PARAFON DSC- chlorzoxazone tablet Keltman Pharmaceuticals Inc.

Parafon DSC (chlorzoxazone)

DESCRIPTION

Each caplet (round shaped tablet) contains:

Chlorzoxazone 500 mg

Inactive ingredients: Colloidal Silicon Dioxide, Croscarmellose Sodium, docusate Sodium, lactose anhydrous, magnesium stearate, microcrystalline cellulose, sodium benzoate, D&C yellow No. 10 alum. Lake, FD&C blue no. 1 alum. Lake HT

C₂H₄CINO₂ Molecular Weight: 169:57

CLINICAL PHARMACOLOGY

Chlorzoxazone is a centrally-acting agent for painful musculoskeletal conditions. Data available from animal experiments as well as human study indicate that chlorzoxazone acts primarily at the level of the spinal cord and subcortical areas of the brain where it inhibits multisynaptic reflex arcs involved in producing and maintaining skeletal muscle spasm of varied etiology. The clinical result is a reduction of the skeletal muscle spasm with relief of pain and increased mobility of the involved muscles. Blood levels of chlorzoxazone can be detected in people during the first 30 minutes and peak levels may be reached, in the majority of the subjects, in about 1 to 2 hours after oral administration of chlorzoxazone. Chlorzoxazone is rapidly metabolized and is excreted in the urine, primarily in a conjugated form as the glucuronide. Less than one percent of a dose of chlorzoxazone is excreted unchanged in the urine in 24 hours.

INDICATIONS AND USAGE

Chlorzoxazone tablets are indicated as an adjunct to rest, physical therapy, and other measures for the relief of discomfort associated with acute, painful musculoskeletal conditions. The mode of action of this drug has not been clearly identified, but may be related to its sedative properties. Chlorzoxazone does not directly relax tense skeletal muscles in man.

CONTRAINDICATIONS

Chlorzoxazone tablets are contraindicated in patients with known intolerance to the drug.

WARNINGS

Serious (including fatal) hepatocellular toxicity has been reported rarely in patients receiving chlorzoxazone. The mechanism is unknown but appears to be idiosyncratic and unpredictable. Factors predisposing patients to this rare event are not known. Patients should be instructed to report early signs

and/or symptoms of hepatotoxicity such as fever, rash, anorexia, nausea, vomiting, fatigue, right upper quadrant pain, dark urine, or jaundice. Chlorzoxazone should be discontinued immediately and a physician consulted if any of these signs or symptoms develop. Chlorzoxazone use should also be discontinued if a patient develops abnormal liver enzymes (e.g. AST, ALT, alkaline phosphatase and bilirubin).

The concomitant use of alcohol or other central nervous system depressants may have an additive effect.

Usage in Pregnancy

The safe use of chlorzoxazone has not been established with respect to the possible adverse effects upon fetal development. Therefore, it should be used in women of childbearing potential only when, in the judgment of the physician, the potential benefits outweigh the possible risks.

PRECAUTIONS

Chlorzoxazone should be used with caution in patients with known allergies or with a history of allergic reactions to drugs. If a sensitivity reaction occurs such as urticaria, redness, or itching of the skin, the drug should be stopped.

If any symptoms suggestive of liver dysfunction are observed, the drug should be discontinued.

ADVERSE REACTIONS

Chlorzoxazone containing products are usually well tolerated. It is possible in rare instances that chlorzoxazone may have been associated with gastrointestinal bleeding. Drowsiness, dizziness, lightheadedness, malaise, or overstimulation may be noted by an occasional patient. Rarely, allergic-type skin rashes, petechiae, or ecchymoses may develop during treatment. Angioneurotic edema or anaphylactic reactions are extremely rare. There is no evidence that the drug will cause renal damage. Rarely, a patient may note discoloration of the urine resulting from a phenolic metabolite of chlorzoxazone. This finding is of no known clinical significance.

OVERDOSAGE

Symptoms

Initially, gastrointestinal disturbances such as nausea, vomiting, or diarrhea together with drowsiness, dizziness, lightheadedness or headache may occur. Early in the course there may be malaise or sluggishness followed by marked loss of muscle tone, making voluntary movement impossible. The deep tendon reflexes may be decreased or absent. The sensorium remains intact, and there is no peripheral loss of sensation. Respiratory depression may occur with rapid, irregular respiration and intercostal and substernal retraction. The blood pressure is lowered, but shock has not been observed.

