# Information For the User Itraconazole (400mg) Tablet

# **Itralom 400 SR Tablet**

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## **Composition:**

Each sustained release tablet contains:

- Itraconazole I.P. 400 mg
- Excipients q.s.
- Colour: Approved colour used

#### **Dosage Form:**

Tablet (Sustained Release)

## **Therapeutic Category:**

Systemic Antifungal – Triazole Class

# Pharmacology & Mechanism of Action:

Itraconazole is a broad-spectrum antifungal agent that belongs to the triazole group. It inhibits the fungal cytochrome P450 enzyme  $14\alpha$ -demethylase, which is crucial for converting lanosterol to ergosterol, an essential component of the fungal cell membrane. This disruption leads to increased cellular permeability and inhibition of fungal growth.

Its extended-release formulation allows prolonged therapeutic levels with once-daily dosing, ensuring improved patient compliance and consistent antifungal coverage.

## **Indications:**

- Systemic fungal infections including histoplasmosis, blastomycosis, and aspergillosis
- Onychomycosis of the fingernails or toenails due to dermatophytes and/or Candida
- Oral and esophageal candidiasis
- Tinea corporis, cruris, and pedis
- Prophylaxis of fungal infections in immunocompromised patients

## **Dosage and Administration:**

- Usual adult dose: One tablet (400 mg) once daily or as directed by the physician
- To be taken after a full meal to enhance absorption
- Duration of therapy depends on the indication and clinical response
- Avoid antacids within 2 hours of dosing to prevent reduced absorption

#### **Contraindications:**

- Known hypersensitivity to itraconazole or any component of the formulation
- Concomitant administration with drugs that are metabolized by CYP3A4 and may prolong QT

interval (e.g., cisapride, pimozide, quinidine)

• History of congestive heart failure or ventricular dysfunction unless benefit outweighs risk

## **Warnings and Precautions:**

- Monitor hepatic function during prolonged therapy; discontinue if signs of liver dysfunction appear
- Use with caution in patients with cardiac disease, renal impairment, or electrolyte disturbances
- Not recommended during pregnancy unless life-threatening infection
- Women of childbearing potential should use effective contraception during therapy and for 2 months after stopping

## **Drug Interactions:**

- Potent inhibitor of CYP3A4 may increase plasma concentrations of drugs metabolized by this enzyme
- Antacids, H2 blockers, and proton pump inhibitors reduce bioavailability of itraconazole
- Increased risk of toxicity when combined with statins, calcium channel blockers, and certain benzodiazepines
- Rifampicin and phenytoin reduce itraconazole levels; avoid concurrent use

## **Adverse Effects:**

- Common: Nausea, vomiting, abdominal pain, headache
- Less common: Elevated liver enzymes, rash, edema
- Rare: Hepatotoxicity, peripheral neuropathy, hypersensitivity reactions including anaphylaxis

#### Overdose:

Symptoms include gastrointestinal discomfort, headache, and potential hepatotoxicity. Treatment is symptomatic and supportive. Itraconazole is not significantly removed by hemodialysis.

## **Storage:**

Store below 25°C in a cool, dry place Protect from light and moisture Keep out of reach of children

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Cafeli Lifecare Pvt. Ltd.

(An ISO 9001: 2015 Certified Co.)
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Panchkula-134113

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