agent.

Guerbet 

MRI use has increased dramatically with a **high consumption of GBCAs worldwide**²⁻⁴

MRI exams, 2007 and 2019 (or nearest year) per 1000 population^{2,3*}



Adapted from Health at a Glance 2019 and OECD Health Statistics 2021. * Exams outside hospital not included.

More than 30 million doses of GBCAs were consumed worldwide in 2014⁴



GBCA: Gadolinium-Based Contrast Agent; MRI: Magnetic Resonance Imaging.

Reducing the dose of gadolinium whilst maintaining image quality is recommended^{5,6}

Following reports of NSF and gadolinium deposition, the EMA and ESUR recommend:



"Macrocytic GBCAs can continue to be used in their current indications but in the lowest doses that enhance images sufficiently and only when unenhanced body scans are unsuitable."⁵

EUROPEAN MEDICINES AGENCY



"Emergency examination: For all patients, use the lowest dose of contrast medium consistent with a diagnostic result."⁶

EUROPEAN SOCIETY OF UROGENITAL RADIOLOGY



"Pregnancy and lactation: When there is a very strong indication for enhanced MRI, the smallest possible dose of a macrocyclic gadolinium contrast agent may be given to the pregnant female."⁶

EUROPEAN SOCIETY OF UROGENITAL RADIOLOGY

GBCA: Gadolinium-Based Contrast Agent; NSF: Nephrogenic Systemic Fibrosis

Introducing Elucirem from Guerbet, the company that developed the first macrocyclic GBCA on the market⁴

This medicinal product is for diagnostic use only.

Elucirem is indicated in adults and children aged 2 years and older for contrast-enhanced magnetic resonance imaging (MRI) to improve detection and visualization of pathologies with disruption of the blood-brain-barrier and/or abnormal vascularity of:

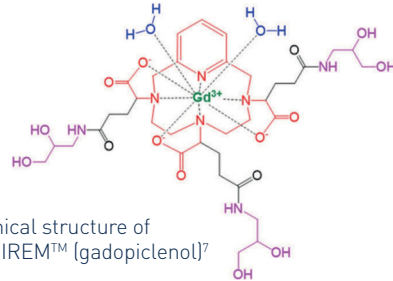
- the brain, spine, and associated tissues of the central nervous system.
- the liver, kidney, pancreas, breast, lung, prostate, and musculoskeletal system.

It should be used only when diagnostic information is essential and not available with unenhanced MRI.

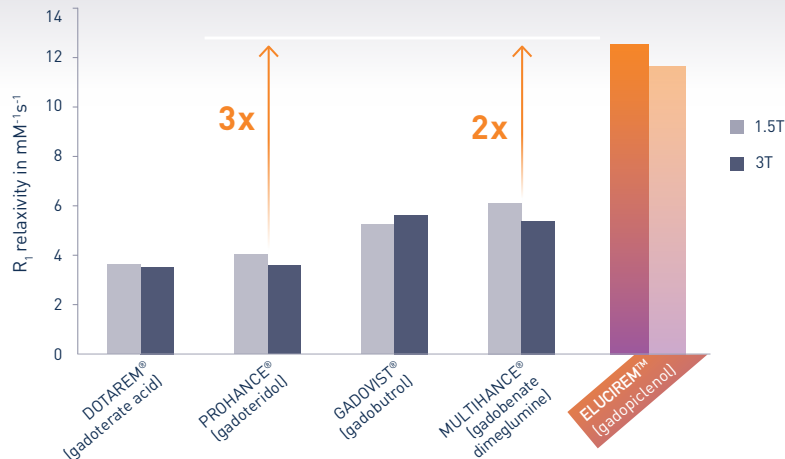
Designed to reveal:



Elucirem's innovative 2 water molecule exchange sites increase relaxivity by up to 3x that of approved GBCAs⁷



Relaxivity of authorised GBCAs⁷

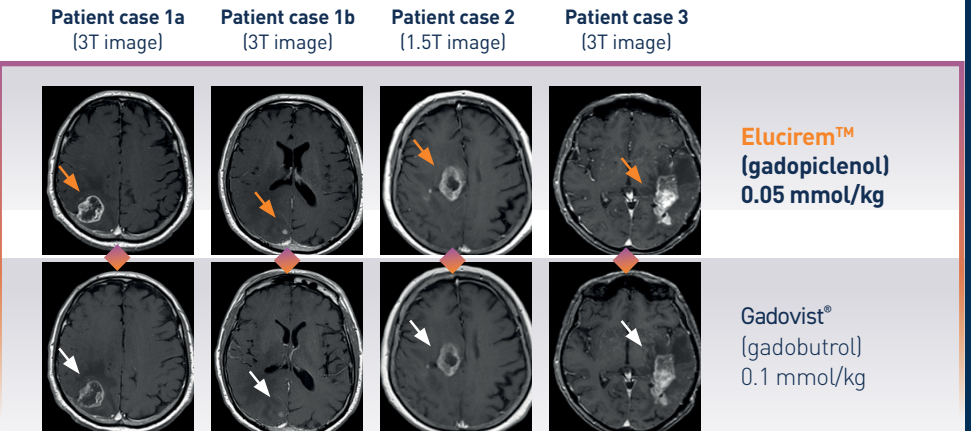


* Gadopiclenol relaxivity measured at 1.41 T in human serum.

