NIVA-PLUS- folic acid, vitamin a, ascorbic acid, calcium sulfate, ferrous fumarate, cholecalciferol, .alpha.-tocopherol acetate, dl-, thiamine mononitrate, riboflavin, niacinamide, pyridoxine hydrochloride, cyanocobalamin, zinc oxide, and cupric oxide tablet, coated Nivagen Pharmaceuticals, Inc.

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Niva-Plus™ Tablets

**Rx Only** 

## DESCRIPTION

Niva-Plus<sup>™</sup> is an orally administered prescription vitamin for the dietary management of patients with nutritional deficiencies or are in need of nutritional supplementation. Niva-Plus<sup>™</sup> is an oval, beige tablet with "N050" debossed on one side.

Supplement Facts		
Servings per Bottle: 100 Serving Size: 1 tablet Each tablet contains:	% DV Adults & Children 4 Years or More	
Folic Acid	1 mg	250 %
<b>Vitamin A</b> (Input as vitamin A acetate and beta carotene)	4000 IU	80%
<b>Vitamin C</b> (ascorbic acid)	120 mg	200%
<b>Calcium</b> (calcium sulfate)	200 mg	20%
<b>Iron</b> (ferrous fumarate)	27 mg	<b>150 %</b>
<b>Vitamin D</b> 3 (cholecalciferol)	400 IU	100%
<b>Vitamin E</b> (dl-alpha-tocopheryl acetate)	22 IU	157 %
<b>Vitamin B</b> <sub>1</sub> (thiamine mononitrate)	1.84 mg	123 %
<b>Vitamin B</b> <sub>2</sub> (riboflavin)	3 mg	176%
<b>Niacinamide</b> (vitamin $B_3$ )	20 mg	100%
<b>Vitamin B</b> 6 (pyridoxine HCl)	10 mg	500%
<b>Vitamin B<sub>12</sub></b> (cyanocobalamin)	12 mcg	200%
<b>Zinc</b> (zinc oxide)	25 mg	167%
<b>Copper</b> (cupric oxide)	2 mg	100%

**Other Ingredients:** Microcrystalline Cellulose, Beige Color Coating (Hydroxypropylmethyl Cellulose, Polyvinyl Alcohol, Titanium Dioxide, Polyethylene Glycol, Talc, FD&C Yellow #6 Lake, FD&C Blue #2 Lake), Pregelatinized Starch, Croscarmellose Sodium, Di Calcium Phosphate, Magnesium Stearate, Stearic Acid, Fumed Silica, Ascorbyl Palmitate.

### INDICATIONS AND USAGE

Niva-Plus<sup>™</sup> is indicated for the supplemental requirements of patients with nutritional deficiencies or are in need of nutritional supplementation.

## CONTRAINDICATIONS

This product is contraindicated in patients with known hypersensitivity to any of the ingredients.

WARNING: Accidental overdose of iron-containing products is a leading cause of fatal poisoning in children under 6. KEEP THIS PRODUCT OUT OF REACH OF CHILDREN. In case of accidental overdose, call a doctor or poison control center immediately.

## PRECAUTIONS

## General

Folic acid, when prescribed as a single agent in doses above 0.1 mg daily, may obscure the detection of  $B_{12}$  deficiency (specifically, the administration of folic acid may reverse the hematological manifestations of  $B_{12}$  deficiency, including pernicious anemia, while not addressing the neurological manifestations). Reduced folates may be less likely than folic acid to mask vitamin  $B_{12}$  deficiency. Folate therapy alone is inadequate for the treatment of  $B_{12}$  deficiency.

## **PATIENT INFORMATION**

Niva-Plus<sup>™</sup> is a prescription vitamin for the use only under the direction and supervision of a licensed physician.

## INTERACTIONS

Pyridoxine hydrochloride should not be given to patients receiving the drug levodopa, because the action of levodopa is antagonized by pyridoxine hydrochloride. However, pyridoxine hydrochloride may be used concurrently in patients receiving a preparation containing both carbidopa and levodopa.

