Salmeterol xinafoate
Fluticasone propionate

Flutizal®

25 mcg/ 125 mcg
25 mcg/ 250 mcg

Metered Dose Inhaler (Suspension)

Fixed Dose Combination Inhalation
Corticosteroid and Beta-2 Adrenoceptor Agonist

FORMULATION
Flutizal 25/125 Inhaler:
Each actuation delivers:
Salmeterol (as xinafoate) ..... 25 mcg
Fluticasone propionate .....125 mcg

Flutizal 25/250 Inhaler:
Each actuation delivers:
Salmeterol (as xinafoate) ..... 25 mcg
Fluticasone propionate .....250 mcg

INDICATIONS
Fluticasone propionate + Salmeterol xinafoate Inhaler is indicated in the regular treatment of asthma where use of a combination (long acting beta-2 agonist and inhaled corticosteroid) is appropriate:
- Patients not adequately controlled with inhaled corticosteroids and "as needed" inhaled short acting beta-2 agonist or,
- Patients already adequately controlled on both inhaled corticosteroids and long acting beta-2 agonist.

DESCRIPTION
Salmeterol xinafoate is a selective, long-acting beta-2 agonist; it attaches to beta-2 receptors on the smooth muscle cells that surround the airways, causing the muscle cells to relax and opening the airways. Fluticasone propionate is a synthetic corticosteroid which is a glucocorticoid receptor agonist with mainly potent anti-inflammatory activity. Fluticasone propionate is stated to exert a topical effect on the lungs without systemic effects at usual dose. Flutizal Inhaler is an environment friendly inhaler and does not contain chlorofluorocarbons (CFCs) as propellant. It uses hydrofluoroalkane (HFA) as propellant which is environment friendly.

DOSAGE AND ADMINISTRATION
Adults and adolescents aged 12 years and older:
Fluticasone propionate + Salmeterol xinafoate 125/25 Inhaler: 2 inhalations (puffs) twice a day or,
Fluticasone propionate + Salmeterol xinafoate 250/25 Inhaler: 2 inhalations (puffs) twice a day or, as directed by the physician.

How to use the inhaler correctly?
1. Remove the mouthpiece cover and check the mouthpiece thoroughly to see that it is clean. Then shake the inhaler vigorously.
2. Hold the inhaler between index finger and thumb. Breathe out gently through the mouth and immediately place the mouthpiece between the teeth (Do not bite it).
3. Grip the mouthpiece firmly with the lips. Tilt the head slightly backwards, start breathing in slowly through the mouth. At the same time press the canister to release one dose while continuing to breathe in steadily and deeply.
4. Remove the inhaler from the mouth. Hold the breath at least for 10 seconds or as long as it is comfortable. Breathe out slowly.

If another dose is required, wait for at least 1 minute and repeat the whole process. After use, place the cover to close the mouthpiece.

How to clean the Inhaler?
1. Gently pull the metal canister out of the plastic body of the inhaler, remove the mouthpiece cover.
2. Rinse the plastic body and the mouthpiece cover in warm water but do not put the metal canister into water.
3. Leave to dry in warm place, avoid excessive heat.
4. Replace the canister and the mouthpiece cover correctly.

CONTRAINDICATIONS
This combination inhaler is contraindicated in patients with a history of hypersensitivity to any of the ingredients.

ADVERSE EFFECTS
As the combination inhaler contains Salmeterol xinafoate and Fluticasone propionate, the type and severity of adverse reactions associated with each of the compounds may be expected. There is no incidence of additional adverse events following concurrent administration of the two compounds.

Adverse events, which have been associated with Salmeterol or Fluticasone propionate are given below:

Salmeterol: The pharmacological side effects of beta-2 agonist treatment, such as tremor, subjective palpitations and headache have been reported but tend to be transient and reduce with regular therapy. Cardiac arrhythmia (including atrial fibrillation, supraventricular tachycardia and extra systoles) may occur usually in susceptible patients. There have been reports of arthralgia and hypersensitivity reactions including rash, oedema and angioedema. There have been also reports of oropharyngeal irritation. There have been rare reports of muscle cramps.

Fluticasone propionate: Hoarseness and candidiasis (thrush) of the mouth and throat can occur in some patients. Cutaneous hypersensitivity reactions have been reported. Rare cases of facial and oropharyngeal oedema have been reported. Both hoarseness and incidence of candidiasis may be relieved by gargling with water after use of Salmeterol / Fluticasone propionate Inhaler. Symptomatic candidiasis can be treated with topical antifungal therapy whilst still continuing.

PRECAUTIONS
Consideration should be given to additional corticosteroid therapies and to including administration of antibiotics if an infection is present. As with all inhaled medication containing corticosteroids, this combination inhaler should be administered with caution in patients with active or quiescent pulmonary tuberculosis. This combination inhaler should be administered with caution in patients with thyrotoxicosis. Orally inhaled corticosteroids may cause a reduction in growth velocity when administered to pediatric patients. The long term effects of this reduction including the impact of final adult height are unknown.

PREGNANCY AND LACTATION
There is insufficient experience of the use of Salmeterol xinafoate and Fluticasone propionate in human pregnancy and lactation.

Administration of drugs during pregnancy and lactation should only be considered if the expected benefit to the mother is greater than any possible risk to the fetus or child.

DRUG INTERACTION
Care should be taken when co-administering known strong CYP3A4 inhibitors (e.g. Ketoconazole, Ritonavir), as there is potential for increased systemic exposure to Fluticasone propionate.
Both non-selective and selective beta-blockers should be avoided in patients with asthma, unless there are compelling reasons for their use.
Due to the very low plasma concentrations achieved after inhaled dosing clinically significant drug interactions are unlikely.

OVERDOSAGE
No human overdosage data has been reported for this combination inhaler; however data on overdose with both drugs are given below:

Salmeterol: The signs and symptoms of Salmeterol overdose are seizures, angina, hypertension or hypotension, tachycardia, arrhythmias, nervousness, headache, tremor, muscle cramps, dry mouth, palpitation, nausea, dizziness, fatigue, malaise, and insomnia.

Other signs of overdosage may include hypokalemia and hyperglycemia. Treatment consists of discontinuation of Salmeterol together with appropriate cardio selective beta-blocking agents, which should be used with caution in patients with a history of bronchospasm.

Fluticasone propionate: Acute inhalation of Fluticasone propionate doses in excess of those recommended may lead to temporary suppression of adrenal function. This does not need emergency action as adrenal function is recovered in a few days, as verified by plasma cortisol measurements. Chronic overdose of inhaled Fluticasone propionate may lead to adrenal suppression. Monitoring of adrenal reserve may be necessary. In cases of Fluticasone propionate overdose this combination inhaler therapy may still be continued at a suitable dosage for symptom control.

CAUTION
Foods, Drugs, Devices, and Cosmetics Act prohibits dispensing without prescription.

ADVERSE DRUG REACTION REPORTING STATEMENT
For suspected adverse drug reaction, seek medical attention immediately and report to the FDA at www.fda.gov.ph **AND** Unilab at (+632) 858-1000 or productsafety@unilab.com.ph. By reporting undesirable effects, you can help provide more information on the safety of this medicine.

AVAILABILITY
Aluminum canister in 120 actuations. Box of 1's.
Salmeterol xinafoate/Fluticasone propionate 25mcg/125mcg MDI - DR-XY44488
Salmeterol xinafoate/Fluticasone propionate 25mcg/250mcg MDI - DR-XY44492

STORAGE
Store at temperatures not exceeding 30° C.
Do not puncture, break or incinerate pressurized canister even when apparently empty. Avoid direct sunlight or heat.

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