This graph is not intended to compare the efficacy or safety of the products shown here. For complete product information, refer to each product's Summary of Product Characteristics. Trademarks are the property of their respective owners. It is intended to show the relaxivity of each product.

Designed to deliver high-quality CNS lesion visualisation giving you the diagnostic confidence you would expect with half the conventional gadolinium dose^{1,8}

PHASE III PICTURE TRIAL⁸



Phase III PICTURE trial in CNS demonstrated that gadopiclenol at a dose of 0.05 mmol/kg was noninferior to gadobutrol at a dose of 0.1 mmol/kg in terms of lesion visualisation $p < 0.0001$.

Results on overall diagnostic preference for PICTURE (CNS)

Study	Reader	N	gadopiclenol preferred	No preference	gadobutrol preferred
PICTURE (CNS) ⁸	4	241	108 (44.8%)	98 (40.7%)	35 (14.5%)
	5	241	131 (54.4%)	52 (21.6%)	58 (24.1%)
	6	241	138 (57.3%)	56 (23.2%)	47 (19.5%)

The overall diagnostic preference was assessed in a global matched-pairs fashion (reading of images from both MRI assessed side by side) by three additional blinded readers in each study.

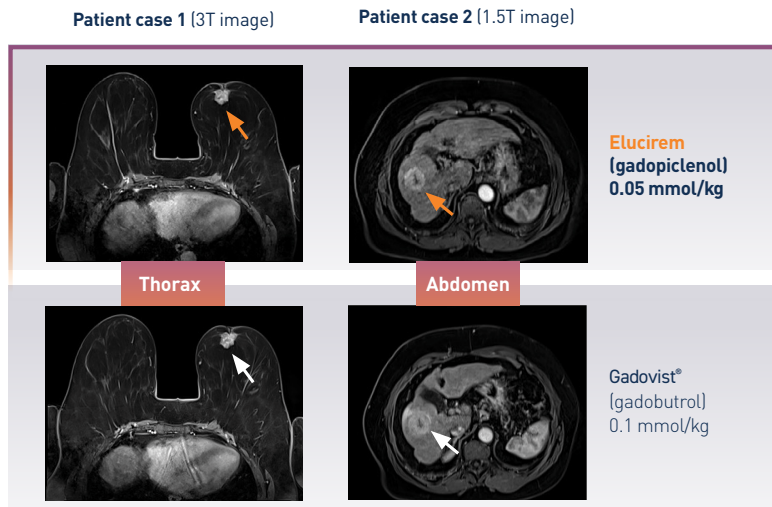
The PICTURE trial is a prospective, randomized, double-blind, phase III controlled, and crossover-designed vs. Gadovist® (gadobutrol) trial. Enrollment (n=256): patients presenting with known or highly suspected CNS lesions with focal areas of disrupted BBB (e.g., primary and secondary tumors). The two contrast media Interval is 2 to 14 days. The primary endpoint was the evaluation of lesion visualization, based on three co-criteria (border delineation, internal morphology, and degree of contrast enhancement) by three independent blinded readers, using a 4-point scale. The mean scores for each of the three lesion visualization co-criteria were calculated as the sum of scores for up to 3 most representative lesions divided by the number of lesions. 242 patients completed the trial (received the two contrast agents). Mean age: 57.2 years (18-84); 53.6% female. The most frequent diagnoses after MRI were meningiomas (32.1%), brain metastases (22.9%), and glial tumors (21.7%)⁸.

In Picture Trial, a majority of radiologists express Overall Diagnostic Preference for CNS images acquired with Elucirem (gadopiclenol), compared with an approved GBCA⁸

*The sensitivity and specificity of Elucirem for detection of specific pathology are not known.
CNS: Central Nervous System; GBCA: Gadolinium-Based Contrast Agent; MRI: Magnetic Resonance Imaging;

Designed to deliver high-quality body lesion visualization you would expect with half the conventional gadolinium dose^{1,9}

PHASE III PROMISE TRIAL⁹



Phase III PROMISE trial in the body demonstrated that gadopiclenol at a dose of 0.05 mmol/kg was noninferior to gadobutrol at a dose of 0.1 mmol/kg in terms of lesion visualisation $p < 0.001$

Results on overall diagnostic preference for PROMISE (Body)

Study	Reader	N	gadopiclenol 1 preferred	No preference	gadobutrol preferred
PROMISE (Body) ⁹	4	276	36 (13.0%)	216 (78.3%)	24 (8.7%)
	5	276	40 (14.5%)	206 (74.6%)	30 (10.9%)
	6	276	33 (12.0%)	228 (82.6%)	15 (5.4%)

