

1.3.1.1 Approved Package Insert

1 **SCHEDULING STATUS**

2 S2

3 **PROPRIETARY NAME AND DOSAGE FORM**

4 **DURO-TUSS LINCTUS** (Liquid)

5 **COMPOSTION**

6 Each 5 ml liquid contains: Salbutamol sulphate 2,41 mg

7 Bromhexine hydrochloride 4 mg

8 Preservative: Sodium Benzoate 0,2 % *m/v*

9 The other inactive ingredients are citric acid anhydrous, hydroxyethylcellulose, menthol, orange
10 flavour, propylene glycol, purified water and sucralose.

11 Contains no sugar or alcohol.

12 **PHARMACOLOGICAL CLASSIFICATION**

13 A.10.1 Antitussives and expectorants.

14 **PHARMACOLOGICAL ACTION**

15 Salbutamol sulphate

16 **Pharmacodynamic properties**

17 Salbutamol is a β_2 -selective adrenergic bronchodilator. It acts by stimulating β_2 -adrenergic receptors
18 in the lungs to relax bronchial smooth muscle.

19 The onset of action is within 30 minutes, with a peak effect between 2 to 3 hours after the dose, and a
20 duration of action of up to 6 hours.

21 **Pharmacokinetic properties**

22 Salbutamol is readily absorbed from the gastrointestinal tract. It is subject to first pass metabolism in
23 the liver and possibly in the gut wall. The main metabolite is an inactive sulfate conjugate. It is
24 excreted in the urine as metabolites and unchanged salbutamol, and some is excreted in the faeces.
25 The plasma half-life of Salbutamol has been estimated to range from 4 to 6 hours.

26 Bromhexine hydrochloride

27 **Pharmacodynamic properties**

28 Bromhexine hydrochloride reduces the viscosity of non-infected secretions from mucous cells in the
29 respiratory tract, in vitro.

30 **Pharmacokinetic properties**

31 Bromhexine hydrochloride is well absorbed from the gastrointestinal tract with peak plasma
32 concentrations after about 1 hour. Bromhexine undergoes extensive first-pass metabolism in the liver,
33 with a bioavailability of about 20%. It is widely distributed to body tissues. About 85 % to 90 % of a
34 dose is excreted in the urine mainly as metabolites, including ambroxol. Bromhexine is highly bound
35 to plasma proteins. It has a terminal elimination half-life of 13 to 40 hours. Bromhexine crosses the
36 blood-brain barrier and small amounts cross the placenta.

37 **INDICATIONS**

38 **DURO-TUSS LINCTUS** is indicated for the relief of cough associated with bronchospasm (wheezing).

39 **CONTRAINDICATIONS**

40 **DURO-TUSS LINCTUS** is contra-indicated in:

- 41 • Patients with known hypersensitivity to salbutamol, bromhexine or to any other ingredients in
42 **DURO-TUSS LINCTUS**.
- 43 • Patients with cardiac dysrhythmias or tachycardia.
- 44 • Patients receiving monoamine oxidase inhibitors (MAOI's) or within 14 days of MAOI's
45 termination.

46 **WARNINGS AND SPECIAL PRECAUTIONS**

47 Salbutamol Sulphate

48 Use with caution in hyperthyroidism, myocardial insufficiency, susceptibility to QT-interval
49 prolongation, hypertension, diabetes mellitus, and in severe asthma.

50 Plasma-potassium concentrations should be monitored in severe asthma as hypokalaemia may
51 occur. The risk can be potentiated by hypoxia and acidosis, or the concomitant use with other
52 medicines that cause hypokalaemia or cardiac dysrhythmias. (see **INTERACTIONS** and **SIDE**
53 **EFFECTS**)

54 High doses may increase the risk of serious side effects, including cardiac dysrhythmias, the
55 maximum dose should not be exceeded.

