

## Evans Product Profile

### CALAMINE LOTION

#### Composition

Each 100ml contains:

Calamine	15.0mg
Zinc Oxide	5.0mg
Phenol	0.43mg
Bentonite	3.0mg
Sodium Citrate	0.5mg
Glycerol	6.3mg

#### Description

Calamine lotion is a thick pink coloured suspension indicated for the cooling and soothing of the skin in conditions such as rashes, stings, insect bites and other skin conditions such as measles and pruritis.

#### Indications

Calamine lotion has a cooling and soothing effect on the skin. Useful in some conditions of the skin involving eruptions such as measles because of its astringent property. It gently relieves the discomfort of rashes, stings, insect bites and other similar skin conditions such as measles. Useful for allaying the swelling and pain due to sunburn. It also has protective properties on the skin due to conditions caused by measles and chicken pox.

#### Dosage and Administration

Apply to the affected parts with the help of cotton wool or any suitable applicator.

#### Presentation

Calamine is available in lotion (100ml)

## **CELGARD C**

### **Composition**

Each tablet and 5ml of the syrup contains 100mg Ascorbic acid.

### **Description**

Celgard C contains ascorbic acid. It is indicated for the treatment of scurvy and ascorbic acid deficiencies.

### **Indications**

Vitamin C tablet is used in the prophylaxis and treatment of scurvy and ascorbic acid deficiencies. It promotes healing of wounds and fractures, ameliorates cold and is an adjunct in the treatment of infections.

### **Pharmacology**

Vitamin C activates the functions of all the cells. It is a powerful antioxidant, and this may impede the biochemical processes of cellular aging (and possibly cancer), which are mostly of an oxidative type. It favours the absorption of iron in the intestine, contributes to the formation of defences against infections, neutralizes blood toxins, and it intervenes in the healing of wounds and fractures. Deficiency in the body gives way to scurvy and it is accompanied by weakness, a tendency towards infections, anaemia and haemorrhages in the gums and the skin and even slow growth in children.

### **Dosage and Administration**

Usual dose is 200-500mg daily. To promote wound healing, 1g twice or thrice daily.

### **Warning and Precautions**

Celgard C tablet should be given with care to patients with hyperoxaluria. Tolerance may be induced in patients taking high doses.

### **Side Effects**

Celgard C tablet is well tolerated but in large doses may cause diarrhoea or form renal calcium oxalate calculi.

### **Presentation**

Celgard C is available in syrup (100ml)

## COFTA

### Composition:

Each 5ml (teaspoonful) of the Syrup and the tablet contains:

	Syrup	Tablet
Ammonium chloride	30mg	1mg
Ipecacuanha liquid extract BPC	10ul	2.5ml
Liquorice Extract	50mg	50mg
Peppermint oil	6.9ul	1ul
Aniseed oil	2.6ul	1ul

### Description

Cofta is a cough expectorant mixture. The syrup is a dark brown thick and good tasting liquid while the tablet has a mottled brown colour with menthol taste.

**Indications:** It gives fast relief, soothes the throat and breaks up phlegm. Cofta has expectorant actions, easing clearance of tenacious sputum by increasing bronchial secretion.

### Dosage and Administration

Adult: 1 – 2 tabs to be sucked slowly four or more times daily.

Adult (12 years and above): 10 – 15ml 3 – 4 times daily

Children (1 – 12 years): 5ml 3 – 4 times daily

### Warning and Precautions

Not to be taken on an empty stomach. Cofta is well tolerated when taken after food.

### Side Effects

Cofta syrup and tablets are well tolerated. Side effects are rare at recommended doses.

### Presentation:

Cofta is available as Tablets (100's) and Syrup (100ml).

## **COTRIMOXAZOLE**

### **Composition**

Each 5ml (teaspoonful) contains: Trimethoprim (40mg) and Sulphamethoxazole (200mg)

Each tablet contains: Trimethoprim (80mg) and Sulphamethoxazole (400mg)

### **Description**

Cotrimoxazole is a chemotherapeutic agent exhibiting bactericidal activity against gram-positive and gram-negative bacteria. The combination acts on two levels in the biosynthesis of Tetrahydrofolic acid: Sulphamethoxazole inhibits the incorporation of PABA (Para Amino Benzoic Acid) into folic acid, whereas Trimethoprim blocks the reduction of Dihydrofolic acid to Tetrahydrofolic acid.

