Lev able Melt wine sulfate U Nul Chewal (hyoscyam syamine sunc. 5 mg/tablet

Rx Only

DESCRIPTION
Each round, white, peppermint
flavored tablet can be chewed
or placed on tongue for disintegration and contains 0.125 mg
of hyoscyamine sulfate USP. antich

antispasmodic of belladonna components alkaloids. in bellationina alikaloids. The empirical formula is C₁₇H₂₂NO₃)₂•H₂SO₄·2H₂O and the molecular weight is 712.85. Chemically, it is benzeneace-ic acid, \(\alpha\) (hydroxymethyl)fo

tic acid, α-(hydroxymethyl) 8-methyl-8-azabicyclo [3.2.1 oct-3-yl ester, [3(S)-endo sulfate (2:1), dehydrate wi the following structure 1

lactose monohydrate, magnesium stearate, mannitol USP, peppermint flavor, starch

CLINICAL
PHARMACOLOGY
Hyoscyamine sulfate inh
specifically the actions
acetylcholine on struct INICAL

lyoscyamine becifically the actions of cetylcholine on structure inervated by postganglinic cholinergic nerves and in smooth muscles that sepond to acetylcholine but a challergic innervation. inhibits structures respond but respond to acetylcholine but lack cholinergic innervation. These peripheral cholinergic receptors are present in the autonomic effector cells of the smooth muscle, cardiac muscle, the sinoatrial node the atrioventricular node, and the exocrine glands. At therapeutic doses, it is completely devoid of any action on autonomic ganglia. cardiac compietely devolor of any ac-tion on autonomic ganglia. Hyoscyamine sulfate inhibits gastrointestinal propulsive motility and decreases gastric acid secretion. Hyoscyamine sulfate also controls exces-sive pharyngeal, tracheal and bropphial coordings. sulfate also controls sive pharyngeal, trac bronchial secretions.

Hyoscyamine sulfate is absorbed totally and completely by oral administration. Once absorbed, hyoscyamine sulfate disappears rapidly from the blood and is distributed throughout the entire body. The half-life of hyoscyamine sulfate is 2 to 3½ hours. Hyoscyamine sulfate is partly hydrolyzed to tropic acid and tropine but the majority of the drug is excreted in the urine unchanged within the first 12 hours. Only traces of this drug are found in breast milk. Hyoscyamine sulfate passes the blood brain barrier and the placental barrier. Hyoscyamine sorbed totally sulfate INDICATIONS AND USAGE NuLeve is effective as adjunctive therapy in the treatment of peptic ulcer. It can also be used to control gastric secretion, visceral spasm and hypermotility in spastic colitis, spastic bladder, cystitis, pylorospasm, and associated abdominal cramps. May be

nyperinoulling in spasue con-tis, spastic bladder, cystitis, pylorospasm, and associated abdominal cramps. May be used in functional intestinal disorders to reduce symptoms such as those seen in mild dysenteries, diverticulitis, and acute enterocolitis. For use as adjunctive therapy in the treat-ment of irritable bowel synment of irritable bowel syn-drome (irritable colon, spastic colon, mucous colitis) and functional gastrointestinal dis-orders. Also used as adjunc-tive therapy in the treatment of neurogenic bladder and neu-rogenic bowel disturbances (including the splenic flexure syndrome and neurogenic colon). NuLeve' is indicated along with morphine or other colon). NuLev® is indicated along with morphine or other narcotics in symptomatic relief of biliary and renal colic; as a "drying agent" in the relief of symptoms of acute rhinitits; in the therapy of parkinsonism to reduce rigidity and tremors and to control associated sialorrhea and hyperhidrosis. May be used in the therapy of poisoning by anticholimesterpoisoning ase agents by anticholinester CONTRAINDICATIONS Glaucoma; obstructive ur thy (for example, bladder obstruction due to pros hypertrophy); obstructive ease of the gastrointes dder neck prostatic dis injustriophy); obstructive dis-ease of the gastrointestinal tract (as in achalasia, pyloro-duodenal stenosis); paralytic ileus, intestinal atony of elderly or debilitated patients; un-

