

MOODNOR

NORTRIPTYLINE HCL BP

Compositions:

Each film coated tablet contains Nortriptyline HCl BP equivalent to Nortriptyline 10 mg.

Pharmacology:

Nortriptyline is a tricyclic antidepressant. The mechanism of action of tricyclic antidepressants are at present unknown. Nortriptyline is not a monoamine oxidase inhibitor. It inhibits the activity of such diverse agents as histamine, 5-hydroxytryptamine and acetylcholine. It increases the pressor effect of norepinephrine but blocks the pressor response of phenethylamine. Studies suggest that Nortriptyline interferes with the transport, release and storage of catecholamines.

Dosage And Administration:

Depression: Adult: Low dose initially increased as necessary to 75-100 mg daily in divided doses or as a single dose (max. 150 mg daily). Adolescent & Elderly: 30-50 mg daily in divided doses; Child not recommended for depression. Nocturnal enuresis: Child 7 years 10 mg, 8-11 years 10-20 mg, over 11 years 25-35 mg, 30 minutes before bedtime; max period of treatment (including gradual withdrawal) 3 months—full physical examination and ECG before further course.

Contraindications:

Nortriptyline is contraindicated in patients with hypersensitivity to nortriptyline. Concomitant administration with MAOI is contraindicated. Do not use with or within 2 weeks of stopping an OI. Nortriptyline is contraindicated during the acute recovery period after myocardial infarction.

Warning And Precaution:

Nortriptyline should be used cautiously in patients with cardiovascular disease; patients with concomitant conditions such as hyperthyroidism and pheochromocytoma. Care is also needed in patients with epilepsy and diabetes. Tricyclic antidepressant drugs have antimuscarinic activity and therefore caution is needed in patients with prostatic hypertrophy, chronic constipation, increased intra-ocular pressure, urinary retention or those with a susceptibility to angle-closure glaucoma. Elderly patients are particularly susceptible to many of the side-effects of tricyclic antidepressants; low initial doses should be used with close monitoring, particularly for psychiatric and cardiac side-effects.

Side Effects:

The most common side effects include dry mouth, sedation, constipation and increased appetite, mild blurred vision, tinnitus, often euphoria and mania. An occasional side effect is a rapid or irregular heartbeat. Alcohol may exacerbate some of its side effects and should be avoided.

Use in Pregnancy and Lactation:

The safety of nortriptyline for use in pregnancy has not been established. Nortriptyline should only be given during pregnancy when there are no alternatives and benefit outweighs risk.

Drug Interaction:

Nortriptyline should not be given with adrenaline, ephedrine, isoprenaline, noradrenaline, phenylephrine, phenylpropanolamine, drugs that are metabolized by CYP4502D6, MAOIs, guanethidine, debrisoquine, bethanidine, clonidine and reserpine etc. Barbiturates may increase the rate of metabolism of nortriptyline.

Overdosage:

The symptoms and the treatment of an overdose are largely the same as for the other tricyclic antidepressants. As tricyclic antidepressants have a relatively narrow therapeutic index, the likelihood of overdose (both accidental and intentional) is fairly high and should be considered carefully by the prescribing physician prior to patient use.

Storage:

Store at 15-30°C. Protect from light and moisture.

Packing:

Each box contains 20 blister strips of 10 tablets.

Manufactured By:

The IBN SINA Pharmaceutical Industry PLC.

Shafipur, Gazipur, Bangladesh.