# Alodia

#### **Tablet**

## Alogliptin Benzoate INN

#### Composition

Alodia 25: Each film-coated tablet contains Alogliptin Benzoate INN 34 mg equivalent to 25 mg of Alogliptin.

Alodia 12.5: Each film-coated tablet contains Alogliptin Benzoate INN 17 mg equivalent to 12.5 mg of Alogliptin.

## Pharmacology

Increased concentrations of the incretin hormones such as glucagon-like peptide-1 (GLP-1) and glucose dependent insulinotropic polypeptide (GIP) are released into the bloodstream form the small intestine in response to meals. These hormones cause insulin release from the pancreatic beta cells in a glucose-dependent manner but are inactivated by the dipeptidyl peptidase-4 (DPP-4) enzyme tithing minutes. GLP-1 also lowers glucagon secretion from pancreatic alpha cells, reducing hepatic glucose production. In patients with type 2 diabetes, concentrations of GLP-1 are reduced but the insulin response to GLP-1 is preserved. Alogliptin is a DPP-4 inhibitor that slows the inactivation of the incretin hormones, thereby increasing their bloodstream concentrations and reducing fasting and postprandial glucose concentrations in a glucose dependent manner in patients with type 2 diabetes mellitus. Alogliptin selectively binds to and inhibits DPP-4 but not DPP-8 or DPP-9 activity in vitro at concentrations approximating therapeutic exposures.

#### Indication

Alodia (Alogliptin) is a dipeptidyl peptidase-4 (DPP-4) inhibitor indicated as an adjunct to diet and exercise to improve glycemic control in adults with type 2 diabetes mellitus. It is also indicated for use in combination with Metformin, Sulfonylurea or Pioglitazone when diet and exercise plus the single agent does not provide adequate glycemic control.

## **Dosage and Administration**

Route of administration: Oral.

The recommended dose of **Alodia** (Alogliptin) is 25 mg once daily. **Alodia** can be taken with or without food

## Patients with Renal Impairment

For patients with mild renal impairment, no dosage adjustment for **Alodia** (Alogliptin) is required. For patients with moderate renal impairment, the dose of **Alodia** (Alogliptin) is 12.5 mg once daily. For patients with severe renal impairment or with end-stage renal disease (ESRD), the dose of **Alodia** (Alogliptin) is 6.25 mg once daily.

#### OR AS DIRECTED BY THE PHYSICIAN.

#### Contraindication

History of a serious hypersensitivity reaction to Alogliptin, such as anaphylaxis, angioedema or severe cutaneous adverse reaction.

## Warning & Precaution

- Should not be used in patients with type 1 diabetes mellitus or for the treatment of diabetic ketoacidosis.
- If pancreatitis is suspected, **Alodia** should promptly be discontinued and appropriate management should be initiated.
- If a hypersensitivity reaction is suspected, Alodia should be promptly discontinued.
- If signs or symptoms of liver injury occur, discontinue Alodia and seek medical advice promptly.
- When Alodia is used in combination with a sulfonylurea or with insulin, hypoglycemia may occur, a lower dose of sulfonylurea or insulin may be required to reduce the risk of hypoglycemia.

## Side Effects

**Common side effects:** The most common adverse reactions are; allergic reaction; severe rash, hives, swallowing or breathing problems and headache. Hypoglycemia may occur in patients treated with the combination of Alogliptin and sulfonylurea and add-on to insulin.

Rare side effects: The rare adverse reactions are; bullous pemphigoid: blistering of the skin, redness or peeling skin, stevens Johnson syndrome: serious rash, swelling of lips, eyes or mouth & flu like symptoms & liver disorders: unusual or unexplained tiredness loss of appetite.

## Use in Pregnancy & Lactation

**Pregnant Women:** There is no adequate or well-controlled studies in pregnant woman. As a precautionary measure, **Alodia** should not be used during pregnancy.

**Nursing Women:** It is not known whether **Alodia** is excreted in human milk but a risk to the breast-fed child can not be excluded. **Alodia** should not be used by a woman who is nursing.

## Use in Children & Adolescents

The safety and efficacy of **Alodia** in children and adolescents below 18 years have not been established.

## **Drug Interaction**

No significant drug-drug interactions were observed with the CYP-substrate or inhibitors or with renally excreted drugs.

## Overdose

If **Alodia** is overdosed no serious adverse reaction were observed but clinical measure should be employed as dictated by patient's clinical status.

## Storage

Store below 30°C temperature & dry place, protected from light. Keep all medicines out of reach of children.

## Packing

Alodia 25: Each box contains 3 x 10 tablets in Alu-Alu blister strip. Alodia 12.5: Each box contains 3 x 10 tablets in Alu-Alu blister strip.

\* Further information is available on request.