56 Bromhexine hydrochloride

57 Use with care in patients with a history of peptic ulceration.

58 Care is also advisable in asthmatic patients.

59 Clearance of bromhexine or its metabolites may be reduced in patients with severe hepatic or renal
60 impairment.

61 **INTERACTIONS**

62 Salbutamol Sulphate

63 Concomitant administration of **DURO-TUSS LINCTUS** with sympathomimetics, diuretics,
64 corticosteroids or xanthines e.g. theophylline, increases the risk of hypokalaemia. (see **WARNINGS**
65 **AND SPECIAL PRECAUTIONS**)

66 **PREGNANCY AND LACTATION**

67 The safety of **DURO-TUSS LINCTUS** in pregnancy and lactating women has not been established.

68 **DURO-TUSS LINCTUS** may delay onset of labour.

69 Small amounts of bromhexine cross the placenta.

70 **DOSAGE AND DIRECTIONS FOR USE**

71 **Adults:** 10 ml three to four times a day

72 **Children 6 – 12 years:** 5 ml three to four times a day

73 **Children 2 – 6 years:** 2,5 ml – 5 ml three to four times a day

74 Do not exceed the recommended dose.

75 Suitable for children, elderly and diabetics.

76 **SIDE EFFECTS**

77 The following side effects have been reported:

78 Salbutamol Sulphate

79 ***Immune system disorders***

80 Frequency unknown: Hypersensitivity reactions, including paradoxical bronchospasm, angioedema,
81 urticaria, hypotension, and collapse.

82 ***Metabolism and nutrition disorders***

83 Frequency unknown: Hyperglycaemia. Hypokalaemia that may be potentiated by concomitant
84 therapy with corticosteroids, diuretics, or xanthines and by hypoxia and acidosis. (see **WARNINGS**

85 **AND SPECIAL PRECAUTIONS)**

86 ***Nervous system disorders***

87 Frequency unknown: Hallucinations in children, hyperactivity and restlessness.

88 ***Cardiac disorders***

89 Frequency unknown: Tachycardia due to increased sympathetic effects on the cardiovascular system,
90 palpitations. Myocardial ischaemia.

91 ***Vascular disorders***

92 Frequency unknown: Peripheral vasodilation with flushing, hypotension.

93 ***Musculoskeletal, connective tissue and bone disorders***

94 Frequency unknown: Fine tremor of skeletal muscle particularly the hands.

95 Less frequent: Cramps.

96 ***General disorders and administrative site conditions***

97 Frequency unknown: Headache and nervous tension.

98 Bromhexine Hydrochloride

99 ***Gastrointestinal disorders***

100 Less frequent: Gastrointestinal side effects.

101 ***Hepato-biliary disorders***

102 Frequency unknown: Transient rise in serum aminotransferase values.

103 ***Skin and subcutaneous tissue disorders***

104 Frequency unknown: Skin rashes.

105 ***General disorders and administrative site conditions***

106 Frequency unknown: Headache, dizziness, sweating.

107 **KNOWN SYMPTOMS OF OVERDOSAGE AND PARTICULARS OF ITS TREATMENT**

108 See **SIDE EFFECTS**. Salbutamol overdosage may result in tachycardia, central nervous system
109 stimulation, tremor, hypokalaemia and hyperglycaemia. Treatment is symptomatic and supportive.

110 Activated charcoal may be considered in patients who present within 1 hour of overdosage.

111 **IDENTIFICATION**

112 A clear, colourless, slightly viscous liquid with an odour of orange.

113 **PRESENTATION**

114 Amber plastic (PET) bottles containing 100 mL and 200 mL. The bottles are packed in a printed unit
115 carton.

116 **STORAGE INSTRUCTIONS**

117 Store at or below 30 °C. Protect from light.

118 KEEP OUT OF REACH OF CHILDREN.

119 **REGISTRATION NUMBER**

120 A39/10.1/0390

121 **NAME AND BUSINESS ADDRESS OF THE HOLDER OF THE CERTIFICATE OF REGISTRATION**

122 iNova Pharmaceuticals (Pty) Ltd

123 15e Riley Road

124 Bedfordview

125 South Africa

126 **DATE OF PUBLICATION OF THIS PACKAGE INSERT**

127 Date of registration: 10 August 2007

128 Date of latest revision: 23 November 2017

NAMIBIA

Scheduling status: NS1

Registration Number: 08/10.1/0138

129

ZIMBABWE

Registration number: 2015/22.2.5/5131

Category of distribution: Prescription Preparations, PP

Pharmacological classification: 22.2.5 Cough and cold preparations – combination products

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