CALFLASH

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

Abbreviated Prescribing information for CALFLASH [Calcium carbonate 1.25gm equivalent to elemental calcium 500mg with Vitamin D_3 250 IU Tablets and Calcium carbonate 1.25gm equivalent to elemental calcium 500mg with Vitamin D_3 500 IU Tablets] [Please refer the complete prescribing information available at www.torrentpharma.com]

PHARMACOLOGICAL PROPERTIES: Vitamin D_3 increases the intestinal absorption of calcium. Administration of calcium and Vitamin D3 counteracts the increase of parathyroid hormone (PTH) which is caused by calcium deficiency and which causes increased bone resorption.

INDICATION: To be used during calcium deficiency, supplementation of calcium during growth, pregnancy, lactation or as directed by the Physician. It may be used as an adjunct to specific therapy for osteoporosis or as a therapeutic supplement in established osteomalacia, pregnant patients at high risk of needing such a therapeutic supplementation or malnutrition when dietary intake is less than that required.

DOSAGE AND ADMINISTRATION: *Adjunctive therapy in osteoporosis:* One tablet 2-3 times per day; *Calcium and Vitamin D3 deficiency:* Adults One tablet 2-3 times per day, Children One tablet 1-2 times per day; *Dosage in hepatic impairment* No dose adjustment is required; *Dosage in renal impairment* Should not be used in patients with severe renal impairment; *Pregnancy*: Do not exceed 1500 mg calcium and 600 IU Vitamin D3. Keep three to four hours administration difference with bisphosphonates/sodium fluoride and levothyroxine respectively.

CONTRAINDICATION: Contraindicated in Diseases and/or conditions resulting in hypercalcaemia and/or hypercalciuria, nephrolithiasis, hypervitaminosis D and hypersensitivity.

WARNINGS & PRECAUTIONS: Use cautiously or stop Calflash in elderly patients on cardiac glycosides or diuretics, and in patients with a high tendency to calculus formation, impaired renal function, sarcoidosis, milk alkali syndrome and immobilised patients with osteoporosis.

DRUG INTERACTIONS: Thiazide diuretics, systemic corticosteroid, ion exchange resins (cholestyramine)/laxatives (paraffin oil), tetracycline preparation, cardiac glycosides, bisphosphonates, sodium fluoride, quinolone antibiotics, oxalic acid and phytic acid.

ADVERSE REACTIONS: Hypercalcaemia, hypercalciuria, milk-alkali syndrome, constipation, dyspepsia, flatulence, nausea, abdominal pain, diarrhea, pruritus, rash and urticaria.

MARKETED BY:

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(Additional information is available on request)