### **Indications**

- Respiratory Tract Infections
- Urinary Tract Infections
- Gastro-intestinal tract infection, including typhoid and paratyphoid fever, dysentery, cholera, traveller's diarrhoea
- Skin and soft tissue infections

### **Dosage and Administration**

#### *Suspension*

6 weeks-5 months: ½ teaspoonful every 12 hours for as long as the physician prescribed

6 months-5 years: 1 teaspoonful every 12 hours for as long as the physician prescribed

6 years-12 years: 2 teaspoonfuls every 12 hours for as long as the physician prescribed

#### *Tablets*

Children (6-12 years)- One tablet every 12 hours

Adults (over 12 years)- Two tablets every 12 hours

### **Contraindications**

Cotrimoxazole is contra-indicated in patients with severe hepatic parenchymal damage. Co-trimoxazole should be given unsupervised to patients with serious haematological disorders. Co-trimoxazole should not be given to neonate or premature babies. Co-trimoxazole should not be given to patients with history of hypersensitivity to sulphonamides, trimethoprim or co-trimoxazole.

### **Warning and Precautions**

Folate supplements should be considered when giving Co-trimoxazole to suspected folate-deficient subjects, to the elderly, or in prolonged high dosage. Regular monthly blood counts are advised whenever treatment is given for long periods. Evidence of crystalluria in vivo is rare, but an adequate urinary output should be maintained at all times. In the treatment of tonsillo-pharyngitis due to Group A beta-haemolytic streptococci, eradication of these organisms from the oropharynx is less effective than with penicillin.

The safety of Co-trimoxazole in human pregnancy has not been established. Sulphonamide containing products should not be administered in late pregnancy because of the risk of kernicterus.

**Side Effects**

At the recommended dosages, co-trimoxazole is usually well tolerated. Most reported adverse reactions are mild and comprises of nausea, with or without vomiting and skin rashes. Diarrhoea and glossitis are uncommon and monilial overgrowth is very rare. Pseudomembranous colitis has been rarely reported. Isolated cases of severe skin sensitivity reactions such as erythema multiforme bullosa (Stevens-Johnson syndrome) and toxic epidermal necrolysis (Lyell syndrome) have occurred. Various haematological changes have been reported, the majority being mild and reversible when treatment was stopped. Although most changes are clinically asymptomatic, they may become severe in isolated cases, especially in the elderly, those with hepatic or renal dysfunction and those with poor folate status. Co-trimoxazole may induce haemolysis in certain susceptible G-6-PD deficient patients.

**Presentation**

Cotrimoxazole is available as suspension (50ml) and tablets (100's).

**DEQUADIN****Composition**

Each lozenge contains: Dequalinium chloride BP, 250mcg

Each 10mls of the Paint contains: Dequalinium chloride BP, 0.5% w/v

**Description**

Dequadin is used locally for oral antiseptics and to relieve pain and inflammation. The tablet has a mottled orange colour and it has a pleasant taste.

**Indications**

For mouth and throat infection, such as:

- Oral thrush
- Sore throat
- Tonsillitis
- Stomatitis

Dequadin may also be used for prevention of infection after tooth extraction.

**Dosage and Administration**

One lozenge should be sucked slowly every two or three hours.

The paint can be applied with a cotton bud every two or three hours

**Warning and Precautions**

Irritation or sensitisation may occur

**Side Effects**

Allergic reactions have been reported rarely.

**Presentation**

Dequadin is available as lozenges (250's).

## **EVAMAL**

### **Composition**

Each tablet of Evamal contains:

Sulphadoxine 500mg

Pyrimethamine 25mg

### **Description**

Evamal is an antimalarial. It is a synergetic combination of two anti-malarial agents. It is indicated for the treatment of malaria infection and for prophylaxis in Intermittent Preventive Therapy (IPT) in pregnancy.

### **Pharmacology**

Evamal is an antimalarial agent, which acts by reciprocal potentiation of its two components, achieved by a sequential blockade of two enzymes involved in the biosynthesis of folic acid in the parasites. One of the major advantages of Evamal is that it attacks the different stages of the life cycle of the malaria parasite. Effective concentrations are rapidly attained with a single dose. Trophozoites and schizonts are eliminated from the blood; the pre-erythrocytic stages are also affected while the secondary exo-erythrocytic forms are unaffected which may cause recurrence of infection with *Plasmodium vivax*. In such cases, therefore, consideration should be given to following up treatment with Primaquin to prevent recurrence. Evamal is compatible with other antimalarial drugs, particularly artesunate, amodiaquine, quinine and some antibiotics. It has no hypoglycaemic effect and does not influence the action of antidiabetic agents.

### **Indications**

Treatment of Malaria infection: In combination with Artesunate and Amodiaquine

Prophylaxis against malaria infection in Intermittent Preventive Therapy in pregnancy

### **Dosage and Administration**

#### ***In combination with Amodiaquine or Artesunate***

Children: 2 months – 2 years: ½ tablet as a single dose

2 – 6 years: One tablet as a single dose

Teenagers: 6 – 12 years: Two tablets as a single dose

Adult: 3 tablets as a single dose.

#### ***In Intermittent Preventive Therapy***

Three doses of 3 tablets of Evamal at no less than 4 weeks intervals after the first trimester.

