1.6.3 Patient Information Leaflet (PIL)

1. Name of the Finished Pharmaceutical Product

1.1 Product name:
DESLORASTAL
(DESLORATADINE SYRUP 2.5MG/ 5ML)

1.2 Strength:
Each 5 ml contains:
Desloratadine BP 2.5 mg
Excipients Q.S
Colour: Sunset yellow FCF

1.3 Pharmaceutical dosage forms:
Oral-Liquid Syrup

2. Qualitative and Quantitative composition:

Sr. No.	Ingredients	Label Claim (mg)	Actual Qty/5 ml (mg)	Actual Qty/60 ml (gm)	Actual Qty/batch (kg)	Function
Active						
1.	Desloratadine BP	2.5	2.500	0.030	0.500	Anti-histamine
Excipients						
2.	Sucrose BP	----	2250.000	27.000	450.000	Syrup Base
3.	Sodium Methyl Paraben BP	----	15.000	0.180	3.000	Preservative
4.	Sodium Propyl Paraben BP	----	5.000	0.060	1.000	Preservative
5.	Anhydrous Citric Acid BP	----	11.000	0.132	2.200	Sequestering agent
6.	Glycerin BP	----	250.000	3.000	50.000	Solvent
7.	Liquid Glucose BP	----	750.000	9.000	150.000	Sweetener
8.	Disodium Edetate BP	----	5.000	0.060	1.000	Chelating agent
9.	Propylene glycol BP	----	750.000	9.000	150.000	Water-miscible co-solvent
10.	Sunset yellow colour IHS	----	0.150	0.180	0.030	Colourant
11.	Sodium benzoate BP	----	15.000	0.180	3.000	Preservative
12.	Sodium citrate BP	----	15.000	0.180	3.000	Buffering agent
13.	Essence liquid orange IHS	----	0.015 ml	1.8 ml	3.00 Lit	Flavour

14.	Purified water BP	----	Q.S. To 5 ml	Q.S. To 60 ml	Q.S. To Batch	Solvent

3. Pharmaceutical forms

Orange coloured clear liquid

4. Clinical Particulars

4.1 Therapeutic Indications

It is indicated for the relief of symptoms associated with seasonal and perennial allergic rhinitis, such as sneezing, nasal discharge and itching, congestion/stuffiness, as well as ocular itching, tearing and redness, itching of palate and coughing.

Desloratadine is also indicated for the relief of symptoms associated with chronic idiopathic urticaria such as the relief of itching and the size and number of hives.

4.2 Posology and Method of administration

Children 2 through 5 years of age:
2.5 ml (1.25 mg) Lora D syrup once a day, with or without a meal

Children 6 through 11 years of age:
5 ml (2.5 mg) Lora D syrup once a day, with or without a meal

In adults and adolescents (12 years of age and over):
10 ml (5 mg)
Desloratadine once a day, with or without a meal

4.3 Method of administration

For Oral use only

4.4 Contraindications

Hypersensitivity to the active substance or to any of the excipients

4.5 Special warning and precaution for use

Desloratadine lacks significant sedative effects; however, some individuals may still experience the sedative effects.

4.6 Paediatric population

Safety and efficacy of Desloratadine in children under 12 years of age have not been established.

4.7 Interaction with other medicinal products and other forms of interactions

Concomitant use of Desloratadine with inhibitors of the cytochrome P-450 enzyme system, such as cimetidine, ketoconazole, clarithromycin and erythromycin, may increase the plasma concentration of Desloratadine.

4.8 Additional information on special populations

Not Available

4.9 Paediatric population

Safety and efficacy of Desloratadine in children under 12 years of age have not been established.

4.10 Fertility, pregnancy and lactation

The safe use of Desloratadine during pregnancy has not been established. Therefore, Desloratadine is not to be used during pregnancy unless clearly indicated. Desloratadine passes into breast milk. Hence the use of Desloratadine by breastfeeding mothers is not recommended.

4.11 Effects on ability to drive and use machines

A few patients treated with non-sedating anti-histamines have experienced drowsiness. Therefore it is prudent to exercise caution before driving or operating machinery. The effect of a drug on a particular patient can be ascertained after the first few doses.

