

Composition : Acepril-5 : Each Tablet Contains Lisinopril USP 5mg.

Acepril-10 : Each Tablet Contains Lisinopril USP 10mg.

Pharmacology : Lisinopril, a synthetic peptide derivative, competitively binds to and inhibits ACE, thereby blocking the conversion of angiotensin I to angiotensin II. This prevents the potent vasoconstrictive actions of angiotensin II and results in vasodilation. Lisinopril also decreases angiotensin II-induced aldosterone secretion by the adrenal cortex, which leads to an increase in sodium excretion and subsequently increases water outflow. Absorption approximately 25%, but widely variable between individuals. Lisinopril dose not undergo metabolism and is excreted unchanged entirely in the urine.

Indications : **Acepril** is indicated for all grades of essential hypertension and renovascular hypertension. **Acepril** can be used alone or with other anti hypertensive agents.

Dosage & administration : Treatment should be started with 2.5mg once daily. In patients with uncomplicated essential hypertension, not on diuretic therapy, the recommended initial dose is 10mg once daily. Dosage should be adjusted according to blood pressure response. The usual dosage range is 10-20mg once daily. Maximum dose is 40mg per day as a single dose or as directed by the physician.

Diuretic treated patients : In hypertensive patients who are currently being treated with a diuretic, symptomatic hypotension may occur, occasionally following the initial dose of **Acepril**. If the diuretic can not be discontinued, and initial dose of 10mg should be used under medical supervision for at least two hours and until blood pressure has stabilised for at least an additional hour.

Contraindications : **Acepril** is contra-indicated in patients who are hypersensitive to this product, in patients with a history of angioneurotic oedema related to previous treatment with an ACE inhibitor. **Acepril** is also contra-indicated in pregnant woman.

Side effects : Chest discomfort, flushing, hypotension, tachycardia, abdominal pain, anorexia, constipation, flatulence, joint pain, depression, insomnia, bronchitis, cough may occur.

Acepril Tablet



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Precautions :

- (1) Evaluation of the patient should include assessment of renal function prior to initiation of therapy and during treatment. Acepril should be used with caution in patients with renal insufficiency, as they may require reduced doses.
- (2) Severe hypotension has been reported with ACE inhibitors, mainly in patients with severe heart failure and also in patients with surgery.
- (3) Acepril should not be used in patients with aortic stenosis, cor pulmonale or outflow tract obstruction.

Drug Interaction : If concomitant use of Potassium-sparing diuretics is indicated, monitor the patient's serum potassium frequently. Concomitant administration of lisinopril and antidiabetic medicines may cause an increased blood-glucose-lowering effect with risk of hypoglycemia. The antihypertensive effect of ACE inhibitors, including lisinopril, may be attenuated by NSAIDs.

Use in Pregnancy & Lactation : Pregnancy Category D. Because many drugs are excreted in human milk, caution should be exercised when Lisinopril is administered to a nursing mother.

Use in Child : There is no data available.

Overdose : Lisinopril can be removed by hemodialysis.

Storage : Store at the temperature must not exceed 30°C.

Packing : Acepril-5 : Each box contains 4 x 14's Tablet in blister pack.

Acepril-10 : Each box contains 2 x 14's Tablet in blister pack.