### **Contraindications**

It is contra-indicated in those that are hypersensitive to sulphonamides or to any component of the drug.

In pregnancy, it is contra-indicated under the following conditions:

- In the first trimester
- In the last four weeks of the third trimester

Concomitant use of Cotrimoxazole and any sulpha-containing drugs

**Warning and Precautions**

Should cutaneous erythema appear, treatment should be stopped immediately. An adequate diuresis must be maintained and in case of renal disorder, administer low or less frequent doses to avoid drug accumulation. Special precautions should be taken in treating patients with conditions predisposing to deficiency of folic acid.

**Side Effects**

Evamal is generally well tolerated at the recommended doses. Side effects could include nausea, vomiting and diarrhoea. Cutaneous eruption may occur and rarely there could be blood dyscrasia.

**Presentation**

Evamal tablet is available in packs of 3's



## FERBELAN

### Composition

Each	5ml of the Tonic	Forté capsule
Iron as dried Ferrous sulphate (equivalent to 30mg elemental iron)	-	100.0mg
Ferric ammonium citrate	46.5mg	-
Zinc (From Zinc sulphate)	-	12.0mg
Manganese (From Manganese sulphate)	-	2.0mg
Copper (From Copper sulphate)	-	1.5mg
Vitamin B1	2.0mg	2.0mg
Vitamin B2	500.0mcg	2.0mg
Vitamin B12	2500.0mcg	5.0mg
Nicotinamide	5.0mg	15.0mg
Folic acid	-	2.0mg

### Description

Ferbelan belongs to the group of the haematinics that comes in tonic and softgel capsules. The tonic is in bottles of 100ml while the softgel capsule comes in a blister pack of 30's.

### Indications:

Nutritional deficiency, Pregnancy, Fatigue, Loss of appetite, Anaemia and Convalescence.

### Dosage and Administration:

#### *For Ferbelan tonic*

Less than 2 years: As directed by a Physician  
 2 - 12 years: 1 or 2 teaspoonful, once or twice depending on age and weight  
 12 years and above: 1 or 2 teaspoonful, three times daily.

#### *For Ferbelan forte capsule*

Adult: One capsule daily or as recommended by the Physician.

### Contraindications:

Antacids and Tetracycline should not be taken within one hour of administration of any iron containing products

### Presentation

Ferbelan blood tonic is available as 100ml bottle while Ferbelan Forte is available as softgel capsules by 30's in blister packs.

**GLUCOSE D****Composition**

Each heaped dessertspoonful (15grams) contains:

Calcium Glycerophosphate	27mg
Vitamin D	19iu
Dextrose Monohydrate	15g

**Description**

A fine white powder, free-flowing, sweet tasting, completely soluble in water and with a cooling effect.

**Indications:**

For Instant source of energy.

**Dosage and Administration**

Children (under 1 year):	As directed by the physician.
(1 – 12 years):	One teaspoonful (5grams).
Adult (12 years and above):	One heaped dessertspoonful (15 grams) or as directed by the physician.

Powder can be dissolved in water, beverages or sprinkled on cereals, fruits, pastries etc, to be taken three times daily.

**Presentation**

Glucose D is available as classic in powder pack sizes of 400g & 175g tins and 50g & 15g sachet. Glucose D is also available in flavours 15g sachet (Orange and Pineapple).

## **METRONIDAZOLE**

### **Composition**

Each 5ml (teaspoonful) of the Suspension contains 200mg Metronidazole

### **Description**

Evans' Metronidazole Suspension has high activity against anaerobic bacteria and protozoa. It is a pleasantly flavoured suspension containing the equivalent of 200mg metronidazole in every 5ml.

### **Pharmacology**

Metronidazole is used in protozoal infestations. It is also used for trichomoniasis, amoebiasis and giardiasis. Metronidazole is active against wide range of bacteria including *Bacteroides* spp, Anaerobic cocci, *Fusobacterium* spp, *Clostridium* spp and *Gardnerella vaginalis*. Metronidazole is also effective against Protozoa including *Trichomonas* spp, *Entamoeba histolytica* and *Giardia lamblia*.

### **Indications**

Treatment of Anaerobic infections, septicaemia, bacteria, puerperal sepsis, pelvic abscess, post-operative wound infections, acute dental infections, acute ulcerative gingivitis, anaerobically infected leg ulcers and pressure sores, giardiasis, trichomonal infections, non-specific vaginitis and intestinal amoebiasis.

### **Dosage and Administration:**

#### **Children**

Invasive amoebiasis: 30mg/kg daily in 3 divided doses for 8 – 10 days

Giardiasis: 15mg/kg daily in divided doses for 5 - 10 days.

