RANOLAZ OD

For the use of a Registered Medical Practitioner or Hospital or a Laboratory only.
Abbreviated Prescribing information for RANOLAZ OD(Ranolazine Extended Release Tablets**)**
[Please refer the complete prescribing information available at www.torrentpharma.com]

PHARMACOLOGICAL PROPERTIES:
Mechanism of action: Ranolazine may have some antianginal effects by inhibition of the late sodium current in cardiac cells. This reduces intracellular sodium accumulation and consequently decreases intracellular calcium overload. Ranolazine, via its action to decrease the late sodium current, is considered to reduce these intracellular ionic imbalances during ischaemia. This reduction in cellular calcium overload is expected to improve myocardial relaxation and thereby decrease left ventricular diastolic stiffness.

DOSAGE AND ADMINISTRATION: RANOLAZ OD tablets should be swallowed whole and not crushed, broken, or chewed. They may be taken with or without food.

CONTRAINDICATION: Hypersensitivity to the active substance or to any of the excipients, Severe renal impairment (creatinine clearance < 30 ml/min), Moderate or severe hepatic impairment, Concomitant administration of potent CYP3A4 inhibitors (e.g. itraconazole, ketoconazole, voriconazol, posaconazol, HIV protease inhibitors, clarithromycin, telithromycin, nefazodone), Concomitant administration of Class Ia (e.g. quinidine) or Class III (e.g. dofetilide, sotalol) antiarrhythmic other than amiodarone.

- **WARNINGS & PRECAUTIONS:** Concomitant administration of moderate CYP3A4 inhibitors, Concomitant administration of P-gp inhibitors, Mild hepatic impairment, Mild to moderate renal impairment (creatinine clearance 30–80 ml/min), Elderly, Patients with low weight (≤ 60 kg), Patients with moderate to severe CHF (NYHA Class III–IV), QT prolongation: Ranolazine blocks I_{Kr} and prolongs the QTc interval in a dose-related manner. Drug-drug interactions: Co-administration with CYP3A4 inducers is expected to lead to lack of efficacy. Ranolazine should not be used in patients treated with CYP3A4 inducers (e.g. rifampicin, phenytoin, phenobarbital, carbamazepine, St. John's Wort), Renal impairment, Azo colouring agent E102: This medicinal product contains the azo colouring agent E102 which may cause allergic reactions, Sodium: This medicine contains less than 1 mmol sodium (23 mg) per Extended Release tablet, that is to say essentially 'sodium-free'.

DRUG INTERACTION*: Effects of other medicinal products on Ranolazine, CYP3A4 or P-gp inhibitors:* Ranolazine is a substrate of cytochrome CYP3A4. Inhibitors of CYP3A4 increase plasma concentrations of RANOLAZ OD, Diltiazem-180 to 360 mg once daily, *CYP3A4 inducers*: Rifampicin (600 mg once daily) decreases Ranolazine steady-state concentrations by approximately 95%, *CYP2D6 inhibitors:* Ranolazine is partially metabolised by CYP2D6; therefore, inhibitors of this enzyme may increase plasma concentrations of Ranolazine, *Effects of Ranolazine on other medicinal products:* Ranolazine is a moderate to potent inhibitor of P-gp and a mild inhibitor of CYP3A4, and may increase plasma concentrations of P-gp or CYP3A4 substrates, *Digoxin, Simvastatin, Atorvastatin, Tacrolimus, ciclosporin, sirolimus, everolimus, Drugs transported by the Organic Cation Transporter-2*

(OCT2): Plasma exposure mellitus when co-administered with Ranolazine 500 mg and 1000 mg twice daily respectively. of metformin (1000 mg twice daily) increased 1.4- and 1.8-fold in subjects with type 2 diabetes

ADVERSE REACTIONS: Swollen face, tongue, or throat, difficulty swallowing, hives or difficulty breathing, Constipation, Dizziness, Headache, Feeling sick, vomiting, Feeling weak, Altered sensation, Anxiety, difficulty sleeping, confusional state, hallucination, Blurred vision, visual disturbance, Changes in sensation (touch or taste), tremor, feeling tired or sluggish, sleepiness or drowsiness, faint or fainting, dizziness upon standing, Dark urine, blood in urine, difficulty urinating, Dehydration, Difficulty breathing, cough, nose bleed, Double vision, Excessive sweating, itching, Feeling swollen or bloated, Hot flushes, low blood pressure, Increases in a substance called creatinine or increases in urea in your blood, increase in blood platelets or white blood cells, changes in ECG heart tracing, Joint swelling, pain in extremity, Loss of appetite and/or weight loss, Muscle cramp, Ringing in the ears and/or feeling a spinning sensation, Stomach pain or discomfort, indigestion, dry mouth, or wind, A lack of ability to urinate, Abnormal laboratory values for liver, Acute kidney failure, Change in sense of smell, numbness in mouth or lips, impaired hearing, Cold sweat, rash, Coordination problems, Decrease in blood pressure upon standing, Decreased or loss of consciousness, Disorientation, Feeling of coldness in hands and legs, Hives, allergic skin reaction, Impotence, Inability to walk due to imbalance, Inflammation of pancreas or intestine, Loss of memory, Throat tightness, Low level of sodium in the blood (hyponatremia) which can cause tiredness and confusion, muscle twitching, cramps, and coma.

MARKETED BY

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IN/RANOLAZ OD 1000mg/APR-21/01/ABPI

(Additional information is available on request)