

# Kofarest-<sup>TM</sup>PD

Drops

---

## 1. Generic Names

Levosalbutamol	0.25g
Ambroxol	7.5mg
Guaiphenesin	12.5 mg

## 2. Qualitative and Quantitative Composition

Each ml contains

Levosalbutamol	0.25g
Ambroxol	7.5mg
Guaiphenesin	12.5 mg

## 3. Dosage form and strength

Oral drop solution containing Levosalbutamol 0.25g, Ambroxol 7.5mg, Guaiphenesin 12.5 mg.

## 4. Clinical particulars

### 4.1 Therapeutic indication

Kofarest-PD drops is indicated for the treatment of symptomatic relief of bronchospasm in bronchial asthma & chronic bronchitis

### 4.2 Posology and method of administration

The usual recommended dose of KOFAREST-PD Drops in children is:

- 1-2 years age: 0.8 ml thrice a day
- 2-3 years age: 1.2 ml thrice a day.

### 4.3 Contraindication

Kofarest-PD drops are contraindicated in patients with hypersensitivity to any ingredient of the formulation.



*We Impart Health to Life*

#### **4.4 Special warnings and precautions for use**

- While treating cough as a symptom, it is important to make every effort to determine and treat appropriately the underlying cause, such as a specific infection.
- Caution should be observed while prescribing Kofarest-PD drops to children with hypertension, cardiovascular disease, uncontrolled juvenile diabetes mellitus, hyperthyroidism, and seizures or in patients who are unusually hypersensitive to sympathomimetic amines.

#### **4.5 Drug interactions**

- Hypokalaemia with high doses of  $\beta_2$  -agonists may result in increased susceptibility to digitalis induced cardiac arrhythmias.
- Hypokalaemia may be enhanced by concomitant administration of aminophylline or other xanthine, corticosteroids or by diuretic therapy.
- Other sympathomimetic bronchodilators or epinephrine should not be used concomitantly with salbutamol, since their combined effect on the cardiovascular system may be deleterious to the patient.
- Salbutamol should be administered with caution in patients being treated with monoamine oxidase (MAO) inhibitors or tricyclic antidepressants, since the action of salbutamol on the vascular system may be potentiated.

#### **4.6 Use in special population**

- Pediatric: safe in children.
- Geriatric: Safety is not evaluated in elderly patients.
- Liver impairment: use with caution.
- Renal failure: use with caution.
- Pregnancy and lactation: Kofarest PD drops is not recommended for use in pregnant and lactating women unless absolutely necessary.

#### **4.7 Effects on ability to drive and use machine**

Patients should be cautioned against engaging in activities requiring complete mental alertness, and motor coordination such as operating machinery until their response to Kofarest PD drops is known.

#### **4.8 Undesirable effects**

An adverse drug reaction includes Tachycardia, Palpitations, Hypoacusis, Vision blurred, Nausea, Vomiting, Drug ineffective, Drug hypersensitivity, Pneumonia, Medication error, Hear rate increased, Hypokalaemia, Tremor, Dizziness, Headache, Nervousness, Insomnia, Dyspnoea, Asthma, Pruritus, Thrombocytopenia, Eosinophilia, Cardiac flutter, Vascular malformation, Vertigo, Tinnitus, Eyelid edema, Diarrhoea, Chest pain, Chills, Hepatic function abnormal,



*We Impart Health to Life*

Anaphylactic shock, Conjunctivitis, Infusion related reaction, Blood pressure increased, Decreased appetite, Pain in extremity, Dysuria, Genital erosion, Rash, Flushing, Anemia, Incorrect product administration duration, Accidental overdose, Muscle spasm, Vaginal haemorrhage, Prostatomegaly.

#### **4.9 Overdose**

There is limited experience of overdose with Kofarest PD drops. Initiate general symptomatic and supportive measures in all cases of overdosages where necessary.

### **5. Pharmacological properties**

#### **5.1 Mechanism of action**

- Activation of  $\beta_2$  adrenergic receptors on airway smooth muscle leads to the activation of adenylate cyclase and to an increase in the intracellular concentration of 3',5'-cyclic adenosine monophosphate (cyclic AMP). The increase in cyclic AMP is associated with the activation of protein kinase A, which in turn, inhibits the phosphorylation of myosin and lowers intracellular ionic calcium concentrations, resulting in muscle relaxation. Levosalbutamol relaxes the smooth muscles of all airways, from the trachea to the terminal bronchioles. Increased cyclic AMP concentrations are also associated with the inhibition of the release of mediators from mast cells in the airways. Levosalbutamol acts as a functional agonist that relaxes the airway irrespective of the spasmogen involved, thereby protecting against all Broncho constrictor challenges.
- Ambroxol is a mucolytic agent. Excessive Nitric oxide (NO) is associated with inflammatory and some other disturbances of airways function. NO enhances the activation of soluble guanylate cyclase and cGMP accumulation. Ambroxol has been shown to inhibit the NO-dependent activation of soluble guanylate cyclase. It is also possible that the inhibition of NO-dependent activation of soluble guanylate cyclase can suppress the excessive mucus secretion; therefore it lowers the phlegm viscosity and improves the mucociliary transport of bronchial secretions.
- Guaifenesin may act as an irritant to gastric vagal receptors, and recruit efferent parasympathetic reflexes that cause glandular exocytosis of a less viscous mucus mixture. Cough may be provoked. This combination may flush tenacious, congealed mucopurulent material from obstructed small airways and lead to a temporary improvement in dyspnea or the work of breathing.