**Contraindications:** Neurological disease, blood dyscrasia, first trimester of pregnancy.

**Special precaution:** Lactation, disulphuric like intolerance to alcohol, phenobarbitones

### **Side Effects:**

Nausea, vomiting, unpleasant metallic taste, furred tongue and gastrointestinal disturbances; rarely, headache, drowsiness, dizziness, ataxia, darkening of urine, erythema multiforme, pruritus, urticaria, angioedema and anaphylaxis; abnormal liver function tests, hepatitis, jaundice, thrombocytopenia, aplastic anaemia, myalgia, arthralgia; peripheral neuropathy, epileptiform seizures, leukopenia, on prolonged or high dosage regimens.

### **Presentation**

Metronidazole is available as suspension (60ml).

**MULTIVITE**

<b>Composition</b>	<b>Drops</b>	<b>Syrup</b>	<b>Tablets</b>
Vitamin A	1,500iu	1,000iu	1,000iu
Vitamin B1	500mcg	1,500mcg	2,500mcg
Vitamin B2	500mcg	1,500mcg	2,500mcg
Vitamin B6	500mcg	-	250mg
Vitamin B12	-	2,500mg	2,500mg
D-Panthenol	1,000mcg	-	-
Nicotinamide	2,500mcg	10,000mcg	10,000mcg
Vitamin C	25,000mcg	40,000mcg	30,000mcg
Vitamin D	-	200iu	250iu
Vitamin D2	100IU	-	-

**Description**

Multivite syrup is thick, golden yellow and pleasant tasting. The drops are clear, bright and pleasant tasting in a tamper-proof amber bottle with a dropper. The tablet is dark brown, also with a pleasant taste.

**Indications**

- As a dietary supplement.
- In condition where there is high demand for the above vitamins as in lactation and convalescence.
- For prevention and treatment of loss of appetite and fatigue.
- For the promotion of wounds and fracture healing.

**Dosage and Administration**

Drops:	0 – 6 months	-	11 Drops (Lower mark of dropper) daily.
	6months - 2years	-	22 Drops (Upper mark of dropper) daily.
Syrup:	2 – 12 years	-	Two teaspoonfuls daily
Tablet:	6 – 12 years	-	One tablet daily after meal
	12 and above	-	Two tablets daily after meal.

**Side Effects**

Very rare if recommended doses are adhered to

**Presentation**

Drops: Pack of 10ml.

Syrup: Pack of 100ml

Tablets: Packs of 1000's

**MULTIVITE FORTE****Composition**

Vitamin A	2000iu
Vitamin B1 (Thiamine Mononitrate)	1.5mg
Vitamin B2 (Riboflavin)	1.5mg
Vitamin B6	2.0mg
Vitamin B12	2.0mcg
Vitamin D3	200iu
Ascorbic acid	30mg
Vitamin E	10mg
Nicotinamide	15mg
Zinc (From Zinc sulphate)	7.0mg
Manganese (From Manganese sulphate)	1.4mg
Copper (From Copper sulphate)	1.0mg
Potassium (From Potassium sulphate)	5.0mg
Calcium (From Dibasic Calcium phosphate)	50mg
Iron (From Dried Ferrous sulphate)	10mg
Calcium pantothenate	3.0mg
Biotin	3.0mcg

**Description**

Multivite forte comes in dark brown soft gel capsule in a blister pack.

**Indications**

Dietary supplement, vitamins and minerals deficiency, loss of appetite, fatigue, promotion of healing of wounds and fractures and convalescence.

**Dosage and Administration**

One capsule daily or as directed by Physician.

**Side Effects**

Very rare if recommended dose is strictly adhered to.

**Presentation**

Available as soft gelatin capsules (30's).

## **PARACETAMOL**

### **Composition**

Each tablet contains: Paracetamol BP - 500mg

Each 5ml (teaspoonful) of syrup and suspension contains Paracetamol BP 125mg.

### **Description**

Evans paracetamol comes in syrup, suspensions and tablets. The syrup and suspensions are in bottles of 60ml while the tablet comes in a blister pack of 12's and jar of 1000's.

### **Pharmacology**

Paracetamol has analgesic properties; it acts on the CNS to produce analgesia. It also has antipyretic properties; it inhibits the actions of endogenous pyrogen on the hypothalamic heat regulating centres thereby leading to dissipation of body heat.

*Pharmacokinetics:* Absorption of paracetamol is rapid and almost completely absorbed from the gastrointestinal tract. Peak plasma levels are achieved within 0.5 to 2 hours.

*Metabolism/Excretion:* Paracetamol is extensively metabolised and excreted in the urine primarily as inactive glucuronate and sulphate conjugates (94%). Approximately 4% is metabolised via cytochrome P-450 oxidase to a toxic metabolite, which is detoxified by preferential conjugation with hepatic glutathione and excreted in the urine as conjugates of cysteine and mercapturic acid. When paracetamol is used chronically or taken in large doses, glutathione stores are depleted and hepatic necrosis occurs; 2% to 4% is excreted unchanged.

