

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

Unicobal Forte

1. Generic Name

Mecobalamin 1500 mcg, Alpha Lipoic Acid 100mg, Folic Acid 1.5 mg & Pyridoxine 3mg Tablets

2. Qualitative and Quantitative Composition

Each film coated tablet contains:

Methylcobalamin I.P.1500 mcg

Alpha Lipoic Acid U.S.P.100 mg

Folic Acid I.P.1.5 mg

Pyridoxine Hydrochloride I.P.3 mg

Approved colours used.

The excipients used are Microcrystalline Cellulose, Magnesium Oxide, Cellulose Acetate Phthalate, Sodium Starch Glycolate, Povidone, Pregelatinised Starch, Dibutyl Phthalate, Crospovidone, Colloidal Silicon Dioxide, Talc, Magnesium Stearate, Isopropyl Alcohol, Acetone, Methylene Chloride, Purified Water, Hypromellose, Titanium Dioxide, Ethyl Cellulose, Triacetin, Black Iron Oxide, Polyvinyl Alcohol, Polyethylene Glycol, Mica based Pearlescent Pigment, Polysorbate 80, Red Iron Oxide and Yellow Iron Oxide.

3. Dosage form and strength

DOSAGE FORM: Film Coated Tablet

STRENGTH: Mecobalamin 1500mcg, Alpha Lipoic Acid 100mg, Folic Acid 1.5 and Pyridoxine Hydrochloride 3mg.

4. CLINICAL PARTICULARS

4.1 Therapeutic Indication

For the treatment of diabetic neuropathy.

4.2 Posology and Method of Administration

Posology

Dosage: As directed by the Physician

4.3 Contraindications

Hypersensitivity to the active substance, cobalt or to any of the excipients.

4.4 Special Warnings and Precautions for Use

Diabetic patients

In accordance with current clinical practice, some diabetic patients who gain weight on treatment may need to adjust hypoglycaemic medicinal products.

Encephalopathy

Cases of encephalopathy have been reported, mostly in patients with underlying conditions that may precipitate encephalopathy.

Diabetes

Unicobal Forte can decrease blood sugar levels. Diabetes medications might need to be adjusted by patient's healthcare provider.

Excessive use of alcohol/thiamine deficiency

Alcohol can lower the amount of thiamine (vitamin B1) in the body. Taking Unicobal Forte when there is a shortage of thiamine might cause serious health problems.

Thyroid disease

Taking Unicobal Forte might interfere with treatments for under-active or over-active thyroid.

High numbers of red blood cells (polycythemia vera)

The treatment of vitamin B12 deficiency can unmask the symptoms of polycythemia vera.

Abnormal red blood cells (megaloblastic anemia)

Megaloblastic anemia is sometimes corrected by treatment with vitamin B12. However, this can have very serious side effects. Don't attempt Unicobal Forte therapy without close supervision by healthcare provider.

Leber's disease, a hereditary eye disease

Do not take Unicobal Forte if patient have this disease. It can seriously harm the optic nerve, which might lead to blindness.

Post-surgical stent placement

Avoid using Unicobal Forte , after receiving a coronary stent. This may increase the risk of blood vessel narrowing.

4.5 Drugs Interactions

Interactions and the elderly

No specific pharmacodynamic interaction studies were conducted in elderly volunteers.

Interaction studies have only been performed in adults.

Medications for cancer (Chemotherapy) interacts with Unicobal Forte

Unicobal Forte is an antioxidant. There is some concern that antioxidants might decrease the effectiveness of some medications used for cancers.

Medications for diabetes (Antidiabetes drugs) interacts with Unicobal Forte

Unicobal Forte might decrease blood sugar. Diabetes medications are also used to lower blood sugar. Unicobal Forte along with diabetes medications might cause blood sugar to go too low. But more evidence is needed to know if this interaction is a big concern. Monitor blood sugar closely.

