

বাজোকা

Gg†jvwWwcb wewc 5 wgMÖv Ges lj†gmvU©vb †g†Wv†-vwgj AvBGbGb 20v

উপাদানঃ ev†RvKv 5/20: cÖwZwU wdj¥ †Kv†UW U`ve††U Av†Q Gg†jvwWwcb wemvB†JU wevc hv Gg†jvwWwcb 5 wgMÖv Gi mgZzj` Ges lj†gmvU©vb †g†Wv†-vwgj AvBGbGb 20 wgMÖv|

ফার্মাকোলজীঃ ev†RvKv `yÖwU D`P i†Pvc wbgš¿YKvix lly†ai Kwª^†bkb: Gg†jvwWwcb GKwU WvBnvB†WªvcvBwiwWb K`vjwmgvg G`Uv†Mvwb-† Ges lj†gmvU©vb †g†Wv†-vwgj GKwU GbwRI†Ubwmb-2 wi†mBi eoKvi| Gg†jvwWwcb fv`zjvi `šy_ gvmj l KwW©qvK gvm†ji wFZ†i K`vjwmgvg Gi cÖ†e†k evav cÖ`vb K†i Ges lj†gmvU©vb †g†Wv†-vwgj GbwRI†Ubwmb-2 Gi cÖfveRwbZ i†bvjxi ms†KvPb†K cÖwZnZ K†i|

নির্দেশনাঃ ev†RvKv D`P i†Pv†ci wPwKrmvq GKk A_ev Ab`vb` D`P i†Pvc†ivax lly†ai mv†_ wb†©wkZ| †h mKj tivMxi GKwªK D`P i†Pvc†ivax lly†ai cÖ†qvrB, Zv†`i cÖviva†CK wPwKrmvq ev†RvKv e`envi Kiv †h†Z cv†i|

মাত্রা ও সেনসিবিটিঃ

প্রাথমিক চিকিৎসায় মাত্রা

GKwU ev†RvKv U`ve††U w`†b GKevi|

i†Pvc h_vh_ wbgš¿†Y 1-2 mÖvn ci m†e©v`P ``wbK 10/40 wgMÖv w`†b GKevi ch©šf gvlv evov†bv †h†Z cv†i| GB Kwª^†bkb llya Lvev†i mv†_ A_ev Lvevi Qvovl †meb Kiv hvq| Ab`vb` D`P i†Pvc†ivax lly†ai mv†_l GB Kwª^†bkb†bi llya †meb Kiv hvq|

পরিবর্তিত চিকিৎসায় মাত্রা

†h mKj tivMx Gg†jvwWwcb A_ev lj†gmvU©vb †meb KiwQ†jb, Zv†`i †††† GB Kwª^†bkb llya i†Pvc wbgš¿†Y e`envi Kiv hv†e| G†††† Gg†jvwWwcb ev lj†gmvU©vb A_ev Dfq lly†ai gvlv cÖ†qvrBgZ e_wx Kiv †h†Z cv†i|

সেনসিবিটি

iaayvl gy†L †meb †hvm`|

প্রতিনির্দেশনাঃ Wvq†fewUK tivMx†`i †††† A`vwjmwK†iY lly†ai mv†_ ev†RvKv cÖwZ wb†©wkZ|

পূর্ব সতর্কতা ও সাবধানতাঃ Mf©aviY wbwÖn †h†Z hZ `ªæZ mªce GB Kwª^†bkb llya e`envi cwinvi Ki†Z n†e| fwjDg A_ev mē-wWwca†UW tivMx†`i wbaœe i†Pvc n†Z cv†i| GQvov Zxeª GlwU©K †-†bvwmm, Zxeª Ae-†vKwUf K†ivbvix AvUCvix wWvRR, Kb†RmwUf nvU© †dBwjli, †wZMÖ`†e,ª ev hK,...Z tivMx†`i †††† e`env†i mZK©Zv Aeja^b Ki†Z n†e| K`vjwmgvg P`v†bj eoKvi †_ivcx iªe Kivi mgq A_ev †w†R e_wx Kivi mgq A`vwªbv tivMx†`i †††† e`_v niqui cwigvY, mgqKvj Ges ZxeªZv e_wx ††Z cv†i|