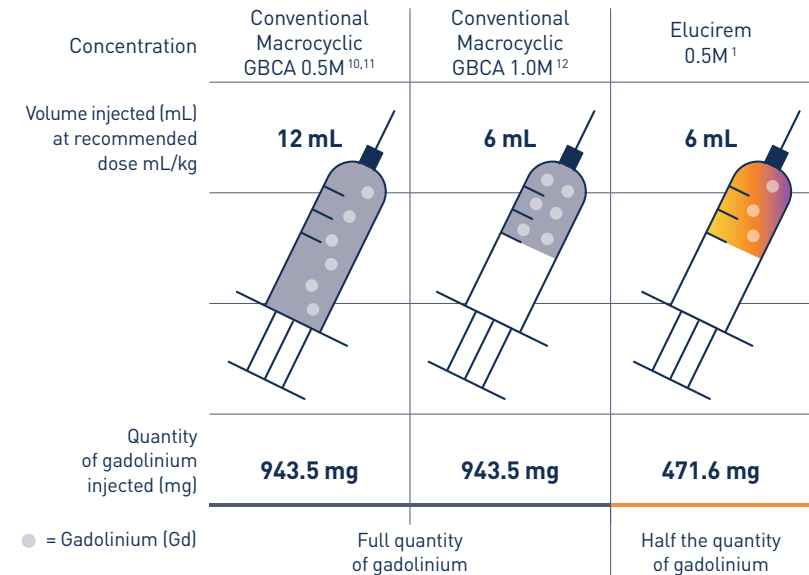
Doctors did not express a diagnostic preference in the PROMISE trial.

PROMISE trial is a Phase III study designed for whole-body MRI, prospective, multicenter, randomized, double-blind, controlled, and crossover design vs Gadovist® (gadobutrol). Enrollment (n=273): patients with known or suspected abnormalities or lesions in other body regions (8% in head and neck, 28% in thorax, 35% in abdomen, 22% in pelvis, and 8% in musculoskeletal system), both based on results of a previous imaging procedure such as CT or MRI. Most participants presented with neoplasms (66%), the most frequent being metastasis to the liver (9.5%) and breast cancer (9.2%). The two contrast media Interval is 2 to 14 days. The primary endpoint was the evaluation of lesion visualization, based on 3 co-criteria (border delineation, internal morphology and degree of contrast enhancement) by three independent blinded readers, using a 4-point scale. The mean of scores for each of the 3 lesion visualization co-criteria was calculated as the sum of scores for up to 3 most representative lesions divided by the number of lesions⁹.

Sensitivity and specificity of Elucirem for detection of specific pathology are not known.

Elucirem portrays innovation and forward thinking as well as encompassing patient safety and environmental benefits.

Quantity of gadolinium injected into a 60 kg-patient



Injecting less gadolinium could



Reduce the gadolinium quantity in patients



Lower the gadolinium footprint in the environment

No dose adjustment required for pediatric (2 years and older) or renally impaired patients¹ when using Elucirem¹

† Use of the product in severe renal impairment requires an overall risk-benefit judgment from the professional. More than 1 dose should not be used during a paediatric scan.

GBCA: Gadolinium-Based Contrast Agent; MRI: Magnetic Resonance Imaging. See Prescribing Information / full SmPC for further details.

Kinetic stability of authorised GBCAs⁷

	Kinetic stability- Dissociation half-life	Thermodynamic stability Log K ^{therm}	Thermodynamic stability Log K ^{cond} (pH7.4)
ELUCIREM™ (Gadopiclenol)	20±3days [†]	18.7	15.5 [†]
DOTAREM® (gadoterate acid)	4±0.5days [†]	25.6 [†]	19.3 [†]
GADOVIST® (Gadobutrol)	18 hours	21.8 [†]	14.7 [†]
PROHANCE® (Gadoteridol)	4 hours	23.8 [†]	17.1 [†]
MULTIHANCE® (Gadobenate dimeglumine)	NA	22.6 [†]	18.4 [†]
OMNISCAN® (Gadodiamide)	<5 seconds	16.9 [†]	14.9 [†]
MAGNEVIST® (Gadopentetate dimeglumine)	<5 seconds	22.1 [†]	17.7 [†]

Adapted from Robic et al. 2019.

*Guerbet measurements. †Port et al (2008). NA indicates not available.

Safety Profile of Elucirem™

In phase III studies, Elucirem demonstrated a safety profile comparable to the active comparator (gadobutrol) in clinical trials.

† In the PICTURE trial, TEAE incidence was 14.6% after MRI with gadopiclenol and 17.6% after MRI with gadobutrol.

In the PROMISE trial, TEAE incidence was 18.1% after MRI with gadopiclenol and 20.0% after MRI with gadobutrol.

