

Secrin® M

Glimepiride and Metformin Hydrochloride

COMPOSITION

Secrin® M 1/500 XR Bilayer Tablet: Each bilayer tablet contains Glimepiride EP 1 mg and Metformin Hydrochloride EP 500 mg (as extended release).

Secrin® M 2/500 XR Bilayer Tablet: Each bilayer tablet contains Glimepiride EP 2 mg and Metformin Hydrochloride EP 500 mg (as extended release).

PHARMACOLOGY

Secrin® M combines two antihyperglycemic agents with complementary mechanisms of action to improve glycemic control in patients with type 2 diabetes: Glimepiride, a sulfonylurea, and Metformin Hydrochloride, a member of the biguanide class.

The primary mechanism of action of Glimepiride, is to stimulate the release of insulin from functioning pancreatic beta cells. Glimepiride also acts by improving the sensitivity of beta cells to physiological glucose stimulus, resulting in insulin secretion. In addition, extra pancreatic effects like reduction of basal hepatic glucose production, increased peripheral tissue sensitivity to insulin and glucose uptake may also play role in the activity of Glimepiride.

The pharmacologic mechanism of action of Metformin is different from other classes of oral antihyperglycemic agents. Metformin decreases hepatic glucose production, decreases intestinal absorption of glucose, and increases peripheral glucose uptake and utilization.

INDICATION AND USAGE

Secrin® M is indicated as an adjunct to diet and exercise to improve glycemic control in adults with type 2 diabetes mellitus when treatment with both Glimepiride and Metformin is appropriate.

DOSAGE AND ADMINISTRATION

The initial recommended dose of Glimepiride & Metformin combination tablet is Glimepiride 1 mg & Metformin Hydrochloride 500 mg one tablet once daily with breakfast or first main meal of the day. Starting dose for patients inadequately controlled on Glimepiride or Metformin monotherapy is **Secrin® M 1/500** XR tablet once daily, and gradually titrated after assessing the therapeutic response. During treatment with Glimepiride & Metformin combination tablet, glucose levels in blood and urine must be measured regularly.

Titration: The daily dose must be titrated in increments of 1 tablet. The maximum recommended dose per day is 8 mg Glimepiride and 2000 mg Metformin. When switching from combination therapy of Glimepiride & Metformin to separate tablets, Glimepiride & Metformin should be administered separately on the basis of dosage currently being taken. Due to the sustained release formulation, **Secrin® M** tablet must be swallowed whole and not crushed or chewed. When Glimepiride & Metformin combination tablet is used in combination or with insulin, a lower dose of the Glimepiride or Insulin may be required to reduce the risk of hypoglycemia.

CONTRAINDICATIONS

For Glimepiride:

- In patients hypersensitive to Glimepiride, other sulfonylureas, other sulfonamides, or any of the excipients of **Secrin® M** tablet.

For Metformin:

- Hypersensitivity to metformin or any of the excipients.
- Acute or chronic metabolic acidosis, including diabetic ketoacidosis, with or without coma.
- Renal disease or renal dysfunction (e.g., as suggested by serum creatinine levels >1.5 mg/dL [males], >1.4 mg/dL [females] or abnormal creatinine clearance)

ADVERSE EFFECTS

For Glimepiride: As a result of the blood glucose-lowering action of Glimepiride, hypoglycemia may occur which may also be prolonged. At the start of treatment, there may be temporary visual impairment due to the change in blood glucose levels. Occasionally,

gastrointestinal symptoms e.g. nausea, vomiting, sensations of pressure or fullness in the epigastrium, abdominal pain and diarrhoea may occur. Occasionally, allergic or pseudo-allergic reactions may occur e.g. in the form of itching, urticaria or rashes.

For Metformin: Gastrointestinal symptoms-nausea, vomiting, diarrhoea, abdominal pain and loss of appetite are very common.

DRUG INTERACTION

For Glimepiride: The hypoglycemic action of sulfonylureas may be potentiated by certain drugs, including NSAIDs and other drugs that are highly protein bound, such as salicylates, sulfonamides, chloramphenicol, coumarins, probenecid, MAO inhibitors, beta adrenergic blocking agents, and clarithromycin. Certain drugs tend to produce hyperglycemia and may lead to loss of control. These drugs include thiazides, and other diuretics, corticosteroids, phenothiazines, thyroid products, estrogens, oral contraceptives, phenytoin, nicotinic acid, sympathomimetics, and isoniazide. A potential interaction between oral miconazole and oral hypoglycemic drugs leading to severe hypoglycemia has been reported.

For Metformin: No information is available about the interaction of Metformin and furosemide when co-administered chronically. Nifedipine appears to enhance the absorption of Metformin. Metformin had minimal effects on nifedipine. Cationic drugs (e.g., amiloride, digoxin, morphine, procainamide, quinidine, quinine, ranitidine, triamterene, trimethoprim, or vancomycin) that are eliminated by renal tubular secretion theoretically have the potential for interaction with Metformin by competing for common renal tubular transport systems. Metformin had no effect on cimetidine pharmacokinetics. Certain drugs tend to produce hyperglycemia and may lead to loss of glycemic control. These drugs include the thiazides and other diuretics, corticosteroids, phenothiazines, thyroid products, estrogens, oral contraceptives, phenytoin, nicotinic acid, sympathomimetics, calcium channel blocking drugs, and isoniazide.

USE IN PREGNANCY & LACTATION

PREGNANCY: The use of Glimepiride & Metformin combination is not recommended for use in pregnancy. Intake may cause risk/harm to child. It is recommended that such patients change over to insulin.

LACTATION: The use of Glimepiride & Metformin combination is not recommended for use in lactating mothers, and if the diet alone is inadequate for controlling blood glucose, insulin therapy should be considered.

GERIATRIC USE: Metformin is substantially excreted by the kidneys, and because aging is associated with reduced renal function, Glimepiride & Metformin combination should be used with caution in the elderly.

PEDIATRIC USE

Safety and effectiveness of Glimepiride & Metformin combination in pediatric patients have not been established.

STORAGE

Store below 30°C, keep away from light & moisture. Keep out of the reach of the children.

HOW SUPPLIED

Secrin® M 1/500 XR Bilayer Tablet: Each box contains 28 bilayer tablets in blister pack. **Secrin® M 2/500** XR Bilayer Tablet: Each box contains 28 bilayer tablets in blister pack.

Manufactured by



SQUARE
PHARMACEUTICALS LTD.
BANGLADESH