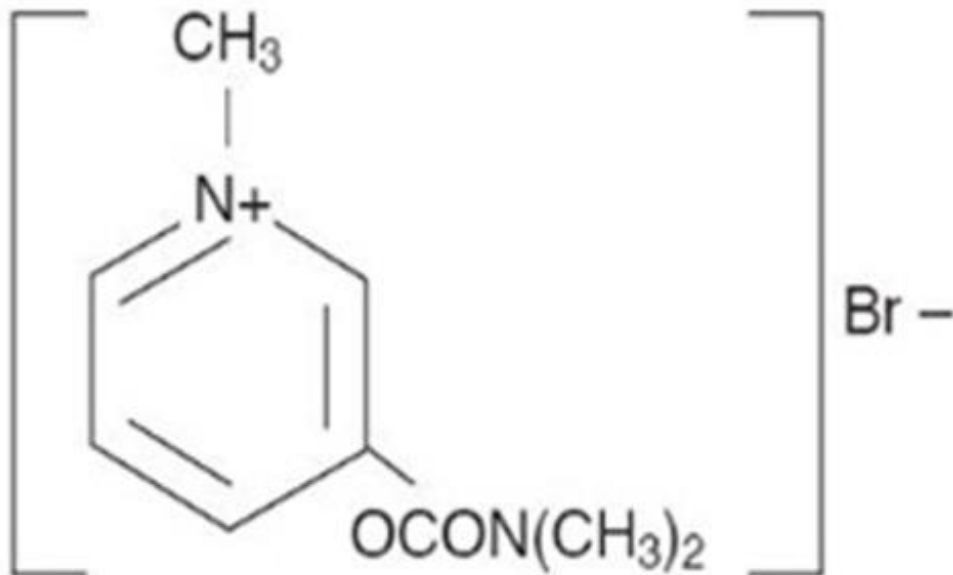


PYRIDOSTIGMINE BROMIDE- pyridostigmine bromide solution
Amneal Pharmaceuticals NY LLC

Pyridostigmine Bromide Oral Solution, USP 60 mg/5 mL

DESCRIPTION

Pyridostigmine bromide, USP is an orally active cholinesterase inhibitor. Chemically, pyridostigmine bromide, USP is 3-hydroxy-1-methylpyridinium bromide dimethylcarbamate. Its structural formula is:



Pyridostigmine bromide, USP is available as a clear, pink to red colored raspberry flavored oral solution containing 60 mg pyridostigmine bromide, USP per 5 mL (1 teaspoonful) in a vehicle containing 5% alcohol, FD&C Red # 40, FD&C Blue # 1, glycerin, lactic acid, sodium benzoate, sorbitol solution, sucrose, artificial juicy raspberry flavor and purified water.

ACTIONS

Pyridostigmine bromide inhibits the destruction of acetylcholine by cholinesterase and thereby permits freer transmission of nerve impulses across the neuromuscular junction. Pyridostigmine is an analog of neostigmine (Prostigmin™), but differs from it in certain clinically significant respects; for example, pyridostigmine is characterized by a longer duration of action and fewer gastrointestinal side effects.

INDICATIONS

Pyridostigmine bromide oral solution is useful in the treatment of myasthenia gravis.

CONTRAINDICATIONS

Pyridostigmine bromide is contraindicated in mechanical intestinal or urinary obstruction, and particular caution should be used in its administration to patients with bronchial asthma. Care should be observed in the use of atropine for counteracting side effects, as discussed below.

WARNINGS

Although failure of patients to show clinical improvement may reflect underdosage, it can also be indicative of overdosage. As is true of all cholinergic drugs, overdosage of pyridostigmine bromide may result in cholinergic crisis, a state characterized by increasing muscle weakness which, through involvement of the muscles of respiration, may lead to death. Myasthenic crisis due to an increase in the severity of the disease is also accompanied by extreme muscle weakness, and thus may be difficult to distinguish from cholinergic crisis on a symptomatic basis. Such differentiation is extremely important, since increases in doses of pyridostigmine bromide or other drugs of this class in the presence of cholinergic crisis or of a refractory or "insensitive" state could have grave consequences. Osserman and Genkins¹ indicate that the differential diagnosis of the two types of crisis may require the use of Tensilon™ (edrophonium chloride) as well as clinical judgment. The treatment of the two conditions obviously differs radically. Whereas the presence of myasthenic crisis suggests the need for more intensive anticholinesterase therapy, the diagnosis of cholinergic crisis, according to Osserman and Genkins¹, calls for the prompt *withdrawal* of all drugs of this type. The immediate use of atropine in cholinergic crisis is also recommended.