#### **5.1 Pharmacodynamics properties**

- Like other bronchodilators, Levosalbutamol acts by relaxing smooth muscle in the bronchial tubes, and thus shortening or reversing an acute "attack" of shortness of breath or difficulty breathing.

- Guaifenesin is an expectorant which increases the output of phlegm (sputum) and bronchial secretions by reducing adhesiveness and surface tension. The increased flow of less viscous secretions promotes ciliary action and changes a dry, unproductive cough to one that is more productive and less frequent. By reducing the viscosity and adhesiveness of secretions, Guaifenesin increases the efficacy of the mucociliary mechanism in removing accumulated secretions from the upper and lower airway.

### 5.2 Pharmacokinetic properties

- There is some systemic absorption of inhaled Levosalbutamol. After a single dose Levosalbutamol has a half-life of 3.3 hours. Levosalbutamol is rapidly excreted, mainly in the urine, as metabolites and unchanged drug; a smaller proportion is excreted in the faeces.
- Guaifenesin is well absorbed from the gastrointestinal tract. It is metabolised and then excreted in the urine.

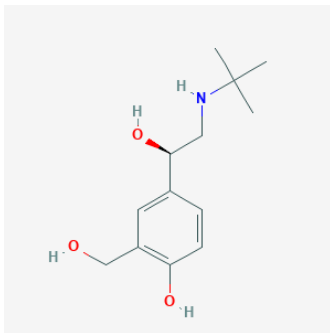
## 6. Nonclinical properties

### 6.1 Animal Toxicology or Pharmacology

NA.

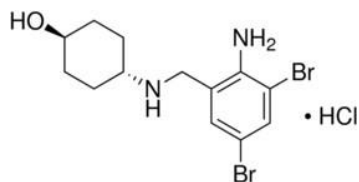
## 7. Description

**Levosalbutamol** is a short-acting sympathomimetic beta-2 adrenergic receptor agonist with bronchodilator activity. Its chemical name is 4-[(1*R*)-2-(*tert*-butylamino)-1-hydroxyethyl]-2-(hydroxymethyl)phenol and its chemical structure is:



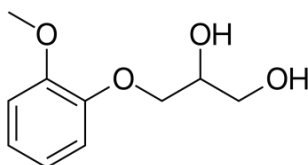
Its empirical formula is  $C_{13}H_{21}NO_3$  and its molecular weight is 239.31 g/mol.

**Ambroxol** belongs to a group of medications called mucolytics. Its chemical name is (1r,4r)-4-[[[(2-amino-3,5-dibromophenyl)methyl]amino]cyclohexan-1-ol hydrochloride and its structure is:



Its empirical formula is  $C_{13}H_{19}Br_2ClN_2O$  and its molecular weight is 414.56 g/mol.

**Guaiphenesin** is in a class of medications called expectorants. Its chemical name is 3-(2-methoxyphenoxy)propane-1,2-diol and its chemical structure is:



Its empirical formula is  $C_{10}H_{14}O_4$  and its molecular weight is 198.216 g/mol.

## 8. Pharmaceutical particulars

### 8.1 Incompatibilities

There are no known incompatibilities.

### 8.2 Shelf-life

24 months.

### 8.3 Packaging Information

Kofarest-PD drops is available bottle of 15 ml with calibrated dropper.

### 8.4 Storage and handling instructions

Store below 25°C. Protect from light.

## 9. Patient Counselling Information

### 9.1 Adverse Reactions

Refer part 4.8

## **9.2 Drug Interactions**

Refer part 4.5

## **9.3 Dosage**

Refer part 4.2

## **9.4 Storage**

Refer part 8.4

## **9.5 Risk Factors**

Refer part 4.4

## **9.6 Self-monitoring information**

NA

## **9.7 Information on when to contact a health care provider or seek emergency help**

Patient is advised to be alert for the emergence or worsening of the adverse reactions and contact the prescribing physician.

## **9.8 Contraindications**

Refer part 4.3

**10. Manufactured by The Madras Pharmaceuticals.**

**11. Details of permission or license number with date**

158(284)/MFG/DFDA/2013/3536 dated. 29.10.2013 for domestic.

**12. Date of revision: January 2022**