atony c patients; unible acute rtive of definitated patients, un-stable cardiovascular status in acute hemorrhage; severe ulcerative colitis; toxic mega-colon complicating ulcerative colitis; myasthenia gravis. NARNINGS In the presence of high environ-mental temperature, heat pros-tration can occur with drug use (fever and heat stroke due to decreased sweating). Diarrhea may be an early symptom of incomplete intestinal obstruc-tion, especially in patients with ileostomy or colostomy. In this instance, treatment with

this instance, treatment with this drug would be inappropria-ate and possibly harmful. Like other anticholinergic agents, NuLev® may produce drowsi-ness, dizziness or blurred vision. In this event, the pablune, the paness, dizziness or blurred vision. In this event, the pa-tient should be warned not to engage in activities requir-ing mental alertness such as operating a motor vehicle or other machinery or to perform hazardous work while taking this drue. hazardous this drug. Psychosis has been reported in sensitive individuals given anticholinergic drugs includ-ing hyoscyamine sulfate. CNS signs and symptoms include confusion, disorientation, shortterm memory loss, hallucinations, dysarthria, ataxia, euphoria, anxiety, fatigue, insomnia, agitation and mannerisms, and inappropriate affect. These DNS signs and

insomnia, agriation and man-nerisms, and inappropriate affect. These CNS signs and symptoms usually resolve within 12 to 48 hours after discontinuation of the drug. discontinuation of the drug.

PRECAUTIONS
General
Use with caution in patients with: autonomic neuropathy, hyperthyroidism, coronary heart disease, congestive heart failure, cardiac arrhythmias, hypertension, and renal disease. Investigate any tachycardia before giving any anticholinergic drug since they may increase the heart rate. Use with caution in patients with hiatal hernia associated with reflux esophagitis. ophagitis.

Information for Patients
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agents, NuLev® may produce
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not to engage in alertness requiring mental alertness such as operating a motor vehicle or other machinery or to perform hazardous work while taking this drug. of NuLe may decre use un NULEV® may decrease sweating resulting in heat prostration, fever or heat stroke; febrile patients or those who may be exposed to elevated environmental tem-peratures should use caution.

Drug Interactions Additive adverse effects result-ing from cholinergic blockade may occur when NuLev® is ninistered antimuscarinics, haloperidol, es, monoamine AO) inhibitors, amantadine, phenothiazines phenounc oxidase (MAO) inhibi antidepressants histamines. tricyclic anti Antacids may interfere with the absorption of hyoscyamine sul-fate. Administer NuLev® before meals; antacids after meals.

Carcinogenesis, Mutagenesis, Impairment of Fertility
No long-term studies in animals have been performed to determine the carcinogenic, mutagenic or impairment of fertility potential of hyoscyamine sulfate; however, 40 years of marketing experience with hyoscyamine sulfate shows no demonstrable evidence of a problem.

Geriatric Use
Reported clinical experience
has not identified differences in safety between patients aged 65 and over and
younger patients. In general,
dose selection for an elderly
patient should be cautious,
usually starting at the low
end of the dosing range, reflecting the greater frequency
of decreased hepatic, renal,
or cardiac function, and of
concomitant disease or other
drug therapy. drug therapy. This drug is known to be substantially excreted by the kidney, and the risk of toxic reactions to this drug may be greater in patients with impaired renal function. to be