4.12 Undesirable effects

Common side effects are found: Pharyngitis, dry mouth or throat, somnolence, headache, fatigue, myalgia, nausea, dizziness.
Children: fever, diarrhea, upper respiratory infections, irritability, coughing.

4.13 Overdose

In the event of overdose, consider standard measures to remove unabsorbed active substance. Symptomatic and supportive treatment is recommended.

Desloratadine is not eliminated by haemodialysis; it is not known if it is eliminated by peritoneal dialysis.

5. Pharmacological properties

5.1 Pharmacodynamic Properties

Pharmacotherapeutic group: Antihistamine
ATC code: R06AX27

Mechanism of action:
Desloratadine competes with free histamine for binding at H1-receptors in the GI tract, uterus, large blood vessels, and bronchial smooth muscle. This block the action of endogenous histamine, which subsequently leads to temporary relief of the negative symptoms (eg. nasal congestion, watery eyes) brought on by histamine.

5.2 Pharmacokinetic Properties

Absorption
The pharmacokinetic profile of Desloratadine was evaluated in a three-way crossover study in 30 adult volunteers. A single dose of 10 mL of Desloratadine containing 5 mg of Desloratadine was bioequivalent to a single dose of 5 mg Tablet. Food had no effect on the bioavailability (AUC and Cmax) of Desloratadine.

Distribution
Desloratadine and 3-hydroxyDesloratadine are approximately 82% to 87% and 85% to 89%, bound to plasma proteins, respectively. Protein binding of Desloratadine and 3-hydroxyDesloratadine was unaltered in subjects with impaired renal function.

Metabolism
Desloratadine (a major metabolite of loratadine) is extensively metabolized to 3-hydroxyDesloratadine, an active metabolite, which is subsequently glucuronidated. The enzyme(s) responsible for the formation of 3-hydroxyDesloratadine have not been identified. Data from clinical trials indicate that a subset of the general population has a decreased ability to form 3-hydroxyDesloratadine, and are poor metabolizers of Desloratadine. In pharmacokinetic studies (n=3748), approximately 6% of subjects were poor metabolizers of Desloratadine (defined as a subject with an AUC ratio of 3-hydroxyDesloratadine to Desloratadine less than 0.1, or a subject with a Desloratadine half-life exceeding 50 hours). These pharmacokinetic studies included subjects between the ages of 2 and 70 years, including 977 subjects aged 2–5 years, 1575 subjects aged 6–11 years, and 1196 subjects aged 12–70 years. There was no difference in the prevalence of poor metabolizers across age groups. The frequency of poor metabolizers was higher in Blacks (17%, n=988) as compared to Caucasians (2%, n=1462) and Hispanics (2%, n=1063). The median exposure (AUC) to Desloratadine in the poor metabolizers was approximately 6-fold greater than in the subjects who are not poor metabolizers. Subjects who are poor metabolizers of Desloratadine cannot be prospectively identified and will be exposed to higher levels of Desloratadine following dosing with

the recommended dose of Desloratadine. In multidose clinical safety studies, where metabolizer status was identified, a total of 94 poor metabolizers and 123 normal metabolizers were enrolled and treated with Desloratadine for 15–35 days. In these studies, no overall differences in safety were observed between poor metabolizers and normal metabolizers. Although not seen in these studies, an increased risk of exposure-related adverse events in patients who are poor metabolizers cannot be ruled out.

Elimination
The mean elimination half-life of Desloratadine was 27 hours. Cmax and AUC values increased in a dose proportional manner following single oral doses between 5 and 20 mg. The degree of accumulation after 14 days of dosing was consistent with the half-life and dosing frequency. A human mass balance study documented a recovery of approximately 87% of the 14C-Desloratadine dose, which was equally distributed in urine and feces as metabolic products. Analysis of plasma 3-hydroxyDesloratadine showed similar Tmax and half-life values compared to Desloratadine.

5.3 Preclinical Safety data

Not Applicable

6. Pharmaceutical Particulars

6.1 List of Excipients

Sucrose
Sodium Methyl Paraben
Sodium Propyl Paraben
Anhydrous Citric Acid
Glycerin
Liquid Glucose
Disodium Edetate
Propylene glycol
Sunset yellow colour
Sodium benzoate
Sodium citrate
Essence liquid orange
Purified water

6.2 Incompatibilities

None known.

6.3 Shelf Life

24 months from the date of manufacturing