Fosphenytoin interacts with Unicobal Forte

Fosphenytoin is used for seizures. The body breaks down Fosphenytoin to get rid of it. Folic acid, present in Unicobal Forte can increase how quickly the body breaks down fosphenytoin.

Taking folic acid along with fosphenytoin might decrease the effectiveness of fosphenytoin for preventing seizures.

Methotrexate interacts with Unicobal Forte

Methotrexate works by decreasing the effects of folic acid in the body's cells. Taking folic acid containing pills along with methotrexate might decrease the effectiveness of methotrexate.

Phenobarbital interacts with Unicobal Forte

Phenobarbital is used for seizures. Taking Unicobal Forte can decrease how well phenobarbital works for preventing seizures.

Phenytoin interacts with Unicobal Forte

The body breaks down phenytoin to get rid of it. Folic acid might increase how quickly the body breaks down phenytoin. Taking Unicobal Forte and taking phenytoin might decrease the effectiveness of phenytoin and increase the possibility of seizures.

Primidone interacts with Unicobal Forte

Primidone is used for seizures. Unicobal Forte might cause seizure in some people. Taking Unicobal Forte along with primidone might decrease how well primidone works for preventing seizures.

Pyrimethamine interacts with Unicobal Forte

Pyrimethamine is used to treat parasite infections. Unicobal Forte might decrease the effectiveness of pyrimethamine for treating parasite infections.

Amiodarone interacts with Unicobal Forte

Amiodarone might increase sensitivity to sunlight. Taking Unicobal Forte along with amiodarone might increase the chances of sunburn, blistering, or rashes on areas of skin exposed to sunlight. Be sure to wear sun block and protective clothing when spending time in the sun.

Phenobarbital interacts with Unicobal Forte

The body breaks down phenobarbital to get rid of it. Unicobal Forte might increase how quickly the body breaks down phenobarbital. This could decrease the effectiveness of Phenobarbital.

Phenytoin interacts with Unicobal Forte

The body breaks down phenytoin to get rid of it. Unicobal Forte might increase how quickly the body breaks down phenytoin. Taking Unicobal Forte and taking phenytoin might decrease the effectiveness of phenytoin and increase the possibility of seizures. Do not take large doses of Unicobal Forte while taking phenytoin.

Levodopa interacts with Unicobal Forte

The body breaks down levodopa to get rid of it. Unicobal Forte can increase how quickly the body breaks down and gets rid of levodopa. But this is only a problem if patient is taking levodopa alone. Most people take levodopa along with carbidopa. Carbidopa prevents this interaction from occurring. If patient is taking levodopa without carbidopa do not take Unicobal Forte .

Chloramphenicol interacts with Unicobal Forte

Unicobal Forte contains Vitamin B12, it is important for producing new blood cells. Chloramphenicol might decrease new blood cells. Taking chloramphenicol for a long time might decrease the effects of vitamin B12 on new blood cells. But most people only take chloramphenicol for a short time so this interaction isn't a big problem.

The data are unavailable for methylcobalamine drug interaction, however evidences for parent drug – Unicobal Forte are as follows Absorption from the gastrointestinal tract may be reduced by neomycin, aminosalicyclic acid, histamine H2-antagonists, omeprazole, and colchicine. Serum concentrations may be decreased by use of oral contraceptives. Many of these interactions are unlikely to be of clinical significance but should be taken into account when performing assays for blood concentrations. Parenteral chloramphenicol may attenuate the effect in anaemia. Potassium supplements can reduce absorption of Unicobal Forte in some people and might contribute to vitamin B12 deficiency.

Early research suggests that vitamin C supplements can destroy dietary vitamin B12. It isn't known whether this interaction is important, but to stay on the safe side, take vitamin C supplements at least 2 hours after meals. Heavy drinking for at least a two-week period can decrease vitamin B12 absorption from the gastrointestinal tract

4.6 Use in Special Populations (Such as Pregnant Women, Lactating Women, Paediatric Patients, Geriatric Patients Etc.)

Physicians should carefully consider the potential risks and benefits for each specific patient before prescribing Unicobal Forte.

