



IRC : 9492253024777706

GTIN : 6260336200589

Batch No : Embossed

EXP : Embossed

Price : Embossed



Trifluoperazine

F.C. Tablets

Category

Antipsychotic, Antiemetic.

Indications

Trifluoperazine is used in the treatment of adults with psychotic disorders who show combativeness and/or explosive, hyperexcitable behavior that is out of proportion to the immediate provocation. It is also used in treatment of nausea /vomiting and Movement in Huntington's disease, In the short-term treatment of hyperactive children who show excessive motor activity with accompanying conduct disorders such as impulsivity, mood lability, aggressiveness, short attention span, and poor frustration tolerance. Their use is acceptable only in children who are displaying combative, dangerous, or destructive behaviors.

Pharmacology/Pharmacokinetics

Trifluoperazine absorption may be erratic and peak plasma concentrations show large interindividual differences, possibly due to large interindividual differences in extent of first-pass metabolism, readily cross the placenta, and are distributed into breast milk, It's protein binding is very high (90% or more) and biotransformation is hepatic to active and inactive metabolites, Trifluoperazine elimination is renal and biliary, with some enterohepatic recycling.

Pregnancy/ Breast feeding

Trifluoperazine is not FDA categorized and not recommended for use during pregnancy.

FDA pregnancy categories are not included in product labeling presently. Breast-feeding while receiving Trifluoperazine is not recommended, because of drowsiness or movement disorders induction in the nursing infant.

Drug interactions and/or related problems

The following drug interactions and/or related problems have been selected on the basis of their potential clinical significance.

Alcohol or CNS depression-producing medications, Amantadine or Anticholinergics or other medications with anticholinergic action, Amphetamines, Aluminum or Magnesium containing Antacids, Antidiarrheals, Anticoagulants, Anticonvulsants including Barbiturates, Tricyclic antidepressants or Fluoxetine or Fluvoxamine or Paroxetine or Maprotiline, Antithyroid agents, Apomorphine, appetite suppressants, beta-adrenergic blocking agents, Bromocriptine, diuretics, Thiazide, Extra pyramidal reaction-causing medications, Hepatotoxic medications, Hypotension-producing medications, Levodopa, Lithium, Metrizamide, Opioid (narcotic) analgesics, ototoxic medications, Photosensitizing medications, QT interval-prolonging medications including Astemizole or Cisapride or Disopyramide or Erythromycin or Pimozide or Probutol or Procainamide or Quinidine, Succinylcholine, sympathomimetic agents for cardiovascular use, especially Epinephrine.

Medical considerations/Contraindications

Except under special circumstances, this medicine should not be used when the following medical problems exist.

Cardiovascular disease, severe hypertension or hypotension or CNS depression, comatose states or congenital long QT syndrome or history of cardiac arrhythmias or known genetic defect leading to reduced levels of activity of P450 2D6 isoenzyme activity.

Side/Adverse Effects

Those indicating need for medical attention

Incidence more frequent: Akathisia; blurred vision associated with anticholinergic effect; dystonic extrapyramidal effects hypotension; ocular changes; epithelial keratopathy; pigmentary retinopathy; parkinsonian extrapyramidal effects; tardive dyskinesia or tardive dystonia.

Incidence less frequent: Difficulty in urinating; photosensitivity; skin rash; Blood dyscrasias; including agranulocytosis; leukocytopenia; thrombocytopenia; cholestatic jaundice; dark urine; fever; melanosis; neuroleptic malignant syndrome (NMS); obstipation or paralytic ileus; paradoxical effects; including aggravation of psychosis; agitation; bizarre dreams; excitement; insomnia; pneumonia; priapism; QT prolongation and torsades de pointes; seizures; systemic lupus erythematosus-like syndrome; temperature regulation dysfunction; including heatstroke or hypothermia.

Those indicating need for medical attention only if they continue or are bothersome

Incidence more frequent: Anticholinergic effects; nasal congestion. Incidence less frequent: Changes in menstrual period; decreased sexual ability; fever; hypertrophic papillae of the tongue; increased salivation; photophobia; unusual secretion of milk; swelling or pain in breasts; unusual weight gain.

Those indicating need for medical attention if they occur after the medication is discontinued

Tardive dyskinesia; persistent or tardive dystonia; dizziness; nausea and vomiting; stomach pain; trembling of fingers and hands.

Overdose

For more information on the management of overdose or unintentional ingestion, contact a Poison Control Center.

Dosing

Usual adult and adolescent dose

Psychotic disorders: initially 2 to 5 mg (base) one to two times per day, the dosage being increased gradually as needed and tolerated.

Note: The optimal dosage range is 15 to 20 mg per day for most patients.

Nausea and vomiting: 1 to 2 mg (base) two times per day or as needed.

Note: Geriatric, emaciated or debilitated patients usually require a lower initial dose and more gradual dosage titration than do younger and healthier patients.

Usual adult prescribing limits

Psychotic disorders: 40 mg (base) per day.

Usual pediatric dose

Psychotic disorders:

Children up to 6 years of age: Dosage has not been established.

Children 6 to 12 years of age: Initially 1 mg (base) one or two times per day, the dosage being adjusted gradually as needed and tolerated.

Children 12 years of age and older: See usual adult and adolescent dose.

Note: Most children 6 to 12 years of age will not need doses greater than 15 mg per day.

How supplied

1, 2 & 5 mg tablets; 10 blisters of 10's in a folding box.

Storage

Store below 30 °C, protect from light and moisture.



**Manufactured by Marham Daru Co.
Tehran-IRAN**