Treatment

Gastric lavage or induction of emesis should be carried out, followed by administration of activated charcoal. Thereafter, treatment is entirely supportive. If respirations are depressed, oxygen and artificial respiration should be employed and a patent airway assured by use of an oropharyngeal airway or endotracheal tube. Hypotension may be counteracted by use of dextran, plasma, concentrated albumin or a vasopressor agent such as norepinephrine. Cholinergic drugs or analeptic drugs are of no value and should not be used.

DOSAGE AND ADMINISTRATION

Usual Adult Dosage

One caplet three or four times daily. If adequate response is not obtained with this dose, it may be increased to $1\frac{1}{2}$ caplets (750 mg) three or four times daily. As improvement occurs dosage can usually be reduced.

HOW SUPPLIED

Chlorzoxazone tablets 500 mg Tablets, (round shaped tablet, light green, imprinted "555/585" and "Barr" scored).

NDC 68387-375-90, bottles of 90 NDC 68387-375-30, bottles of 30

Dispense in tight container as defined in the USP/NF.

Store at controlled room temperature (15°–30°C, 59°–86°F).

Manufactured for:

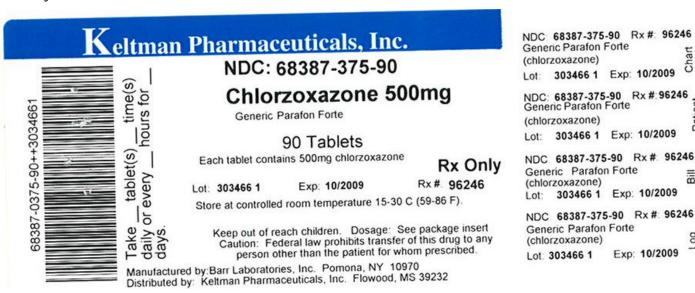
Keltman Pharmaceuticals Inc.

1 Lakeland Square, Suite A Flowood, Ms 39232

R4

Package Label - Principal Display Panel – 90-count Bottle, 500 mg Tablets NDC 68387-375-90

Rx Only



Patient

PARAFON DSC

chlorzoxazone tablet

Product Information			
Product Type	HUMAN PRESCRIPTION DRUG	Item Code (Source)	NDC:68387-375
Route of Administration	ORAL		

Active Ingredient/Active Moiety

Ingredient Name	Basis of Strength	Strength
Chlorzoxazone (UNII: H0 DE420 U8G) (Chlorzoxazone - UNII:H0 DE420 U8G)	Chlorzoxazone	500 mg

Inactive Ingredients	
Ingredient Name	Strength
COLLOIDAL SILICON DIO XIDE (UNII: ETJ7Z6 XBU4)	
CROSCARMELLOSE SODIUM (UNII: M28 OL1HH48)	
DO CUSATE SODIUM (UNII: F05Q2T2JA0)	
ANHYDROUS LACTOSE (UNII: 3S Y5LH9 PMK)	
MAGNESIUM STEARATE (UNII: 70097M6I30)	
CELLULOSE, MICRO CRYSTALLINE (UNII: OP1R32D61U)	
SODIUM BENZOATE (UNII: OJ245FE5EU)	
D&C YELLOW NO. 10 (UNII: 35SW5USQ3G)	
FD&C BLUE NO. 1 (UNII: H3R47K3TBD)	

Product Characteristics			
Color	GREEN (light green)	Score	2 pieces
Shape	ROUND	Size	17mm
Flavor		Imprint Code	555;585;Barr
Contains			

Packaging			
# Item Code	Package Description	Marketing Start Date	Marketing End Date
1 NDC:68387-375-90	90 in 1 BOTTLE		
2 NDC:68387-375-30	30 in 1 BOTTLE		

Marketing Information			
Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date
ANDA	ANDA089895	06/20/2004	

Labeler - Keltman Pharmaceuticals Inc. (362861077)

Establishment				
Name	Address	ID/FEI	Business Operations	
Barr Laboratories, Inc.		824749340	MANUFACTURE	

Revised: 2/2010 Keltman Pharmaceuticals Inc.