Pregnancy

No safety data are available for Unicobal Forte administered during pregnancy or in breastfeeding women. This medicinal product may be prescribed during pregnancy if required, providing the indication and dosages are observed in order to avoid vitamin overdose.

Lactation

Use is not recommended during breastfeeding because of the risk of vitamin A overdose in the neonate. There are no adequate data from the use of Unicobal Forte with regards to fertility in male or female patients.

4.7 Effects On Ability to Drive and Use Machines

There is no information on the effects of Unicobal Forte on the ability to operate an automobile or other heavy machinery.

4.8 Undesirable Effects

FOLIC ACID

Folic acid is generally well tolerated although the following side effects have been reported:

Gastrointestinal disorders:

Rare ($\geq 1/10,000$ to $< 1/1,000$)

Anorexia, nausea, abdominal distension and flatulence

Immune system disorders

Rare ($\geq 1/10,000$ to $< 1/1,000$)

Allergic reactions, comprising erythema, rash, pruritus, urticaria, dyspnoea, and anaphylactic reactions (including shock).

Not known

Anaphylactic reaction

ALPHA LIPOIC ACID

Alpha-lipoic acid is possibly safe for most adults when taken by mouth, when used intravenously or when applied to the skin. People taking alpha-lipoic acid by mouth might get a rash. People at risk for thiamine deficiency should take a thiamine supplement.

People with diabetes should be careful to check their blood sugar levels because alpha-lipoic acid might lower blood sugar.

PYRIDOXINE

Long term administration of large doses of pyridoxine is associated with the development of severe peripheral neuritis.

Methylcobalamine

Dermatologic Effects: Rash; In the event of such symptoms, treatment should be discontinued.

Gastrointestinal Effects: Anorexia, nausea/vomiting and diarrhea

Neurologic Effects (Central nervous system): Headache

Others:

Anaphylactoid reaction: decrease in blood pressure or dyspnea, may occur. Patients should be carefully observed. In the event of such symptoms, treatment should be discontinued immediately and appropriate measures taken.

Hot sensation

Diaphoresis

4.9 Overdose

a) Symptoms – None reported

b) Treatment – no treatment necessary.

5. PHARMACOLOGICAL PROPERTIES

5.1 Mechanism of Action

Mecobalamin

It works by functioning in the production of a compound called myelin, which covers and protect nerve fibers. Methylcobalamin rejuvenates the damaged neuron. Without enough Methylcobalamin, myelin sheath does not form properly due to which nerve fibers suffers and people experience irreversible nerve damage. An intrinsic factor made in the stomach, must be present in the intestinal tract to allow its proper absorption. People lacking this factor show vitamin B₁₂ deficiencies such as pernicious anemia (a slow and insidious process that can end in death. Pernicious anemia in fact means ‘leading to death’). Methylcobalamin is used as a cofactor in methionine transferase enzyme, an enzyme which converts amino acid homocysteine to methionine via folate cycle.

Alpha Lipoic Acid

Lipoic Acid is generally involved in oxidative decarboxylations of keto acids and is presented as a growth factor for some organisms. Lipoic acid exists as two enantiomers, the R-enantiomer and the S-enantiomer. Normally only the R-enantiomer of an amino acid is biologically active, but for lipoic acid the S-enantiomer assists in the reduction of the R-enantiomer when a racemic mixture is given. Some recent studies have suggested that the S-enantiomer in fact has an inhibiting effect on the R-enantiomer, reducing its biological activity substantially and actually adding to oxidative stress rather than reducing it. Furthermore, the S-enantiomer has been found to reduce the expression of GLUT-4s in cells, responsible for glucose uptake, and hence reduce insulin sensitivity.

