

Dotahub 80 Tablet

Drotaverine 80mg Tablet: Overview and Information

Active Ingredient:

- **Drotaverine Hydrochloride:** 80 mg
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What is Drotaverine?

Drotaverine is an antispasmodic medication used to relieve smooth muscle spasms. It works by relaxing the muscles in the gastrointestinal tract, urinary system, and other organs, thereby reducing pain and discomfort associated with spasms.

Uses

Drotaverine 80mg is commonly prescribed for:

1. **Abdominal Pain:** Relief from spasms of the gastrointestinal tract.
 2. **Irritable Bowel Syndrome (IBS):** Reducing bowel spasms and associated pain.
 3. **Dysmenorrhea (Painful Menstruation):** Alleviating menstrual cramps.
 4. **Renal Colic:** Relieving spasms in the urinary tract.
 5. **Biliary Colic:** Managing spasms of the bile duct or gallbladder.
 6. **Other Smooth Muscle Spasms:** Such as those related to surgeries or procedures.
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Dosage and Administration

- **Recommended Dose:** 1 tablet (80 mg), 1 to 3 times daily, as directed by a healthcare provider.
- **Administration:** Take the tablet with water, preferably after a meal to reduce stomach irritation.

Precautions

- **Consult Your Doctor:**
 - If you have a history of liver, kidney, or heart disease.
 - If you are pregnant, planning to conceive, or breastfeeding.
 - Avoid driving or operating heavy machinery if you experience dizziness or drowsiness after taking the medication.
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Potential Side Effects

Common:

- Nausea
- Dizziness
- Headache
- Dry mouth

Rare but Serious:

- Allergic reactions (e.g., rash, itching, swelling)
 - Drop in blood pressure (hypotension)
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Drug Interactions

- Drotaverine may interact with other antispasmodic drugs or medications for blood pressure.
 - Inform your doctor about all medications and supplements you are taking.
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Storage

- Store in a cool, dry place, away from direct sunlight.
- Keep out of reach of children.

Disclaimer: Use this medication only as prescribed by a healthcare professional. This information is for educational purposes and does not replace medical advice.

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Cafoli Lifecare Pvt. Ltd.

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Plot no.: 367-FF, Industrial Area Phase-I,
Panchkula-134113

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