

Cortenema

Hydrocortisone 100 mg/60 ml

هیدرو کورتیزون

شکل دارو : Rectal Suspension (Enema)

موارد مصرف:

بیماریهای التهابی روده

بیماری کولیت اولسراتیو

بسته بندی ۷ عدد ۶۰ سی سی

تحت پوشش تمام بیمه ها



EDP

اسپادانا دارو پارس

Espadana Darou Pars

ثبت و نماینده انحصاری : شرکت اسپادانا دارو پارس
توزیع : شرکت های پخش معتبر در سراسر کشور
دپارتمان بازاریابی و فروش / واحد CRM : ۰۲۱-۲۲۲۵۱۱۴۰
دپارتمان علمی : ۰۲۱-۲۲۲۵۰۶۱۷

پگافرون



بهترین انتخاب در درمان بیماران مبتلا به
"هیپاتیت سی"



تحت پوشش بیمه‌های: تأمین اجتماعی، خدمات درمانی و نیروهای مسلح

دارای گواهی تائید کیفیت از مراکز معتبر بین المللی
نظارت بر ساخت داروهای بیوتکنولوژی از اروپا

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دارای گواهینامه بالاترین استاندارد کیفیت اروپا (EDQM) برای ماده موثره

بکارگیری فرمولاسیون منحصر به فرد در ساخت جهت محافظت کامل ماده موثره از اسید معده

مدت اثر طولانی ترو تداخل دارویی پایین تر نسبت به سایر مهار کننده های پمپ هیدروژن

بیشترین پنتوپرازول نسخه شده در اروپای مرکزی در سال ۲۰۰۹



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omeprazole
Capsules 20 mg

بکارگیری تکنولوژی منحصر بفرد در تولید پلت های مقاوم به اسید جهت محافظت کامل ماده موثره از اسید معده

اثر بخشی، کیفیت و ایمنی اثبات شده در مطالعات بالینی بر روی بیش از ۷۵۰۰۰ بیمار

بیش از ۲۰ سال حضور مداوم به عنوان دارویی با کیفیت برتر در بیش از ۲۷ کشور دنیا



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PANTOZOL®
PANTOPRAZOLE
Quality you can trust



- Well- tolerated and highly effective drug.
- Patient friendly and convenient to use.
- Cost effective.
- Simple to use both orally and intravenously.

