

COMPOSITION:

Each film coated tablet contains: Citalopram USP (as Hydrobromide) ... 20mg. [USP Specs.]

INDICATION:

Treatment of depression and panic disorder with or without agoraphobia.

USES AND ADMINISTRATION:

Citalopram tablets is a selective serotonin reuptake inhibitor (SSRI). Citalopram tablets can be administered as a single daily dose any time of the day with or without food. A dose increase if required in increments of 10mg should take place with intervals of 2-3 weeks.

Dosage in depression: Citalopram 1 tablet daily for 2-3 weeks. Dose up to 40mg may be increased on severity of depression.

Dosage in panic disorders: Initially **Citalopram** $\frac{1}{2}$ tablet for first week followed by 1 tablet for 2-3 weeks. Depending on individual patient response, the dose may be increased to a maximum of 40mg daily.

Dosage above 60 years of age: An initial dose of 1 tablet is recommended which may be increased up to 2 tablets daily depending upon severity of case. Reduced doses i.e ½ tablet should be employed in patients with hepatic impairment.

Use in Children: Safety and efficacy have not been established.

Duration of treatment: The antidepressive effect usually sets in after 2 to 4 weeks. Treatment with antidepressants is symptomatic and must therefore be continued for an appropriate length of time, usually for 6 months or longer in order to prevent relapse

ADVERSE EFFECTS:

Many side effects of Citalopram are similar to other tricyclic anti-depressant caused by their anti-muscarinic actions. The most common adverse effect observed in first two weeks of treatment are nausea, drowsiness, vomiting, increased sweating, tremors, dryness of mouth, constipation and increased intra-ocular pressure. The reported adverse effects occurred during treatment only which usually attenuate subsequently.

CONTRA-INDICATIONS:

Citalopram tablets is contra-indicated in patients who have shown hypersensitivity to any of similar tricyclic compound and Monoamino oxidase inhibitors (MAOIs). Citalopram is contra-indicated in patients with known QT-interval prolongation or congenital long QT syndrome. Citalopram is contra-indicated with medicinal products that are known to prolong the QT-

INTERACTIONS:

The simultaneous use of Citalopram and MAO-inhibitors can result in severe undesirable effects, including serotonin syndrome. Co-administration of Citalopram with medicinal products that prolong the QT interval such as Class IA and III antiarrhythmics, antipsychotics (e.g. phenothiazine derivatives, pimozide, haloperidol), tricyclic antidepressants, certain antimicrobial agents (e.g. sparfloxacin, moxifloxacin, erythromycin IV, pentamidine, anti-malarial treatment particularly halofantrine), certain antihistamines (astemizole, mizolastine) etc., is contra-indicated. Cimetidine (potent CYP2D6, 3A4 and 1A2 inhibitor) caused a moderate increase in the average steady state levels of Citalopram. Caution is advised when administering Citalopram in combination with cimetidine.

USE DURING PREGNANCY AND LACTATION:

Clinical experience of use in pregnant women is limited. Reproduction toxicity studies have not given evidence of an increased incidence of foetal damage or other deleterious effects on the reproductive process. Citalopram should not be used during pregnancy unless clearly necessary and only after careful consideration of risk/benefit. Information on the excretion of **Citalopram** into breast milk exists but is insufficient for assessment of the risk to the child. Caution is recommended.

PHARMACOKINETICS: Absorption: Absorption is almost complete and independent of food intake (T_{max} mean 3.8 hours). Oral bioavailability is about 80%.

Distribution: The apparent volume of distribution (Vd β) is about 12.3L/kg. The plasma protein binding is below 80% for Citalopram and its main metabolites.

Elimination: The elimination half-life is about 36 hours and the systemic plasma clearance is about 0.3L/min and oral plasma clearance is about 0.4L/min. Citalopram is excreted mainly via the liver (85%) and remainder (15%) via the kidney, 12-23% of the daily dose is excreted in urine as unchanged Citalopram.

OVER DOSE EFFECTS: Citalopram tablets is given to patients at potential risk of suicide and some reports of attempted suicide have been received. Detail is often lacking regarding precise dose or combination with other drugs and/or alcohol. There is no known specific antidote to Citalopram. Treatment should be symptomatic and supportive and include the maintenance of a clear airway and monitoring of ECG and vital signs until stable.

INSTRUCTIONS: Store below 30°C. Protect from heat, light and moisture. Keep out of the reach of children. Use on medical advice only.

PRESENTATION: PRAMCIT (Citalopram) tablets 20mg is available in blister pack of 20's.

مرط شیلیش خ (خالوپراشیلیش یوایس پی)

ا برز ا ءِتر کیب: پرامٹ میں شالو پرام ہائیڈر دوبر دمائیڈ مسادی ۲۰ ملی گرام شالو پرام فی گولی موجود ہے۔ فوائد: پرامٹ افسردگی اور پیرائش طور پر دماغ کے اندر کیمیا دی مادوں کے توازن کے غیر ہموار ہونے یا اردگر د کے ماحول کے بے جاخوف میں مبتا مریضوں میں بہت موزوں ہے۔

تجویز کرده خوراک: بالغول کیلیے: شالو پرام۲۰ ملی گرام کی ایک گولی روزانه۔

مرض کی شدت کی صورت میں شالو پرام زیادہ سے زیادہ ہم ملی گرام تک روزاند دی جاسکتی ہے۔

بچول کیلئے: سٹالو پرام کی افادیت اور تحفظ بچوں میں متعین نہیں ہو تکی ہے۔

مدت استعمال: شالو پرام کی افادیت ۳ تا ۴ ہفتہ بعد پید چلتی ہے۔ افسر دگی اوراس کے ساتھ ملحقہ پیچید گیوں میں شالو پرام کم از کم ۲ سے ۴ ہفتہ میں اثر انداز ہوتی ہے لہذا شالو پرام مرض کی شدت کے مطابق عام طور پر ۲ ماہ تک استعمال کی حاتی ہے۔

مضراشرات: دوسری دَبنی دباؤ کی ادویات کی طرح ابتدائی دو ہفتہ کے علاج کے دوران مندرجہ ذیل اثرات دیکھے گئے میں۔ اُلٹی کامحسوں ہونا،منہ یازبان کا خشک ہونا، زیادہ پسینے کا نظاقبین ہونا، آ کھے کے اندرونی جھے پر دیاؤ کا بڑھنااور ہاتھوں کا کیکیا ناوغیرہ۔

> مدایات: ۳۰ ڈگری سنٹی گریڈ ہے کم درجہ ترارت پر کھیں۔ روثنی ،گری اورنی ہے بچائیں۔ بچوں کی پنتی سے دور رکھیں۔ ڈاکٹر کی ہدایت کے مطابق دوا استعال کریں۔ طریق فراہمی: پیرامٹ ۲۰ ملی گرام کی گولیاں ۲۰ گولیوں کے بلسٹریک میں دستیاب ہے۔