Adverse events considered related to contrast media:	Elucirem (gadopiclenol) Rate (%)	Gadovist® (gadobutrol) Rate (%)
CNS MRI [§] (PICTURE trial)	4.9% 15 reported in 12 patients	6.9% 19 reported in 17 patients
Body MRI [§] (PROMISE trial)	4.2% 14 reported in 12 patients	5.5% 19 reported in 16 patients

Summary of the safety profile: The most frequent adverse reactions were injection site pain, headache, nausea, injection site coldness, fatigue and diarrhoea¹.

System Organ Class	Frequency	
	Common	Uncommon
Immune System disorders	-	Hypersensitivity*
Nervous System Disorders	Headache	Dysgeusia
Gastrointestinal Disorders	-	Diarrhoea, Nausea, Abdominal pain, Vomiting
General Disorders and Administration Site Conditions	Injection site reaction**	Fatigue, Feeling hot

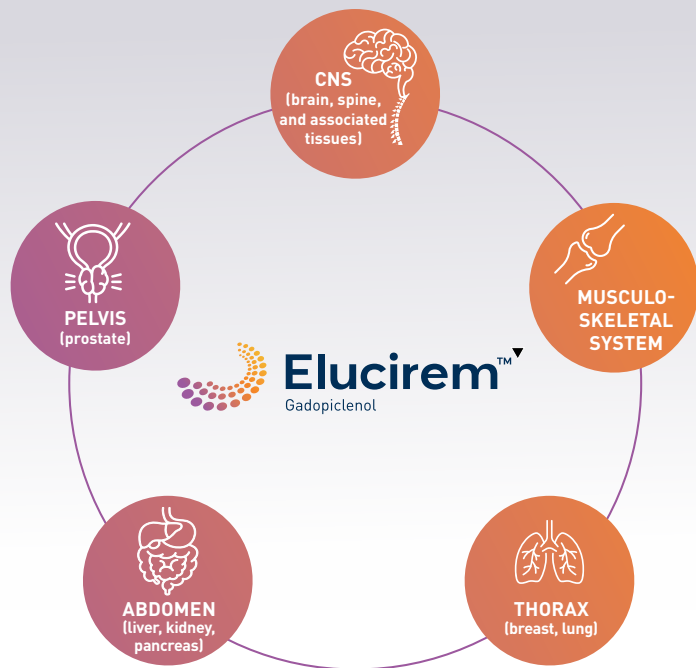
* Including immediate (dermatitis allergic, erythema, dyspnoea, dysphonia, throat tightness, throat irritation, paraesthesia oral and flushing) and delayed (periorbital oedema, swelling, rash and pruritus) reactions.

** Injection site reaction includes the following terms: injection site pain, injection site oedema, injection site coldness, injection site warmth, injection site haematoma and injection site erythema.

TEAE: Treatment Emergent Adverse Events.

Elucirem™ is for both **adults and children**¹

Elucirem™ is indicated in adults and children aged 2 years and older for contrast-enhanced MRI to improve detection and visualisation of pathologies with disruption of the blood-brain-barrier and/or abnormal vascularity of:¹



Elucirem™ (gadopiclenol) should be used only when diagnostic information is essential and not available with unenhanced MRI.

Paediatric population (2 years and older)
The recommended and maximum dose of Elucirem is 0.1 mL/kg BW (equivalent to 0.05 mmol/kg BW) for all indications. More than one dose should not be used during a scan.

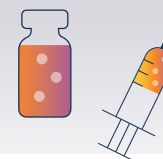
The safety and efficacy of Elucirem in children less than 2 years has not yet been established. No data are available.

Elucirem™ uses a **standard weight-based dosing**¹

Elucirem™ volume by body weight¹

Body Weight	Volume kg/10 = ml	Quantity
Kilograms (kg)	Milliliters (mL)	Millimoles (mmol)
10	1	0.5
20	2	1
30	3	1.5
40	4	2
50	5	2.5
60	6	3
70	7	3.5
80	8	4
90	9	4.5
100	10	5
110	11	5.5
120	12	6
130	13	6.5
140	14	7

The recommended dose of Elucirem™ is 0.1 mL/kg body weight (BW) (equivalent to 0.05 mmol/kg BW) to provide diagnostically adequate contrast for all indications.



Elucirem™ (gadopiclenol) is available in vials and pre-filled syringes and is designed for efficient drug delivery¹

Important information for using **Elucirem™**

Elderly

No dose adjustment is necessary. Caution should be exercised in elderly patients (see SmPC section 4.4 and 5.2).

Renal impairment

No dose adjustment is necessary for patients with any level of renal impairment. Gadopiclenol should only be used in patients with severe renal impairment (GFR < 30 mL/min/1.73 m²) and in patients in the perioperative liver transplantation period after careful risk/benefit assessment and if the diagnostic information is essential and not available with non-contrast enhanced MRI (see section 4.4). If it is necessary to use gadopiclenol, the dose should not exceed 0.1 mL/kg BW (equivalent to 0.05 mmol/kg BW). More than one dose should not be used during a scan. Because of the lack of information on repeated administration, gadopiclenol injections should not be repeated unless the interval between injections is at least 7 days.

