SCHEDULING STATUS

S2

PROPRIETARY NAME (AND DOSAGE FORM):

ADCO-ZETOFEN (SYRUP)

COMPOSITION:

Each 5 ml of the syrup contains:

Ketotifen hydrogen fumarate 1,38 mg corresponding to Ketotifen base 1 mg

As preservatives:

Propylparaben 0,0167 % m/v

Methylparaben 0,0333 % m/v

Contains alcohol 0,5 % v/v

PHARMACOLOGICAL CLASSIFICATION:

A 10.2.2 Medicines acting on respiratory system – Other.

PHARMACOLOGICAL ACTION:

ADCO-ZETOFEN has anti-anaphylactic properties and antihistaminic effects. Laboratory experiments have indicated the following properties of **ADCO-ZETOFEN**, which may contribute to its activity:

- Inhibition both of the acute bronchoconstrictor response to PAF (Platelet Activating Factor) and of PAF-induced airway hyper-responsiveness.
- Inhibition of PAF-induced accumulation of eosinophils in the airways.
- Inhibition of the release of such chemical mediators as histamine and SRS-A (a

slow-reacting substance of anaphylaxis).

- Antagonism of acute bronchoconstriction due to SRS-A.

ADCO-ZETOFEN exerts H1-receptor-blocking activity, which can be clearly dissociated from its anti-anaphylactic properties.

After oral administration the absorption of **ADCO-ZETOFEN** is nearly complete. Bioavailability amounts to approximately 50 % due to a first-pass effect of about 50 % in the liver.

Maximal plasma concentrations are reached within 2 to 4 hours.

Protein binding is 75 %.

Ketotifen is eliminated biphasically with a short half-life of 3 to 5 hours and a longer one of 21 hours.

In the urine about 1 % of the substance is excreted unchanged within 48 hours and 60 to 70 % as metabolites.

The main metabolite in the urine is the practically inactive ketotifen- N-glucuronide.

INDICATIONS:

Long-term prevention of asthma. **ADCO-ZETOFEN** is not effective in aborting established attacks of asthma.

Prevention and treatment of allergic rhinitis, allergic skin reactions.

CONTRAINDICATIONS:

Hypersensitivity to any of the ingredients.

ADCO-ZETOFEN should not be used in patients with hepatic disease. Safety in pregnancy and lactation has not been established.

DOSAGE AND DIRECTIONS FOR USE:

Each 5 ml of the syrup contains 1 mg of ketotifen base.

Under 14 kg body mass: 0,3 mg (1,5 ml) twice daily (older than 6 months of age).

14 to 25 kg body mass: 0,5 mg (2,5 ml) twice daily.

Over 25 kg body mass: 1 mg (5 ml) twice daily.

In the prevention of asthma it may take several weeks of treatment to achieve the full therapeutic effect. If the therapeutic response after four weeks of treatment is insufficient, the doses may be increased gradually, depending upon body mass.

In introducing **ADCO-ZETOFEN** therapy to patients, care should be taken to slowly taper off the dose of other anti-allergic substances that the patient may be receiving.

SIDE EFFECTS AND SPECIAL PRECAUTIONS:

Sedation, dry mouth and dizziness may occur at the beginning of treatment, but usually disappear spontaneously after a few days. On the first few days of treatment with **ADCO-ZETOFEN** the patient's reactions may be impaired. Care should therefore be exercised when driving a vehicle, operating machinery, etc. The preparation may cause drowsiness, which will be aggravated by the simultaneous intake of alcohol. **ADCO-ZETOFEN** may potentiate the effects of sedatives, hypnotics, tranquilizers, narcotic analgesics, antihistamines, anti-cholinergics and alcohol.

If intercurrent infection occurs, **ADCO-ZETOFEN** treatment must be

supplemented by specific anti-infectious therapy.

Anti-asthmatic agents already in use should be continued for at least 2 weeks after starting long-term treatment with **ADCO- ZETOFEN**. This applies especially to systemic corticosteroids and ACTH because of the possible existence of adrenocortical insufficiency in steroid-dependent patients; in such cases, recovery of a normal pituitary-adrenal response to stress may take up to one year.

A reversible fall in the thrombocyte count in patients receiving **ADCO-ZETOFEN** concomitantly with oral antidiabetic agents has been observed in a few cases. This combination of medicines should therefore be avoided.

Increased appetite and weight gain have been reported.

KNOWN SYMPTOMS OF OVERDOSAGE AND PARTICULARS OF ITS TREATMENT:

Symptoms of overdosage may include drowsiness to severe sedation, dizziness, hypotension, muscular weakness and incoordination. Other symptoms may include nausea, vomiting, diarrhoea, colic, epigastric pain, dryness of the mouth, blurred vision, dyspnoea, bradycardia or tachycardia, confusion, disorientation and convulsions.

If the medicine has been taken recently, the stomach should be emptied by aspiration and lavage. Treatment should be symptomatic.

IDENTIFICATION:

A clear, colourless to yellowish liquid with a strawberry odour and flavour.

PRESENTATION:

200 ml amber glass bottles.

STORAGE INSTRUCTIONS:

Store in a cool place (below 25 ºC) and protect from light.

KEEP OUT OF REACH OF CHILDREN.

REGISTRATION NUMBER:

32/10.2.2/0619

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