Folic acid

Folic acid, a biochemically inactive compound, is the precursor for tetrahydrofolic acid and methyl tetrahydrofolate. Tetrahydrofolic acid, methyl tetrahydrofolate, and other folic acid congeners are essential for the maintenance of normal erythropoiesis and are also required cofactors for the synthesis of purine and thymidylate nucleic acids. They are also necessary for the interconversion of amino acids such as the metabolism of histidine to glutamic acid and the interconversion of serine and glycine. Folic acid congeners are transported across cells by receptor-mediated endocytosis where they function and are stored. Other processes involving folate coenzymes include generation and use of formate and methylation of transfer RNA. Impaired thymidylate synthesis, which leads to faulty DNA synthesis, is responsible for megaloblastic and macrocytic anemias. An important role of folic acid is the formation of methionine from homocysteine using vitamin B12 as a cofactor. Adequate folic acid intakes can normalize high homocysteine levels via increased remethylation of homocysteine to methionine via 5-methyltetrahydrofolate-homocysteine methyltransferase (a.k.a.; methionine synthetase). Reduced folic acid intake is associated with hyperhomocysteinemia. Hyperhomocysteinemia is recognized as an independent risk factor for arteriosclerosis of the coronary, cerebral, and peripheral vasculature. There is mounting evidence that elevated plasma homocysteine (and therefore decreased serum methionine) contributes to congenital neural tube defects. High serum homocysteine levels may also be important in the pathogenesis of colon cancer, diabetic retinopathy, and other diseases.

Pyridoxine Hydrochloride

Pyridoxine is converted in erythrocytes to pyridoxal phosphate and to a lesser extent pyridoxamine phosphate, which act as coenzymes for various metabolic functions affecting protein, carbohydrate, and lipid utilization. Pyridoxine is involved in conversion of tryptophan to niacin or serotonin, breakdown of glycogen to glucose-1-phosphate, conversion of oxalate to glycine, synthesis of gamma aminobutyric acid (GABA) within the CNS, and synthesis of heme.

Antidote—Pyridoxine increases the excretion of certain drugs (e.g., cycloserine and isoniazid) that act as pyridoxine antagonists.

5.2 Pharmacodynamic Properties

METHYLCOBALAMIN

Methylcobalamin is one of the biologically active form of vitamin B12. It acts as coenzymes in nucleic acid synthesis. Methylcobalamin is also closely involved with folic acid in several important metabolic pathways. Methylcobalamin supports the methionine synthetase reaction,

which is essential for normal metabolism of folate.

ALPHA LIPOIC ACID

Alpha-lipoic acid is a vitamin-like chemical called an antioxidant. Yeast, liver, kidney, spinach, broccoli, and potatoes are good sources of alpha-lipoic acid. It is also made in the laboratory for use as medicine.

Alpha-lipoic acid is used for diabetes and nerve-related symptoms of diabetes including burning, pain, and numbness in the legs and arms.

Alpha-lipoic acid seems to help prevent certain kinds of cell damage in the body, and also restores vitamin levels such as vitamin E and vitamin C. There is also evidence that alpha-lipoic acid can improve the function and conduction of neurons in diabetes.

Alpha-lipoic acid is used in the body to break down carbohydrates and to make energy for the other organs in the body.

Alpha-lipoic acid seems to work as an antioxidant, which means that it might provide protection to the brain under conditions of damage or injury. The antioxidant effects might also be helpful in certain liver diseases.

FOLIC ACID

Folic acid is a member of the vitamin B group. Folic acid is reduced in the body to tetrahydrofolate, which is a coenzyme for various metabolic processes including the synthesis of purine and pyrimidine nucleotides, and hence in the synthesis of DNA; it is also involved in some amino-acid conversions.

PYRIDOXONE HYDROCHLORIDE

Pyridoxine hydrochloride is Vitamin B6. It is converted to pyridoxal phosphate which is the co-enzyme for a variety of metabolic transformations. It is essential for human nutrition.