## Drugs which may interact with folate include:

- Antiepileptic drugs (AED): The AED class including, but not limited to, phenytoin, carbamazepine, primidone, valproic acid, phenobarbital and lamotrigine have been shown to impair folate absorption and increase the metabolism of circulating folate. Additionally, concurrent use of folic acid has been associated with enhanced phenytoin metabolism, lowering the levels of this AED in the blood and allowing breakthrough seizures to occur.
- Capecitabine: Folinic acid (5-formyltetrahydrofolate) may increase the toxicity of Capecitabine.
- Cholestyramine: Reduces folic acid absorption and reduces serum folate levels.
- Colestipol: Reduces folic acid absorption and reduces serum folate levels.
- Cycloserine: Reduces folic acid absorption and reduces serum folate levels.
- Dihydrofolate Reductase Inhibitors (DHFRI): DHFRIs block the conversion of folic acid to its active forms, and lower plasma and red blood cell folate levels. DHFRIs include aminopterin, methotrexate, pyrimethamine, triamterene, and trimethoprim.
- Fluoxetine: Fluoxetine exerts a noncompetitive inhibition of the 5-methyltetrahydrofolate active transport in the intestine.
- Isotretinoin: Reduced folate levels have occurred in some patients taking isotretinoin.
- Nonsteroidal Anti-inflammatory Drugs (NSAIDs): NSAIDs have been shown to inhibit some folate dependent enzymes in laboratory experiments. NSAIDs include ibuprofen, naproxen, indomethacin and sulindac.
- Oral Contraceptives: Serum folate levels may be depressed by oral contraceptive therapy.
- Methylprednisolone: Reduced serum folate levels have been noted after treatment with methylprednisolone.
- Pancreatic Enzymes: Reduced folate levels have occurred in some patients taking pancreatic extracts.
- Pentamidine: Reduced folate levels have been seen with prolonged intravenous pentamidine.
- Smoking and alcohol: Reduced serum folate levels have been noted.
- Sulfasalazine: Inhibits the absorption and metabolism of folic acid.

- Metformin treatment in patients with type 2 diabetes decreases serum folate.
- Warfarin can produce significant impairment in folate status after a 6 month therapy.

## **ADVERSE REACTIONS**

Allergic sensitization has been reported following both oral and parenteral administration of folic acid, as well as possibly the use of other forms of folates - including reduced folates. Paresthesia, somnolence, nausea and headaches have been reported with pyridoxine hydrochloride. Mild transient diarrhea, polycythemia vera, itching, transitory exanthema and the feeling of swelling of the entire body have been associated with cyanocobalamin.

#### **Ferrous Fumarate**

Gastrointestinal disturbances (anorexia, nausea, diarrhea, constipation) occur occasionally, but are usually mild and subside with continuation of therapy and physician encouragement. Although, the absorption of iron is best when taken between meals, occasional gastrointestinal disturbances may be controlled giving Niva-Plus<sup>™</sup> shortly after meals.

### DOSAGE AND ADMINISTRATION

Before, during and after pregnancy, one tablet daily, or as prescribed by a physician.

## HOW SUPPLIED

Niva-Plus<sup>™</sup> is supplied as:

Bottles of 100 tablets: 75834-050-01

### **KEEP OUT OF REACH OF CHILDREN**

### **Rx Only**

Manufactured for:

Nivagen Pharmaceuticals, Inc., Sacramento, CA 95827 nivagen.com

Rev. 09/14

### PRINCIPAL DISPLAY PANEL - 100 Tablet Bottle Label

75834-050-01 Rx Only Niva-Plus™

Tablets

NIVAGEN PHARMACEUTICALS

**100 TABLETS** 



# NIVA-PLUS

folic acid, vitamin a, ascorbic acid, calcium sulfate, ferrous fumarate, cholecalciferol, .alpha.-tocopherol acetate, dl-, thiamine mononitrate, riboflavin, niacinamide, pyridoxine hydrochloride, cyanocobalamin, zinc oxide, and cupric oxide tablet, coated

Product Information				
Product Type	DIETARY SUPPLEMENT	Item Code (Source)	NHRIC:75834-050	
Route of Administration	ORAL			

