

Salbutamol Sulfate BP & Budesonide BP

## Composition

**Airfors 90/80 HFA Inhaler:** Each actuation delivers Salbutamol (as Salbutamol Sulfate BP) 90 µg and Budesonide BP 80 µg.

## Pharmacology

**Airfors HFA Inhaler** HFA inhaler is a combination of Salbutamol Sulphate BP and Budesonide BP. It is a Hydrofluoroalkane (HFA) based environment friendly inhaler as it does not contain Chlorofluorocarbon (CFC) as propellant which is one of the main reasons of ozone layer depletion. Salbutamol activates beta2-adrenergic receptors on airway smooth muscle which leads to the activation of adenylyl cyclase and increases intracellular concentration of cyclic-3',5'-adenosine monophosphate (cyclic AMP). Then it activates protein kinase A, which inhibits the phosphorylation of myosin and lowers intracellular ionic calcium concentrations, resulting in relaxation. Budesonide is an anti-inflammatory corticosteroid that exhibits potent glucocorticoid activity and weak mineralocorticoid activity.

## Indications

**Airfors HFA Inhaler** is indicated for the as-needed treatment or prevention of bronchoconstriction and to reduce the risk of exacerbations in patients with asthma 18 years of age and older..

## Dosage and Administration

Route of Administration: HFA Inhalation Aerosol

The recommended dosage is 2 actuations of **Airfors HFA Inhaler** as needed for asthma symptoms by oral inhalation. Do not take more than 6 doses (12 inhalations) in a 24-hour period.

## OR AS DIRECTED BY THE PHYSICIAN.

## Contraindications

**Airfors HFA Inhaler** is contraindicated in patients with a history of hypersensitivity to Salbutamol, Budesonide, or any of the excipients.

## Warning & Precautions

• If **Airfors HFA Inhaler** produce paradoxical bronchospasm, it should be discontinued immediately and alternative therapy should be instituted

• **Airfors HFA Inhaler** can produce cardiovascular effects in some patients as measured by increases in pulse rate, blood pressure, and/or other symptoms. If such effects occur, **Airfors HFA Inhaler** may need to be discontinued

• **Airfors HFA Inhaler** should not be used more than the maximum daily dose as an overdose may result

• Hypersensitivity reactions can occur after administration of **Airfors HFA Inhaler** such as anaphylaxis, angioedema, bronchospasm, oropharyngeal edema, rash and urticaria. Discontinue **Airfors HFA Inhaler** if such reactions occur

• Beta-adrenergic agonist medicines may produce significant hypokalemia in some patients

• Inhaled corticosteroids should be used with caution in patients. It may produce active or quiescent tuberculosis infection of the respiratory tract, systemic fungal, bacterial, viral, or parasitic infections; or ocular herpes simplex

• **Airfors HFA Inhaler** contains budesonide, an inhaled corticosteroid (ICS) which can cause infections of the mouth and pharynx with *Candida Albicans*. When such an infection develops, it should be treated with appropriate local or systemic antifungal therapy while treatment with **Airfors** continues.

• Patients treated with **Airfors HFA Inhaler** should be observed carefully for any evidence of systemic corticosteroid effects

• Decreases in bone mineral density (BMD) have been observed with long-term administration of products containing ICS

• Glaucoma, increased intraocular pressure, and cataracts have been reported following the long-term administration of ICS, including budesonide. Referral should be considered to an ophthalmologist in patients who develop ocular symptoms

• Caution should be exercised when considering the co-administration of **Airfors HFA Inhaler** with long-term ketoconazole and other known strong CYP3A4

inhibitors (e.g., ritonavir, atazanavir, clarithromycin, indinavir, itraconazole, nefazodone, nelfinavir, saquinavir, telithromycin)

• If the patient continues to experience symptoms after using **Airfors** or requires more doses of **Airfors HFA Inhaler** than usual and requires evaluation of the patient with their treatment regimen

## Side Effects

**Common side effects:** Headache, cough, hoarseness, thrush in mouth and throat, adrenal insufficiency, allergic reactions, low bone mineral density, eye problems including glaucoma, cataracts etc.

## Use in Pregnancy & Lactation

It is not known that if **Airfors HFA Inhaler** may harm the unborn baby. There are no available data on the effects of **Airfors HFA Inhaler** on the breastfed child or on milk production. Administration of **Airfors HFA Inhaler** in pregnant and lactating women should only be considered if the expected benefit to the mother is greater than any possible risk to the fetus

## Drug Interaction

• Strong cytochrome P4503A4 inhibitors (e.g. ritonavir)

• Other short-acting bronchodilators: Use judiciously with other short-acting beta agonists

• Beta blockers: May decrease effectiveness of **Airfors HFA Inhaler** and produce severe bronchospasm

• Diuretics, or non-potassium-sparing diuretics: May potentiate hypokalemia or ECG changes. Consider monitoring potassium levels with concomitant use

• Digoxin: May decrease serum digoxin levels

• Monoamine oxidase inhibitors (MAOI) and tricyclic antidepressants: Use **Airfors HFA Inhaler** with extreme caution with concomitant use

## Packing

**Airfors 90/80 HFA Inhaler:** Each canister contains 120 metered doses, each dose contains Salbutamol (as Salbutamol Sulfate BP) 90 µg and Budesonide BP 80 µg.

## Pharmaceutical Precautions

• Do not puncture, break or incinerate the pressurized canister even when apparently empty.

• Avoid storage in direct sunlight and heat.

• Store below 30° C, temperature & dry place, protected from light.

• Keep away from children.

• Keep away from eyes.

\*Further information is available on request.



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