*Elimination half-life:* 1 to 3 hours.

*Protein binding:* varies from 20% to 50% at toxic serum concentration.

### **Indications**

It has analgesic and antipyretic actions. It is indicated for the treatment of mild to moderate pains, headache, toothache, earache, neuralgia and feverish conditions.

### **Dosage and Administration**

Syrup/Suspension: Children under 1 year:	½ - 1 teaspoonful
1 – 5 years:	1 – 2 teaspoonful(s)
6 – 12 years:	2 – 4 teaspoonfuls
Tablet: Children 6 – 12 years:	½ - 1 tablet 3 or 4 times daily
Adult:	Two tablets 3 to 4 times daily.

### **Contraindications**

Hypersensitivity to paracetamol

### **Warning and Precautions**

Paracetamol should be administered with care to patients with impaired kidney or liver function. Prolonged use of paracetamol is not advisable.

### **Side Effects**

Haematological reactions (though usually mild) have been reported. Skin rashes and other allergic reactions occur occasionally.

### **Presentation**

Syrup: Packs of 60ml

Tablets: Packs of 96's.

## **PIRITON**

### **Composition**

Each tablet contains: 4mg Chlorpheniramine maleate B.P

Each 5ml (teaspoonful) syrup contains: 2mg/5ml Chlorpheniramine maleate B.P

### **Description**

Piriton is a potent antihistamine (Chlorpheniramine maleate BP) presented as tablet and syrup.

### **Pharmacology**

Chlorpheniramine competes with histamine for H<sub>1</sub>-receptor sites on effector cells in the GIT, blood vessels, and respiratory tract.

**Pharmacokinetics - Absorption:** Complete absorption. Peak blood levels are achieved in 1-2 hours.

**Metabolism/Excretion:** The drug is metabolised in the liver. Chlorpheniramine metabolites and parent drug are excreted in the urine, 35% of total within 48 hours. Small amounts may be excreted in breastmilk.

**Plasma half-life:** 20-24 hours

**Protein binding:** 70%

### **Indications**

Symptomatic relief of allergy, allergic rhinitis (hay fever) and conjunctivitis, urticaria, insect stings and pruritis of allergic origin; adjunct in the emergency treatment of anaphylactic shock and severe angioedema.

### **Dosage and Administration**

Adult: 4mg every 4-6 hours (maximum 24mg daily)

Children: Under 1 year: not recommended

1-2 years: 1mg twice daily

2-5 years: 1 mg every 4-6 hours (maximum 6mg daily),

6-12 years: 2 mg every 4-6 hours (maximum 12 mg daily).

### **Contraindications:**

Prostatic enlargement, urinary retention, ileus or pyloroduodenal obstruction, glaucoma and child under 1 year.

### **Warning and Precautions:**

Pregnancy and breastfeeding; renal and hepatic impairment; epilepsy

### **Side Effects**

Drowsiness (rarely paradoxical stimulation with high doses, or in children or elderly), hypertension, headache, palpitations, psychomotor impairment, urinary retention, dry mouth, blurred vision, gastrointestinal disturbances; liver dysfunction; blood disorder; also rash and photosensitivity reactions, sweating and tremor, hypersensitivity reactions (including bronchospasm, angioedema and anaphylaxis).

### **Presentation**

Piriton is available in both tablet and syrup.

Tablet of 250's

Syrup of 60ml

## **PIRITON EXPECTORANT LINCTUS**

### **Composition**

Each 5ml contains:

	<i>Adult</i>	<i>Children</i>
Chlorpheniramine maleate	2mg	1mg
Ammonium chloride	100mg	50mg
Sodium citrate	44mg	22mg

### **Description**

Piriton expectorant linctus is a cough mixture

### **Indications**

Piriton expectorant linctus is an effective expectorant for use in upper respiratory tract infections including the common cold and bronchitis.

### **Dosage and Administration**

Children 6 – 12 years: One teaspoonful (5ml) three to four times daily.

Adults 12 years and above: One to two teaspoonfuls (5 – 10ml) three to four times daily or as directed by the Physician.

### **Contraindications**

Hypersensitivity to antihistamines and those that have had MAOI therapy within the previous 14 days.

### **Warning and Precautions**

Chlorpheniramine may have an additive effect when used concurrently with hypnotics and anxiolytics causing potentiation of drowsiness. A similar additive effect will result from concurrent usage of alcohol with Chlorpheniramine. Monoamine oxidase inhibitor therapy intensifies the anticholinergic effects of Chlorpheniramine. Chlorpheniramine inhibits phenytoin metabolism and can lead to phenytoin toxicity.

### **Side Effects**

Drowsiness (rarely paradoxical stimulation with high doses, or in children or elderly), hypertension, headache, palpitations, psychomotor impairment, urinary retention, dry mouth, blurred vision, gastrointestinal disturbances; liver dysfunction; blood disorder; also rash and photosensitivity reactions, sweating and tremor, hypersensitivity reactions (including bronchospasm, angioedema and anaphylaxis).

