‰e-‡cv‡jvj

‰e‡m‡cv‡jvj

Dcv`vb t
‰e-‡cv‡jvj 2.5 U¨ve‡jU t cvZvU vdj¦ †Kv‡UW U¨ve‡j‡U Av‡Q ‰e‡m‡cv‡jvj vdDg‡iU ‰evc 2.5 vg.Mv.|
‰e-‡cv‡jvj 5 U¨ve‡jU t cvZvU vdj¦ †Kv‡UW U¨ve‡j‡U Av‡Q ‰e‡m‡cv‡jvj vdDg‡iU ‰evc 5 vg.Mv.|

dvgv‡KvjRx t
‰e‡m‡cv‡jvj ürvc‡Ûi ‰eUv-1 G‡WbwRK vi‡mÞ‡i evav †`Iqvi gva¨g vmg‡c‡_vUK bv‡fvm vm‡÷‡gi KvR‡K evav `vb K‡i| ‰e‡m‡cv‡jvj nvU †iU Ì ürvc‡Ûi ms‡KvP‡bi MvZ Kvg‡q ‡`q, hvi d‡j i³Pvc K‡g hvq|

vb‡`kbv t
‰e‡m‡cv‡jvj D”Pi³Pvc Gi e¨e¯vcbvq Ges GbwRbvi wPwKrmvq e¨eüZ nq| Bnv GKKfv‡e ev Ab¨vb¨ D”Pi³Pvcve‡ivax Jl‡ai m‡_ e¨eüZ nq|

gvÎv Ì ‡mebvwa t
‰e‡m‡cv‡jvj Gi †mebvwa Ì gvÎv G‡KK R‡bi †¶‡Î G‡KK iKg| mvaviYZt 5 vg.Mv. cvZv¨‡b GKevi wa¨‡q wPwKrmv ïi“ nq| vKQ vKQ †ivMvi ‡¶‡Î 2.5 vg.Mv. w`‡q wPwKrmv ïi“ nq| hv‡`i †¶‡Î ^`vbK 5 vg.Mv. chvß KvR K‡i bv, Zv‡`i †¶‡Î 10 vg.Mv chš †mebgvÎv evov‡bv hvq| c‡qvR‡b 20 vg.Mv. chš evov‡bv ‡h‡Z cv‡i|

‰eivZ vb‡`kbv t
†h mg¯ †ivMvi KvwWÌ‡RvbK kK, IfvU KvwWqvK †dBwjIi, 2q ev 3q GwÎf eK Ges gvKW mvBbvm e¨vwKvwWqv Av‡Q Zv‡`i †¶‡Î ‰eivZ vb‡`kZ|

cvk cvZvµqv t
Aemv`, vSgvb, gv_ve¨_v, A‡šÍi ‰eksLjv †hgb - evg evg fve, evg nIqv, Wvqviqv, †KvôKwVY¨ ev ‡c‡U e¨_v, nvZ-cv VvÛv nIqv, gvsm‡cki `ejZv, ür ú`b K‡g hvIqv, nvU ‡dBwjIi Av‡iv Lvivc nIqv, Ng Kg nIqv, `vðšÍ, G¨vRgv ev COPD, kvm-ckv‡m mgm¨v BZ¨vw` cvkcvZvµqv †`Lv w`‡Z cv‡i|

Mfve¯vq Ì ¯b¨`vbKv‡j e¨envi t
Mfve¯vq t Le †ekx c‡qvRb bv n‡j ‰e‡m‡cv‡jvj Mfve¯vq e¨envi Kiv DwPZ bq|
¯b¨`vbKv‡j t gvZ`‡» ‰e‡m‡cv‡jvj vbtmZ nq| hvi `i¨Y ¯b¨`vbKv‡j ‰e‡m‡cv‡jvj e¨envi Ki‡j ¯b¨`vb †_‡K ‰eiZ _vK‡Z n‡e|

mZKZv t
‡ibvj ev †ncwUK B‡¤úqvi‡gvU Gi †¶‡Î ‰e‡m‡cv‡jvj - Gi †mebgvÎv mZKZvi mv‡_ vgvj‡q vb‡Z n‡e| ZvQvov hviv ‰eUv-eKvi †meb K‡i Ì †h mg¯ †ivMv‡`i GbwdvB‡jKvUK ‰eµqvi BwZnvm Av‡Q, Zv‡`i †¶‡Î ‰e‡m‡cv‡jvj mZKZvi mv‡_ e¨envi Ki‡Z nq|