Hepatic impairment

No dose adjustment is considered necessary for patients with hepatic impairment. Caution is recommended, especially in the case of perioperative liver transplantation period (see above "renal impairment").

Paediatric population (2 years and older)

The recommended and maximum dose of Elucirem is 0.1 mL/kg BW (equivalent to 0.05 mmol/kg BW) for all indications. More than one dose should not be used during a scan.

The safety and efficacy of Elucirem in children less than 2 years has not yet been established. No data are available.

Method of administration

The medicinal product is for intravenous use only.

The recommended dose is administered intravenously as a bolus injection at approximately 2 mL/sec followed by a flush of sodium chloride 9 mg/ml (0.9%), solution for injection via manual injection or power injector.

Intravenous administration of contrast agent should, if possible, be done with the patient lying down. Since experience shows that most undesirable effects occur within minutes after administration, the patient should be kept under observation during and following administration for at least half an hour (see SmPC section 4.4).

For instructions on the medicinal product before administration, see SmPC section 6.6.

Paediatric population

In children, Elucirem in vials with a single use syringe of a volume adapted to the amount to be injected should be used in order to have better precision of the injected volume.

Contra-indications

Hypersensitivity to gadopiclenol or to any excipients listed in the SmPC.

Special warnings and precautions

- MRI examinations should adhere to standard precautions, including excluding patients with certain medical devices or suspected metallic foreign bodies.
- MRI images using this product should only be interpreted by healthcare professionals trained in gadolinium-enhanced MRI interpretation.
- Limited clinical data are available for gadopiclenol's performance in CNS and body imaging in various conditions, such as inflammatory, infectious, autoimmune, or demyelinating disorders.

- Hypersensitivity reactions, including potentially life-threatening anaphylactic reactions, may occur immediately or up to 7 days after injection. Immediate cessation of administration and appropriate therapy are necessary if reactions occur.
- The risk of a hypersensitivity reaction may be higher in patients with a history of previous reactions to gadolinium-containing contrast agents, bronchial asthma, or allergies.
- Patients with renal impairment should be screened before gadopiclenol administration due to the risk of nephrogenic systemic fibrosis (NSF). Use in patients with severe renal impairment or undergoing liver transplantation requires careful assessment of benefits and risks.
- Haemodialysis may be considered shortly after gadopiclenol administration for removal from the body in patients with severe renal impairment.
- Gadopiclenol should be administered with caution in elderly patients, particularly those aged 65 years and older and in patients with severe cardiovascular disease.
- Special caution is necessary in patients with a lowered seizure threshold, and equipment and drugs to counter seizures should be readily available.
- Caution is needed during administration to prevent extravasation, and prompt evaluation and treatment are necessary if extravasation occurs.
- The product contains minimal sodium content and is essentially 'sodium-free.'

Information for disposal

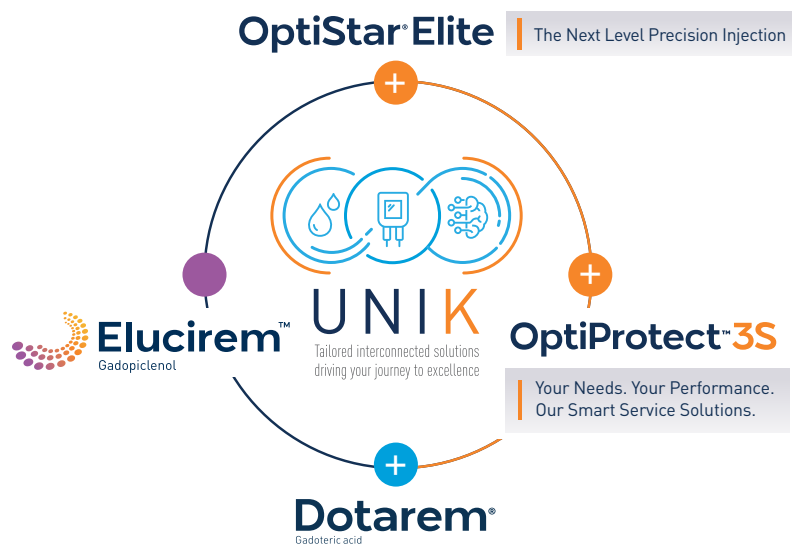
- Do not use if the medicinal product including packaging is opened or damaged.
- The solution for injection should be inspected visually prior to use.
- Solution with visible signs of deterioration (such as particles in the solution, fissures in the vial) must not be used.
- Before and during the use of the product, follow the safety, hygiene and asepsis rules.

