

CARDINOL

25/50/100 mg

GENERIC NAME: Atenolol

PHARMACOLOGICAL CLASS: Beta- adrenergic blocking agent (B1 selective)

THERAPEUTIC CATEGORY: Antihypertensive

COMPOSITION AND PRESENTATION:

Cardinol 25:

Composition:

Each uncoated tablet contains: Atenolol BP 25 mg.

Presentation:

30 tablets X 5 blisters

Cardinol 50:

Composition:

Each uncoated tablet contains: Atenolol BP 50 mg

Presentation:

30 tablets X 5 blisters

Cardinol 100:

Composition:

Each uncoated tablet contains: Atenolol BP 100 mg.

Presentation:

30 tablets X 5 blisters

MOLECULAR INTRODUCTION:

Cardinol is a beta-adrenergic blocking agent. It lowers the systolic and diastolic blood pressure by 15 to 20 % in a single drug treatment. In a long-term treatment; it has the ability to reduce cardiovascular mortality. For chronic Angina Pectoris the frequency of attacks, the occurrence of silent ischemia and the risk of infarction are greatly reduced. A long term treatment after infarction can reduce the risk of re-infarction and cardiovascular mortality.

MECHANISM OF ACTION:

Atenolol blocks the action of the sympathetic nervous system, which stimulates the pace of the heart beat. By blocking the action of these nerves, atenolol reduces the heart rate and is useful in treating abnormally rapid heart rhythms. Atenolol also reduces the force of heart muscles contraction and lowers blood pressure. By reducing the heart rate and the force of muscle contraction, atenolol reduces heart muscle oxygen demand. When oxygen demand of the heart exceeds supply, atenolol is helpful in treating angina.

INDICATIONS:

Treatment of angina pectoris due to coronary atherosclerosis
Hypertension, as a step 1 agent, alone or with other drugs, especially diuretics
Treatment of myocardial infarction

DOSAGE AND ADMINISTRATION:

Cardinol should be taken before meals or at bedtime.

HYPERTENSION

The initial dose can be started with cardinal 25 one tablet a day, either alone or added to diuretic therapy. if an optimal response is not achieved, the dosage should be titrated to cardinol 50-100 ,one tablet a day.

ANGIA PECTORIS

The initial dose can be started with cardinol 25 one tablet a day .if an optimal response is not achieved within one week, the dosage should be titrated to cardinol 50-100, one tablet a day.

PHARMACOKINETICS

Absorption: Absorption is rapid and consistent but incomplete; about 50% of an oral dose is absorbed in the GI tract; plasma levels peak 2-4 hr after oral admin.

Distribution:

6-16% bound to plasma proteins.

Metabolism:

Little or no hepatic metabolism.

Excretion:

50% of the oral dose is removed unchanged in the faeces; absorbed drug is removed mainly via renal elimination; half-life is about 6-7 hr.

SIDE EFFECTS:

serious side effects includes:

- slow or uneven heartbeats;
- feeling light-headed, fainting;
- feeling short of breath, even with mild exertion;
- swelling of your ankles or feet;
- nausea, stomach pain, low fever, loss of appetite, dark urine, clay-colored stools, jaundice (yellowing of the skin or eyes);
- depression; or
- cold feeling in your hands and feet.

Less serious side effects may include:

- decreased sex drive, impotence, or difficulty having an orgasm;
- sleep problems (insomnia);
- tired feeling; or
- anxiety, nervousness.

CONTRAINDICATION:

- bradycardia (pulse less than 50 bpm)
- cardiogenic shock
- asthma (may cause broncho-constriction).
- symptomatic hypotension (blood pressure of less than 90/60 mm Hg with dizziness, vertigo etc.)
- angina of the Prinzmetal type (vasospastic angina)
- metabolic acidosis (a severe condition with a more acidic blood than normal)
- severe disorders in peripheral arterial circulation
- AV-Blockage of second and third degree (a particular form of arrhythmia)
- acutely decompensated congestive heart failure (symptoms may be fluid retention with peripheral edema and/or abdominal fluid retention (ascites), and/or lung edema)
- sick sinus syndrome (a particular form of arrhythmia)
- hypersensitivity and/or allergy to atenolol
- pheochromocytoma (a rare type of tumor of the adrenal glands)

Atenolol should not be taken by patients with preexisting bronchial asthma, and only if clearly needed during pregnancy, as atenolol may retard fetal growth and possibly cause other abnormalities

For further information, please contact:

Market Planning Department



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