5.3 Pharmacokinetic Properties

METHYLCOBALAMIN

It binds to intrinsic factor; a glycoprotein secreted by the gastric mucosa, and is then actively absorbed from the gastrointestinal tract. Absorption is impaired in patients with an absence of intrinsic factor, with a malabsorption syndrome or with disease or abnormality of the gut, or after gastrectomy. Absorption from the gastrointestinal tract can also occur by passive diffusion; little of the vitamin present in food is absorbed in this manner although the process becomes increasingly important with larger amounts such as those used therapeutically. After intranasal dosage, peak plasma concentrations of cyanocobalamin have been reached in 1 to 2 hours. The bioavailability of the intranasal preparation is about 7 to 11% of that by intramuscular injection.

It is extensively bound to specific plasma proteins called trans cobalamins; trans cobalamin II appears to be involved in the rapid transport of the cobalamins to tissues. A parent form - vitamin B12 is stored in the liver, excreted in the bile, and undergoes extensive enterohepatic recycling; part of a dose is excreted in the urine, most of it in the first 8 hours; urinary excretion, however, accounts for only a small fraction in the reduction of total body stores acquired by dietary means. Vitamin B12 diffuses across the placenta and also appears in breast milk

ALPHA LIPOIC ACID

It is reported that alpha-lipoic acid 600 mg was administered orally once daily for 4 days, and the pharmacokinetic parameters were measured on days 1 and 4 revealed the mean percentage

of the administered dose excreted in urine as parent compound was 0.2 (which is 0.67% with assumption of 30% bioavailability)

FOLIC ACID

Folic acid is rapidly absorbed from the gastrointestinal tract, mainly from the duodenum and jejunum. Dietary folates are stated to have about half the bioavailability of crystalline folic acid. The naturally occurring folate polyglutamates are largely deconjugated, and then reduced by dihydrofolate reductase in the intestines to form 5-methyltetrahydrofolate, which appears in the portal circulation, where it is extensively bound to plasma proteins. Folic acid given therapeutically enters the portal circulation largely unchanged, since it is a poor substrate for reduction by dihydrofolate reductase. It is converted to the metabolically active form 5-methyltetrahydrofolate in the plasma and liver. The principal storage site of folate is the liver; it is also actively concentrated in the CSF. Folate undergoes enterohepatic circulation. Folate metabolites are eliminated in the urine and folate in excess of body requirements is excreted unchanged in the urine. Folate is distributed into breast milk. Folic acid is removed by haemodialysis.

PYRIDOXINE HYDROCHLORIDE

Pyridoxine readily absorbed from the gastrointestinal tract after oral dose and converted to the active forms pyridoxal phosphate and pyridoxamine phosphate. They are stored mainly in the liver where there is oxidation to 4-pyridoxic acid and other inactive metabolites which are excreted in the urine. As the dose increases, proportionally greater amounts are excreted unchanged in the urine. Pyridoxal crosses the placenta and is distributed into breast milk.

6. NONCLINICAL PROPERTIES

6.1 Animal Toxicology or Pharmacology

Methylcobalamin

Convulsions, followed by cardiac or respiratory failure, have been described in mice given 1.5-3 mg/kg body weight of vitamin B12; clinical signs were not thought to be due to hypersensitivity.

Alpha-lipoic acid

Chronic Exposure or Carcinogenicity/ Alpha-lipoic acid, also referred to as thioctic acid, has been demonstrated to exhibit strong anti-oxidant properties. In order to test the long-term toxicity of alpha-lipoic acid, groups of 40-50 male and female, 5-6-week-old, Sprague-Dawley rats were subjected to oral administration of 20, 60, or 180 mg/kg body weight (bw)/day alpha for 24 months. There was no significant difference between control animals and treated animals at 20 or 60 mg/kg bw/day with respect to body weight gain, food consumption, behavioral effects, haematological and clinical chemistry parameters, and gross and histopathological findings. In all treatment groups, mortality was slightly lower as compared to the control. The absolute weights of the heart (high-dose males), thymus (high-dose males), and left adrenal (mid-dose males), liver (high-dose females), and lungs (high-dose females) were decreased in comparison to controls. These changes were of no toxicological significance. The only notable finding in rats of both sexes dosed at 180 mg/kg bw/day was a reduction in food intake relative to the controls and a concomitant decrease in body weight. This decrease in body weight led to significant differences between the control and high-dose rats with respect to the absolute weights of certain organs. However, no gross or histopathological changes were associated with these findings. The no-observed-adverse-effect level (NOAEL) is considered to be 60 mg/kg bw/day.