Atropine may also be used to abolish or obtund gastrointestinal side effects or other muscarinic reactions; but such use, by masking signs of overdosage, can lead to inadvertent induction of cholinergic crisis.

For detailed information on the management of patients with myasthenia gravis, the physician is referred to one of the excellent reviews such as those by Osserman and Genkins,² Grob³ or Schwab.^{4,5}

Usage in Pregnancy

The safety of pyridostigmine bromide during pregnancy or lactation in humans has not been established. Therefore, use of pyridostigmine bromide in women who may become pregnant requires weighing the drug's potential benefits against its possible hazards to mother and child.

PRECAUTIONS

Pyridostigmine is mainly excreted unchanged by the kidney.^{6,7,8} Therefore, lower doses may be required in patients with renal disease, and treatment should be based on titration of drug dosage to effect.^{6,7}

ADVERSE REACTIONS

The side effects of pyridostigmine bromide are most commonly related to overdosage and generally are of two varieties, muscarinic and nicotinic. Among those in the former group are nausea, vomiting, diarrhea, abdominal cramps, increased peristalsis, increased salivation, increased bronchial secretions, miosis and diaphoresis. Nicotinic side effects are comprised chiefly of muscle cramps, fasciculation and weakness. Muscarinic side effects can usually be counteracted by atropine, but for reasons shown in the preceding section the expedient is not without danger. As with any compound containing the bromide radical, a skin rash may be seen in an occasional patient. Such reactions usually subside promptly upon discontinuance of the medication.

To report SUSPECTED ADVERSE REACTIONS, contact Amneal Pharmaceuticals at 1-877-835-5472 or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

DOSAGE AND ADMINISTRATION

Pyridostigmine bromide oral solution is available as follows:

Oral Solution-

Raspberry-flavored, containing 60 mg pyridostigmine bromide per teaspoonful (5 mL). This form permits accurate dosage adjustment for children and "brittle" myasthenic patients who require fractions of 60 mg doses. It is more easily swallowed, especially in the morning, by patients with bulbar involvement.

Dosage:

The size and frequency of the dosage must be adjusted to the needs of the individual patient.

Oral Solution -

The average dose is ten 5 mL teaspoonfuls daily, spaced to provide maximum relief when maximum strength is needed. In severe cases as many as 25 teaspoonfuls a day may be required, while in mild cases one to six teaspoonfuls a day may suffice.

NOTE: For information on a diagnostic test for myasthenia gravis, and for the evaluation and stabilization of therapy, please see product literature on Tensilon (edrophonium chloride).

HOW SUPPLIED

Pyridostigmine bromide oral solution, USP **60 mg/5 mL** is available as a clear, pink to red colored raspberry flavored solution.

It is supplied as follows:

One 473 mL bottle: NDC 69238-1731-2

Store pyridostigmine bromide oral solution, USP at 20° to 25°C (68° to 77°F); excursions permitted between 15° to 30°C (59° to 86°F) [see USP Controlled Room Temperature]. Dispense in tight, light-resistant containers as defined by the USP.

