Patram

325/37.5 mg
Tablets

(Paracetamol + Tramadol Hydrochloride)

پیٹریم

۳۲۵/۳۷.۵ ملی گرام
گولیاں

(پیراسیٹامول + ٹرامااڈول ہائیڈرو کلورائیڈ)

COMPOSITION:
Each film coated tablet contains
Paracetamol.....325 mg
Tramadol Hydrochloride.....37.5 mg
(USP Specifications)

CLINICAL PHARMACOLOGY:

Mode of Action
Tramadol is a centrally acting synthetic analgesic compound whose analgesic profile can be attributed to the binding of parent and 0-demethylated (M1) metabolite to p-opioid receptors as well as the weak inhibition of neuronal re-uptake of noradrenaline and serotonin. Paracetamol also has centrally acting analgesic effects.

PHARMACOKINETICS:
Tramadol is well absorbed after oral administration, reaching peak activity in 2 to 3 hours. Oral absorption of paracetamol following co-administration of tramadol and paracetamol, gives a Peak plasma concentration of paracetamol within one hour and is not affected by co administration with tramadol. Tramadol and paracetamol are both extensively metabolised in the liver. Approximately 30% of tramadol is excreted unchanged in the urine. Tramadol and its metabolites are eliminated primarily by the kidney. The plasma elimination half-lives of tramadol and its M1 metabolite are approximately 6 and 7 hours respectively. Paracetamol is eliminated from the body primarily by formation of glucuronide and sulfate conjugates in a dose-dependent manner. The half-life of paracetamol is about 2-3 hours in adults. Less than 9% of paracetamol is excreted unchanged in the urine.

INDICATIONS:
Patram tablets are indicated for the short term (Less than 5 days) management of acute pain.

CONTRAINDICATIONS:
Tramadol + Paracetamol combination is contraindicated in patients with a known hypersensitivity to tramadol, paracetamol or other opioids such as codeine. Its also contraindicated in cases of severe liver function impairment and in acute intoxication with alcohol, hypnotics, centerally acting analgesics, opioids or psychotropic medicines. It should not be administered to patients who are receiving monoamine oxidase inhibitors or within two weeks of their withdrawal.
Tramadol + Paracetamol combination must not be used for narcotic withdrawal treatment. Tramadol + Paracetamol combination should not be given to patients with respiratory depression especially in the presence of cyanosis and excessive bronchial secretions. Tramadol + Paracetamol combination should not be given to patients with increased intracranial pressure or central nervous system depression due to head injury or cerebral disease.

WARNINGS:
Dosages in excess of those recommended may cause severe liver damage. Patients suffering from liver or kidney disease should take paracetamol containing products under medical supervision.

Serious Skin Reactions
Rarely, acetaminophen paracetamol may cause serious skin reactions such as acute generalized exanthematous pustulosis (AGEP), Stevens-Johnson syndrome, and toxic epidermal necrolysis (TEN), which can be fatal. Patients should be informed about the signs of serious skin reactions, and use of the drug should be discontinued at the first appearance of skin rash or any other sign of hypersensitivity.

Seizures
Seizures have been reported in patients receiving tramadol at dosages within the recommended dosage range. The risk of seizures is enhanced in patients exceeding the recommended dose, or in patients taking tricyclic anti-depressants or other tricyclic compounds e.g. promethazine, selective serotonin re-uptake inhibitors, MAO-inhibitors and neuroleptics.

Drug Abuse and Dependence
Although tramadol has a low dependence potential, tolerance, psychic and physical dependence of the morphine-type (p-Opioid) may develop with long-term use.

Effects on Ability to Drive or Operate Machinery
Tramadol may affect reactions to the extent that driving ability and the abilty to operate machinery may be impaired. This applies particularly in conjunction with other psychotropic medicines including alcohol.

DOSAGE AND ADMINISTRATION:
To be used in adults and children over 16 years of age. Do not exceed the recommended dose.

Renal insufficiency/dialysis
In patients with creatinine clearance less than 30ml/min, it is recommended that the dosing interval be increased not to exceed 2 tablets every 12 hours OR As directed by the physician.

SIDE-EFFECTS:
The most frequently reported side effects were of the gastrointestinal and central nervous systems. Other side-effects reported with the use of tramadol include: anaphylaxis, increased liver enzyme values, postural hypotension or cardiovascular collapse and the potential for Toxic Epidermal Necrolysis and Stevens-Johnson Syndrome. Paracetamol may cause allergic reactions and skin rash. The rash usually appears as red areas or allergic wheals, and may be accompanied by fever and involvement of the mucous membranes. The use of paracetamol has been associated with the the occurrence of neutropenia, pancytopenia and leucopenia.

PRECAUTIONS:

Pregnancy
Teratogenic Effects: Pregnancy Category C.
Safety during pregnancy and lactation has not been established. Tramadol has been shown to cross the placenta.

Children
Safety and efficacy have not been established.

Elderly
Use with caution, reflecting the greater frequency of decreased hepatic, renal, or cardiac function, and of concomitant disease and multiple drug therapy.

SPECIAL PRECAUTIONS:
Do not co-administer Patram with other tramadol + paracetamol containing products. Tramadol + Paracetamol combination should not be taken with alcohol containing beverages. The administration of tramadol + paracetamol combination concurrently with central nervous system (CNS) depressants such as alcohol, opioids, anaesthetic agents, phenothiazines, tranquilizers or sedative hypnotics is likely to intensify and prolong CNS effects.
Tramadol + Paracetamol combination should be used with caution in patients with impaired renal functions, in patients with impaired hepatic functions and in patients prone to convulsive disorders or in shock.

DRUG INTERACTIONS:
Concomitant administration of tramadol paracetamol combination and carbamazepine may cause significantly decreased tramadol and M1 concentrations. Patients receiving carbamazepine may have significantly reduced analgesic effect from the tramadol component of tramadol + paracetamol combination Concomitant administration with inhibitors of CYP2D6 such as fluoxetine, paroxetine, quinidine and amitriptyline could result in some inhibition of the metabolism of tramadol. Simultaneous administration with cimetidine is associated with clinically insignificant changes in serum concentrations of tramadol. Therefore, no alteration of the tramadol + paracetamol dosage regimen is recommended for patients receiving chronic cimetidine therapy. Tramadol + Paracetamol combination must not be combined with a MAO-inhibitor, or within 14 days of discontinuation of it, as potentiation of serotonergic and noradrenergic effects may result.
Periodic evaluation of prothrombin time should be performed when tramadol + paracetamol is administered concurrently with warfarin like compounds Concomitant administration of diflunisal and paracetamol produces a 50% increase in paracetamol plasma levels in normal volunteers. Tramadol + Paracetamol combination should be used cautiously and patients should be monitored carefully.

PRESENTATION:
Patram pack size of 10's.

STABILITY:
See expiry on the pack.

Dosage:
As advised by the physician.

DIRECTIONS:
Protect from sunlight, heat and moisture.
Store below 30°C.
Keep all medicines out of the reach of children.

خوراک وہدایات:

ڈاکٹر کی ہدایات کے مطابق استعمال کریں۔
دوا کو دھوپ، گرمی اور نمی سے بچا کر رکھیں۔
۳۰ ڈگری سینٹی گریڈ سے کم درجہ حرارت پر رکھیں۔
تمام ادویات بچوں کی پہنچ سے دور رکھیں۔

Manufactured by:
Vega Pharmaceuticals (Pvt.) Ltd.
30km, Multan Road, Lahore-Pakistan.