

# Torsid<sup>TM</sup>

Torsemide USP

## COMPOSITION

**Torsid<sup>TM</sup> 5 tablet:** Each tablet contains Torsemide USP 5 mg.

**Torsid<sup>TM</sup> 20 tablet:** Each tablet contains Torsemide USP 20 mg.

## PHARMACOLOGY

Torsemide acts within the lumen of the thick ascending portion of the loop of Henle, where it inhibits the Na<sup>+</sup>/K<sup>+</sup>/2Cl<sup>-</sup>-carrier system. Torsemide increases the urinary excretion of sodium, chloride and water, but it does not significantly alter glomerular filtration rate, renal plasma flow or acid-base balance.

## INDICATION

Torsemide is indicated for the treatment of edema associated with congestive heart failure, renal disease, or hepatic disease. Torsemide is indicated for the treatment of hypertension alone or in combination with other antihypertensive agents.

## DOSAGE & ADMINISTRATION

### *Treatment of Edema*

Edema associated with heart failure: The recommended initial dose is Torsemide 10 mg or 20 mg once daily. If the diuretic response is inadequate, titrate upward by approximately doubling until the desired diuretic response is obtained.

Edema associated with chronic renal failure: The recommended initial dose is Torsemide 20 mg once daily. If the diuretic response is inadequate, titrate upward by approximately doubling until the desired diuretic response is obtained.

Edema associated with hepatic cirrhosis: The recommended initial dose is Torsemide 5 mg or 10 mg once daily, administered together with an aldosterone antagonist or a potassium-sparing diuretic. If the diuretic response is inadequate, titrate upward by approximately doubling until the desired diuretic response is obtained.

Treatment of Hypertension: The recommended initial dose is 5 mg once daily. If the 5 mg dose does not provide adequate reduction in blood pressure within 4 to 6 weeks, increase to 10 mg once daily. If the response to 10 mg is insufficient, add another antihypertensive agent to the treatment regimen.

## CONTRAINDICATION

Torsemide is contraindicated in patients with known hypersensitivity to Torsemide. It is contraindicated in patients who are anuric or with hepatic coma.

## PRECAUTION & ADVERSE EFFECTS

*Hypotension:* Excessive diuresis may cause potentially symptomatic dehydration, blood volume reduction and hypotension.

*Electrolyte and Metabolic Abnormalities:* Torsemide can cause symptomatic hypokalemia, hyponatremia and hypochloremic alkalosis.

## DRUG INTERACTION

Patients receiving high doses of salicylates may experience salicylate toxicity when Torsemide is concomitantly administered. If Torsemide and cholestyramine should be co-administered, administer Torsemide at least one hour before or 4 to 6 h after cholestyramine administration. Also, coadministration of Torsemide with ACE inhibitors or Angiotensin receptor blockers can increase the risk of hypotension and renal impairment.

## USE IN SPECIAL POPULATION

*Use in Pregnancy:* Pregnancy Category: B

*Use in Lactation:* It is not known whether Torsemide is excreted in human milk. Caution should be exercised when Torsemide is administered to a nursing woman.

## STORAGE

Protect from light and moisture. Store below 30°C. Keep the medicine out of reach of children.

## HOW SUPPLIED:

**Torsid<sup>TM</sup> 5 tablet:** Each box contains 30 tablets in blister pack.

**Torsid<sup>TM</sup> 20 tablet:** Each box contains 30 tablets in blister pack.

Manufactured by



TM - Trade Mark

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