

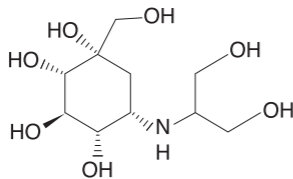
For the use only of a Registered Medical Practitioner or a Hospital or a Laboratory

VOGLITOR MD

(Voglibose Dispersible Tablets 0.2 mg & 0.3 mg I.P.)

DESCRIPTION

Voglibose is an α -glucosidase inhibitor. Voglibose is chemically designated as 2(S),3(R),4(S),5(S)-Tetrahydroxy-N-[2-hydroxy-1-(hydroxymethyl)ethyl]-5-(hydroxymethyl)-1(S)-cyclohexylamine. Its molecular formula is $C_{10}H_{21}NO_7$ and its molecular weight is 267.28. The structural formula is as shown:



COMPOSITION

VOGLITOR MD 0.2

Each uncoated tablet contains :

Voglibose I.P. 0.2 mg

Excipients q.s.

VOGLITOR MD 0.3

Each uncoated tablet contains :

Voglibose I.P. 0.3 mg

Excipients q.s.

DOSAGE FORM

Tablets

INDICATIONS

For improvement of post-prandial hyperglycemia in diabetic mellitus only when diet and/or exercise or oral hypoglycemic drug or insulin preparation in addition to diet and/or exercise do not result in adequate glycaemic control.

DOSE AND METHOD OF ADMINISTRATION

Usual Adult Dose:

Voglibose dispersible Tablets are orally administered in a single dose of 0.2 mg three times daily just before each meal. If the effect is not sufficient enough, the single dose may be increased up to 0.3 mg, under close observation of the course of disease.

USE IN SPECIAL POPULATIONS

Paediatrics

The safety of Voglibose dispersible Tablets in children has not been established (no clinical experience).

NOT FOR CHILDREN USE

Geriatrics

Since the elderly have a physiological hypo function in general, the administration of Voglibose dispersible Tablets should be initiated at a lower dose (e.g. single dose of 0.1 mg). Furthermore, this drug should be carefully administered under close observation of the course of disease conditions, with careful attention to the blood sugar level and the onset of gastrointestinal symptoms.

Pregnancy

Voglibose dispersible Tablets should be administered to pregnant women or women having possibilities of being pregnant only if the expected therapeutic benefit is thought to outweigh any possible risk [The safety of this drug in pregnant women has not been established].

Lactation

It is desirable to avoid the administration of this drug to nursing mothers. However, if the administration is indispensable, nursing should be discontinued. [Animal studies (rats) have revealed a suppressive action of this drug on body weight increase in newborns, presumably due to suppression of milk production resulting from inhibition of carbohydrate absorption in mother animals].

CONTRAINDICATIONS

Voglibose dispersible Tablets are contraindicated in following conditions:

- Patients with severe ketosis, or in a state of diabetic coma or pre-coma (since it becomes essential to quickly rectify hyperglycaemia with administration of intravenous fluid or insulin, the use of voglibose is not suitable).
- Patients with severe infections, before and after operation, or with serious trauma (It is desirable to control blood sugar with the insulin. Therefore, administration of the drug is not appropriate).
- Patients with a history of hypersensitivity to any of the ingredients of this product.

