

# Novatac<sup>®</sup>

## Description

Novatac<sup>®</sup> is a chemically novel competitive H<sub>2</sub> receptor antagonist with a guanidinothiazole ring. Is rapidly absorbed with dose related peak plasma concentrations reached in one to three hours. When used as recommended there was no accumulation effect with repeated doses.

## Indications:

- Duodenal ulcer
- Maintenance of prevention of recurrence of duodenal ulcer
- Benign gastric ulcer
- Zollinger-Ellison syndrome

## Dosage and administration:

**Adult dosage:** In benign gastric and duodenal ulceration, the dose one Novatac<sup>®</sup> 40mg tablet at night. It is not necessary to time the dose in relation to meals. Bioavailability of Novatac<sup>®</sup> is not clinically affected by food in stomach. In all cases clinical response of the patient should be taken into consideration.

**Duodenal ulcer:** The recommended initial dose is one Novatac<sup>®</sup> 40mg tablet at night. Treatment should continue for 4-8 weeks. In most patients, healing occurs on this regimen within 4 weeks. In those patients whose ulcers have not healed completely after 4 weeks a further 4 weeks period of treatment is recommended.

**Maintenance of prevention of recurrence of duodenal ulcer:** One Novatac<sup>®</sup> 20mg tablet at night. The 20mg dose has been effectively continued in clinical studies of 12 months duration.

**Benign gastric ulcer:** One Novatac<sup>®</sup> 40mg tablet at night. Treatment should continue for 4-8 weeks unless endoscopy reveals earlier healing.

**Zollinger-ellison syndrome:** Patients without prior antisecretory therapy should be started with Novatac<sup>®</sup> 20mg tablet every six hourly. Dosage should then be adjusted to individual response Doses up to 800mg daily have been used up to one year without the development of significant adverse effects or tachyphylaxis. Patients who have been receiving another H<sub>2</sub> antagonist may be switched directly to Novatac<sup>®</sup> at a dose higher than that recommended for new cases. This starting dose will depend on the severity of the condition and the last dose of H<sub>2</sub> antagonist previously used.

## Use in elderly

The recommended dosage in most elderly patients is the same as in younger patients for all indications. No change in the incidence or type of side effects were seen in treated elderly patients.

**Use in elderly**

The efficacy and safety of Famotidine in children have not been established.

**Use in pregnancy**

Famotidine is not recommended for use in pregnancy and should be prescribed only if clearly needed.

**Use in lactating mother**

Famotidine is secreted in human milk, therefore lactating mothers should either stop breast feeding or stop taking the drug.

**Paediatric Use**

The safety and effectiveness of Rabeprazole in pediatric patients have not been established.

**Geriatric use**

No overall differences in safety or effectiveness were observed between these subjects and younger subjects.

**Precautions**

Gastric carcinoma: Gastric malignancy should be excluded prior to initiation of therapy of gastric ulcer with Famotidine. Use in impaired renal function: Since Famotidine is excreted primarily by the kidney, caution should be observed. The dose should be reduced to 20mg at night if creatinine clearance falls below 10ml/min.

**Side effects**

Famotidine is generally well tolerated. Headache, dizziness, constipation and diarrhea have been reported rarely and nausea. Other side effects e.g., dry mouth, nausea, vomiting, abdominal discomfort or distension, anorexia, cholestatic jaundice, anaphylaxis, angioedema, arthralgia have been reported even less frequently.

**Contra-indications**

Famotidine is contra-indicated in patients with known hypersensitivity to Famotidine or to any component of the formulation.

**Overdose**

There has been no experience to date with overdosage. In case of overdosage, the usual measures to remove unabsorbed material from the gastro-intestinal tract, clinical monitoring and supportive therapy should be employed.

**Warnings**

Clarithromycin should not be used in pregnant women except in clinical circumstances where no alternative therapy is appropriate. If pregnancy occurs while taking clarithromycin, the patient should be appraised of the potential hazards to the fetus. Amoxicillin: serious and occasionally fatal hypersensitivity (anaphylactic) reactions have been reported in patients on penicillin therapy. These reactions are more likely to occur in individuals with a history of penicillin hypersensitivity and/or a history of sensitivity to multiple allergens.

**Drug Interactions**

No clinically important drug interactions have been identified. Famotidine does not interact with the cytochrome P450 (CYP450)-linked drug metabolizing enzyme system.

**Pharmaceutical precautions**

Store in a cool and dry place. Protect from light & moisture.

**Package quantities**

Novatac<sup>®</sup> 20 Tablets: Carton of 100 tablets in blister. Novatac<sup>®</sup> 20 Tablets: Carton of 100 tablets in blister.

<sup>®</sup> Registered Trade Mark



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