**Composition**

**Diphyllin Children Suppositories**
Each suppository contains Diprophylline 150 mg.

**Action**

Diphyllin (dihydroxypropyl theophylline) is a highly soluble neutral xanthine derivative, which is considered to be mediated through inhibition of phosphodiesterase with a resulting increase in the intracellular cyclic adenosine phosphate (cyclic AMP) concentrations. Diphyllin relaxes smooth muscles and relieves bronchial spasm. It also stimulates the myocardium and produces a diminution of venous pressure in congestive heart failure leading to a marked increase in cardiac output.

It has a stimulant effect on respiration. In comparison with other xanthines, Diphyllin has a stronger diuretic effect than caffeine.

**Indications**

For relief and/or prevention of symptoms of asthma and reversible bronchospasm associated with chronic bronchitis and emphysema.

**Contraindications**

- Known hypersensitivity to any of the components.
- Not to be administered concurrently with other xanthine preparations.
- In patients with active peptic ulcer disease.

**Adverse Reactions**

Diprophylline may cause less nausea and gastric irritation than aminophylline. Other side effects include palpitation and restlessness, hypotension, tachycardia, circulatory failure, anxiety, respiratory arrest, and tachypnea. Prolonged use may cause palpitation and CNS stimulation, which may be controlled by reducing the dose.

**Precautions**

Use cautiously in patients with severe myocardial damage or cardiac disease, hypertension and hyperthyroidism; in renal or hepatic disease and in glaucoma.

**Drug Interactions**

Concomitant administration of diprophyllin with propranolol, erythromycin, and cimetidine may increase the theophylline serum concentration.

**Dosage and Administration**

1-2 suppositories daily.

**Over Dosage**

Over Dosage in children, particularly with suppositories, can be dangerous, as absorption is unpredictable. It may be characterized by haematemesis, stimulation of the CNS, and diuresis. Plasma concentrations greater than 20 mcg/ml are considered toxic. Gastric lavage may be used for theophylline overdosage by mouth and enemas for overdosage by rectum. Treatment is symptomatic. Fluid and electrolytes should be maintained with intravenous fluids and oxygen given as necessary. Convulsions should be controlled by I.V. administration of Serepam (diazepam) 5-10 mg.

**Presentation**

**Diphyllin Children Suppositories**
Box of 6 suppositories.