WARNINGS

- The administration of Voglibose dispersible Tablets should be limited to the patients who have been definitely diagnosed as having diabetes mellitus. It should be noted that In addition to diabetes mellitus, there are such diseases as abnormal glucose tolerance and positive urinary sugar that represent diabetes-like symptoms (renal glucosuria, senile abnormal glucose tolerance, abnormal thyroid function, etc.).
- For patients who are undergoing only the basic treatment for diabetes mellitus, namely, dietary treatment and /or exercise therapy, this drug should be given only when the two-hour postprandial blood sugar is 200 mg/dL or more.
- For patients who are using oral hypoglycaemic drugs or insulin preparations, in addition to dietary treatment and/or exercise therapy, a rough standard for administration of this drug is to give it when the fasting blood sugar is about 140 mg/dL or more.
- During administration of Voglibose dispersible Tablets, the disease progression be closely observed with the monitoring of blood sugar at regular intervals, and careful attention should always be paid to the question of necessity for continuous administration of this drug. If its effect on postprandial blood sugar is not satisfactory even after the administration of this drug for 2 to 3 months (e.g. the reduction in the two-hour postprandial sugar level in venous plasma to 200 mg/dL or below can not be achieved), such consideration as the change to more possible appropriate treatment should be made.
- When sufficient control of the postprandial blood sugar has been attained (the two-hour postprandial sugar level reduced to 160 mg/dL or below in venous plasma), and is judged to be satisfactorily maintained only with dietary treatment and/or exercise therapy, or with additional use of oral hypoglycaemic drugs or insulin preparations, the administration of voglibose should be discontinued and the subsequent progress of disease be observed.
- In administration of Voglibose dispersible Tablets, the patients should be given the sufficient explanation on hypoglycaemic symptoms and as to how they will be coped with.

PRECAUTIONS

General

Voglibose should be administered with care in following patients:

- Patients who are receiving other antidiabetic drugs (hypoglycaemia may occur).
- Patients with a history of laparotomy or ileus (Intestinal obstruction like symptoms are liable to develop due to an increase in intestinal gas, etc.).
- Patients with chronic intestinal disease accompanied by a disturbance indigestion and absorption (the action is drug may aggravates the pathologic condition).
- Patients with Roemheld's syndrome, severe hernia, or stenosis or ulceration of the large intestinal gas, etc. (symptom may worsen due to an increase in intestinal gas, etc).
- Patients with serious hepatic dysfunction (Because of possible changes in metabolic condition, the status of blood sugar control may worsen, followed by disturbance of consciousness).
- Patients with serious renal dysfunction (Because of possible changes in metabolic conditions, the status of blood sugar control may greatly vary).
- Elderly patients.

DRUG INTERACTIONS

Precautions for Co-administration (Voglibose dispersible Tablets should be administered with care when Co-administered with the following drugs).

Drugs	Signs, Symptoms, Treatment, Mechanisms, etc.
Antidiabetic drugs Derivatives of sulfonamide and sulfonyleurea, biguanide derivatives, insulin preparations and improving agents for insulin resistance	It has been reported that hypoglycemia occurred in the concomitant use of Voglibose dispersible Tablets with insulin preparations or sulfonyleurea derivatives. Therefore, when this drug is used in combination with any of the left-listed drugs, such careful caution as starting from a lower dose should be exercised, taking into account the possible development of hypoglycaemia. When Voglibose dispersible Tablets are further administered concurrently, in addition to the concomitant use among any of the left-listed drugs, careful attention should be paid to the drug interactions listed in the package inserts of these antidiabetic drugs. Further cautious attention should also be paid to the influence that might be additionally caused by the delaying action of this drug on the absorption of carbohydrates.
For the concomitant use of antidiabetic drugs and the drugs which enhance or diminish the hypoglycaemic action of antidiabetic drugs - Drugs enhancing the hypoglycaemic action of antidiabetic drugs: B-blockers, salicylic acid preparations, monoamine oxidase inhibitors, fibrate derivatives for treatment of hyperlipemia, warfarin, etc. - Drugs diminishing the hypoglycaemic action of antidiabetic drugs: eplnephrlne, adrenocortical hormone, thyroid hormone, etc.	

UNDESIRABLE EFFECTS

Adverse reactions, including abnormalities in laboratory data, were observed in 154 (16.0%) of 965 patients given the daily doses of 0.6 mg or 0.9 mg of Voglibose dispersible Tablets in the investigation performed up to the time of approval, and in 443 (10.1 %) of 4,383 patients in the post marketing investigation of the results of drug use. Adverse reactions listed below have been found in the above-mentioned investigations, spontaneous reports, etc.

