PULMADRIN DM SUGAR FREE

Syrup

Composition

Each teaspoon (5 ml) contains:

Pseudoephedrine Hydrochloride	30 mg
Triprolidine Hydrochloride	1.25 mg
Dextromethorphan Hydrobromide	10 mg

Action

Triprolidine is a powerful antihistamine for the control of allergic manifestations associated with upper respiratory tract infections. Pseudoephedrine produces vasoconstriction, acting on (alpha-adrenergic receptors in the mucosa of the respiratory tract. This action shrinks swollen nasal mucous membranes, thus reducing nasal congestion and thereby improving passage through the nasal airways. Sinus secretion is increased and the opening of obstructed eustachian tubes is facilitated. Dextromethorphan is an antitussive action of the non-narcotic, centrally acting cough suppressant.

Pseudoephedrine and Triprolidine are complementary. The mild stimulating effect Pseudoephedrine reduces the drowsiness associated with the antihistamine component.

Indications

Provides simultaneous antitussive, expectorant, decongestant, bronchodilator, and antihistaminic effects.
Pulmadrin is indicated for the symptomatic relief of cough in conditions such as; the common cold, acute bronchitis, allergic asthma, bronchiolitis, croup, emphysema, tracheobronchitis.

Contraindications

- Hypersensitivity to any of the ingredients.
- Patients who are taking a prescription monoamine oxidase inhibitor (MAOI) or for 14 days after stopping the MAOI drug.

Warnings and Precautions

Patients with the following conditions are warned not to take the medicine, unless directed by a doctor: high blood pressure, heart disease, diabetes, thyroid disease, glaucoma, or difficulty in urination due to enlargement of the prostate gland.

Patients should be advised not to exceed the recommended dosage because at higher doses, nervousness, dizziness or sleeplessness may occur.
A persistent cough may be a sign of a serious condition. If cough persists for more than 7 days, tends to recur, or is accompanied by fever, rash or persistent headache, patients should consult a doctor.

Patients are advised not to take the medicine for persistent or chronic cough such as occurs with smoking, asthma, chronic bronchitis, emphysema, or if cough is accompanied by excessive phlegm (mucus) unless directed by a doctor.
Pseudoephedrine hydrochloride may cause sleeplessness if the medication is consumed up to several hours before going to bed.

Pregnancy

Category C

Studies in animals are inadequate, or may be lacking, but available data show no evidence of an increased occurrence of fetal damage.

Nursing Mothers

It is unknown whether dextromethorphan is excreted in breast milk although pseudoephedrine hydrochloride is distributed into breast milk. As neonates and infants are susceptible to the effects of

pseudoephedrine, this product is not recommended for nursing mothers unless the expected benefits outweigh any potential risk.

Adverse Reactions

The following symptoms may occur: dizziness, nervousness, tremor, vertigo, headache, sleeplessness or drowsiness, anxiety, hypertension, tachycardia, nausea and vomiting. Also dry mouth, blurred vision, sedation, and rash may occur.

Drug Interactions

Sympathomimetics
Concomitant administration of pseudoephedrine with other sympathomimetic agents may cause a rise in blood pressure, as well as produce additive effects and increased toxicity.

Monoamine oxidase inhibitors
May produce a hypertensive crisis. Serious toxicity may result if dextromethorphan or pseudoephedrines are used with monoamine oxidase inhibitors.

Anti-hypertensive agents
Coadministered pseudoephedrine may alter the hypotensive effect of guanethidine and could produce a loss of blood pressure control, hypertensive episodes, and/or cardiac arrhythmias.

Coadministered pseudoephedrine may alter the antihypertensive effect of methyldopa and reserpine and could produce a loss of blood pressure control and an increase in the risk of hypertensive episodes
Beta- adrenergic blocking drugs such as propranolol may increase the toxicity to pseudoephedrine. The drug interaction between beta-1 selective blocking agents and pseudoephedrine is less likely but theoretically possible.

Antidepressants
Pseudoephedrine may interact with antidepressant medication.
Concomitant administration of serotonin reuptake-inhibitor medications, such as fluoxetine and dextromethorphan may result in Serotonin Syndrome, excessive serotonergic activity, characterized by changes in mental status, hypertension, restlessness, myoclonus, hyperflexia, diaphoresis, shivering, and tremor.

Serum level of dextromethorphan may be increased by the concomitant use of the antiarrythmics quinidine and amiodarone, the antidepressant fluoxetine, fluvoxamine and paroxetine and the antipsychotic agent haloperidol.
The central nervous system depressant effects of dextromethorphan or other CNS depressants (eg alcohol, narcotic analgesics, and tranquillizers) may be increased if taken together.

Dosage and Administration

Adults and children over 12
2 teaspoonfuls every 6-8 hours

Children 6 to 12
1 teaspoon every 6-8 hours

Infants and children up to 6
½ teaspoon every 6-8 hours

This dosage is desired, one-half of the appropriate dose recommended above may be given every 3 hours.

Presentation

Bottle of 100 ml.