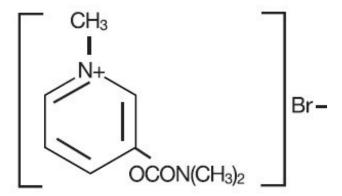
PRYIDOSTIGMINE BROMIDE- pyridostigmine bromide solution Apnar Pharma LP

PRYIDOSTIGMINE BROMIDE pyridostigmine bromide solution

DESCRIPTION

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



Pyridostigmine bromide oral soution USP is available in the following form: *Oral solution* containing 60 mg pyridostigmine bromide per teaspoonful in a vehicle containing 5% alcohol, glycerin, lactic acid, sodium benzoate, sorbitol, sucrose, FD&C Red No. 40, FD&C Blue No. 1, raspberry flavor and water.

ACTION

Pyridostigmine bromide oral solution 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 (Prostigmine TM), 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.

INDICATION

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

CONTRAINDICATIONS

Pyridostigmine bromide oral solution 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 oral solution 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 oral solution 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 Genkins ¹ indicate that the differential diagnosis of the two types of crisis may require the use of Tensilon TM(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 Genkins, ¹ 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 Grob 3 or Schwab. 4,5

USE IN PREGNANCY

The safety of pyridostigmine bromide oral solution during pregnancy or lactation in humans has not been established. Therefore, use of pyridostigmine bromide oral solution 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

PEDIATRIC USE

Safety and effectiveness in pediatric patients have not been established.

ADVERSE REACTIONS

The side effects of pyridostigmine bromide oral solution 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 APNAR PHARMA LP at 1-855-642-2594 or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

DOSAGE AND ADMINISTRATION

Pyridostigmine bromide oral solution is available in the following dosage form:

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 TM (edrophonium chloride).

HOW SUPPLIED

Oral Solution, 60 mg pyridostigmine bromide per teaspoonful (5 mL) and 5% alcohol — bottles of 16 fluid ounces (1 pint)

(NDC: 24689-104-01).

Store pyridostigmine bromide oral solution USP at 25°C (77°F); excursions permitted to 15°C-30°C (59°F-86°F).

Brands mentioned are trademarks of their respective owners.

REFERENCES

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 patho-genesis 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. Anaesthesiology. (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.

PYRIDOSTIGMINE BROMIDE ORAL SOLUTION 60MG/5ML BOTTLE

Manufactured for: Apnar Pharma LP Chino, CA 91710 USA

Rev. 10/2021

5 ml (1 teaspoonful) contains 60 mg pyridostigmine bromide.

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 maybe 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.

Store at 25°C (77°F); excursions permitted to 15°C to 30°C (59°F to 86°F).

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

Manufactured For: Apnar Pharma LP Chino, CA 91710 USA Rev. 10/2021 NDC: 24689-104-01

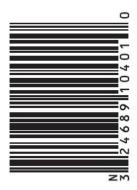


5 ml = 60 mg 1 Pint (473 ml)

Alcohol 5%

Rx only





Varnish Free Area

PRYIDOSTIGMINE BROMIDE

pyridostigmine bromide solution

Product Information			
Product Type	HUMAN PRESCRIPTION DRUG	Item Code (Source)	NDC:24689-104
Route of Administration	ORAL		

Active Ingredient/Active Moiety				
Ingredient Name	Basis of Strength	Strength		
PYRIDOSTIGMINE BROMIDE (UNII: KVI301NA53) (PYRIDOSTIGMINE - UNII:19QM69HH21)	PYRIDOSTIGMINE BROMIDE	60 mg in 5 mL		

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

FD&C BLUE NO. 1 (UNII: H3R47K3TBD)		
RASPBERRY (UNII: 4N14V5R27W)		
WATER (UNII: 059QF0KO0R)		

Product Characteristics		
Color	orange	Score
Shape		Size
Flavor	RASPBERRY	Imprint Code
Contains		

l	Packaging			
	# Item Code	Package Description	Marketing Start Date	Marketing End Date
	1 NDC:24689-104-01	473 mL in 1 BOTTLE, PLASTIC; Type 0: Not a Combination Product	06/01/2024	

Marketing Information				
Marketing Application Number or Monograph Category Citation		Marketing Start Date	Marketing End Date	
ANDA	ANDA208797	06/01/2024		

Labeler - Apnar Pharma LP (079568229)

Establishment			
Name	Address	ID/FEI	Business Operations
InvaTech Pharma Solutions LLC		078602180	manufacture(24689-104), analysis(24689-104), pack(24689-104), label(24689-104)

Revised: 3/2024 Apnar Pharma LP