### **Presentation**

Piriton expectorant linctus and Piriton expectorant linctus for children are both available in bottles of 100mls.



## **PIRITON LINCTUS WITH CODEINE**

### **Composition**

Each 5ml contains:

Chlorpheniramine maleate BP	2mg
Ammonium chloride BP	100mg
Sodium citrate BP	44mg
Codeine Phosphate	10.95mg

### **Description**

Piriton linctus with codeine is a cough mixture

### **Indications**

Piriton linctus with codeine is indicated for the relief of persistent, dry, irritating cough.

### **Dosage and Administration**

#### ***Adults and children over 12 years:***

10 ml three to four times daily

#### ***Children aged 6 to 12 years:***

One teaspoonful (5 ml) three to four times daily

Piriton linctus with Codeine is not recommended for children under 6 years.

### **Contraindications**

Piriton linctus with Codeine is contra-indicated in individuals with known hypersensitivity to the product or any of its constituents.

Piriton linctus with Codeine is contra-indicated in individuals with hepatic or respiratory failure.

Use of codeine containing products is contraindicated in mothers who are breastfeeding unless prescribed by a doctor.

### **Warning and Precautions**

Chlorpheniramine may have an additive effect when used concurrently with hypnotics and anxiolytics causing potentiation of drowsiness. A similar additive effect will result from concurrent usage of alcohol with Chlorpheniramine. Monoamine oxidase inhibitor therapy intensifies the anticholinergic effects of Chlorpheniramine. Chlorpheniramine inhibits phenytoin metabolism and can lead to phenytoin toxicity.

This product contains codeine which is a narcotic analgesic. Tolerance, psychological dependence and constipation may occur at high doses. This should be borne in mind when prescribing for patients with a propensity for addiction to drugs, including alcohol.

Piriton linctus with Codeine should not be administered to patients with chronic or persistent cough, such as occurs with asthma, or where cough is accompanied by excessive secretions, unless directed by a physician.

This product may act as a cerebral stimulant in children and occasionally in adults.

Patient with rare hereditary problems of fructose intolerance, glucose-galactose malabsorption or sucrase – isomaltase insufficiency should not take this medicine.

Prolonged regular use, except under medical supervision, may lead to physical and psychological dependence (addiction) and result in withdrawal symptoms, such as restlessness and irritability once the drug is stopped.

### **Pregnancy and lactation**

Codeine is known to cross the placenta and have also been detected in breast milk. Piriton linctus with Codeine should only be used when the potential benefit of treatment to the mother exceeds any possible hazards to the developing foetus or suckling infant.

In nursing mothers, who are ultra-rapid metabolisers of codeine, higher than expected serum and breast milk morphine levels can occur. Morphine toxicity in babies can cause excessive somnolence, hypotonia, miosis and difficulty breastfeeding or breathing. In severe cases respiratory depression and death can occur. In severe cases, naloxone may be appropriate to reverse the effects. The lowest effective dose should be used, for the shortest possible time.

Codeine-containing products must not be used while breastfeeding unless prescribed by a doctor.

### **Side Effects**

Drowsiness (rarely paradoxical stimulation with high doses, or in children or elderly), hypertension, headache, palpitations, psychomotor impairment, urinary retention, dry mouth, blurred vision, gastrointestinal disturbances; liver dysfunction; blood disorder; also rash and photosensitivity reactions, sweating and tremor, hypersensitivity reactions (including bronchospasm, angioedema and anaphylaxis).

Codeine may cause constipation, nausea, dizziness and drowsiness.

### **Presentation**

Piriton linctus with codeine is available in bottles of 100mls.

**HEALTHY BITTER****Composition**

Each 5ml contains

Alhagi camelorum	22.20mg
Cassia angustifolia	16.66mg
Commiphora myrrha	05.33mg
Andrographis peniculata	22.20mg
Picrorhiza kurroa	22.20mg
Tinospora cordifolia	22.20mg
Aloe barbabens	40.00mg
Crocus-sativus	1.06mg
Water	QS

**Description**

Healthy Bitters contain well-established herbal drugs, which have found acceptance all over the world for their therapeutic benefits, owing to the bitter substances present in them. In digestion, liver plays a very important role, especially in metabolism of fats. Healthy Bitters is an effective “Liver-Tonic” which stimulates and maintains the production and flow of bile. It improves digestion and appetite, giving the feeling of well-being and sustained energy all day long.

**Indications**

1. Stimulates the production and flow of bile.
2. Improves digestion.
3. Soothes and energizes.

**Dosage and Administration**

Two teaspoonfuls twice a day with water.

**Presentation**

Healthy Bitters is available in 100ml glass bottle.

