

LISTRIL

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

Abbreviated Prescribing information for Listril (Lisinopril 2.5/5/10 mg Tablet) [Please refer the complete prescribing information available at www.torrentpharma.com]

PHARMACOLOGICAL PROPERTIES: Lisinopril is an oral long-acting angiotensin converting enzyme inhibitor. **INDICATION:** Treatment of essential hypertension and in patients with congestive heart failure. **DOSAGE AND ADMINISTRATION:** The recommended initial dose is 10 mg once a day. The usual dosage range is 20 to 40 mg per day administered in a single daily dose. Renal impairment: creatinine clearance >30 mL/min (serum creatinine up to 3 mg/dL)-usual dose of 10mg, creatinine clearance ≥ 10 mL/min ≤ 30 mL/min (serum creatinine ≥ 3 mg/dL)-5mg once daily and creatinine clearance < 10 mL/min (usually on hemodialysis)-initial dose is 2.5 mg. The dosage may be titrated upward until blood pressure is controlled or to a maximum of 40 mg daily. Heart failure: starting dose is 5 mg once a day and can be titrated up to maximum of 40mg at intervals of no less than 2 weeks. Paediatric hypertensive patients ≥ 6 years of age: recommended starting dose is 0.07 mg/kg once daily (up to 5 mg total). Lisinopril is not recommended in pediatric patients <6 years or in pediatric patients with glomerular filtration rate < 30 mL/min/1.73m². **CONTRINDICATIONS:** hypersensitive to this product and in patients with a history of angioedema. Do not co-administer aliskiren with Lisinopril in patients with diabetes. **WARNINGS & PRECAUTIONS:** Anaphylactoid and possibly related reactions, head and neck angioedema, intestinal angioedema, anaphylactoid reactions during desensitization, anaphylactoid reactions during membrane exposure, hypotension, leukopenia/neutropenia/agranulocytosis, hepatic failure, fetal toxicity, general aortic stenosis/hypertrophic cardiomyopathy, impaired renal function, hyperkalemia, cough, risk of hypotension during surgery/anesthesia, angioedema, symptomatic hypotension, hypoglycemia and risk while use during pregnancy. **DRUG INTERACTIONS:** interacts with diuretics, potassium-sparing diuretics (spironolactone, amiloride, triamterene, and others), antidiabetics (insulins, oral hypoglycemic agents), nsais including selective cox-2 inhibitors, other renin-angiotensin system (ras) blockers, lithium and gold. **ADVERSE REACTIONS:** headache, dizziness, cough, hypotension, chest pain, creatinine increased, hyperkalemia, syncope, renal dysfunction, fatigue, pancreatitis, constipation, flatulence, dry mouth, diarrhea, bone marrow depression, hemolytic anemia, leukopenia/neutropenia and thrombocytopenia, diabetes mellitus, inappropriate antidiuretic hormone secretion, gout, urticaria, alopecia, photosensitivity, erythema, flushing, diaphoresis, cutaneous pseudolymphoma, toxic epidermal necrolysis, stevens-johnson syndrome, pruritus, visual loss, diplopia, blurred vision, tinnitus, photophobia, taste disturbances, olfactory disturbance, impotence, arthralgia/arthritis, myalgia, fever, vasculitis, eosinophilia, leukocytosis, paresthesia, vertigo, rash, decreases in hemoglobin and hematocrit, hyponatremia, mood alterations (including depressive symptoms), mental confusion, hallucinations and psoriasis.

MARKETED BY:



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(Additional information is available on request)