WvM BwUvi¨vKkb t
‰e‡m‡cv‡jvj †ivMv‡`i Bbmvjb ev Ab¨vb¨ nvB‡cvM‡B‡mvgK Jla I ürvc‡Ûi Ab¨vb¨ Jl‡ai vµqv ewo‡q w`‡Z cv‡i| vidvgvcvmb ‰e‡m‡cv‡jvj‡ji nvd-jvBd‡K Kvg‡q w`‡Z cv‡i|

msi¶Y t
Av‡jv †_‡K `‡i, VvÛv Ì ï® ¯v‡b msi¶Y Ki“b| vkï‡`i bvM‡ji evB‡i ivLb|

c¨vKs t
‰e-‡cv‡jvj 2.5 U¨ve‡jU t cvZvU ev‡· Av‡Q 3 x 10wU U¨ve‡jU ‰eóvi c¨v‡K |
‰e-‡cv‡jvj 5 U¨ve‡jU t cvZvU ev‡· Av‡Q 3 x 10wU U¨ve‡jU ‰eóvi c¨v‡K |

c¯ZKvi K t

kixd dvgwmDwUK¨vjm wjt
i(cMÄ, bvivqYMÄ, evsjv‡`k|

P12008

B-prolol

Bisoprolol

COMPOSITION :
B-prolol 2.5 Tablet : Each film coated tablet contains Bisoprolol Fumarate BP 2.5 mg.
B-prolol 5 Tablet : Each film coated tablet contains Bisoprolol Fumarate BP 5 mg.

PHARMACOLOGY :
Bisoprolol blocks the action of the sympathetic nervous system on the heart by blocking the heart's beta1-adrenergic receptors. Bisoprolol reduces the heart rate & force of contraction of the heart, thus lowers blood pressure.

INDICATIONS :
Bisoprolol is indicated in the management of hypertension and in the treatment of angina. It may be used alone or in combination with other antihypertensive agents.

DOSAGE AND ADMINISTRATION :
The dose of Bisoprolol must be individualized to the needs of the patient. The usual starting dose is 5 mg once daily. In some patients, 2.5 mg may be an appropriate starting dose. If the antihypertensive effect of Bisoprolol 5 mg is inadequate, the dose may be increased to 10 mg and then, if necessary, to 20 mg once daily.

CONTRAINDICATIONS :
Bisoprolol is contraindicated in patients with cardiogenic shock, overt cardiac failure, second or third degree AV block and marked sinus bradycardia.

SIDE EFFECTS :
Fatigue, dizziness, headache, disturbances of the gut such as nausea, vomiting, diarrhoea, constipation or abdominal pain, cold or numb extremities, e.g. hands and feet, muscle weakness or cramps, slower than normal heart beat (bradycardia), worsening of heart failure, sleep disturbance, depression, breathing difficulties due to a narrowing of the airways (bronchospasm) in people with asthma or COPD.

USE IN PREGNANCY & LACTATION :
Pregnancy: Bisoprolol should not be used during pregnancy unless clearly necessary.
Lactation: It is not known whether this drug is excreted in human milk. Therefore, breast-feeding is not recommended during administration of Bisoprolol.

PRECAUTION :
Impaired renal or hepatic function: Use caution in adjusting the dose of Bisoprolol in patients with renal or hepatic impairment. Risk of anaphylactic reaction: While taking beta-blockers, patients with a history of severe anaphylactic reaction to a variety of allergens may be more reactive to repeated challenge, accidental, diagnostic or therapeutic. Such patients may be unresponsive to the usual doses of epinephrine used to treat allergic reaction.

DRUG INTERACTION :
May potentiate the effects of other cardiovascular agents, insulin or other oral hypoglycemic drugs. Rifampicin can reduce the half-life of bisoprolol.

STORAGE :
Store in cool and dry place, away from light. Keep out of the reach of children.

PACKING :
B-prolol 2.5 Tablet: Each box contains 3 x 10's Tablet in blister pack.
B-prolol 5 Tablet: Each box contains 3 x 10's Tablet in blister pack.

Manufactured by:

Sharif Pharmaceuticals Ltd.
Rupganj, Narayanganj, Bangladesh.

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