Ezitor

Ezetimibe USP & Atorvastatin USP

Composition

Ezitor 10/10: Each film coated tablet contains Ezetimibe USP 10 mg and Atorvastatin calcium USP equivalent to Atorvastatin 10 mg.

Ezitor 10/20: Each film coated tablet contains Ezetimibe USP 10 mg and Atorvastatin calcium USP equivalent to Atorvastatin 20 mg.

Pharmacology

Ezitor is a combination of Ezetimibe and Atorvastatin. Ezetimibe reduces blood cholesterol by inhibiting the absorption of cholesterol by the small intestine. Ezetimibe is localized at the brush border of the small intestine and inhibits the absorption of cholesterol, leading to a decrease in the delivery of intestinal cholesterol to the liver. This causes a reduction of hepatic cholesterol stores and an increase in LDL receptors, resulting in clearance of cholesterol from the blood.

Atorvastatin is a selective, competitive inhibitor of HMG-CoA reductase. The rate-limiting enzyme responsible for the conversion of 3-hydroxy-3-methyl-glutaryl-coenzyme A to mevalonate, a precursor of sterols, including cholesterol. Triglycerides (TG) and cholesterol in the liver are incorporated into VLDL and released into the plasma for delivery to peripheral tissues. Low-density lipoprotein (LDL) is formed from VLDL and is catabolised primarily through the high affinity LDL receptor. Atorvastatin lowers plasma cholesterol and lipoprotein levels by inhibiting HMG-CoA reductase and cholesterol synthesis in the liver and increases the number of hepatic LDL receptors on the cell surface for enhanced uptake and catabolism of LDL.

Indication

Ezitor is indicated as adjunctive therapy to diet to:

• reduce elevated total-C, LDL-C, Apo B, TG, and non-HDL-C, and to increase HDL-C in patients with primary (heterozygous familial and non-familial) hyperlipidemia or mixed hyperlipidemia.

• reduce elevated total-C and LDL-C in patients with homozygous familial hypercholesterolemia (HoFH), as an adjunct to other lipid-lowering treatments.

Dosage and Administration

• Dosage range is 10/10 mg/day through 10/80 mg/day.

• Recommended starting dose is 10/10 mg/day or 10/20 mg/day.

• Recommended starting dose is 10/40 mg/day for patients requiring a greater than 55% reduction in LDL-C **or as directed by the physician.**

Contraindication

• Active liver disease or unexplained persistent elevations of hepatic transaminase levels.

• Hypersensitivity to any Ezetimibe & Atorvastatin.

• Women who are pregnant or may become pregnant.

• Nursing mothers

Warnings & Precautions

• Patients need to contact physicians in case of any muscle pain, tenderness, or weakness.

• Combination therapy of Ezetimibe & Atorvastatin should be discontinued immediately if myopathy is diagnosed or suspected.

• Skeletal muscle effects (e.g., myopathy and rhabdomyolysis): Risks increase with higher doses and concomitant use of certain CYP3A4 inhibitors, fibric acid derivatives, and cyclosporine. Rare cases of rhabdomyolysis with acute renal failure secondary to myoglobinuria have been reported.

• Liver enzyme abnormalities: Persistent elevations in hepatic transaminase can occur. Check liver enzyme tests before initiating therapy and as clinically indicated thereafter.

Side Effects

Common side effects are: increased ALT, increased AST, and musculoskeletal pain.

Use in Pregnancy and Lactation

It may cause fetal harm when administered to a pregnant woman. It is not known whether atorvastatin is excreted into human milk. Statins have the potential for serious adverse reactions in nursing infants, women who require Ezitor treatment should not breast-feed their infants.

Use in Children & Adolescents

Safety and effectiveness have not been established in pediatric & adolescent patients.

Drug Interaction

• Cyclosporine, HIV protease inhibitors (tipranavir plus ritonavir), hepatitis C protease inhibitor (telaprevir), gemfibrozil- Avoid Ezitor

• HIV protease inhibitor (lopinavir plus ritonavir)- Use with caution and lowest dose necessary.

• Clarithromycin, itraconazole, HIV protease inhibitors (saquinavir plus ritonavir, darunavir plus ritonavir, fosamprenavir, fosamprenavir plus ritonavir)- Do not exceed 10/20 mg EzitorT daily.

• HIV protease inhibitor (nelfinavir), hepatitis C protease inhibitor (boceprevir)-Do not exceed 10/40 mg
Ezitor daily.

• Other lipid-lowering medications: Use with fenofibrates or lipid-modifying doses (≥1 g/day) of niacin increases the risk of adverse skeletal muscle effects. Caution should be used when prescribing
with Ezitor.

• Fenofibrates: Combination increases exposure of ezetimibe. If cholelithiasis is suspected in a patient receiving ezetimibe and afenofibrate, gallbladder studies are indicated and alternative lipid-lowering therapy should be considered.

• Cholestyramine: Combination decreases exposure of ezetimibe.

• Digoxin: Patients should be monitored appropriately.

• Oral contraceptives: Values for norethindrone and ethinyl estradiol may be increased.

• Rifampin should be simultaneously coadministered with Azitor.

Overdose

No specific treatment for overdosage with Ezitor can be recommended. In the event of an overdose, the patient should be treated symptomatically and supportive measures instituted as required.

Storage

Store below 30°C, away from light and in a dry place. Keep all medicine out of the reach of children.

Packing

Ezitor 10/10: Each box contains 3x10 tablets in Alu-Alu blister pack and an insert.

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Manufactured by:

Navana Pharmaceuticals Ltd.

Rupshi, Rupganj, Narayanganj, Bangladesh.

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