



FERROTAB-200 TABLET(FILM-COATED)

Description: Brown, round, biconvex, top-scored and film-coated tablet .Diameter = 9.00mm

Content

Ferrous Fumarate 200mg/tablet

Indications

For prevention and treatment of iron deficiency anemia resulting from inadequate diet, malabsorption, pregnancy, blood loss, and/or parasitic infestation.

Pharmacology

Iron is an essential component in the physiological formation of hemoglobin, adequate amounts of which are necessary for effective erythropoiesis and the resultant oxygen transport of the blood. Oral absorption is usually increased in conditions of iron deficiency.

Adverse Effects

Gastrointestinal discomfort, nausea, vomiting, constipation, diarrhoea and darkened faeces may occur.

Precautions

- Caution in patients with impaired liver function, gastrointestinal disease and peptic ulcer.
- The tablet should be taken 1 hour before or 2 hours after meals; or with food to lessen possibility of stomach upset.
- Avoid regular use of large amounts of iron supplements several times daily for more than 6 months unless, approved physician.

Contraindications

- Not recommended for patients with hemochromatosis, hemosiderosis and other anemic conditions, unless accompanied by iron deficiency.
- Do not take iron supplements orally if receiving by injection.

Drug Interactions

- Concurrent use of ascorbic acid may enhance iron absorption.
- Iron salts should be administered 3 hours before or 2 hours after oral tetracyclines since concurrent use reduces the absorption of either medications.
- Iron supplements should not be taken within 1 hour after ingestion of antacids or tea as co-administration will decrease iron absorption.

Dosage and Administration

Adults : Prophylactic -Oral, 200 to 300mg a day.

Therapeutic -Oral, 200mg 3 to 4 times a day, the dosage being adjusted gradually, as needed and tolerated.

Children 6 to 12 years : Prophylactic - Oral, 100mg a day.

Therapeutic - Oral, 100mg 3 times a day, or as directed.

Overdosage

Large doses may have irritant and corrosive effects on the gastrointestinal mucosa and necrosis and perforation may occur. Overdose symptoms may be delayed. Immediate treatment is essential and consists of emesis and gastric lavage. Fluid and electrolyte balance must be maintained.

Antidote : Desferrioxamine, administered slowly, intravenously or intramuscularly.

Storage conditions : Keep container tightly closed. Store in a cool, dry place, below 30°C. Protect from light. Keep away from children.

Presentation / Packing : Film-coated tab 200mg x 90's

Product registration holder : **PRIME PHARMACEUTICAL SDN. BHD.**

& Manufacturer
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