পার্শ্ব প্রতিক্রিয়াঃ

প্রচলিত

†cwi†divj BwWgv, gv_Nyiv†bv, gv_v wSgwSg Kiv, Aviwa†CKZv, BZ`vw`|

বিবল

†dBm BwWgv, nvBcvi†mbwmwUwfiwU, Qzwj, msªVnxbZv BZ`vw`|

পার্শ্বপ্রস্থায় ও স্তন্যদানকালে ব্যবহারঃ

পার্শ্বপ্রস্থায়

Mf©aviY wbwÖn †h†Z hZ `ªæZ mªce GB Kwª^†bkb llya e`envi cwinvi Ki†Z n†e| Mf©ve`vq 2q l 3q UªvB†g-†vi e`env†ii mgq †h mKj llya †iwbb-GbwRI†Ubwmb wm†-†g Kvh©Ki, †m, †jv âæ†Yi †wZ GgbwK g_`Zz` NUv†Z cv†i|

স্তন্যদানকালে

gv†qi †††† lly†ai cÖ†qvrBxqZv Ges mªcve` †wZi w`K ch©v†jvPbv K†i llya †meb A_ev `yª`vb Gi †h †Kvb GKwU Kvr †_†K weiZ _vK†Z n†e|

শিশু ও কিশোরদের ক্ষেত্রে ব্যবহারঃ

ch©vß Z`_l DcvÈ bv _vKvq 18 eQ†ii wb†P ev†RvKv wb†©wkZ bq|

খাবার ও অন্য ওষুধের সাথে প্রতিক্রিয়াঃ

অন্য ওষুধের সাথে

†h llya, †jv †mivg cUvwkqv†gi gvlv evovq (†hgbt †ncwvb) †m, †jv ev†RvKv Gi mv†_ †meb Ki†j †mivg cUvwkqv†gi gvlv te†o †h†Z cv†i| myZivs GB RvZxq llya, †jv ev†RvKv -Gi mv†_ wb†©wkZ bq| †m†††† cUvwkqv†gi gvlv Mfxfiv†e ch©†e†Y Ki†Z n†e|

খাবারের সাথে

Av`syi A_ev Av`sy†ii Ry†mi mv†_ Gg†jvwWwcb †meb Ki†j Gg†jvwWwc†bi ev†qvG`v††BjG wewjwU †e†o hvq Ges hv wKQz wKQz tivMx†`i †††† `ªæZ i†Pvc†K Kwg†q †dj†Z cv†i| ZvB Av`syi A_ev Av`sy†ii Ry†mi mv†_ ev†RvKv wb†©wkZ bq|


মাত্রাভিত্তিক সেরবঃ

সফল

wbaœe i†Pvc, U`wKkwW©qv, AwZwiª gvlvq †cwi†divj ††mVWvB†jkb BZ`vw`|

চিকিৎসা

hw` tewKwv†Kw†RvKv †meb Kiv n†q _v†K Zvn†j `ªæZZg mg†q ewg

 **কেমিস্ট** ল্যাবরেটরীজ লিমিটেড
কলেজ রো, বরিশাল, বাংলাদেশ।

Bazoka

Amlodipine BP 5 mg & Olmesartan Medoxomil INN 20 mg

Composition: Bazoka 5/20: Each film coated tablet contains Amlodipine Besylate BP equivalent to Amlodipine BP 5 mg and Olmesartan Medoxomil INN 20 mg.

Pharmacology: This product is a combination of two antihypertensive drugs: Amlodipine BP is a dihydropyridine calcium antagonist and Olmesartan Medoxomil INN is an angiotensin-II receptor blocker. The Amlodipine BP component inhibits the transmembrane influx of calcium ions into vascular smooth muscle and cardiac muscle and the Olmesartan Medoxomil INN component blocks the vasoconstrictor effects of angiotensin-II.

Indication: Bazoka is indicated for the treatment of hypertension, alone or with other antihypertensive agents. Bazoka may also be used as initial therapy in patients who are likely to need multiple antihypertensive agents to achieve their blood pressure goals.

Dosage & administration:

Initial Therapy

The usual recommended dosage of Bazoka is one tablet once daily. Bazoka 5/20 tablet may be administered in patients whose blood pressure is not adequately controlled by 20 mg Olmesartan Medoxomil INN or 5 mg Amlodipine BP alone.

