100mm

Mestinon®

Pyridostigmine Bromide

Vagotonic, antimyasthenic

COMPOSITION
Each sugar coated tablets contains:
Pyridostigmine bromide 60 mg

MODE OF ACTION
Pyridostigmine inhibits the destruction of acetylcholine by cholesterase and thereby permits free transmission of nerve impulses across the neuromuscular junction. Pyridostigmine is an analog of Neostigmine but differ from it in certain clinically significant respect : for example, Pyridostigmine is characterized by a longer duration of action and fewer gastrointestinal side effects.

INDICATIONS AND USAGE
Mestinon is useful in treatment of myasthenia gravis.

CONTRAINDICATIONS
Mestinon is contraindicated in mechanical obstruction of the intestinal or urinary tract and know allergy to the preparation.
Mestinon is not be given in combination with depolarizing muscle relaxants such as suxamethonium.

WARNING AND PRECAUTIONS
Special care must be taken when Mestinon is used in patients with bradycardia, bronchial asthma, diabetes mellitus, kidney diseases and following gastrointestinal surgery.
If a patient does not show the desired response to Mestinon treatment, this may be due to an over-dosage (see Overdosage).

Pregnancy, Lactation
Pregnancy, category B.
Reproduction studies in laboratory animals have not indicated any risks to the foetus but no controlled studies have so far been conducted in pregnant women. Therefore, this medication should only be used during pregnancy strictly as directed, with carefull dosing and under medical supervision.
Since the possibility of pyridostigmine diffusing into breast milk cannot be ruled out, nursing mothers are advised to refrain from breast feeding their babies during treatment.

Safety and effectiveness in paediatric patients have not been established.

OVERDOSAGE
Overdosage with Mestinon or other cholinesterase inhibitors can lead to cholinergic crises that manifest themselves in, among other things, pronounced muscle weakness (or exacerbated muscle weakness in patients with myasthenia).
If such a situation overlooked, life is endangered due to paralysis of the respiratory muscles. Bradycardia and paradoxically-tachycardia are other possible effects.

Countermeasures include the immediate withdrawal of Mestinon or other cholinergics and the slow intravenous administration of 1-2 mg atropine sulphate. Depending on the pulse rate, this dose is to be repeated at intervals of two to four hours if required.

SIDE EFFECTS
Like all cholinergic drugs, Mestinon can have undesirable functional effects on the autonomic nervous system.

100mm

Muscarine-type side effects can make manifest themselves as nausea, vomiting, diarrhoea, stomach cramps, increased peristalsis and bronchial secretion, salivation and lacrimation as well as bradycardia, miosis and diaphoresis. Nicotine-type side effects consist mainly of muscle spasms, muscle twiches and muscle weakness.
Like other bromide-containing drugs. Mestinon can occasionally cause skin rash, although this generally disappears rapidly once medication has been discontinued. Further use of Mestinon or other bromide containing preparations is then contraindicated.

PROPERTIES AND EFFECTS
Pyridostigmine, the active ingredient of Mestinon, is cholinesterase inhibitor. It is characterised by the gentle onset, smooth course, comparatively long duration and gradual decine of its cholinergic action.
Pyridostigmine has an antagonistic effect on non-depolarising muscle relaxants only.
It has a synergistic effect on depolarising muscle relaxants.

INTERACTIONS
Pyridostigmine antagonises the action of curate-like non-depolarising muscle relaxants.
Atropine counteracts the cholinergic effects of Pyridostigmine, especially bradycardia and hypersecretion.

DOSAGE AND ADMINISTRATION
The size and frequency of the dosage must be adjusted to the needs of the individual patient. The average dose is ten 60 mg tablets, spaced to provide maximum relief when maximum strength is needed. In severe cases as many as 25 tablets may be required, while in mild cases one to six tablets a day may suffice.

Special dosage instructions
The required dose must be carefully titrated when used in paediatrics.
In cases of neonatal myasthenia, generally one treatment with Neostigmine (Prostigmine) is preferred. However, if this appears unsuitable due to excessively cholinergic side effects, then Mestinon can be administered. In these cases, the following serves as a rough guideline: 5-10 mg per as in tablets form, 30-60 minutes before food.
Treatment over the eight week of life is required only in extremely rare cases of congenital and familial infantile myasthenia.
Pyridostigmine is mainly eliminated unchanged via the kidneys. Lower doses may therefore be indicated in patients presenting with kidney disease. The dose should be adjusted in line with desired effect.

Store below 25ºC and do not use after the date identified by "EXP" on the package
Keep all medicine out of the reach of children.

PACKAGING
Box, Bottle @ 150 Dragees Reg. No.: DKL2132209916A1

On medical prescription only
Harus dengan resep dokter

MENARINI

Manufactured by:
Labiana Pharmaceuticals, S.L.U. Spain
For
A Menarini Asia Pacific Holding, Pte. Ltd., Singapore
Imported, Packed and Released by:
PT. Menarini Indria Laboratories
Bekasi-Indonesia

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200mm

Black

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County: ID
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