Suspected alpha lipoic acid (ALA) toxicity was diagnosed based on clinical history and compatible laboratory findings in 2 dogs. Case 1 was presented within 10 hours of ALA ingestion, with initial behavioral changes likely due to hypoglycemia. During the course of hospitalization, hypoglycemia persisted and evidence of acute hepatic insult developed. With aggressive supportive care (including IV fluids with dextrose supplementation, hepatoprotective medications, and a plasma transfusion), he made a full recovery. Case 2 was presented approximately 60 hours after ALA ingestion, and was found to be in oliguric renal failure. She was treated with IV fluids, gastro protective medications, and furosemide, but her condition deteriorated and she was ultimately euthanized within 16 hours of admission to the hospital.

Folic acid

Toxicity studies in animals (rats and rabbits) have shown that massive doses (100mg/kg upwards) produce precipitation of folate crystals in renal tubules, particularly proximal tubules and ascending limb of the loop of Henle. Tubular necrosis is followed by recovery.

Pyridoxine

There are no preclinical data of relevance to the prescriber, which are additional to those already included in other sections of the Summary of Product Characteristics.

7. DESCRIPTION

Unicobal Forte tablets are grey coloured, circular shaped, film coated tablets with break line on one side and plain on other side. The active ingredients are Mecobalamin 1500mcg, Alpha Lipoic Acid 100mg, Folic Acid 1.5mg, Pyridoxine Hydrochloride 3mg. The excipients used are Microcrystalline Cellulose, Magnesium Oxide, Cellulose Acetate Phthalate, Sodium Starch Glycolate, Povidone, Pregelatinised Starch, Dibutyl Phthalate, Crospovidone, Colloidal Silicon Dioxide, Talc, Magnesium Stearate, Isopropyl Alcohol, Acetone, Methylene Chloride, Purified Water, Hypromellose, Titanium Dioxide, Ethyl Cellulose, Triacetin, Black Iron Oxide, Polyvinyl Alcohol, Polyethylene Glycol, Mica based Pearlescent Pigment, Polysorbate 80, Red Iron Oxide and Yellow Iron Oxide.

8. PHARMACEUTICAL PARTICULARS

8.1 Incompatibilities

Not Available

8.2 Shelf-life

Do not use later than date of expiry

8.3 Packaging information

Unicobal Forte is packed in strips of 10 tablets.

8.4 Storage and Handing Instructions

Store below 25⁰C. Protect from light and moisture..

Keep out of reach of children.

Important: Moisture sensitive tablets – do not remove from strip until immediately before administration

9. PATIENT COUNSELLING INFORMATION

Read all of this leaflet carefully before you start taking this medicine because it contains

important information for you.

- Keep this leaflet. You may need to read it again.
- If you have any further questions, ask your doctor or pharmacist.
- This medicine has been prescribed for you only. Do not pass it on to others; it may harm them, even if their signs of illness are the same as yours.
- If you get any side effects, talk to your doctor or pharmacist. This includes any possible side effects not listed in this leaflet. See section 4.

What is in this leaflet

1. What Unicobal Forte Tablets are and what they are used for
2. What you need to know before you take Unicobal Forte Tablets
3. How to take Unicobal Forte Tablets
4. Possible side effects
5. How to store Unicobal Forte Tablets
6. Contents of the pack and other information

1. What Unicobal Forte Tablets are and what they are used for

The Unicobal Forte is combination of Mecobalamin (Mecobalamin is a kind of endogenous coenzyme B12: As a coenzyme of methionine synthetase, Mecobalamin plays an important role in trans methylation in the synthesis of methionine from homocysteine.)

