

# SALBUT

Salbutamol sulphate BP

**Presentation :**

**Salbut Syrup :** Each 5 ml contains Salbutamol sulphate BP equivalent to 2 mg Salbutamol.

**Uses :**

Salbut is beta-adrenergic stimulant which has relatively selective action on the beta<sub>2</sub>- adrenergic receptors in the respiratory tract thereby relieves bronchospasm and reduces airways resistance. At the therapeutic dosage, it has little or no action on the beta<sub>1</sub> receptors. Salbut is indicated for the symptomatic relief of reversible bronchospasm associated with acute and chronic bronchial asthma, bronchitis, emphysema and other obstructive pulmonary diseases.

**Oral Dosage and administration :**

Adults and children over 12 years : The usual effective dose is 2-4 mg 3 to 4 times daily. If a favourable response does not occur, dosage may be increased gradually to 8 mg 3-4 times daily. In elderly patients or in those known to be unusually sensitive to the beta-adrenergic stimulants, it is advisable to initiate treatment with 2 mg 3-4 times daily. The total daily dosage should not exceed 32 mg.

*Children (upto 12 years) :*

2-6 years : 1-2 mg 3-4 times daily.

6-12 years : 2 mg 3-4 times daily.

Contra-indications, warning, etc.

**Contra-indications :** Salbut is contra-indicated in patients with a history of hypersensitivity to Salbutamol.

**Use in pregnancy :** As with all drugs Salbutamol should only be used in pregnancy, particularly in the first trimester, if essential.

**Precautions :** Salbutamol should be used with caution in patients with cardiovascular disorders, especially coronary insufficiency, cardiac arrhythmias and hypertension, and in patients with convulsive disorders, hyperthyroidism, enlarged prostate or diabetes mellitus. In asthmatic patients whose condition deteriorates despite administration of salbutamol, alternative or additional of salbutamol, alternative or additional therapy should be instituted instead of increasing the dosage of Salbutamol.

**Side-effects :**

Salbutamol may cause fine tremor of skeletal muscle (particularly the hands), palpitations and muscle cramps. Slight tachycardia, tenseness, headaches, and peripheral vasodilatation have been reported after large doses or in patients unusually sensitive to the drug. Occasionally nausea has been reported.

**Drug interactions :**

The effects of salbutamol are antagonized by the beta-adrenergic blocking agents such as propranolol. Concomitant use of MAO inhibitors or tricyclic antidepressants may potentiate the action of Salbutamol. Concurrent use with other sympathomimetic agents may increase the effects of either these medications, possibly, resulting in deleterious cardio-vascular effects. The effects of Salbutamol may be enhanced by concomitant administration of aminophylline and other xanthines.

**Overdosage :** Manifestations of overdosage may include anginal pain, hypertension, headache, nausea, vomiting, restlessness, etc. Treatment should preferably be instituted with a cardioselective beta-adrenergic blocker, however, it should be used with caution since an asthmatic attack could be induced by the beta-blocker.

**Pharmaceutical precautions :**

**Storage :** Salbutamol tablets and syrup should be protected from light and stored in a cool place.

**Commercial pack :**

Salbut Syrup : Bottles of 100 ml.



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