

# RANUL

## Ranitidine

150 mg Tablet

### Description

**Ranul** (Ranitidine) is an antiulcerant drug belongs to H<sub>2</sub>-receptor antagonist class. Ranitidine reversibly competitively blocks histamine at H<sub>2</sub>-receptors, particularly those in the gastric parietal cells and inhibits all phases of gastric acid secretion caused by histamine, muscarinic agonists and gastrin. Ranitidine also inhibits fasting and nocturnal acid secretions, and acid secretions stimulated by food, insulin, & caffeine. In controlling gastric acid hypersecretion Ranitidine is 5 to 12 times more potent than Cimetidine. Ranitidine is readily absorbed from GIT and food does not significantly impair absorption. After oral administration, the bioavailability of Ranitidine is about 50%, time to peak plasma concentration is 2-3 hours, elimination half-life 2 to 3 hours, plasma protein binding 15% and 30% of dose is excreted unchanged in urine in 24 hours.

### Composition

**Ranul Tablet** : Each tablet contains Ranitidine Hydrochloride BP equivalent to 150 mg Ranitidine.

### Indication

**Ranul** (Ranitidine) is indicated for the treatment or symptomatic relief of various gastric disorders and other conditions where reduction of gastric acid secretion and acid output is desirable, like-

- Benign gastric and duodenal ulcer
- NSAID-induced ulcer
- Prophylaxis of NSAID-induced ulcer
- Duodenal ulcer associated with *H. pylori* in combination with antibiotics
- Chronic episodic dyspepsia
- Gastro-esophageal reflux disease (GERD)
- Pathological acid hypersecretory conditions, such as Zollinger-Ellison Syndrome (ZES)
- Gastric acid reduction (prophylaxis of acid aspiration)
- Prophylaxis of stress ulcer

### Dosage and Administration

Benign gastric ulcer and duodenal ulcer	Treatment dose	150 mg twice daily or 300 mg single dose at bed time for 4 to 8 weeks. A dose of 300 mg twice daily for 4 weeks can be given in duodenal ulcer to achieve a higher healing rate
	Maintenance dose	150 mg daily at bed time
NSAID-induced ulcer		150 mg twice daily or 300 mg single dose at bed time for 8 weeks
Prophylaxis of NSAID-induced ulcer		150 mg-300 mg twice daily
Duodenal ulcer associated with <i>H. pylori</i>		300 mg Ranitidine once daily or 150 mg twice daily + 750 mg Amoxicillin 3 times a day + 500 mg Metronidazole 3 times a day for 2 weeks. Therapy with Ranitidine should then be continued for a further 2 weeks
Chronic episodic dyspepsia		150 mg twice daily or 300 mg single dose at bed time for 6 weeks
Gastro-esophageal reflux disease (GERD)	Normal	150 mg twice daily or 300 mg single dose at bed time for 8 weeks or if necessary 12 weeks
	Moderate to severe	600 mg daily in 2-4 divided doses for up to 12 weeks
	Maintenance dose	150 mg twice daily
Pathological acid hypersecretory conditions, such as Zollinger-Ellison Syndrome (ZES)		150 mg 3 times daily; dose up to 6 g daily in divided doses have been used
Gastric acid reduction (prophylaxis of acid aspiration)	In obstetrics	150 mg at onset of labour, then every 6 hours
	Surgical procedures	150 mg 2 hours before induction of anaesthesia and preferably also 150 mg the previous evening
Prophylaxis of stress ulcer		After IV Ranitidine administration, doses of 150 mg twice daily may be given when oral feeding commences

**In renal impairment** : In renal impairment the mean elimination half-life of Ranitidine is increased to double and therefore dosage of Ranitidine should be reduced in patients with severe renal impairment and suggested doses is 150 mg daily. **Children** : The recommended oral dose for the treatment of duodenal and gastric ulcer in children is 2 to 4 mg/kg twice daily to a maximum of 300 mg/day.

### Contraindication

**Ranul** is contraindicated in patients with known hypersensitivity to Ranitidine

### Precaution

It should be used with caution in renal and hepatic impairment and avoid in porphyria.

### In pregnancy and lactation

**Pregnancy** : Pregnancy category B. This drug should be used during pregnancy only if clearly needed. **Lactation** : Ranitidine is secreted in human milk. Caution should be exercised when administered to a nursing mother.

### Side Effect

**Ranul** (Ranitidine) is well tolerated and side effects are generally infrequent and minor. Headache, malaise, dizziness, constipation, nausea, abdominal pain and rash may occur. Mental confusion and hallucination have occurred in geriatric patients during Ranitidine therapy.

### Drug Interaction

**Sulfonylureas** : Ranitidine may increase the hypoglycemic effect. **Diazepam, phenytoin and warfarin** : Ranitidine can delay their elimination. **Ethanol** : may increase plasma ethanol levels.

### Storage

Store in a cool dry place, away from light. Keep out of reach of children.

### How supplied

**Ranul Tablet** ☐ Box containing 10 x 10 tablets in Alu-Alu strips.



Manufactured by  
**Apex Pharma Ltd.**  
Shafipur, Gazipur