Alpha Lipoic Acid (Alpha-lipoic acid also known as lipoic acid, is an antioxidant used to treat diabetic neuropathy.).

Folic Acid (Unicobal Forte Tablets, which contains folic acid, a vitamin essential in the production and maintenance of new cells.

The another active ingredient in Unicobal Forte Tablets is pyridoxine hydrochloride, which is Vitamin B6. Unicobal Forte Tablets used for the treatment of diabetic neuropathy.

2. What you need to know before you take Unicobal Forte Tablets

Do not take Unicobal Forte Tablets if you:

- are allergic to Unicobal Forte or any of the other ingredients of this medicine

Warnings and precautions

Talk to your doctor or pharmacist before taking Unicobal Forte Tablets if you:

- have problems with your liver or kidneys

Brief about the allergy and the signs like:

- Rash
- Itching
- Shortness of breath
- Swelling of face, lips, tongue or throat or any other signs.

Unicobal Forte Tablets, if possible, not be given to patients with suspected vitamin B12 deficiency without first confirming the diagnosis. Where it is desirable to start therapy

immediately, combined treatment for both deficiencies may be started once suitable samples have been taken to permit diagnosis of the deficiency, and the patient converted to the appropriate treatment once the cause of the anaemia is known. Regular monitoring of the blood is advisable.

if you have cancer (unless you have anaemia due to a deficiency of folic acid)

- if you are undergoing haemodialysis due to kidney failure
- if you are receiving a coronary stent (a tube that is inserted in the artery that leads to the heart, in order to stop blockages)
 - if you suffer from pernicious anaemia (a disorder preventing the absorption of vitamin B12) or could be suffering from a lack of vitamin B12
 - if you have a tumour. Care needs to be taken in patients with certain tumours.
- the patient is a child. Unicobal Forte are not recommended for children.

Other medicines and Unicobal Forte Tablets

Tell your doctor or pharmacist if you are taking, have recently taken or might take any other medicine. This is especially important for the following medicines:

Unicobal Forte contains vitamin B12. Absorption of vitamin B12 from the gastrointestinal tract may be reduced by neomycin, amino salicylic acid, histamine H2-antagonists, omeprazole, and colchicine. Serum concentrations may be decreased by use of oral contraceptives. Many of these interactions are unlikely to be of clinical significance but should be taken into account when performing assays for blood concentrations.

can reduce the amount of insulin or oral diabetes medicine needed

- phenytoin, phenobarbital and primidone (used to control epileptic fits)
- Fluorouracil, a drug used to treat certain tumours
 - antibiotics. Some antibiotics (trimethoprim and sulphonamides, sometimes combined as co-trimoxazole) reduce the effect of Unicobal Forte. All antibiotics can interfere with Unicobal Forte blood test results
- Some indigestion remedies (edible clay and antacids containing aluminium or magnesium). Allow at least a two-hour gap between taking your Unicobal Forte and indigestion remedies
- Preparations containing zinc such as vitamins or food supplements (this may be important in pregnancy)
- sulfasalazine, used to treat the inflammatory bowel conditions ulcerative colitis and Crohn's disease
- cholestyramine, used to reduce cholesterol levels in the blood
- levodopa, a drug used in the treatment of Parkinson's disease
- isoniazid, used to treat tuberculosis
- oral contraceptives
- penicillamine, used to treat arthritis and other conditions. If you have any doubts about whether you should take this medicine then discuss matters with your doctor before taking it.

Pregnancy and breast-feeding

This medicine can be taken in pregnancy to treat anaemia. If you are breast feeding, please speak with your doctor before taking this medicine.

Do not take

Unicobal Forte Tablets if you are pregnant, unless necessary. Unicobal Forte Tablets are not recommended during breast-feeding

Driving and using machines

Unicobal Forte Tablets is unlikely to affect your ability to drive or operate machinery. However, you should check that these tablets do not make you feel sleepy or dizzy before driving or operating machinery.

