

Composition : **Ramicard-1. 25 tablet** : Each film-coated tablet contains Ramipril BP 1.25 mg.

Ramicard-2.5mg tablet : Each film-coated tablet contains Ramipril BP 2.5mg.

Ramicard-5mg tablet : Each film-coated tablet contains Ramipril BP 5mg.

Pharmacology : Ramipril is an angiotensin converting enzyme (ACE) inhibitor, which after hydrolysis to ramiprilat, blocks the conversion of angiotensin I to the vasoconstrictor substance, angiotensin II. So inhibitor of ACE by ramipril results in decreased plasma angiotensin II, which leads to decrease vasopressor activity and decreased aldosterone secretion, Thus Ramipril exerts its antihypertensive activity. Ramipril after oral administration is rapidly absorbed from the gastrointestinal tract. Peak plasma concentrations of the active metabolite, ramiprilat, are reached within 2-4 hours. Ramipril is almost completely metabolized and the metabolites are excreted mainly via the kidneys.

Indications : Ramicard is indicated in the treatment of : (1) Mild to severe hypertension, where it may be used alone or in combination with thiazide diuretics. (2) Congestive heart failure. (3) To reduce the risk of stroke, myocardial infarction and death from cardiovascular events in patients with a history of cardiovascular disease. (4) Proteinuric non-diabetic nephropathy.

Dosage and administration : Dosage of Ramicard must be adjusted according to the patient tolerance and response. **Hypertension:** For the management of hypertension in adults not receiving a diuretic, the usual initial dose of Ramicard is 1.25 - 2.5 mg once daily. Dosage generally is adjusted no more rapidly than at 2-week intervals. The usual maintenance dosage in adults is 2.5 - 20 mg daily given as a single dose or in 2 divided doses daily. If BP is not controlled with Ramicard alone, a diuretic may be added. **Congestive heart failure after myocardial infarction:** In this case, Ramicard therapy may be initiated as early as 2 days after myocardial infarction. An initial dose of 2.5 mg twice daily is recommended, but if hypotension occurs, dose should be reduced to 1.25 mg twice daily. Therapy is then titrated to a target daily dose of 5 mg twice daily. **Prevention of major cardiovascular events:** In this case, the recommended dose is 2.5 mg once daily for the first week of therapy and 5 mg once daily for the following 3 weeks; dosage then may be increased, as tolerated, to a maintenance dosage of 10 mg once daily. **Dosage in renal impairment:** For the patients with hypertension and renal impairment, the recommended initial dose is 1.25 mg Ramicard once daily. Subsequent dosage should be titrated according to individual tolerance and BP response, up to a maximum of 5 mg daily. For the patients with heart failure and renal impairment, the recommended dose is 1.25 mg once daily. The dose may be increased to 1.25 mg twice daily and up to a maximum dose of 2.5 mg twice daily depending upon clinical response and tolerability. Or, as directed by registered physician.

Ramicard

Tablet



DRUG
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Contraindication : Hypersensitivity to Ramipril or any of the excipients. History of angioneurotic edema, hemodynamically relevant renal artery stenosis, hypotensive or hemodynamically unstable patients.

Precautions : Ramicard should be used with caution in patients with impaired renal function hyperkalemia, hypotension, surgery/anesthesia and impaired hepatic function.

Side effects : Ramicard is generally tolerated. Dizziness, headache, fatigue and asthenia are commonly reported side effects. Other side effects occurring less frequently include symptomatic hypotension, cough, nausea, vomiting, diarrhea, rash, urticaria, oliguria, anxiety, amnesia etc. Angioneurotic edema, anaphylactic reactions and hyperkalemia have also been reported rarely.

Use in pregnancy and lactation : Pregnancy should be excluded before start of treatment with Ramicard. Ramicard should not be used during lactation.

Use in Child : Safety and efficacy in children have not been established.

Drug Interactions : Combination with diuretics or other antihypertensive agents may potentiate the antihypertensive response to Ramipril. Potassium sparing diuretics or potassium supplements may increase the risk of hyperkalemia. When antidiabetic agents (insulin and sulfonylurea derivatives) are used concurrently, the possibility of increased blood-sugar reduction must be considered. If Ramipril is given with lithium, an increase in serum lithium concentration may occur.

Overdose : There is no data available .

Storage : Store below 30°C in a dry place.

Packing : **Ramicard-1.25mg tablet** : Each box contains 4 x 14's tablets in blister pack.

Ramicard-2.5mg tablet : Each box contains 4 x 14's tablets in blister pack.

Ramicard-5mg tablet : Each box contains 4 x 14's tablets in blister pack.