Software use : CorelDraw X8
60 ± 10% GSM Maplitho paper
3 horizontal fold at equal distance
Reason of artwork : New/Export (Commercial) R0
Size : 120x195 mm
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QURIC

EFFERVESCENT GRANULES

Composition:
Each sachet of 4 gm contains:

Sodium Bicarbonate BP	1.760 gm
Anhydrous Citric Acid BP	720 mg
Tartaric Acid BP	890 mg
Sodium Citrate USP (Anhydrous)	630 mg

Dosage from: Effervescent granules for oral solution.

Product Description: White granular free flowing powder filled in a printed tri laminated aluminium poly glycine paper, after dissolving in 200ml water gives clear colourless solution.

Pharmacology:
Sodium bicarbonate acts as urinary alkaliser by excretion of free bicarbonate ions in the urine, thus effectively raising the urinary pH. By maintaining alkaline urine, the actual dissolution of uric acid stones may be accomplished. It also acts as antacid by chemically neutralizing or buffering existing quantities of stomach acid but has no direct effect in its output. This action results in increased pH value of stomach contents, thus providing relief of hyperacidity symptoms.

Pharmacokinetic:
Sodium citrate is metabolized to bicarbonates, which increases urinary pH by increasing the excretion of free bicarbonates ions, without producing systemic alkalosis when administrated recommended doses. A rise in urinary pH increases the solubility of cysteine in the urine and the ionization of uric acid to more soluble urate iron. It also reacts chemically to neutralize or buffer existing quantities of gastric hydrochloride acid but has no direct effects its output. Sodium bicarbonate is exerted through renal and also via lung by forming CO_2. Sodium citrate, citric acid and absorbed tartaric acid are excreted through urine.

Indications:
Indicated for relieving of discomfort in mild UTI; symptomatic relief of dysuria; to enhance the action of certain antibiotics especially some sulphonamides; in gout as urinary alkalinisers to prevent crystallisation of urates and dissolution of uric acid stones.

Contraindications:
Renal failure or hypernatremia; in conjunction with hexamine mandelate or hexamine hippurate therapy because an acidic urine is needed. Caution is advised in overt and occult cardiac failure. Concomitant use of urinary alkalinisers and quinolone antibiotics should be avoided; crystalluria may be more likely to occur in alkaline urine.

Side Effects/ Adverse Effects:
Excessive doses of sodium salts may also lead to sodium overload and hyperosmolarity. Large doses of oral citrate salts may result in gastrointestinal events such as diarrhea, nausea & vomiting, and a laxative effects. Diluting with large amount of water and administration after meals can minimize these effects.

Warnings & Precautions:
Caution should be used in patient with peptic ulceration and patients with renal abnormalities, to avoid the condition of metabolic alkalosis. Should not be taken by patients on a sodium- restricted diet.

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Interaction with other medicinal products:
Alkalinization of the urine due to the use of Ore Soda, theoretically, may result in a decreased therapeutic effect of the following medications, chlorpropamide, lithium, salicylates and tetracyclines.
Alternatively, alkalinization of the urine due to the use of Ore Soda, theoretically, may result in an increased therapeutic effect of the following medications, amphetamines and ephadrine / pseudoepherine.
Antacid: Concurrent use of antacids with citrates may result in systematic alkalosis. Concomitant administration of antacids with sodium citrate and sodium bicarbonate may promote the development of calcium stones in patients with uric acid stones and may also cause hypernatraemia. Concurrent use of aluminum containing antacids with citrate salts can increase aluminum absorption, possibly resulting in acute aluminum toxicity, especially in patients with renal insufficiency.
Quinolones: Citrates may reduce the solubility of ciprofloxacin, norfloxacin, or ofloxacin in the urine. Patients should be observed for signs of crystalluria and nephrotoxicity.
Salicylates: Concurrent use of salicylates with citrates may increase the urinary excertion and decrease the therapeutic effects of salicylates due to alkalinization of the urine.
Laxatives: Concurrent administration of citrates with laxatives may have an additive effect.

Pregnancy and Lactation:
Pregnancy: Use in pregnancy should be considered only when the possible benefits outweigh the potential risks.
Lactation: Use in nursing mothers should be considered only when the possible benefits outweigh the potential risks.

Symptoms & Treatment of Overdose:
Overdosage may result in metabolic alkalosis Ore Soda should be discontinued, appropriate treatment instituted and electrolyte and acid-base determinations should be carried out as appropriate.

Dosage & Administration:
1-2 sachets (4g to 8g) dissolved in cold water 4 times daily or as prescribed

Route of Administration
Oral

Pack Size:
4g granules per sachet. Box of 12 sachets.

Storage conditions:
Store below 30°C. Protect from moisture.

Date of Revision:
Nov 2025

Manufactured Under License for:
Zyprus Pharma Private Limited
C-78 DDA Shed, Okhla Industrial Area Phase 1,
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Manufactured by:
Akums Drugs & Pharmaceuticals Ltd.
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Ranipur, Haridwar-249403, Uttarakhand, INDIA

Product Registration Holder:
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47170 Puchong, Selangor, Malaysia.

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