Active Ingredient/Active Moiety			
Ingredient Name	<b>Basis of Strength</b>	Strength	
FOLIC ACID (UNII: 935E97BOY8) (FOLIC ACID - UNII:935E97BOY8)	FOLIC ACID	1 mg	
VITAMIN A (UNII: 81G40H8B0T) (VITAMIN A - UNII:81G40H8B0T)	VITAMIN A	4000 [iU]	
ASCORBIC ACID (UNII: PQ6CK8PD0R) (ASCORBIC ACID - UNII:PQ6CK8PD0R)	ASCORBIC ACID	120 mg	
CALCIUM SULFATE (UNII: WAT0 DDB505) (CALCIUM CATION - UNII:2M83C4R6ZB)	CALCIUM SULFATE	200 mg	
FERROUS FUMARATE (UNII: R5L488RY0Q) (FERROUS CATION - UNII:GW895810WR)	FERROUS CATION	27 mg	
CHOLECALCIFEROL (UNII: 1C6V77QF41) (CHOLECALCIFEROL - UNII:1C6V77QF41)	CHOLECALCIFEROL	400 [iU]	
<b>.ALPHATOCOPHEROL ACETATE, DL-</b> (UNII: WR1WPI7EW8) (.ALPHATOCOPHEROL, DL UNII:7QWA1RIO01)	.ALPHATOCOPHEROL, DL-	22 [iU]	
THIAMINE MONONITRATE (UNII: 8 K0 I0 49 19 X) (THIAMINE ION - UNII:4ABT0 J9 45J)	THIAMINE	1.84 mg	
RIBOFLAVIN (UNII: TLM2976OFR) (RIBOFLAVIN - UNII:TLM2976OFR)	RIBOFLAVIN	3 mg	
NIACINAMIDE (UNII: 25X5118RD4) (NIACINAMIDE - UNII:25X5118RD4)	NIACINAMIDE	20 mg	
<b>PYRIDO XINE HYDRO CHLO RIDE</b> (UNII: 68 Y4CF58 BV) (PYRIDO XINE - UNII:KV2JZ1BI6Z)	PYRIDOXINE HYDROCHLORIDE	10 mg	
CYANO COBALAMIN (UNII: P6 YC3EG204) (CYANOCOBALAMIN - UNII:P6 YC3EG204)	CYANOCOBALAMIN	12 ug	
ZINC OXIDE (UNII: SOI2LOH54Z) (ZINC OXIDE - UNII:SOI2LOH54Z)	ZINC OXIDE	25 mg	
CUPRIC OXIDE (UNII: V1XJQ704R4) (CUPRIC CATION - UNII:8CBV67279L)	CUPRIC CATION	2 mg	

	Ingredient Nam	e	Strength
CELLULOSE, MICROCR	YSTALL INE (UNII: OP1R32D61U)		
HYPROMELLOSES (UNI	I: 3NXW29V3WO)		
POLYVINYL ALCOHOL	(UNII: 532B59J990)		
TITANIUM DIO XIDE (UN	II: 15FIX9V2JP)		
POLYETHYLENE GLYC	<b>DLS</b> (UNII: 3WJQ0SDW1A)		
TALC (UNII: 7SEV7J4R1U	)		
FD&C YELLOW NO.6 (	UNII: H77VEI93A8)		
ALUMINUM O XIDE (UNI	I: LMI26O6933)		
FD&C BLUE NO. 2 (UNII	L06K8R7DQK)		
CROSCARMELLOSE SO	DIUM (UNII: M28OL1HH48)		
CALCIUM PHO SPHATE,	DIBASIC, ANHYDROUS (UNII: L11K75	P92J)	
MAGNESIUM STEARATH	E (UNII: 70097M6I30)		
STEARIC ACID (UNII: 4EI	LV7Z65AP)		
SILICON DIOXIDE (UNII	ETJ7Z6XBU4)		
ASCORBYL PALMITATI	E (UNII: QN83US2B0N)		
Packaging			
# Item Code	Package Description	Marketing Start Date	<b>Marketing End Date</b>
<b>1</b> NHRIC:75834-050-01	100 in 1 BOTTLE		
Marketing Infor			
Marketing Category	Application Number or Monogra	ph Citation Marketing Start	t Date Marketing End Dat
DIETARY SUPPLEMENT		11/24/2014	

Supplement Facts				
Serving Size :		Serving per Container :		
	<b>Amount Per Serving</b>	% Daily Value		
color				
scoring	1			
shape				
size (solid drugs)	22 mm			
imprint				

Labeler - Nivagen Pharmaceuticals, Inc. (052032418)

Revised: 3/2015

Nivagen Pharmaceuticals, Inc.