Prescribing Information: PANTOZOL® 40mg. Composition: Active Ingredient: 1 gastro-resistant tablet contains: Pantoprazole sodium sesquihydrate 45.1 mg (corresponding to 40mg pantoprazole). Excipients: Sodium carbonate, D-mannitol (corresponding to 0.0036 BU), crospovidone, povidone K 90, povidone K 25, calcium stearate, propylene glycol, methylhydroxypropylcellulose, poly (ethylacrylate-co-methacrylic acid) 1:1 poly sorbate 80 sodium dodecyl sulfate, triethyl citrate, colours (E 171, E 172) printing ink. **Pharmaceutical form and contents:** Gastro-resistant tablets: Packs of benzimidazole, 15 and 30 tablets. **Pharmaco-therapeutic / Indication group / action mechanism:** Selective proton pump inhibitor, substituted benzimidazole. **Indications:** In combination with two appropriate antibiotic (see Pansology) for the eradication of *Helicobacter pylori* in patients with peptic ulcers with the objective of reducing the recurrence of duodenal and gastric ulcers caused by this microorganism. -Duodenal ulcer. -Gastric ulcer. -Moderate and severe cases of inflammation of the esophagus (reflux esophagitis). **Contraindications:** Pantozol 40mg must not be used in combination treatment for eradication of *Helicobacter pylori* in patients with moderate to severe liver or kidney function disturbance since currently no clinical data are available on the efficacy and safety of Pantozol 40 mg in combination treatment of these patients. Pantozol 40mg should generally not be used in cases of known hypersensitivity to one of the constituents of Pantozol 40mg or of the combination partners. **Special warnings and precautions for use:** Pantozol 40mg is not indicated for mild gastro-intestinal complaints, e.g. nervous stomach. In the case of combination therapy, the prescribing information for the respective drugs must be observed prior to treatment with Pantozol 40mg steps. In cases of duodenal or gastric ulcer in which infection with *Helicobacter pylori* has been confirmed the microorganism should be eradicated by combination treatment. Depending on the resistance pattern the following combinations are recommended. a) 2 x 1 Pantozol 40mg gastro-resistant tablet/day + 2 x 1000mg amoxicillin/day + 2 x 500mg clarithromycin/day b) 2 x 1 Pantozol 40 mg gastro-resistant tablet/day + 2 x 500mg metronidazole/day + 2 x 500mg clarithromycin/day. c) 2 x 1 Pantozol 40mg gastro-resistant tablet/day + 2 x 1000mg amoxicillin/day + 2 x 500mg metronidazole/day. If combination therapy is not an option, e.g. if the patient has tested negative for *Helicobacter pylori*, the following dosage guidelines apply for Pantozol 40 mg monotherapy: for duodenal ulcer, gastric ulcer, and reflux oesophagitis: Generally, 1 Pantozol 40 mg gastro-resistant tablet daily. In individual cases the dose may be doubled (increase to 2 Pantozol 40 mg gastro-resistant tablets/day), particularly when there has been no response to other medicines. In Patients with severe liver impairment the dose has to be reduced to 1 tablet (40 mg pantoprazole) every other day. Furthermore, in these patients the liver enzymes should be monitored during Pantozol 40 mg therapy. In the case of the rise of the liver enzymes, Pantozol 40 mg should be discontinued. The daily dose of 40 mg Pantoprazole should not be exceeded in elderly patients or in patients with impaired kidney function. An exception is combination therapy for eradication of *Helicobacter Pylori*, where also elderly patients should receive the appropriate Pantoprazole dose (2 x 40mg per day) during the 1-week treatment period. Combination therapy for eradication of *Helicobacter Pylori* infection usually last 7 days and can be extended to a maximum of 2 weeks. If after this time further treatment with Pantozol 40 mg is indicated to ensure that the ulcer heals completely. The dose recommendations for gastric and duodenal ulcers must be observed. In majority of the cases, a duodenal ulcer heals completely within 2 weeks. If a two-week treatment is not sufficient, healing will be achieved in almost all cases within a further 2 weeks. Gastric ulcers and reflux oesophagitis usually require a 4- weeks course of treatment. It must be taken to ensure that the gastric ulcer is not malignant, and that there is no malignant disease in the oesophagus, since the treatment would also alleviate the complaints associated with malignant diseases and possibly delay establishment of the diagnosis. A diagnosis of reflux esophagitis should be confirmed by endoscopy. To date there has no experience with treatment in children. **Pregnancy and lactation** Clinical experience in pregnant woman is limited. There is no information on the excretion of Pantoprazole into human breast milk. Pantozol 40mg gastro-resistant tablets should not be used when the benefit to the mother is considered greater than the potential risk to the foetus/baby. **Effects on the ability to drive and to use machines or work without a firm foothold:** There are no known effects on the ability to drive, or to operate machinery or to work without a firm foothold. **Interactions:** Pantozol 40 mg may reduce the absorption of drugs whose bioavailability is pH-dependent (e.g. ketoconazole). Please note that this information also applies to drugs which you might have used recently. The active ingredient of Pantozol 40mg is metabolized in the liver via the cytochrome p450 enzyme system. An interaction with other drugs or substances metabolized by the same enzyme system cannot be excluded. However, in targeted studies involving a range of such drugs and substances no clinically significant interactions were observed; studies have been carried out on crabamazepine, caffeine, diazepam, diclofenac, dioxin, ethanol, glibenclamide, metoprolol, nifedipine, phenprocoumon, phenytoin, theophylline, warfarin and an oral contraceptive. There were also no interactions with concomitantly administered antacids. No clinically relevant interactions were observed with the respective antibiotics (clarithromycin, metronidazole, amoxicillin). **Posology and method of administration:** The following information applies unless Pantozol 40 mg has been otherwise prescribed by your doctor. Please follow the instructions, as otherwise Pantozol 40mg may not have the desired effect. This should be inadequate, healing will in most cases be achieved within a further 4 weeks. Treatment should not exceed 8 weeks as experience with long-term use is limited. **Instruction for use/handling:** Pantozol 40 mg gastro-resistant tablets must not be chewed or crushed and must be swallowed whole with water 1hr before breakfast. In combination therapy for eradication of *Helicobacter pylori* infection the second Pantozol 40 mg tablet should be taken before the evening meal. **Incorrect use and overdosage:** If you have taken too little Pantozol 40 mg or have forgotten to take it do not take the dose late, but continue with the next regular dose on your dosing schedule. Talk to your doctor if you want to interrupt or prematurely discontinue treatment with Pantozol 40 mg. There are no symptoms of overdosage in man; in any case, the doctor must be consulted. In the case of overdosage with clinical signs of intoxication, the usual rules of intoxication apply. **Undesirable effects:** Treatment with Pantozol 40 mg can occasionally lead to headache, gastrointestinal complaints such as upper abdominal pain, diarrhoea, constipation or flatulence as well as allergic reactions such as itching, skin rash, and, in isolated cases, wheals, mucosal swelling or anaphylactic reactions including anaphylactic shock with typical symptoms such as dizziness, increased pulse or increased perspiration. There have been rare reports of nausea, dizziness, visual disturbances (blurred vision) in isolated cases, swelling of the lower arms and legs, fever, depression or muscular pain were observed which disappeared after discontinuation of Pantozol 40 mg. If you experience any side effects not mentioned in this leaflet, please inform your doctor or pharmacist. **Countermeasures:** If you should experience any side effects, notify your doctor so that he can decide what further measures are necessary. Storage conditions and shelf life Pantozol 40 mg gastro-resistant tablets stored at room temperature remain unchanged for 3 years. The expiry date of this pack is printed on the container and on the folding box. Do not use this pack after the expiry date!