## GLAVAMET SR

### Composition

#### Glavamet SR 500

Each uncoated extended-release tablet contains:

Metformin Hydrochloride BP.....500mg

#### Glavamet SR 1000

Each uncoated extended-release tablet contains:

Metformin Hydrochloride BP.....1000mg

### Description

**Glavamet SR** is an oral antihyperglycaemic drug used in the management of type 2 diabetes.

### Indications

**Glavamet SR** is indicated as monotherapy, as an adjunct to diet and exercise, to improve glycaemic control in patients with type 2 diabetes and whose hyperglycaemia cannot be satisfactorily managed with diet and exercise alone.

### Dosage and Administration

For the treatment of Type 2 (non-insulin dependent, NIDDM) Diabetes Mellitus uncontrolled by diet alone:

Adult: Initially, 500 mg once daily with the evening meal. Increase in increments of 500 mg weekly, as needed, up to a maximum of 2000 mg once daily with evening meal.

Adolescents & children: Safe and effective use has not been established.

## Tadalafil

### Composition

#### Tadalafil-10

Each film-coated tablet contains

Tadalafil .....10 mg

#### Colours

Titanium Dioxide & Yellow oxide of iron

#### Tadalafil-20

Each film-coated tablet contains

Tadalafil .....20 mg

#### Colours

Titanium Dioxide & Yellow oxide of iron

### Description

Tadalafil, an oral treatment for erectile dysfunction, is a selective inhibitor of cyclic guanosine monophosphate (cGMP)-specific phosphodiesterase type 5 (PDE5).

### Indications

Tadalafil is indicated for the treatment of erectile dysfunction.

### Dosage and Administration

The recommended starting dose of Tadalafil in most patients is 10 mg, taken prior to anticipated sexual activity. The dose may be increased to 20 mg or decreased to 5 mg, based on individual efficacy and tolerability. The maximum recommended dosing frequency is once per day.

Tadalafil may be taken without regard to food.

## APRAVAN

### Composition

#### Apravan – 10

Each enteric-coated tablet contains

Rabeprazole Sodium ..... 10 mg

#### Apravan – 20

Each enteric-coated tablet contains

Rabeprazole Sodium ..... 20 mg

### Description

Rabeprazole belongs to a class of anti-secretory compounds (substituted benzimidazole proton-pump inhibitors) that do not exhibit anticholinergic or histamine H<sub>2</sub>-receptor antagonist properties, but suppress gastric acid secretion by inhibiting the gastric H<sup>+</sup>, K<sup>+</sup> ATPase at the secretory surface of the gastric parietal cell.

### Dosage and administration

#### **Healing of Erosive or Ulcerative Gastroesophageal Reflux Disease (GERD)**

The recommended adult oral dose is one Rabeprazole -20 mg tablet to be taken once daily for four to eight weeks.

#### **Maintenance of Healing of Erosive or Ulcerative Gastroesophageal Reflux Disease (GERD)**

The recommended adult oral dose is one Rabeprazole 20 mg tablet to be taken once daily.

#### **Healing of Duodenal Ulcers**

The recommended adult oral dose is one Rabeprazole 20 mg tablet to be taken once daily after the morning meal for a period up to four weeks.

Most patients with duodenal ulcer heal within four weeks.

#### **Treatment of pathological hypersecretory conditions, including Zollinger-Ellison Syndrome**

The recommended adult oral starting dose is 60 mg once a day. Doses should be adjusted to individual patient needs and should continue for as long as clinically indicated. Doses up to 100 mg OD and 60 mg BID have been administered.

Rabeprazole tablets should be swallowed whole. The tablets should not be chewed, crushed, or split.

## Fepilat

### **Composition**

#### **Fepilat-5mg Tablets**

Each uncoated tablet contains

Amlodipine Besilate BP

Equivalent to Amlodipine BP ..... 5 mg

#### **Fepilat-10mg Tablets**

Each uncoated tablet contains

Amlodipine Besilate BP

Equivalent to Amlodipine ..... 10 mg

### **Description**

Amlodipine is a dihydropyridine calcium antagonist that inhibits the transmembranous influx of calcium ions into vascular smooth muscle and cardiac muscle. The drug provides 24-hour control of hypertension and angina pectoris.

### **Dosage and Administration**

#### ***Hypertension***

Initial dose of 5 mg once daily, with a maximum dose of 10 mg once daily.

Amlodipine should be used during pregnancy only if the potential benefit justifies the potential risk to the foetus.

## VANPRAZOL - 200

### COMPOSITION

#### VANPRAZOL - 200

Each uncoated tablet contains

**Misoprostol ..... 200 mcg**

### DOSAGE FORM

Tablets for oral, vaginal, rectal, sublingual use.

### PHARMACOLOGY

#### Pharmacodynamics

Misoprostol is a synthetic analogue of naturally occurring prostaglandin E1 and has anti-secretory (inhibiting gastric acid secretion) and mucosal protective properties.