Clinically significant adverse reactions

- When Voglibose dispersible Tablets are used in combination with other antidiabetic drugs, hypoglycaemia may occur (0.1% to < 5%). Furthermore, hypoglycaemia has been reported to occur (< 0.1%) even when other antidiabetic drug was not concomitantly used with this drug. This drug delays the digestion and absorption of disaccharides. Therefore, if any hypoglycaemic symptom is observed, such appropriate measures as the administration of glucose instead of sucrose should be taken.
- Abdominal swelling, increased flatus, etc., may occur (0.1% to <5%), and intestinal obstruction-like symptom due to an increase in intestinal gas, etc., may occur (< 0.1%). Therefore, close observation should be made, and if any of such symptoms occurs, appropriate measures, such as discontinuation of Voglibose dispersible Tablets, should be taken.
- Serious hepatic dysfunction accompanied with jaundice, increased AST or ALT, etc., may occur (< 0.1%). In addition, it has been reported in a similar drug (acarbose) that fulminant hepatitis occurred (<0.1%). Therefore, close observation should be made, and if any abnormality is found, the administration should be discontinued and appropriate measures should be taken.
- When Voglibose dispersible Tablets are administered to the patients with serious liver cirrhosis, hyperammonemia may worsen with the development of constipation, etc., followed by disturbance of consciousness (frequency unknown). Therefore, the condition of bowel movement, etc., should closely be observed, and if any abnormality is observed, such appropriate measures as immediate discontinuation of this drug should be taken.

Other adverse reactions 0.1% to < 5%		< 0.1%
Gastrointestinal	Diarrhoea, loose stools, borborygmus, abdominal pain, constipation, anorexia, nausea, vomiting or heartburn	Stomatitis, thirst or taste abnormality
Hypersensitivity*	-	Rash, pruritus, or photosensitivity
Hepatic	Increased AST, ALT, LDH, γ -GTP or ALP	-
Psychoneurologic	-	Headache, dizziness, light-headedness or sleepiness
Hematologic	Anaemia	Thrombocytopenia
Others	Numbness, edema of face etc., blurred vision, hot flushes, malaise, weakness, hyperkalemia, increased serum amylase, decreased HDL cholesterol, diaphoresis or alopecia	-

* In such a case, administration of voglibose dispersible tablets should be discontinued.

OVERDOSAGE

The alpha-glucosidase inhibitors, acarbose, voglibose and miglitol competitively and reversibly inhibit the alpha-glucosidase enzymes (glucoamylase, sucrase, maltase and isomaltase) in the brush border in the small intestine, which delays the hydrolysis of complex carbohydrates. They appear unlikely to produce hypoglycaemia in overdose, but abdominal discomfort and diarrhoea may occur.

PHARMACODYNAMIC AND PHARMACOKINETIC PROPERTIES

Mechanism of Action

Voglibose inhibits the enzyme hydrolase (α -glucosidase) that catalyzes decomposition of disaccharides into monosaccharides in the intestine, thereby delaying the digestion and absorption of carbohydrate, resulting in improvement of postprandial hyperglycemia.

Pharmacokinetics

Voglibose is poorly absorbed after oral dose.

When Voglibose dispersible Tablets were repeatedly administered to healthy male adults (6 subjects) in a single dose of 0.2 mg, three times a day, for 7 consecutive days, no voglibose was detected in plasma or urine. Also, on administration of this drug to 10 healthy male subjects in a single dose of 2 mg, no voglibose was detected in plasma or urine.

In a study in which a single dose of 1 mg/kg of [14 C] voglibose was administered to rats, the transfer of voglibose to fetus and mothers milk was observed, and the rates of excretion into urine and feces were about 5% and 98%, respectively.

INCOMPATIBILITIES

Not Applicable

DIRECTIONS FOR USE

Place the entire tablet on the tongue. Tablet disintegration occurs rapidly in saliva. The tablet can be taken with or without liquid. Alternatively, disperse the tablet in water and drink the resulting suspension.

EXPIRY DATE

Do not use later than the date of expiry.

STORAGE

Store at a temperature not exceeding 30°C, protected from light and moisture.

Keep all medicines out of reach of children

PRESENTATION

Vogliton MD 0.2 & 0.3 are available in blister of 10 tablets.

MARKETED BY



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