Information for Pre-filled syringe

- Any unused portions and waste material derived from disposal and items which come into contact with the product when administering this product with an automatic application system should be disposed of in accordance with local requirements.
- Do not use the pre-filled syringe if there are any signs of leakage.
- Pre-filled syringe is for single use only. Do not attempt to re-use even after cleaning or sterilizing the single use pre-filled syringe.
- Screw the push rod into the syringe plunger. It is important to rotate and push the push rod an additional ½ turn so that the plunger can rotate freely.
- Before using the pre-filled syringe, remove the tip cap by spinning it.
- Connection is compatible with luer 6%.
- All luer connections should be gently hand tightened without over tightening to ensure secure connection and to prevent damage to the device.
- Before connecting to the patient, prime completely the intravenous line and check the absence of air: hold the syringe erect and push plunger forward until all of the air is evacuated and fluid either appears at the tip of the needle or the tubing is filled.
- The dose volume accuracy has been checked and is conform to ISO 7886-1.
- The delivered dose accuracy for 15 mL syringes, graduated every 0.5 mL, depends on the injected volume. For a volume range of 5 to 15 mL, it may vary up to ± 0.6 mL.
- When used with a power injector, follow injector instructions for use.
- Any unused product should be discarded at the end of the examination session.
- The peel-off tracking label available on the pre-filled syringe should be stuck onto the patient record to enable accurate recording of the gadolinium contrast agent used. The dose used should also be recorded. If electronic patient records are used, the name of the product, the batch number and the dose should be entered into the patient record.

Guerbet: solutions for MRI

Elucirem is part of our UNIK tailored and interconnected solutions



MRI: Magnetic Resonance Imaging.

OptiStar Elite: Dual head contrast delivery system for MRI / Medical device;

OptiProtect 3S: Guerbet's original suite of Services and Support.

References

1. Elucirem. Summary of Product Characteristics. 2025.
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3. Health at a Glance 2021: OECD Indicators. <https://www.oecd-ilibrary.org/sites/ed023875-en/index.html?itemId=/content/component/ed023875-en>. Accessed March 2023.
4. Runge VM. Safety of the gadolinium-based contrast agents for magnetic resonance imaging, focusing in part on their accumulation in the brain and especially the dentate nucleus. *Invest Radiol.* 2016;51(5):273-279.
5. PRAC confirms restrictions on the use of linear gadolinium agents. Benefit-risk balance of certain linear gadolinium agents no longer favourable. European Medicines Agency. 2017.
6. European Society of Urogenital Radiology. ESUR Guidelines on Contrast Agents. https://www.esur.org/wp-content/uploads/2022/03/ESUR-Guidelines-10_0-Final-Version.pdf. Accessed March 2023.
7. Robic C, Port M, Rousseau O, et al. Physicochemical and Pharmacokinetic Profiles of Gadopicolenol: A New Macrocyclic Gadolinium Chelate With High T1 Relaxivity. *Invest Radiol.* 2019 Aug;54(8):475-484.
8. Loevner LA, Kolumban B, Hutóczy G, et al. Efficacy and Safety of Gadopicolenol for Contrast-Enhanced MRI of the Central Nervous System: The PICTURE Randomized Clinical Trial. *Invest Radiol.* 2023 May 1;58(5):307-313.
9. Kuhl C, Csösz T, Piskorski W, et al. Efficacy and safety of half-dose gadopicolenol versus full-dose gadobutrol for contrast-enhanced body MRI. *Radiology.* 2023 Jul;308(1):e222612.
10. Prohance Summary of Product Characteristics. 2021.
11. Dotarem Summary of Product Characteristics. 2024.
12. Gadovist Summary of Product Characteristics. 2024.
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Prescribing Information

PRESCRIBING INFORMATION FOR THE GREAT BRITAIN

▼ Elucirem (gadopicolenol) 0.5 mmol/mL Solution for injection, vials and pre-filled syringe (PFS)

POM. MARKETING AUTHORISATION NUMBERS: PLGB 12308/0014 (Vials), PLGB 12308/0034 (PFS) LIST PRICE: 1 x 7.5ml vials £92.80, 1 x 10ml vials £123.70, 1 x 15ml vials £185.60, 1 x 7.5ml £111.60 PFS, 1 x 10ml £148.80 PFS, 1 x 15ml £223.20 PFS DATE OF REVISION OF TEXT: 27-JAN-2025. PELU-PI-Digital-UK-JAN2025_001

Please consult full Summary of Product Characteristics (SmPC) before using.