The dosage can be increased after 1 to 2 weeks of therapy to a maximum dose of 10/40 mg once daily as needed to control blood pressure. Bazoka may be taken with or without food. Bazoka may be administered with other antihypertensive agents. Initial therapy with this combination product is not recommended in patients ≥ 75 years old or with hepatic impairment.

Replacement Therapy

Bazoka may be substituted for its individually titrated components. When substituting for individual components, the dose of one or both of the components can be increased if blood pressure control has not been satisfactory.

Route of administration: Oral route only.

Contraindication: AIsSkiren is contraindicated with Bazoka in patients with diabetes.

Precaution and warning: When pregnancy is detected, this combination drug should be discontinued as soon as possible. Symptomatic hypotension may occur after initiation of therapy. Bazoka should be used with caution in patients with congestive heart failure, impaired renal function / hepatic impairment, patients with severe aortic stenosis, severe obstructive coronary artery disease. Patients may develop increased frequency, duration or severity of angina or acute MI on starting Calcium Channel Blocker therapy or at the time of dosage increase. As with other angiotensin receptor antagonists and ACE inhibitors, hyperkalaemia may occur during treatment with olmesartan medoxomil, especially in the presence of renal impairment and/or heart failure. Olmesartan medoxomil inhibits the renin-angiotensin system (RAS) and drugs that inhibit the RAS can cause hyperkalaemia. Monitor serum electrolytes periodically. Close monitoring of serum potassium levels is recommended.

Side effects:

Common

The most common side effects include peripheral oedema, dizziness, flushing, vomiting, diarrhoea, rhabdomyolysis, alopecia, pruritus, urticaria etc.

Rare

Face oedema, hypersensitivity, syncope, urticaria etc.

Use in pregnancy and lactation:

Pregnancy

When pregnancy is detected, discontinue this combination product as soon as possible. When used in pregnancy during the second and third trimesters, drugs that act directly on the renin angiotensin system can cause injury and even death to the developing fetus.

Nursing Mothers

Because of the potential for adverse effects on the nursing infant, a decision should be made whether to discontinue nursing or discontinue the drug, taking into account the importance of the drug to the mother.

Use in children & adolescents: Bazoka is not recommended for use in children & adolescents below 18 years of age due to lack of data on safety & efficacy.

Drug interaction: With medicine based on experience with the use of other drugs that affect the renin-angiotensin system, concomitant use of potassium-sparing diuretics, potassium supplements, salt substitutes containing potassium or other drugs that may increase serum potassium levels (e.g. heparin) may lead to increases in serum potassium. Such concomitant use is therefore not recommended.

With food & others

Administration of amlodipine with grapefruit or grapefruit juice is not recommended as bioavailability may be increased in some patients resulting in increased blood pressure lowering effects.

Overdose:

Symptoms

There is no experience of overdose with Bazoka. The most likely effects of olmesartan medoxomil overdosage are hypotension and tachycardia; bradycardia could be encountered if parasympathetic (vagal) stimulation occurred. Amlodipine BP overdosage can be expected to lead to excessive peripheral vasodilatation with marked hypotension and possibly a reflex tachycardia. Marked and potentially prolonged systemic hypotension up to and including shock with fatal outcome has been reported.

Treatment

If intake is recent, gastric lavage or induction of emesis may be considered. In healthy subjects, the administration of activated charcoal immediately or up to 2 hours after ingestion of amlodipine has been shown to reduce substantially the absorption of amlodipine. Clinically significant hypotension due to an overdose of Bazoka requires active support of the cardiovascular system, including close monitoring of heart and lung function, elevation of the extremities, and attention to circulating fluid volume and urine output. A vasoconstrictor may be helpful in restoring vascular tone and blood pressure, provided that there is no contraindication to its use. Intravenous calcium gluconate may be beneficial in reversing the effects of calcium channel blockade. Since amlodipine is highly protein-bound, dialysis is not likely to be of benefit. The dialysability of olmesartan is unknown.

Storage: Store at temperature within 30°C, protect from light and moisture. Keep out of the reach of children.

Packing: Bazoka 5/20: Each box contains 3X10's tablets in Alu-Alu blister pack.

Manufactured by:

 **Chemist Laboratories Ltd.**

College Row, Barishal, Bangladesh.