

For the use of Registered Medical Practitioner or Hospital use or Laboratory use only

Betaloc[®] Tablets/Injection

Composition

Each tablet contains: Metoprolol Tartrate I.P. 50 & 100 mg.

Each ml of injection contains: Metoprolol Tartrate I.P. 1mg

Description : Metoprolol (Betaloc[®]) is a cardioselective beta-blocker, i.e. it acts on β_1 -receptors in the heart at much lower doses than those needed to influence the β_2 -receptors mainly located in peripheral vessels and bronchi. Metoprolol has no membrane stabilising effect nor does it display partial agonistic activity. The stimulant effect of catecholamines, which are increasingly released during physical and mental stress on the heart, is reduced or inhibited by metoprolol. This leads to a decrease in heart rate, cardiac output, cardiac contractility and blood pressure.

Indications Hypertension.

Angina pectoris

Disturbances of cardiac rhythm, especially supraventricular tachycardia, confirmed or suspected acute myocardial infarction, functional heart disorders with palpitations, hyperthyroidism and migraine prophylaxis.

Dosage

Hypertension, Angina pectoris & Cardiac arrhythmias: Betaloc[®] Tablets 100-200mg daily, given in divided doses.

Cardiac Arrhythmias :Intravenously: Initially up to 5 mg injected intravenously at a rate of 1-2 mg per minute. The injection can be repeated at 5 mins intervals until a satisfactory response has been obtained. A total dose of 10-15mg generally proves sufficient. Doses of 20mg or more are unlikely to result in further therapeutic benefit.

Myocardial infarction: Acute intervention: Betaloc[®] should be administered intravenously as soon as possible after symptoms indicating acute MI. Three 5 mg bolus injections should be given at 2 minutes intervals depending on the haemodynamic status of the patient. In patients who tolerate the full intravenous dose (15mg), Betaloc[®] tablets, 50mg four times daily should be started 15 minutes after the last intravenous injection and continued for 48 hours. Patients who do not tolerate the full intravenous (15mg) dose of Betaloc[®] should have their oral treatment initiated with caution, starting with a lower dose.

Maintenance treatment: The oral maintenance dose is generally Betaloc[®] tablets 200mg daily, given in divided doses.

Precautions : As with other beta-blockers, when discontinuing treatment with the drug should as a rule be withdrawn gradually. i.e. over a period of 7-10 days as abrupt interruption of the medication, particularly in patients with ischaemic heart disease, may lead to an acute deterioration in the patient's condition. During pregnancy and in the course of labour, β -blockers should be employed only if their use is mandatory, they may possibly cause undesirable side effects (especially bradycardia) in the foetus and in the newborn infants. In hypertension associated with pregnancy, Betaloc[®] therapy has been shown to achieve a better foetal outcome than conventional therapy. Like all other beta-blockers, Betaloc[®] should not be given in combination with verapamil. The concomitant use of verapamil and β -blockers may cause bradycardia, hypotension and also asystole.

Adverse Effects :The most common side effects appear to be lassitude, gastrointestinal disturbances and disturbances of the sleep pattern. Also reported in rare cases are non-specific skin reactions and coldness of the extremities.

Presentation: Betaloc[®] 50&100mg Tablets-Strip of 10 tablets; Betaloc[®] 1mg Injection:Ampoules of 5ml.

For further information please contact:

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