Pregnamo Category Animal

Category C
Animal reproduction studies have not been conducted with hyoscyamine sulfate. It is also not known whether hyoscyamine sulfate can cause fetal harm when administered to a pregnant woman or can affect reproduction capacity. NuLev® should be given to a pregnant woman only if

it woman d. a pregnant arly needed lursing Mothers

Hyoscyamine sulfate is ex-creted in human milk. Caution should be exercised when NuLev® is administered to a

nursing woman Geriatric Use Reported cli has not in

may be greater in patients with impaired renal function. Because elderly patients are more likely to have decreased renal function, care should be taken in dose selection, and the more beceletion, and the more because the selection and the more because the selection and the second selection are selection. it may be us renal function

useful to monitor

ADVERSE REACTIONS
All of the following adverse reactions have been reported with hyoscyamine sulfate. Adverse reactions may include dryness of the mouth; urinary hesitancy and retention; blurred vision; tachycardia; palpitations; mydriasis; increased ocular tension; loss of taste; headache; nervousness; drowsiness; weakness; fatigue; dizziness; insomnia; nausea; vomiting; impotence; constipation; bloated feeling; abdominal pain; diarrhea; allergic reactions or drug idio-syncrasies; urticaria and other dermal manifestations; ataxia;

lergic reactions or drug idio-syncrasies; urticaria and other dermal manifestations; ataxia; speech disturbance; some de-gree of mental confusion and/ or excitement (especially in or excitement (especially in elderly persons); short-term memory loss; hallucinations; and decreased sweating. OVERDOSAGE

OVERDOSAGE
The signs and symptoms of overdose are headache, nausea, vomiting, blurred vision, dilated pupils, hot dry skin, dizziness, dryness of the mouth, difficulty in swallowing, and ness of ficulty in swallowing, CNS stimulation

CNS stimulation.

Measures to be taken are immediate lavage of the stomach and injection of physostigmine 0.5 to 2 mg intravenously and repeated as necessary up to a total of 5 mg. Fever may be treated symptomatically (tepid water sponge baths, hypothermic blanket). Excitement to a degree that demands attention may be managed with sodium thiopental 2s solution given slowly intra-

with sodium thiopental 2% solution given slowly intra-venously or chloral hydrate (100-200 mL of a 2% solu-tion) by rectal intrusion. In the event of progression of the curare-like effect to paralysis of the respiratory muscles, artificial respiration should be instituted and maintained be instituted and mainta until effective respiratory and maintained

tion returns In rats, the LD50 for hyoscyamine is 375 mg/kg. Hyoscyamine sulfate is dialyzable. DOSAGE AND

DOSAGE AND ADMINISTRATION

Dosage may be adjusted according to the conditions and severity of symptoms. NuLev® Chewable Melt (Hyoscyamine Sulfate tablets, 0.125 mg) may be chewed or placed on tongue and allowed to disintegrate.

Tahlets may be taken with or

ablets may vithout water Tablets be taken with or Adults and pediatric patients 12 years of age and older 1 to 2 tablets every four hours or as needed. Do not exceed 12 tablets in 24 hours.

Pediatric patients 2 to under 12 years of age:
½ to 1 tablet every four hours or as needed. Do not exceed 6 tablets in 24 hours.

HOW SUPPLIED

NuLev® Chewable Melt (Hyoscyamine Sulfate tablets, 0.125 mg) are round, white, peppermitt flavored tablets with "AP" debossed on one side and "nu" debossed on the opposite side. Bottles of 100 tablet NDC 68220-118-10 Dispense in tight, light-resistant containers as defined in the USP/NF, with a childresistant closure.

at controlled room tem-ure between 20°-25°C 77°F), see USP Con-Room Temperature. erature between 68°-77°F), see U rolled Room Tel void exposure to hi pera (68) rolled Α KEEP THIS AND ALL MEDICA-TIONS OUT OF THE REACH OF CHILDREN. IN CASE OF AC-CIDENTAL OVERDOSE, SEEK PROFESSIONAL ASSISTANCE OR CALL A POISON CONTROL CENTER IMMEDIATELY.

Manufactured for: Marietta, GA 30062 pha For Medical Inquiries Call toll free 1-888-317-0001

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