

# 15-08-2022 3rd Copy

# RECADA® Capsule/Sachet

# QUALITATIVE AND QUANTITATIVE COMPOSITION

RECADA<sup>®</sup> 100mg Capsule Each capsule contains: Racecadotril Ph. Eur.....100mg RECADA<sup>®</sup>Infants Sachet 10mg Each sachet contains: Racecadotril Ph. Eur.....10mg RECADA® Children Sachet 30mg Each sachet contains:
Racecadotril Ph. Eur.....30mg

# PHARMACEUTICAL FORM

Capsule/Granules for oral suspension (Sachet).

# CLINICAL PARTICULARS

THERAPEUTIC INDICATIONS:

Capsule: Indicated for the symptomatic treatment of acute diarrhoea in adults when causal treatment is not possible

Sachet: Complementary symptomatic treatment of acute diarrhoea in infants (older than 3 months) and in children together with oral rehydration and the usual suppo measures, when these measures alone are insufficient to control the clinical condition, and when causal treatment is not possible.

f causal treatment is possible, RECADA® capsule/sachet can be administered as a complementary treatment with caution because RECADA® capsules contains lactose however, **RECADA**® sachet is lactose free

# POSOLOGY AND METHOD OF ADMINISTRATION:

Capsule:
For adults only: One capsule initially regardless of the time of day. Then, one capsule three times daily preferably before the main meals. Treatment should be continued until wo normal stools are recorded. Treatment should not exceed 7 days.

Caution is advised in patients with hepatic or renal impairment

RECADA® infants is intended for children <13kg. The recommended dose is determined according to body weight: 1.5mg/kg per dose (corresponding to 1 to 2 sachets), three times daily at regular intervals.

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  In infant less than 9kg: One 10mg sachet 3 times daily or as directed by physician.

  In infant from 09 -13kg: Two 10mg sachets 3 times daily, or as directed by the physician.

  In children from 13kg to 27kg: One 30mg sachet 3 times daily or as directed by physician.

In children of more than 27kg: Two 30mg sachets 3 times daily or as directed by physician.
The duration of treatment in the clinical trials with children was 5 days. Treatment should be continued until two normal stools are recorded. Treatment should not exceed 7

There are no clinical trials in infants fewer than 3 months of age. There are no studies in infants or children with renal impairment or hepatic impairment Caution is advised in patients with hepatic or renal impairment.

Method of administration: The granules can be added to food, dispersed in a glass of water or in the feeding-bottle, mixing well and followed by immediate administration

# CONTRAINDICATIONS:

- Hypersensitivity to the active substance
- Racecadotril capsule contains lactose. Patients with rare hereditary problems of galactose intolerance, the Lapp lactase deficiency or glucose-galactose malabsorptio should not take this medicine
- Racecadotril sachet contains sucrose. Patients with rare hereditary problems of fructose intolerance, glucose-galactose malabsorotion syndrome or sacchrase-iso maltos deficiency should not take this medicine

# SPECIAL WARNINGS AND PRECAUTIONS FOR USE:

- The administration does not modify the usual rehydration regimens. Rehydration is highly important in the management of acute diarrhoea in infants.

  The requirement for rehydration and route should be adapted to the age and weight of the patient and the stage and severity of the condition, specifically in case of serior

- or prolonged diarrhoea with significant vomiting or a lack of appetite.

  In the event of serious or prolonged diarrhoea with important vomiting or a lack of appetite, intravenous rehydration should be considered.

  The presence of bloody or prulent stools and fever may indicate the presence of invasive bacteria as a reason for diarrhoea, or the presence of other severe disease. Also racecadotril has not been tested in antibiotic-associated diarrhoea. Therefore, racecadotril should not be administered under these conditions.

- Chronic diarrhoea is known to be sufficiently studied with racecadotril.
- In patients with diabetes, it should be taken that each capsule contains lactose
- Racecadoril must not be administered to infants less than 3 months old, as there are no clinical trials in this population.

  Racecadoril must not be administered to infants less than 3 months old, as there are no clinical trials in this population.

  Racecadoril must not be administered to children with renal or liver impairment, whatever the degree of severity, due to a lack of information on these patient populations

  Because of possible reduced bioavailability, racecadotril must not be administered in cases of prolonged or uncontrolled vomiting.
- Occurrence of skin reactions are known to be reported. These are in most cases mild and do not require treatment but in some cases, they can be severe, even life threatening. Association with racecadotril cannot be fully excluded. When experiencing severe skin reactions, the treatment has to be stopped immediately

# INTERACTIONS WITH MEDICINAL PRODUCTS AND OTHER FORMS OF INTERACTIONS:

No interactions with other active substances have been described in humans to date. In humans, joint treatment with racecadotril and loperamide or nifuroxazide does no modify the kinetics of racecadotril.

# FERTILITY, PREGNANCY AND LACTATION:

Fertility: Fertility studies conducted with racecadotril on rats demonstrate no impact on fertility.

