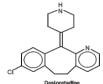
# **Deso-L**

# (Desloratadine)

# 5mg Tablets

# DESCRIPTION

Deso-L. (Destoratadine) is a non-sedating long acting histamine antagonist with potent, selective peripheral H<sub>1</sub>-receptor antagonist activity. Chemically, destoratadine is 8-chioro-6, 11-dhydro-11-(4-piperdinylidene)-5H benzo[5,6]cyclohepta[1,2-b]pyridine. The molecular formula is Ca-lha-(IN) and the structural formula is:



QUALITATIVE AND QUANTITATIVE COMPOSITION

Deso-L (Desloratadine) is available for oral administration as:

Deso-L Tablets 5mg

Each film-coated tablet contains:

Desloratadine ... 5mg

# CLINICAL PHARMACOLOGY Mechanism of Action

Desloratadine is a long-acting tricyclic histamine antagonist with selective H-receptor histamine antagonist activity. Receptor bribding data indicates that at a concentration of 2-3ng/ml, desloratadine shows significant interaction with the human histamine H-receptor. Desloratadine inhibited histamine release from human mast cells in vitro.

# Pharmacokinetics

#### Absorption

Desloratadine is well absorbed with maximum concentration achieved after approximately 3 hours. The area under the concentration time curve (AUC) is 56.9ng.hr/ml and the mean steady state peak plasma concentrations (C<sub>max</sub>) is 4ng/ml. The bloavailability of desloratadine was dose proportional over the range of 5mg to 20mg.

### Metabolism

Desionatedine is extensively metabolized to 3-hydroxydesionatedine an active metabolite, which is subsequently glucorinated.

#### Distribution

Destorated in e and 3-hydroxydestorated in e approximately 82% to 87% and 85% to 89% bound to plasma proteins.

#### Excretion

The mean elimination half-life of desloratadine was 27 hours. The degree of accumulation after 14 days of dosing was consistent with the half-life and dosing frequency.

# Special Populations

# Renal Impairment

In patients with mild and moderate renal impairment, median  $C_{\rm max}$  and AUC values increased by approximately 1.2- and 1.9-fold, respectively, relative to subjects with normal renal function. In patients with severe renal impairment or who were hemodialysis dependent,  $C_{\rm max}$  and AUC values increased by approximately 1.7- and 2.5- fold, respectively. Desloratedine and 3-hydroxydesloratedine were poorly removed by hemodialysis. Dosage adjustment for patients with renal impairment is recommended.

# Hepatic Impairment

Patients with hepatic impairment, regardless of severity, had approximately a 2.4-fold increase in AUC as compared with normal subjects. The apparent oral clearance of desloratadine in patients with mild, moderate, and severe hepatic impairment was 37%, 36%, and 28% of that innormal subjects, respectively. An increase in the mean elimination half-life of desloratadine in patients with hepatic impairment was observed. Dosage adjustment for patients with hepatic impairment is recommended.



# THERAPEUTIC INDICATIONS

Seasonal allergic rhinitis

Deso-L (Desioratadine) tablets are indicated for the relief of the nasal and non-nasal symptoms of seasonal allergic rhinitis in patients 12 years of age or older.

# Perennial allergic rhinitis

**Deso-L** (Desloratadine) tablets are indicated for the relief of the nasal and non-nasal symptoms of perennial allergic rhinitis in patients 12 years of age or older.

# - Chronic idiopathic urticaria

Deso-L (Desionated ine) tablets are indicated for the symptomatic relief of pruritis, reduction in the number of hives, in patients with chronic idiopathic urticaria 12 years of age and older.

# DOSAGE AND ADMINISTRATION

The recommended dose of **Deso-L** (Designated ine) tablets is one 5mg tablet once daily with or without a meal.

#### Patients with renal and hepatic impairment:

In patients with renal or hepatic impairment, a starting dose of one 5mg tablet every other day is recommended based on pharmacokinetic data.

#### Paediatric use:

Deso-L (Desloratadine) tablets are not indicated for children under 12 years.

# ADVERSE REACTIONS

Generally destoratedine is well tolerated. The most common side effects reported during therapy with destoratedine were fatigue, headache and dry mouth. Other adverse effects reported very rarely were: Dizziness, somnolence, insomnia, tachycardia, palpitations, abdominal pain, nausea, vomiting, dyspepsia, diarrhocea, elevations of liver enzymes, increased billinubin, hepatitis, mysalja, hypersensitivity reactions (such as anaphylaxis, angioedema, dyspnocea, pruitus, rash and urticaria).

# CONTRAINDICATIONS

Desloratadine is contraindicated in patients who have shown hypersensitivity or idiosyncrasy to desloratadine, to loratadine or to any of the excipients.

# **PRECAUTIONS**

# Pregnancy

There are no adequate and well-controlled studies of desloratadine in pregnant wormen. Desloratadine should be used during pregnancy only if the potential benefit justifies the risk to the fetus.

# **Nursing Mothers**

Destoratedine passes into human breast milk; therefore, a decision should be made whether to discontinue destoratedine, taking into account the importance of the drug to the mother.

# STORAGE

Store below 30°C.

Protect from sunlight and moisture.

The expiration date refers to the product correctly stored at the required conditions.

# HOW SUPPLIED

Deso-L (Desloratadine) Tablets 5mg are available in blister pack of 1x10 s.

Keep out of the reach of children.