3. How to take Unicobal Forte Tablets

Always take Unicobal Forte Tablets exactly as your doctor has told you. Check with your doctor or pharmacist if you are not sure.

Dosage:

Dosage: As directed by the Physician.

If you take more Unicobal Forte Tablets than you should

If you (or anybody else,) takes more Unicobal Forte than you should, it is unlikely that this medicine will cause any harm. If you are at all concerned contact your doctor. Always take the carton and this leaflet with you.

If you forget to take Unicobal Forte Tablets

If you forget a dose, take another as soon as you remember. If it is almost time for your next dose, then do not take the missed dose at all. Do not take a double dose to make up for a forgotten dose.

If you stop taking Unicobal Forte Tablets

You should continue to take Unicobal Forte for as long as your doctor tells you to. Do not stop taking the medicine without talking to your doctor first.

4. Possible side effects

Like all medicines, this medicine can cause side effects, although not everybody gets them.

If you get any of the following symptoms after taking these tablets you should contact your doctor or pharmacist immediately as these may be signs of a serious allergic reaction:

Gastrointestinal disorders:

Rare ($\geq 1/10,000$ to $< 1/1,000$)

Anorexia, nausea, vomiting and diarrhea, abdominal distension and flatulence

Dermatologic Effects: Rash; In the event of such symptoms, treatment should be discontinued. People at risk for thiamine deficiency should take a thiamine supplement.

Immune system disorders

Rare ($\geq 1/10,000$ to $< 1/1,000$)

Allergic reactions, comprising erythema, rash, pruritus, urticaria, dyspnoea, and anaphylactic reactions (including shock).

Not known

Anaphylactic reaction

Blood Sugar level:

People with diabetes should be careful to check their blood sugar levels because Unicobal Forte might lower blood sugar.

Peripheral neuritis

Long term administration of large doses of pyridoxine is associated with the development of severe peripheral neuritis.

Neurologic Effects

(*Central nervous system*): Headache

Others:

Decrease in blood pressure or dyspnea, may occur. Patients should be carefully observed. In the event of such symptoms, treatment should be discontinued immediately and appropriate measures taken.

Hot sensation

Diaphoresis

5. How to store Unicobal Forte Tablets

Store below 25⁰C. Protect from light and moisture..

Keep out of reach of children.

Important: Moisture sensitive tablets – do not remove from strip until immediately before administration

6. Contents of the pack and other information

Unicobal Forte is packed in strips of 10 tablets.

What Unicobal Forte Tablets contains:

The active substance is Mecobalamin 1500mcg, Alpha Lipoic Acid 100mg, Folic Acid 1.5mg, Pyridoxine Hydrochloride 3mg.

The excipients used are Microcrystalline Cellulose, Magnesium Oxide, Cellulose Acetate Phthalate, Sodium Starch Glycolate, Povidone, Pregelatinised Starch, Dibutyl Phthalate, Crospovidone, Colloidal Silicon Dioxide, Talc, Magnesium Stearate, Isopropyl Alcohol, Acetone, Methylene Chloride, Purified Water, Hypromellose, Titanium Dioxide, Ethyl Cellulose, Triacetin, Black Iron Oxide, Polyvinyl Alcohol, Polyethylene Glycol, Mica based Pearlescent Pigment, Polysorbate 80, Red Iron Oxide and Yellow Iron Oxide.

10. DETAILS OF MANUFACTURER

Ordain Health Care Global Pvt. Ltd.

Survey No. 532, Uthiramerur Road, Melavalampettai,

Karunguzhi-603303, Kanchipuram District, Tamilnadu

11. DETAILS OF PERMISSION OR LICENCE NUMBER WITH DATE

Mfg Lic No. TN00003297 issued on 09.05.2014

12. DATE OF REVISION

Not Applicable

MARKETED BY



TORRENT PHARMACEUTICALS LTD.

Indrad – 382721, Dist. Mehsana, INDIA.

IN/ Unicobal Forte 1500 mcg, 100mg, 1.5 mg & 3mg Tablets /JUL-2019/01/PI