Pregnancy: There are no adequate data from the use of racecadotril in pregnant women. However, since no specific clinical studies are available, racecadotril should not be

reastfeeding: Due to the lack of information regarding racecadotril excretion in human milk, this medicinal product should not be administered to breastfeeding wome

# EFFECTS ON ABILITY TO DRIVE AND USE MACHINES:

Racecadotril has no or negligible influence on the ability to drive and use machines.

The following adverse drug reactions listed below have occurred with racecadotril more often:

Unknown: Erythema multiforme, tongue oedema, face oedema, lip oedema, eyelid oedema, angioedema, urticaria, erythema nodosum, rash papular, prurigo, pruritus



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No cases of overdose are known to be reported. In adults, single doses above 2q, which is equivalent to 20 times the therapeutic dose, have been administered, and no harmful effects have been described

# PHARMACOLOGICAL PROPERTIES

# PHARMACODYNAMIC PROPERTIES:

Therapeutic classification: Antidiarrhoeal. ATC code: A07XA04.

Mechanism of Action: Racecadotril is a pro-drug that needs to be hydrolyzed to its active metabolite thiorphan, which is an inhibitor of enkephalinase, a cell membrane peptidase enzyme located in various tissues, notably the epithelium of the small intestine. This enzyme contributes both to the digestion of exogenous peptides and to the preakdown of endogenous peptides such as enkephalins.

Racecadotril protects enkephalins from enzymatic degradation thereby prolonging their action at enkephalinergic synapses in the small intestine and reducing hypersecretion

Racecadotril is a pure intestinal anti-secretory active substance. It decreases the intestinal hypersecretion of water and electrolytes induced by the cholera toxin or nflammation, and does not have effects on basal secretory activity. Racecadotril exerts rapid antidiarrhoeal action, without modifying the duration of intestinal transit.

### PHARMACOKINETIC PROPERTIES:

bsorption: Following oral administration, racecadotril is rapidly absorbed. The exposure at steady state is comparable with the exposure following a single dose

Distribution: Ninety percent of the active metabolite of racecadorii (thiorphan=(RS)-N-(1-oxo-2-(mercaptomethyl)-3-phenylpropyl) glycin), is bound to plasma proteins, mainly to albumin. The duration and extent of the effect of racecadoriil are dose-dependent. Time to peak plasma enkephalinase inhibition is approximately 2 hours and corresponds to an inhibition of 90% with the dose of 1.5mg/kg. The duration of plasma enkephalinase inhibition is about 8 hours.

Metabolism: The half-life of racecadotril, measured as plasma enkephalinase inhibition, is approximately 3 hours. Racecadotril is rapidly hydrolysed to thiorphan (RS)-N-1-xxx-2-(mercaptomethyl)-3-phenylpropyl) glycin, the active metabolite, which is in turn transformed into inactive metabolites identified as sulfoxyde of S-methylthiorphan, S-methyl thiorphan, 2-methanesulfnylmethyl propionic acid and 2-methylsulfanylmethyl propionic acid, which all were formed at greater than 10% of parent drug systemic exposure. Additional minor metabolites were also detected and quantified in urine and faeces.

n the paediatric population, pharmacokinetic results are similar to those of the adult population, reaching Cmax at 2 hours 30 min after administration. There is no accumulation

Excretion: Racecadotril is eliminated as active and inactive metabolites. Elimination is mainly via the renal route (81.4%), and to a much lesser extent via the faecal route (around 8%). The pulmonary route is not significant (less than 1% of the dose).

See expiry on the pack

### AVAII ARII ITY

RECADA® 100mg capsule in a pack of 10's

RECADA® Infants sachet 10mg in a pack of 16's

RECADA® Children sachet 30mg in a pack of 10's

Dosage: As advised by the physician.
To be sold on the prescription of a registered medical practitioner only.
Keep out of reach of children.

For Capsule: Do not store over 30°C, and protect from heat, light and moistur For Sachet: Avoid exposure to heat, light and humidity. Store between 15 to 30°C.

Improper storage may deteriorate the medicine.

ری کبیدا<sup>®</sup> کیپول/ساشے (ریسیکا ڈوٹرل) ہدایات: خوراک: ڈاکٹر کہ دایت کے مطابق استعال کریں۔

صرف رجسڑ ڈ ڈاکٹر کے نشخ کےمطابق فروخت کریں۔

رے بہ طرورہ بچل کی پیچے سے دور کئیں۔ برائے کمپیول: دواکو ۴۰ ڈگری پینٹی گریڈے نیادہ درجہ ترارت پرندر کئیں، گرمی ، روشنی اورنمی سے محفوظ کئیں۔ برائے ساشے: دواکوگرمی، روشنی اورنمی سے محفوظ ۱۵ اسے ۴۰۰ ڈگری

سینٹی گریڈ کے درمیان میں رکھیں۔

ورنه دواخراب ہوجا ئیگی۔

Manufactured by: **SAMI Pharmaceuticals (Pvt.) Ltd.** F-95, S.I.T.E., Karachi-Pakistan www.samipharmapk.com Mfg. Lic. No. 000072

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R.N-05/NA/08/2022\_For Capsule