SOUTH AFRICAN PROFESSIONAL INFORMATION FOR MEDICINES FOR HUMAN USE

SCHEDULING STATUS

S5

PROPRIETARY NAME AND DOSAGE FORM

ASPEN TRAZODONE 50 mg (capsule)

ASPEN TRAZODONE 100 mg (capsule)

COMPOSITION

ASPEN TRAZODONE 50 mg:

Each capsule contains 50 mg of trazodone hydrochloride.

Excipients:

Erythrosine - FD&C Red 3 (C.I. 45430), gelatin, lactose monohydrate, magnesium stearate, patent blue V (C.I. 42051), purified talc, sodium starch glycollate, sunset yellow FCF - FD&C yellow 6 (C.I. 15985), titanium dioxide (C.I. 77891), quinolene yellow (C.I. 47005)

Contains sugar: Lactose monohydrate 62,5 mg

ASPEN TRAZODONE 100 mg:

Each capsule contains 100 mg of trazodone hydrochloride.

Excipients:

Erythrosine - FD&C Red 3 (C.I. 45430), gelatin, lactose monohydrate, magnesium stearate, patent blue V (C.I. 42051), purified talc, sodium starch glycollate, sunset yellow FCF - FD&C

yellow 6 (C.I. 15985), titanium dioxide (C.I. 77891)

Contains sugar: Lactose monohydrate 125,00 mg

CATEGORY AND CLASS

A 1.2. Psychoanaleptics (antidepressants)

PHARMACOLOGICAL ACTION

Pharmacodynamic properties

Trazodone hydrochloride is a triazolopyridine anxiolytic / antidepressant, psychotropic medicine.

Pharmacokinetic properties

Trazodone is readily absorbed from the gastrointestinal tract although absorption is affected by food. When trazodone is taken shortly after a meal there may be an increase in the amount absorbed, a decrease in the maximum concentration, and a lengthening in the time to maximum concentration compared with the fasting state. Peak plasma concentrations occur about one hour after administration when taken on an empty stomach and after about two hours when taken with food.

Protein binding is reported to be about 89 % to 95 %.

Trazodone is excreted predominately in the urine almost entirely in the form of its metabolite, either in the free or in the conjugated form. Some is excreted in the faeces via biliary elimination. The elimination of trazodone from the plasma is biphasic, with a terminal half-life of 9 hours.

Small amounts are distributed in breast milk.

INDICATIONS

ASPEN TRAZODONE is indicated in the treatment of:

- Depression.
- Mixed anxiety and depression.

CONTRAINDICATIONS

- Myocardial infarction during the acute recovery phase.
- Combined use with other psychotropic medicines should only be undertaken with due recognition of the possibility of potentiation.
- Pregnancy and lactation (see HUMAN REPRODUCTION).

WARNINGS AND SPECIAL PRECAUTIONS

- Hypersensitivity to trazodone.
- Pregnancy and lactation: Safety in pregnancy and lactation has not been established.
- Use in children: Safety in children has not been established.

Special precautions:

Risk-benefit should be considered when the following medical problems exist:

- Alcoholism, active (possible CNS depression).
- Cardiac disease, especially arrhythmias (ventricular arrhythmias, premature ventricular contractions and ventricular tachycardia may be potentiated).
- Hepatic function impairment (possible serum trazodone accumulation resulting in potentiation of side effects).
- Renal function impairment (may result in prolonged ASPEN TRAZODONE effects).

Effects on ability to drive and use machines

There is a possibility that judgement may be impaired when operating dangerous machinery and when driving.

Excipients

Contains lactose which may have an effect on the glycaemic control of patients with diabetes mellitus.

Patients with the rare hereditary conditions of galactose intolerance e.g. galactosaemia, Lapp lactase deficiency, glucose-galactose malabsorption or fructose intolerance should not take ASPEN TRAZODONE.

INTERACTIONS

- Alcohol or CNS depression producing medications may result in potentiation of CNS depressant effects of ASPEN TRAZODONE such as drowsiness, dry mouth, tachycardia, blurred vision and constipation.
- Anticholinergics or medication with anticholinergic activity.
- Antidyskinetics.
- Antihistamines (concurrent use with ASPEN TRAZODONE may intensify anticholinergic effects because of secondary anticholinergic activity of ASPEN TRAZODONE).
- Antidepressants, tricyclic.
- Haloperidol.
- Loxapine.
- Maprotiline.
- Molindone.
- Phenothiazines.

