ARTESDIAQUINE® TABLETS

[GENERIC NAME] Artesunate – Amodiaquine
[TRADE NAME] Artesdiaquine® Tablets
[PHARMACEUTICAL FORM] Tablets
[COMPOSITION]
Each packet contains 12 tablets of Artesunate (50 mg each tablet) and 12 tablets of Amodiaquine HCl (200 mg* each tablet) in the form of blister pack (to allow for equal daily divided doses for 3 days).

[INDICATIONS]
Treatment of falciparum malaria in area where *Plasmodium falciparum* is declared as resistant to chloroquine.

[DOSAGE AND METHOD OF ADMINISTRATION] For all age groups, the dosage shall be taken orally; The dosage for Artesunate is 4 mg/kg BW daily, and the total dosage of Artesunate (3 days) is 12 mg/kgBW. The dosage for Amodiaquine is 10 mg/kgBW daily, and the total dosage of Amodiaquine (3 days) is 25 – 35 mg/kgBW. Refer to the following table for dosages of different age groups. Specific dosage for children shall follow the advice of doctors.

Drug	Day	Age (years)			
		1 - 4	5 - 9	10 - 15	>15
Artesunate Tablets (50 mg/Tab)	D1	1	2	3	4
	D2	1	2	3	4
	D3	1	2	3	4
Total Artesunate (tablets)		3	6	9	12
Amodiaquine Tablets (200mg*/Tab)	D1	1	2	3	4
	D2	1	2	3	4
	D3	1	2	3	4
Total Amodiaquine (tablets)		3	6	9	12

*153 Amodiaquine Base

[WARNINGS AND PRECAUTIONS]
Amodiaquine accumulates in liver, therefore special precaution should be taken when treating patient with liver disorder, alcoholism or under hepatotoxic medication. Children are sensitive to aminoquinolin derivates, because of the narrow range between therapeutic and toxic doses.

[DRUG INTERACTIONS]
There have been no reports of negative drug interactions to date. The activity of other anti-malaria drugs may in fact be potentiated.

[PREGNANCY-BREAST FEEDING]
Use of the product for uncomplicated malaria during the second and third trimester is allowed in chloroquine resistant area. It is not recommended during the first trimester because of inadequate available data.

[ADVERSE EFFECTS]
Artesunate : The following adverse effects have been reported in the clinical trial : Decrease in reticular erythrocyte, increase of SGPT and BUN level, pain in the injection area, nausea, headache, sinus bradycardia (>50 bpm), reversible diuresis, macroscopic haemoglobinuria, jaundice, oliguria, hypoglycemia, seizures, bleeding, sepsis, pulmonary edema, reduced plasma lactate level, cardiorespiratory arrest, irrectable hypotension, gastro-intestinal tract bleeding, black water fever, ulnar or median nerve palsy, urinary tract infection by *Klebsiella sp*, pneumonia, herpes zoster, and erythematosus urticarial rash.
Amodiaquine : Mild to moderate side effects include abdominal discomfort, nausea, vomiting, headache, dizziness, blurred vision, mental and physical weakness, and fatique. Severe side effects include pruritus, cardiovascular abnormality, dyskinesia, ocular damage, nerve disorder, and loss of hearing. Agranulocytosis, hepatitis, and peripheral neuropathy have also been reported.

[CONTRAINDICATIONS]
Amodiaquine: Amodiaquine is contraindicated in patients with hypersensitivity.

[OVER DOSAGE]
Do not exceed the recommended dose without further medical advice. In case of over dose, emergency symptomatic treatment in a specialist facility is required.
Amodiaquine : General symptom of over-dosage is headache, vertigo, and nausea. More severe manifestations are cardiac arrhythmia, convulsion, and coma. The most dramatic characteristic is visual disorder, including abrupt loss vision which usually is temporary.

[PHARMACOLOGIC EFFECTS]
Pharmacokinetics : After oral administration artesunate is rapidly absorbed, and then almost completely hydrolyzed to dihydroartemisinin (DHA). Amodiaquine HCl is rapidly absorbed, and undergoes rapid metabolism to desethylamodiaquine. Peak concentration of Amodiaquine is 32 ± 3 ng/ml in 0.5 ± 0.03 hour. The peak concentration in the blood cells of 60 ± 10 ng/ml, and 42 ± 6 ng/ml consecutively are reached in 0,5 ± 0.1 hour. The average peak plasma concentration of the active metabolite (desethylamodiaquine) is 181 ± 26 ng/ml. Tmax in blood and cells are 2.2 ± 0.5 hours, and 3.6 ± 1.1 hours consecutively.
Pharmacodynamics : DHA has a peroxide bond which breaks up inside the parasite, forming single oxygen as well as free radicals. The mechanism of action of Amodiaquine has not been known, but generally 4-aminoquinoline derivatives appear to bind to nucleoproteins and inhibit DNA and RNA polymerase.
After oral administration, Amodiaquine HCl is rapidly absorbed, and undergoes rapid metabolism to desethylamodiaquine, and concentrates in the blood cells. The desethylamodiaquine is probably the metabolite which has antimalarial activity.

[EXPIRY] Three years.
[STORAGE]
The tablets should preferably be kept dry and stored below 25°C . The drugs should always be kept in their original package.

[MANUFACTURER]
Beijing Holley-Cotec Pharmaceuticals Co., Ltd.
Address : 6/F, Building B, No.4, Xinghuo Road, Fengtai District, Beijing 100070, P.R. China.

[IMPORTER/DISTRIBUTOR]

Pt. Trimitra Sehati
Jl. KH. Hasyim Ashari,
Komp. Roxy Mas Blok E1 No. 45, Jakarta Pusat

ON MEDICAL PRESCRIPTION ONLY