

# DIPROXEN

## Tablet

**Composition :** Naproxen 250mg, 500mg & 500mg CR Tablet.

**Indications :** Naproxen is indicated for the treatment of rheumatoid arthritis, juvenile arthritis, osteoarthritis ankylosing spondylitis, acute gout and acute musculoskeletal disorder and dysmenorrhoea.

**Dosage & administration :** Dosage for **Diproxen-250mg & 500mg :** Adults-In rheumatoid arthritis, osteoarthritis and ankylosing spondylitis : 500mg to 1 g daily in two doses at 12 hourly intervals with meal. For Acute Gout- 750mg at once then 250mg every eight hours until the attack has passed. For Acute musculoskeletal disorders : 500mg initially followed by 250mg at 6 to 8 hour intervals with a maximum daily dose after the first day of 1250mg. In each step advice from registered physician should be followed.

**Dosage for Diproxen-CR-500mg :** Adults- One or two tablets once daily. Or as directed by the registered physician.

**Side effects :** Nausea, vomiting, abdominal discomfort and epigastric distress may be encountered. More serious reactions which may occur occasionally are gastro-intestinal bleeding, peptic ulceration. Skin rashes, urticaria, angioedema, glomerulonephritis, convulsions, headache, insomnia, thrombocytopenia, haemolytic anaemia, tinnitus, vertigo, heart burn, constipation may also occur.

**Contraindications :** **Diproxen** is contraindicated in active peptic ulcer disease, active gastro-intestinal bleeding. Hypersensitivity to Naproxen. Since there is a potential for cross-sensitivity reactions, it is important that Naproxen should not be given to patients in whom aspirin or other NSAID's induce asthma, rhinitis or urticaria.

**Pregnancy and lactation :** Pregnancy Category C. Naproxen should be administered during pregnancy only if the potential benefits outweighs the potential risk to the fetus.

Naproxen has been found in the milk of lactating mothers. The use of Naproxen should therefore be avoided in patients who are breast feeding.

**Drug interactions :** Concomitant administration of antacid or cholestyramine can delay the absorption of Naproxen but does not affect its extent. The natriuretic effect of frusemide has been reported to be inhibited by some drugs of this class. Inhibition of renal lithium clearance leading to increases in plasma lithium concentrations has also been reported. Naproxen and other non-steroidal antiinflammatory drugs can reduce the antihypertensive effect of propranolol and other beta-blockers and may increase the risk of renal impairment associated with the use of ACE inhibitors. Probenecid given concurrently increases Naproxen plasma levels and extends its half life considerably. Caution should be taken when Naproxen is used concomitantly with methotrexate, cardiac glycoside, cyclosporin, corticosteroids, quinolones.

**Precautions :** Patients with the history of gastro-intestinal disease, bronchial asthma, chronic liver disease should be closely supervised during Naproxen therapy. Naproxen should not be used in patients having a baseline creatinine clearance less than 20ml/minute.

**Packing : Diproxen-250mg :** 10 x 10's tablets.

**Diproxen-500mg :** 5x10's tablets.

**Diproxen-CR-500mg :** 3x10's tablets.