- Pimozide.
- Thioxanthines (concurrent use may prolong and intensify the sedative and anticholinergic effects of either these medications or ASPEN TRAZODONE).
- Antihypertensives (concurrent use with ASPEN TRAZODONE may increase the likelihood of hypotension; dosage reduction of the antihypertensive medicine may be necessary; also, antihypertensives with CNS depressant effects, such as clonidine, guanabenz, methyldopa, metyrosine and rauwolfia alkaloids, may potentiate CNS depression when used concurrently with ASPEN TRAZODONE).
- Digoxin (concurrent use with ASPEN TRAZODONE may increase serum concentration of digoxin and may result in digoxin toxicity).
- Phenytoin and possibly other hydantoin anticonvulsants (increased plasma phenytoin concentrations have been reported when phenytoin was used concurrently with ASPEN TRAZODONE. Caution and close monitoring is suggested).

HUMAN REPRODUCTION

The safety of ASPEN TRAZODONE during pregnancy and lactation has not been established (see CONTRAINDICATIONS).

DOSAGE AND DIRECTIONS FOR USE

The dosage is dependent upon the diagnosis and the severity of the condition and the individual patient's response. The daily dosage is usually administered in 3 divided doses.

Adults:

The optimal dosage is between 300 mg/day to 400 mg/day. It is suggested that a starting dose of 150 mg/day is given for the first week, increasing to 300 mg/day or higher according to the clinical response (600 mg dosage has been reported).

Mixed anxiety and depression:

The recommended starting dose is between 100 mg/day to 150 mg/day. When depression is the predominant symptom, a dose of 300 mg to 400 mg daily may be required to obtain a satisfactory response.

Children:

ASPEN TRAZODONE is not recommended for use in children.

SIDE EFFECTS

Frequent:

- Nervous system disorders - dizziness or lightheadedness, headache, drowsiness which disappears on continuation of treatment.
- Gastrointestinal disorders - dry mouth, nausea and vomiting, unpleasant taste.

Less frequent:

- Nervous system disorders - confusion, unusual tiredness.
- Musculoskeletal and connective tissue disorders - muscle tremors, arthralgia, weakness.
- Vascular disorders - hypotension (fainting).
- Immune system disorders - allergic reaction.
- Cardiac disorders - fast or slow heartbeat.
- Reproductive system and breast disorders - priapism, unusual excitement.
- Eye disorders - blurred vision.
- Gastrointestinal disorders - constipation, diarrhoea.
- Blood and lymphatic system disorders - agranulocytosis, thrombocytopenia and anaemia have been reported rarely.

- Hepatobiliary disorders - jaundice and hepatocellular damage have been reported rarely.
- Endocrine disorders - hyponatraemia possibly due to inappropriate secretion of antidiuretic hormone has been associated with the use of ASPEN TRAZODONE, particularly in the elderly.

KNOWN SYMPTOMS OF OVERDOSAGE AND PARTICULARS OF ITS TREATMENTS

Symptoms

Drowsiness, dizziness, vomiting, priapism, respiratory arrest, seizures, and ECG changes.

Treatment

Treatment of overdosage involves gastric lavage followed by the administration of activated charcoal and symptomatic and supportive therapy.

IDENTIFICATION

ASPEN TRAZODONE 50 mg: Capsule size #3 with standard purple opaque cap with light green opaque body, axially imprinted in black ink, “TZ 50” on the body. Each capsule contains a white to off-white powder.

ASPEN TRAZODONE 100 mg: Capsule size #2 with standard purple opaque cap with peach opaque body, axially imprinted in black ink, “TZ 100” on the body. Each capsule contains a white to off-white powder.

PRESENTATION

100 capsules are packed in a clear polyvinylchloride/polyvinylidene chloride film sealed with aluminium foil backing. There are 10 capsules per blister strip and 10 strips are packed into a white cardboard carton.

100 capsules are packed in a white high density polyethylene container and sealed with a green polypropylene screw on cap.

100 capsules are packed in a grey cylindrical polypropylene container and sealed with a dark grey low density polyethylene tamper evident snap-on cap.

Not all packs are necessarily marketed.

STORAGE INSTRUCTIONS

Store in a dry place at or below 30 °C.

Protect from moisture and light.

Keep in original packaging until required for use.

KEEP OUT OF REACH OF CHILDREN.

REGISTRATION NUMBER

ASPEN TRAZODONE 50 mg: 37/1.2/0491

ASPEN TRAZODONE 100 mg: 37/1.2/0492

NAME AND BUSINESS ADDRESS OF THE HOLDER OF THE CERTIFICATE OF REGISTRATION

PHARMACARE LIMITED

Healthcare Park

Woodlands Drive

Woodmead 2191

DATE OF PUBLICATION OF THE PROFESSIONAL INFORMATION FOR MEDICINES FOR HUMAN USE

Dates of registration:

ASPEN TRAZODONE 50 mg: 25 November 2005

ASPEN TRAZODONE 100 mg: 25 November 2005

Date of the most recent amendment to the professional information as approved by the Authority: 25 November 2005

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