

**Composition :** Each tablet contains Captopril USP 25mg.

**Pharmacology :** Captopril is a sulfhydryl-containing analog of proline with antihypertensive activity. Captopril competitively inhibits angiotensin converting enzyme (ACE), thereby decreasing levels of angiotensin II, increasing plasma renin activity, and decreasing aldosterone secretion. Approximately 60-75% of an oral dose of captopril is rapidly absorbed from the GI tract in fasting healthy individuals or hypertensive patients. More than 95% of a dose is excreted renally, both as unchanged (45-50%) drug and as metabolites.

**Uses : Mild-to-moderate hypertension :** As an adjunct to thiazide therapy in patients who have not responded effectively to thiazide treatment alone.

**Severe hypertension :** Where standard therapy has failed.

**Congestive heart failure :** **ACETOR** is indicated for the treatment of congestive heart failure. The drug should be used together with diuretics and where appropriate, digitalis.

**Dosage & administration :** Adults : Mild-to-moderate hypertension: The initial dose is 12.5mg twice daily. The usual maintenance dose is 25mg twice daily which can be increased incrementally, at two to four week intervals, until a satisfactory response is achieved, to a maximum of 50mg twice daily.

**Severe hypertension :** In severe hypertension the starting dose is 12.5mg b.d. The dosage may be increased incrementally to a maximum of 50mg t.d.s.

**Heart failure :** A starting dose of 6.25mg or 12.5mg may minimise a transient hypotensive effect. The usual maintenance dose is 25mg three times a day. The usual maximum dose is 150mg daily.

**ACETOR** must be taken 1 hour before meals to ensure maximum absorption.

**ACETOR**

Tablet



**DRUG  
INTERNATIONAL  
LTD.**

**Contraindications :** A history of previous hypersensitivity to captopril. **ACETOR** is contra-indicated in pregnancy and should not be used in women of child-bearing potential unless protected by effective contraception.

**Precautions :** Evaluation of the patient should include assessment of renal function before **ACETOR** therapy and at appropriate intervals thereafter. Patients with renal impairment should not normally be treated with **ACETOR**. **ACETOR** should not be used in patients with aortic stenosis or outflow tract obstruction.

**Side-effects :** Neutropenia, anaemia, proteinuria, hypotension, tachycardia, rashes, usually pruritic may occur. Gastric irritation and abdominal pain may occur.

**Use in Pregnancy & Lactation :** There are no available data in pregnant women to inform the drug-associated risk. Because of the potential for serious adverse reactions a decision should be made whether to discontinue nursing or to discontinue the drug.

**Use in Child :** Safety and effectiveness in pediatric patients have not been established.

**Drug Interaction :** Do not coadminister aliskiren with Captopril in patients with diabetes. Monitor renal function periodically.

**Overdose :** Correction of hypertension would be of primary concern.

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

**Packing :** Each box contains 10 x 10's tablets in blister pack.