

LOTAN-H
(LOSARTAN POTASSIUM + HYDROCHLOROTHIAZIDE)

GENERIC NAME: Losartan Potassium & Hydrochlorothiazide

PHARMACOLOGICAL CATEGORY: Angiotensin receptor blocker (ARB) and a diuretic

DRUG CATEGORY: Antihypertensive

COMPOSITION & PRESENTATION:

Composition:

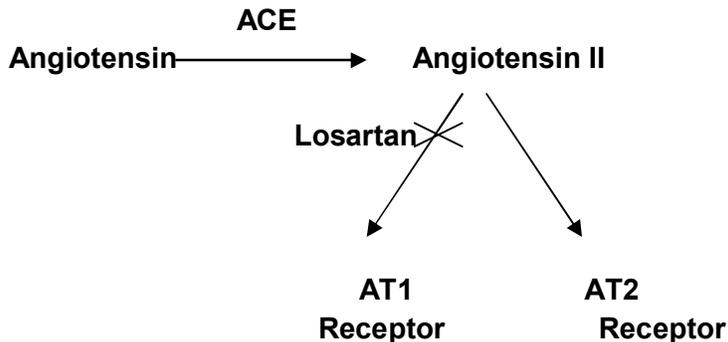
Each tablet contains Losartan Potassium 50 mg + Hydrochlorothiazide 12.5 mg per tablet.

Presentation:

10 Tablets x 10 Blisters

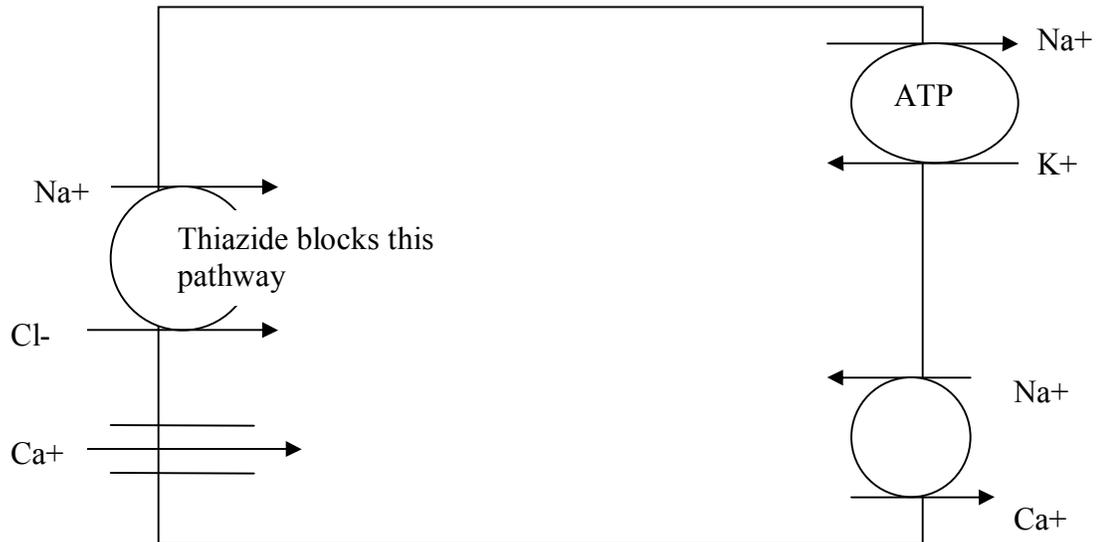
MECHANISM OF ACTION:

- **Losartan:** Losartan and its principal active metabolite block the vasoconstrictor and Aldosterone secreting effects of Angiotensin II by selectively blocking the binding of Angiotensin II to the AT1 receptor found in many tissues e.g., vascular smooth muscle, adrenal gland.



- **Hydrochlorothiazide:** It is thiazide diuretic. It blocks the Na/Cl transporter in the distal convoluted tubule, resulting in decreased NaCl reabsorption and eventual reduced blood volume, reduced venous pressure & reduced preload. Thiazides enhance Ca reabsorption in the distal convoluted tubule, perhaps by Na/Ca exchange. Indirectly, the diuretic action of hydrochlorothiazide reduces plasma volume, with consequent increase in plasma renin activity, increase in aldosterone secretion, increase in urinary potassium loss, and decrease in serum potassium. The renin aldosterone link is mediated by angiotensin II so coadministration of angiotensin II receptor antagonist tends to reverse the potassium loss associated with these diuretics.

DISTAL CONVOLUTED TUBULE



INDICATIONS:

- It is indicated for the treatment of hypertension in patients not adequately controlled with Losartan alone. This fixed dose combination is not indicated for the initial therapy.
- It is now indicated to reduce the risk of stroke in patients with hypertension and left ventricular hypertrophy (LVH),

DOSAGE:

- One tablet of Lotan-H once daily with or without food.
- If blood pressure remains uncontrolled after three weeks of therapy, the dose may be increased to two tablets once daily.
- More than two tablets once daily is not recommended.

PHARMACOKINETICS:

ABSORPTION:

Losartan

It is well absorbed following oral administration and undergoes excessive first pass metabolism. Bioavailability is -33%.

Hydrochlorothiazide

It is variably absorbed from GI tract.

HALF LIFE:

Losartan -2hrs

Hydrchlorothiazide-5.6 to 14.8 hrs.

EXCRETION:

Losartan-Biliary

Hydrochlorothiazide-Renal

ONSET OF ACTION:

Losartan- max effect seen after 6hrs

Hydrochlorothiazide- 2 hours and the peak action in about 4 hours.

DURATION OF ACTION:

Losartan- 24hrs

Hydrochlorothiazide- 6 to 12 hrs.

ADVERSE EFFECTS:

- Mostly found side effects are Dizziness, upper respiratory infection.
- Losartan Potassium: chest pain, facial edema, fever, orthostatic effects, syncope.
- Hydrochlorothiazide: weakness

For further information, please contact:

Market Planning Department



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A Systemic Care Division of DJPL