## ALU-TAB PRODUCT INFORMATION

COMPOSITION

Aluminium hydroxide dried gel, sodium content 0.03 mEq.

**ACTIONS** 

Antacid actions include neutralisation of gastric hyperacidity and mild astringent and absorbent properties. Aluminium hydroxide dried gel increases phosphate excretion in the bowel by the formation of nonabsorbable phosphate salls.

**INDICATIONS** 

Symptomatic relief of uncomplicated peptic ulcer and gastric hyperacidity. Phosphate binding in renal dysfunction.

CONTRAINDICATIONS Hypophosphataemia.

**PRECAUTIONS** 

Phosphate Depletion: Aluminium salts may cause phosphate depletion, which is generally negligible. On prolonged treatment or large doses hypophosphataemia may occur, especially in patients with restricted phosphate intake. This

syndrome is characterised by anorexia, malaise and muscle weakness. If left unchecked this condition may give rise to osteomalacia, osteoporosis and urinary calculi. Serum phosphate levels should be monitored regularly (bi-monthly) in

phosphate levels should be monitored regularly (bi-monthly) in patients on maintenance haemodialysis who are receiving chronic aluminium hydroxide therapy.

Renal Failure: In patients with chronic renal failure, hyperaluminaemia may occur. Aluminium accumulates in bone, lungs and nerve tissue. Aluminium accumulation in the CNS may be the cause of dialysis dementia which sometimes occurs in chronic renal failure patients receiving long term aluminium therapy for hyperaphosphatagoria. therapy for hyperphosphataemia.

Constipation: Aluminium hydroxide gel is astringent and may cause constipation. Decreased bowel motility, dehydration or fluid restriction may pre-dispose patients to intestinal obstruction. Haemorrhoids and fissures, or faecal impaction may occur.

Effect on Drug Absorption: Aluminium hydroxide reduces the absorption of tetracyclines and vitamins and may delay the absorption of quinidine (see interactions). Aluminium hydroxide and such drugs should be administered 2 hours apart.

Use in Pregnancy: Category A. There is no evidence of safety of the drug in human pregnancy but it has been in wide use for many years without apparent ill consequence - animal

years without apparent in consequence - anims studies having shown no hazard.

Drug Interactions: Reported to interfere with absorption of some drugs including tetracyclines, penicillin, sulphonamides, iron, digoxin, indomethacin, naproxen, phenylbutazone and vitamins. Aluminium bydroxide and such drugs should be hydroxide and such drugs should be administered 2 hours apart.

ADVERSE REACTIONS

May cause constipation. If so, medication should be discontinued and a physician

consulted.

DOSAGE AND ADMINISTRATION One to two tablets four times daily or as directed by physician. When used for patients with renal dysfunction the specially formulated film coating allows the whole tablet to be swallowed with a minimum of water.

## **OVERDOSAGE**

Excessive dosage may cause phosphate depletion, manifested in muscle weakness, anorexia and malaise. If left unchecked this condition may give rise to osteomalacia, osteoporosis and urinary calculi. Treatment should include monitoring of serum calcium and phosphate levels.

## PRESENTATION

Tablets, 600 mg (green, film coated, scored:

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