By interacting with prostaglandin receptors, misoprostol causes the cervix to soften and the uterus to contract, resulting in the expulsion of the uterine contents. Thus, in many regions of the world it is widely used in obstetrics and gynaecology.

### DOSAGE AND ADMINISTRATION

- Prevention of postpartum hemorrhage – 600 mcg oral. Use immediately after the delivery of baby. Confirm there is no second baby of a multiple pregnancy still in utero. The most common side effects are shivering and pyrexia which resolve spontaneously.

- Treatment of postpartum hemorrhage (blood loss > 500 ml) – 1000 mcg rectal or 800 mcg sublingual.

Administer after estimated blood loss of 500 ml.

- Induction of labor (live fetus >24 weeks) – Do not use in women who have had a cesarean section.

- 25 mcg vaginal (every 4 hours, max 6 doses) or
- 50 mcg oral (every 4 hours, max 6 doses) or
- 20 mcg oral solution (every 2 hours, max 12 doses)

- Incomplete abortion – 600 mcg oral (single dose). Use in patient with uterine size equivalent to 12 weeks gestation. Do not use in case of suspected ectopic pregnancy.

- Missed abortion (first trimester)

- 800 mcg vaginal (single dose) or
- 600 mcg sublingual (single dose)

- Intrauterine fetal death - Reduce doses in women with previous cesarean section.

- 13-17 weeks – 200 mcg vaginal (every 6 hours, max 4 doses)
- 18-26 weeks – 100 mcg vaginal (every 6 hours, max 4 doses)
- 27+ weeks – 25-50 mcg vaginal (every 4 hours, max 6 doses)

- Termination of pregnancy with mifepristone (up to 12 weeks) – 800 mcg oral. Use 36 to 48 hours after 200 mg oral mifepristone.

- Termination of pregnancy with only misoprostol (up to 12 weeks) – Vaginal route for pregnancy termination has been associated with higher incidence of infection. Oral route can be used instead of sublingual route with slightly less effectiveness.

- 800 mcg vaginal (every 6, 12, or 24 hours for 3 doses) or
- 800 mcg sublingual (every 3 hours for 3 doses)

### WARNINGS AND PRECAUTIONS

#### General

The patient should not give MISOPROSTOL to anyone else.

- MISOPROSTOL has been prescribed for the patient's specific condition, it may not be the correct treatment for another person, and may be dangerous to the other person if she is or were to become pregnant.
- Some authors suggest moistening misoprostol with 3-4 drops of saline /distilled water when used for vaginal administration.



## Levofloxacin Infusion 500 mg/100 ml Levoxin Infusion

Each 100 ml contains  
 Levofloxacin Hemihydrate  
 equivalent to Levofloxacin ..... 500 mg  
 Dextrose USP (anhydrous) ..... 5% w/v  
 Water for injection BP ..... q.s.

### **DESCRIPTION**

Levofloxacin is a fluoroquinolone antimicrobial available for oral, intravenous or ophthalmic administration. It is the optically active L-isomer of ofloxacin. Clinically, levofloxacin, a chiral fluorinated carboxyquinolone, is the pure enantiomer of the racemic drug substance ofloxacin.

### **MECHANISM OF ACTION**

Levofloxacin inhibits two bacterial enzymes, topoisomerase IV & DNA gyrase, which are involved in DNA supercoiling.

### **DOSAGE AND ADMINISTRATION**

The dosage depends on the type and severity of the infections and the sensitivity of the preserved causative pathogen. Levofloxacin injection should only be administered by intravenous infusion. It is not for intramuscular, intrathecal, intraperitoneal or subcutaneous administration. It should be infused intravenously slowly over a period of not less than 60 or 90 minutes, depending on the dosage. Levoxin IV Infusion is administered by slow infusion once or twice daily. The dosage depends on the type and severity of the infection and the sensitivity of the planned causative pathogen. It is usually possible to switch from irritant intravenous treatment to the oral route after a few days according to the condition of the patient. Given the bioequivalence of the parenteral and oral source, the same dosage can be used.

### **Duration of treatment**

The duration of therapy varies according to the cause of the disease.

### **Dosage**

Adults: Oral, IV (Infuse IV Solution over 60 minutes)

Acute bacterial exacerbation of chronic bronchitis: 500 mg every 24 hours for at least 7 days.

Community-acquired pneumonia: 500 mg every 24 hours for 7-14 days

Acute maxillary sinusitis: 500 mg every 24 hours for 10-14 days

Uncomplicated skin infections: 500 mg every 24 hours for 7-10 days

Uncomplicated urinary tract infections: 250 mg once daily for 3 days

Complicated urinary tract infections (including acute pyelonephritis) : 250 mg every 24 hours for 10 days

Dosage in elderly: No adjustment is required as Levoxin is not metabolized by the liver.