REFERENCES

1. Osserman KE, Genkins G. Studies in myasthenia gravis: Reduction in mortality rate after crisis. *JAMA*. Jan 1963; 183:97-101.
2. Osserman KE, Genkins G. Studies in myasthenia gravis. *NY State J Med*. June 1961; 61:2076-2085.
3. Grob D. Myasthenia gravis. A review of pathogenesis and treatment. *Arch Intern Med*. Oct 1961; 108:615-638.
4. Schwab RS. Management of myasthenia gravis. *New Eng J Med*. Mar 1963; 268:596-597.
5. Schwab RS. Management of myasthenia gravis. *New Eng J Med*. Mar 1963; 268:717-719.
6. Cronnelly R, Stanski DR, Miller RD, Sheiner LB. Pyridostigmine kinetics with and without renal function. *Clin Pharmacol Ther*. 1980; 28:No. 1, 78-81.
7. Miller RD. Pharmacodynamics and pharmacokinetics of anticholinesterase. In: Ruegheimer E, Zindler M, ed. *Anesthesiology*. (Hamburg, Germany: Congress; Sep 14-21, 1980; 222-223.) (Int Congr. No. 538), Amsterdam, Netherlands: Excerpta Medica; 1981.
8. Breyer-Pfaff U, Maier U, Brinkmann AM, Schumm F. Pyridostigmine kinetics in healthy subjects and patients with myasthenia gravis. *Clin Pharmacol Ther*. 1985;5:495-501.

Distributed by:

Amneal Pharmaceuticals LLC

Bridgewater, NJ 08807

Rev. 04-2019-00

PRINCIPAL DISPLAY PANEL

NDC 69238-1731-2

**Pyridostigmine Bromide
Oral Solution, USP**

60 mg/5 mL

Rx only 1 Pint (473 mL)

Distributed by:

Amneal Pharmaceuticals LLC
Bridgewater, NJ 08807

Rev. 04-2019-00



2" x 1.25"
Non-Varnish Area for
Lot No. and Exp Date

NDC 69238-1731-2

**Pyridostigmine Bromide
Oral Solution, USP**

60 mg/5 mL

5 mL (1 teaspoonful) contains **60 mg** pyridostigmine bromide, USP.

Alcohol 5%

Usual Dosage: The size and frequency of the dosage must be adjusted to the needs of the individual. The average is ten 60 mg (5 mL) doses per day, spaced to provide maximum relief when maximum strength is needed. In severe cases, as many as 25 or more teaspoonfuls a day may be required, while in mild cases one to six teaspoonfuls a day may suffice. **IMPORTANT:** For additional dosage information and other important prescribing information, read accompanying insert.

Storage: Store at 20° to 25°C (68° to 77°F); excursions permitted between 15° to 30°C (59° to 86°F) [see USP Controlled Room Temperature].

Dispense in tight, light-resistant containers as defined by the USP.

Rx only

**Net Contents:
1 Pint (473 mL)**



PYRIDOSTIGMINE BROMIDE

pyridostigmine bromide solution

Product Information

Product Type	HUMAN PRESCRIPTION DRUG	Item Code (Source)	NDC:69238-1731
Route of Administration	ORAL		

Active Ingredient/Active Moiety

Ingredient Name	Basis of Strength	Strength
PYRIDOSTIGMINE BROMIDE (UNII: KVI301NA53) (PYRIDOSTIGMINE -	PYRIDOSTIGMINE	60 mg

UNII:19QM69HH21)	BROMIDE	in 5 mL
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Inactive Ingredients

Ingredient Name	Strength
ALCOHOL (UNII: 3K9958V90M)	
FD&C RED NO. 40 (UNII: WZB9127XOA)	
FD&C BLUE NO. 1 (UNII: HBR47K3TBD)	
GLYCERIN (UNII: PDC6A3C0OX)	
LACTIC ACID (UNII: 33X04XA5AT)	
SODIUM BENZOATE (UNII: OJ245FE5EU)	
SORBITOL (UNII: 506T60A25R)	
SUCROSE (UNII: C151H8M554)	
WATER (UNII: 059QF0K00R)	

Product Characteristics

Color	PINK (clear, pink to red colored)	Score	
Shape		Size	
Flavor	RASPBERRY	Imprint Code	
Contains			

Packaging

#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1	NDC:69238-1731-2	473 mL in 1 BOTTLE; Type 0: Not a Combination Product	01/17/2020	

Marketing Information

Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date
ANDA	ANDA212702	01/17/2020	

Labeler - Amneal Pharmaceuticals NY LLC (123797875)

Establishment

Name	Address	ID/FEI	Business Operations
Amneal Pharmaceuticals, LLC		963900878	ANALYSIS(69238-1731) , LABEL(69238-1731) , MANUFACTURE(69238-1731) , PACK(69238-1731)