

ELECTRO-K®

Potassium Chloride

DESCRIPTION

ELECTRO-K (Potassium Chloride) is an electrolytic agent which is used as a Potassium supplement. Potassium is the major intracellular cation which plays an important role in the biochemical integrity of cells. Potassium is accumulated by cells using an energy-dependent mechanism that pushes sodium out of the cell. Depending on the daily intake a healthy individual excretes Potassium about one third of his daily Potassium intake in the stool and two third in the urine. The normal daily intake of Potassium is about 2-3 g.

COMPOSITION

Tablet : Each tablet contains Potassium Chloride BP 600 mg equivalent to 8 mmol Potassium.

Syrup : Each 5 ml syrup contains Potassium Chloride USP 500 mg equivalent to 6.7 mmol Potassium.

INDICATIONS

ELECTRO-K is indicated in drug induced hypokalemia, liver cirrhosis, nausea, vomiting, cholera, diarrhoea, muscular weakness, paralysis, cardiac and congestive heart failure, diabetic ketoacidosis, ulcerative colitis, weakness, anorexia, drowsiness, Cushing's syndrome, pyloric stenosis, low blood pressure etc.

DOSAGE AND ADMINISTRATION

Dosage must be adjusted to the individual needs of each patient.

Adults : In severe deficiencies 3-6 tablets or 4-8 teaspoonful or 25-50 mmol per day orally in divided doses for some days with fruit juice, sweet or plain water.

Children : ½-1 teaspoonful twice daily or 1-3 mmol/kg body weight a day in several divided doses.

Patient should take ELECTRO-K with meals.

OR AS DIRECTED BY THE PHYSICIAN.

SIDE EFFECTS

The most common side effects are nausea, vomiting, abdominal pain and diarrhoea.

CONTRAINDICATIONS

Potassium Chloride is contra-indicated to the patients who are hypersensitive to Potassium salts. Potassium supplements are contraindicated in patients receiving Potassium sparing diuretics (e.g. Spironolactone, Triameterene) since such use may produce severe hyperkalemia.

PRECAUTIONS

The treatment of Potassium depletion, particularly in presence of cardiac disease, renal disease or acidosis, requires careful attention to acid-base balance and appropriate monitoring of serum electrolytes, ECG, and clinical status of patients.

DRUG INTERACTIONS

Concurrent use of Potassium and Potassium retaining diuretics is very likely to result in hyperkalemia. ACE inhibitors and Potassium have been reported to cause hyperkalemia during the therapy of heart failure. b-adrenoceptor blockers increase the risk of hyperkalemia when given with Potassium supplements.

SUPPLY

Tablet : Each box contains 10 X 10 tablets in strips.

Syrup : Each bottle contains 100 ml syrup.

FOR HEALTH, VIGOUR AND HAPPINESS

 *The ACME Laboratories Ltd.*
Dhamrai, Dhaka, Bangladesh.