ACTIVE INGREDIENT: 1 ml of solution contains 485.1 mg gadopicolenol, [equivalent to 0.5 mmol of gadopicolenol and to 78.6 mg of gadolinium]. Mean osmolality at 37°C: 850 mOsm/kg H₂O. Viscosity at 20°C: 12.5 mPa.s [7.7 mPa.s at 37°C], pH: 7.0 to 7.8. **THERAPEUTIC INDICATIONS:** This medicinal product is for diagnostic use only. Elucirem is indicated in adults and children aged 2 years and older for contrast-enhanced magnetic resonance imaging (MRI) to improve detection and visualization of pathologies with disruption of the blood-brain-barrier (BBB) and/or abnormal vascularity of: the brain, spine, and associated tissues of the central nervous system (CNS); the liver, kidney, pancreas, breast, lung, prostate, and musculoskeletal system. It should be used only when diagnostic information is essential and not available with unenhanced MRI. **POSOLGY AND METHOD OF ADMINISTRATION:** This medicinal product should only be administered by trained healthcare professionals with technical expertise in performing gadolinium enhanced MRI. The recommended dose of Elucirem is 0.1 mL/kg body weight (BW) (equivalent to 0.05 mmol/kg BW) to provide diagnostically adequate contrast for all indications. The dose should be calculated based on the patient's BW and should not exceed the recommended dose per kilogram of BWP (see SmPC for dose charts). **Elderly:** No dose adjustment is necessary. Caution should be exercised in elderly patients (see SmPC for further details). **Renal impairment:** No dose adjustment is necessary for patients with any level of renal impairment. Gadopicolenol should only be used in patients with severe renal impairment (GFR < 30 mL/min/1.73 m²) and in patients in the perioperative liver transplantation period after careful risk/benefit assessment and if the diagnostic information is essential and not available with non-contrast enhanced MRI. If it is necessary to use gadopicolenol, the dose should not exceed 0.1 mL/kg BW (equivalent to 0.05 mmol/kg BW). More than one dose should not be used during a scan. Because of the lack of information on repeated administration, gadopicolenol injections should not be repeated unless the interval between injections is at least 7 days. **Hepatic impairment:** No dose adjustment is considered necessary for patients with hepatic impairment. Caution is recommended, especially in the case of perioperative liver transplantation period (see renal impairment in the SmPC). **Paediatric population (2 years and older):** The recommended and maximum dose of Elucirem is 0.1 mL/kg BW (equivalent to 0.05 mmol/kg BW) for all indications. **More than one dose should not be used during a scan.** The safety and efficacy of Elucirem in children less than 2 years has not yet been established. No data are available. **Method of administration:** Image acquisition. The medicinal product is for intravenous use only. The recommended dose is administered intravenously as a bolus injection at approximately 2 mL/sec followed by a flush of sodium chloride 9 mg/ml (0.9%), solution for injection via manual injection or power injector. Intravenous administration of contrast agent should, if possible, be done with the patient lying down. Since experience shows that most undesirable effects occur within minutes after administration, the patient should be kept under observation during and following administration for at least half an hour. **Paediatric population:** Elucirem in vials with a single use syringe of a volume adapted to the amount to be injected should be used in order to have better precision of the injected volume. **CONTRA-INDICATIONS:** Hypersensitivity to gadopicolenol or to any excipients listed in the SmPC. **SPECIAL WARNINGS AND PRECAUTIONS FOR USE:** Gadopicolenol must not be used intrathecally. Serious, life-threatening and fatal cases, primarily with neurological reactions (e.g. coma, encephalopathy, seizures), have been reported with intrathecal use of gadolinium-based contrast agents. The usual precautions for MRI examination should be applied, such as exclusion of patients with pacemakers, ferromagnetic vascular clips, infusion pumps, nerve stimulators, cochlear implants, or suspected intracorporeal metallic foreign bodies, particularly in the eye. MRI images produced with this medicinal product should only be analysed and interpreted by the healthcare professionals trained in interpretation of gadolinium enhanced MRI. There are no or limited clinical data investigating the performance of gadopicolenol for CNS imaging in patients with inflammatory, infectious, autoimmune or demyelinating disorders (such as multiple sclerosis), patients with acute or chronic infarct, or patients with intramedullary spine lesions. There are also no or limited clinical data investigating the performance of gadopicolenol for body imaging in patients with inflammatory, infectious and autoimmune conditions, including acute/chronic pancreatitis, inflammatory bowel disease, inflammatory diseases of head and neck region and endometriosis. **Potential for hypersensitivity or anaphylactic reactions:** As with other gadolinium-containing contrast agents, hypersensitivity reactions can occur, including life-threatening. Hypersensitivity reactions may be either allergic (described as anaphylactic reactions when serious) or non-allergic. They can occur either immediately (less than 60 minutes) after injection or delayed (up to 7 days). Anaphylactic reactions occur immediately and can be fatal. They are independent of the dose, can occur after even the first dose of the product, and are often unpredictable. During the examination, supervision by a physician is necessary. If hypersensitivity reactions occur, administration of the contrast agent must be discontinued immediately and – if necessary – a specific therapy must be instituted. A venous access should thus be kept during the entire examination. To permit immediate emergency countermeasures, appropriate drugs (e.g. epinephrine and antihistamines), an