## **VALZAAR**

For the use of a Registered Medical Practitioner or a Hospital or a Laboratory Only Abbreviated Prescribing information for Valzaar [Valsartan I.P 40/80/160mg tablets] [Please refer the complete prescribing information available at <a href="https://www.torrentpharma.com">www.torrentpharma.com</a>]

**PHARMACOLOGICAL PROPERTIES**: Valsartan is nonpeptide and specific angiotensin II receptor blocker acting on the AT1 receptor subtype. It blocks the vasoconstrictor and aldosterone-secreting effects of angiotensin II by selectively blocking the binding of angiotensin II to the AT1 receptor in many tissues, such as vascular smooth muscle and the adrenal gland

**INDICATION**: Indicated for treatment of mild to moderate hypertension and heart failure. To reduce cardiovascular mortality in clinically stable patients with left ventricular failure or ventricular dysfunction following myocardial infarction.

**DOSAGE AND ADMINISTRATION: Hypertension:** starting dose of Valzaar (valsartan) is 80 mg or 160 mg once daily, dose may be increased to a maximum of 320 mg. Valzaar may be administered with other antihypertensive agents and may be administered with or without food. **Heart Failure:** Starting dose of valsartan is 40 mg twice daily, maximum daily dose administered in clinical trials is 320 mg in divided doses. **Pediatric Hypertension 6-16 years of age:** The usual recommended starting dose is 1.3 mg/kg once (up to 40 mg total daily), Doses higher than 2.7 mg/kg (up to 160 mg) once daily have not been studied in pediatric patients 6 to 16 years old.

**CONTRAINDICATION:** Do not use in patients with known hypersensitivity to any component and do not coadminister aliskiren with Valsartan in patients with diabetes.

**WARNINGS & PRECAUTIONS**: Fetal toxicity. When pregnancy is detected, discontinue product as soon as possible. Drugs that act directly on the renin-angiotensin system can cause injury and death to the developing fetus. Caution should be observed when initiating therapy in patients with heart failure or post-myocardial infarction patients for hypotension, impaired in renal function and hyperkalemia.

**DRUG INTERACTIONS**: Rifampin, cyclosporine and ritonavir.

**ADVERSE REACTIONS:** Headache, dizziness, upper respiratory infection, cough, diarrhea, rhinitis, sinusitis, nausea, pharyngitis, edema, and arthralgia, Impaired renal function, renal failure, allergic reaction and asthenia, palpitations, pruritus and rash, constipation, dry mouth, dyspepsia and flatulence, constipation, dry mouth, dyspepsia, hyperkalemia, flatulence, anxiety, insomnia, paresthesia, somnolence, dyspnea, vertigo, impotence, elevated liver enzymes, alopecia, vasculitis and rhabdomyolysis.

## **MARKETED BY:**



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(Additional information is available on request)