

# Coderin<sup>®</sup>

## Description

Loratadine is an antihistamine. It is a long acting tricyclic antihistamine with selective peripheral H<sub>1</sub>- receptor antagonistic activity and no central sedative or anticholinergic effect. Pseudoephedrine acts as a decongestant. It constricts blood vessels, by decreasing blood flow and decreases congestion.

## Uses

Coderin<sup>®</sup> tablet should be administered when both the antihistaminic properties of Loratadine and the nasal decongestant activity of Pseudoephedrine are desired.

Coderin<sup>®</sup> is indicated for the relief of following symptoms due to hay fever or other upper respiratory allergies:

- nasal congestion
- runny nose
- sneezing
- itchy, watery eyes
- itching of the nose or throat
- swelling of nasal passages
- sinus congestion and pressure

## Dosage and administration

### **Adults and children over 12 years:**

Coderin<sup>®</sup> 5 tablet: One tablet twice daily (every 12 hours)

Coderin<sup>®</sup> 10 tablet: One tablet once daily and to be taken in the morning instead of night.

Patients with renal insufficiency (GFR <30 ml/min) should be given a lower initial dose (one Coderin<sup>®</sup> 5 tablet per day, or one Coderin<sup>®</sup> 10 tablet every alternate day) because they have reduced clearance of Loratadine and Pseudoephedrine.

Patients who have a history of difficulty in swallowing tablets or who have known upper gastrointestinal narrowing or abnormal esophageal peristalsis should not use Coderin<sup>®</sup> 10 tablet.

## Use in pregnancy

Pregnancy category B: no evidence of risk in human is reported.

## Paediatric use

Safety and effectiveness in children below the age of 12 years have not been established.

## Use in patients approximately 60 years of age and older

The safety and efficacy of Coderin<sup>®</sup> tablet in patients greater than 60 years old have not been investigated in placebo-controlled clinical trials. The elderly is more likely to have adverse reactions to sympathomimetic amines.

**Use in nursing mother**

It is not known if this combination product is excreted in human milk. However, both Loratadine and Pseudoephedrine when administered alone passed into breast milk, so it should not be administered to lactating mother.

**Precautions**

Coderin<sup>®</sup> tablet should generally be avoided in patients with hepatic insufficiency. Patients with renal insufficiency should be given a lower initial dose because they have reduced clearance of Loratadine and Pseudoephedrine. As because the doses of this fixed combination product cannot be individually titrated and hepatic insufficiency results in a reduced clearance of Loratadine to a much greater extent than Pseudoephedrine.

**Side effects**

In general it is well tolerated. Clinical trial suggests a very low of adverse effects commonly reported is dry mouth, somnolence, insomnia, pharyngitis, dizziness, coughing, fatigue, nausea, nervousness, anorexia, dysmenorrheal and headache. Other less common side effects may include; increased sweating, thirst, back pain, chest pain, malaise, palpitations, hypertension, tachycardia, abdominal distension, altered taste, flatulence, myalgia, dry throat, agitation, micturation frequency etc.

**Contraindications**

Coderin<sup>®</sup> tablet is contraindicated in patients who are hypersensitive to any component of this product.

**Warnings**

Coderin<sup>®</sup> tablet should be used with caution in patients with hypertension, diabetes mellitus, ischemic heart disease, increased intraocular pressure, hyperthyroidism, renal impairment, or with accompanying hypotension may be produced by sympathomimetic amines.

**Overdose**

In the event of overdosage, general symptomatic and supportive measure should be instituted promptly and maintained for as long as necessary. Treatment of overdose would reasonably consist of emesis (ipecac syrup), except in patients with impaired consciousness, followed by the administration of activated charcoal to absorb any remaining drug. If vomiting is unsuccessful, or contraindicated, gastric lavage should be performed with normal saline.

**Drug interactions**

Coderin<sup>®</sup> tablet is contraindicated in patients taking monoamino oxidase (MAO) inhibitors and for 2 weeks after stopping use of an MAO inhibitor. The antihypertensive effects of beta-adrenergic blocking agents, methyldopa, reserpine and veatumr alkaloids may be reduced by sympathomimetics. Increased ectopic pacemaker activity can occur when Pseudoephedrine is used concomitantly with digitalis. Concomitantly administration of Erythromycin, Ketoconazole and Cimetidine increases plasma concentration of both Loratadine and Decarboethoxyloratadine. But there were no clinically relevant changes in the safety profile of Loratadine.

**Pharmaceutical precautions**

Store in a cool, dry place. Protect from light

**Presentation**

Coderin<sup>®</sup> 5 tablet: A round shaped extended release tablet. Each tablet contains Loratadine USP 5mg and Pseudoephedrine Hydrochloride BP 120mg.

Coderin<sup>®</sup> 10 tablet: A round shaped extended release tablet. Each tablet contains Loratadine USP 10mg and Pseudoephedrine Hydrochloride BP 240mg.

**Packaging quantities**

Coderin<sup>®</sup> 5 tablet: Carton of 50 tablets in Alu-PVC blister.  
Coderin<sup>®</sup> 10 tablet: Carton of 50 tablets in Alu-PVC blister.

® Registered Trade Mark



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