endotracheal tube and a respirator should be ready at hand. The risk of hypersensitivity reaction may be higher in patients with a history of previous reaction to gadolinium-containing contrast agents, bronchial asthma or allergy. **Renal impairment and nephrogenic systemic fibrosis (NSF):** Prior to administration of gadopicolenol, it is recommended that all patients are screened for renal dysfunction by obtaining laboratory tests. There have been reports of nephrogenic systemic fibrosis (NSF) associated with use of some gadolinium-containing contrast agents in patients with acute or chronic severe renal impairment (GFR < 30 mL/min/1.73 m²). Patients undergoing liver transplantation are at particular risk since the incidence of acute renal failure is high in this group. As there is a possibility that NSF may occur with gadopicolenol, it should only be used in patients with severe renal impairment and in patients in the perioperative liver transplantation period after careful benefit/risk assessment and if the diagnostic information is essential and not available with non-contrast enhanced MRI. Haemodialysis shortly after gadopicolenol administration may be useful at removing it from the body. There is no evidence to support the initiation of haemodialysis for prevention or treatment of NSF in patients not already undergoing haemodialysis. **Elderly:** As the renal clearance of gadopicolenol may be impaired in the elderly, it is particularly important to screen patients aged 65 years and older for renal dysfunction. Caution should be exercised in patients with renal impairment. **Seizures:** As with other gadolinium-containing contrast agents, special caution is necessary in patients with a lowered threshold for seizures. All equipment and drugs necessary to counter convulsions occurring during the MRI examination must be made ready for use beforehand. **Extravasation:** Caution during administration is necessary to avoid any extravasation. In case of extravasation, the injection must be stopped immediately. In case of local reactions, evaluation and treatment should be carried out as necessary. **Cardiovascular disease:** In patients with severe cardiovascular disease gadopicolenol should only be administered after careful risk benefit assessment because no data are available so far. **Excipients:** This medicinal product contains less than 1 mmol sodium (23 mg) per 15 mL, that is to say essentially sodium-free. **INTERACTIONS:** No interaction studies have been performed. **Concomitant medicinal products to be taken into account:** Beta-blockers, vasoactive substances, angiotensin-converting enzyme inhibitors, angiotensin II receptor antagonists decrease the efficacy of the mechanisms of cardiovascular compensation for blood pressure disorders. The physician must obtain information before injection of gadopicolenol about the concomitant intake of those medicinal products. **FERTILITY, PREGNANCY AND LACTATION:** **Pregnancy:** Data on the use of gadopicolenol in pregnant women is limited. Gadolinium can cross the placenta. It is unknown whether exposure to gadolinium is associated with adverse effects in the foetus. Animal studies showed little placental transfer and do not indicate direct or indirect harmful effects with respect to reproductive toxicity (see SmPC for more details). Elucirem should not be used during pregnancy unless the clinical condition of the woman requires use of gadopicolenol. **Breast-feeding:** Gadolinium-containing contrast agents are excreted into breast milk in very small amounts. At clinical doses, no effects on the infant are anticipated due to the small amount excreted in milk and poor absorption from the gut. Continuing or discontinuing breast feeding for a period of 24 hours after administration of Elucirem, should be at the discretion of the doctor and breast-feeding mother. **Fertility:** Animal studies do not indicate impairment of fertility (see SmPC for full details). **EFFECTS ON ABILITY TO DRIVE AND USE MACHINES** Elucirem has no or negligible influence on the ability to drive and use machines. **UNDESIRABLE EFFECTS:** Please consult the SmPC in relation to other adverse reactions. Incidences of NSF have been reported with other gadolinium-containing contrast agents. Hypersensitivity. Immediate reactions include one or more effects, which appear simultaneously or sequentially, which are most often cutaneous, respiratory and/or vascular reactions. Each sign may be a warning sign of a starting shock and go very rarely to death. **Summary of the safety profile:** The most frequent adverse reactions were injection site pain, headache, nausea, injection site coldness, fatigue and diarrhoea. **Common (≥ 1/100 to < 1/10) adverse reactions:** Headache and injection site reaction (includes injection site pain, injection site oedema, injection site coldness, injection site warmth, injection site haematoma and injection site erythema). **Uncommon (≥ 1/1000 to < 1/100) adverse reactions:** Hypersensitivity including immediate (dermatitis allergic, erythema, dyspnoea, dysphonia, throat tightness, throat irritation, paraesthesia oral and flushing) and delayed (periorbital oedema, swelling, rash and pruritus) reactions, dysgeusia, diarrhoea, nausea, abdominal pain, vomiting, fatigue and feeling hot. **Paediatric population (2 years and older):** A total of 80 paediatric patients aged 2 years and older were included in the clinical trial. As compared to adults, the safety profile of gadopicolenol in this population did not show any specific safety concern. **MARKETING AUTHORISATION HOLDER:** Guerbet B.P. 57400, 95943 Roissy CdG Cedex France. **LEGAL CATEGORY:** POM. **MARKETING AUTHORISATION NUMBERS:** PLGB 12308/0014 (Vials), PLGB 12308/0034 (PFS) **LIST PRICE:** 1 x 7.5ml vials £92.80, 1 x 10ml vials £123.70, 1 x 15ml vials £185.60, 1 x 7.5ml £111.60 PFS, 1 x 10ml £148.80 PFS, 1 x 15ml £223.20 PFS **DATE OF REVISION OF TEXT: 27-JAN-2025. PELU-PI-Digital-UK-JAN2025_001**

