

For the use only of a Registered Medical Practitioner or a Hospital or a Laboratory.

# CHERICOF

## COUGH FORMULA

### COMPOSITION :

Each 5 ml contains :

Chlorpheniramine Maleate USP	2 mg
Dextromethorphan Hydrobromide USP	10 mg
Phenylephrine Hydrochloride BP	5 mg
In a pleasantly flavoured syrup	q.s.

### PHARMA COLOGY

Cough is a protective respiratory reflex by which foreign matter is expelled from the tracheobronchial tree. When cough increases in frequency and severity, it becomes troublesome, disturbs sleep and requires symptomatic treatment. Cough can be caused by disorders of upper and lower respiratory tract. Most coughs associated with acute respiratory infections or allergy are nonproductive or dry and irritating. CHERICOF is formulated to provide symptomatic relief of cough and upper respiratory symptoms associated with allergy or common cold, including nasal congestion.

Chlorpheniramine is a potent antiallergic agent which inhibits the vascular response to histamine thereby reducing irritation of cough receptors lining the respiratory mucous membrane. It provides relief from symptoms of allergic upper respiratory catarrh. Chlorpheniramine has moderate sedative and antimuscarinic effects. After absorption, it is widely distributed in body and extensively metabolised; unchanged drug and metabolites are excreted primarily in urine.

Dextromethorphan Hydrobromide is a nonopioid cough suppressant. Dextromethorphan suppresses the cough reflex by a direct action on the medullary cough centre. Dextromethorphan is as effective as codeine in antitussive effect. However, it does not have addictive, sedative or respiratory depressant effect seen with opioid antitussives. The onset of antitussive action is 15-30 minutes after administration and is sustained for upto 6 hours. Dextromethorphan is rapidly absorbed after oral administration. It is metabolised in liver and excreted in urine as unchanged drug and metabolites.

Phenylephrine Hydrochloride is a predominantly indirect acting sympathomimetic agent with a decongestant action on nasal and upper respiratory tract mucosal membranes. Phenylephrine causes far less central nervous system stimulation than ephedrine. The onset of decongestant action is 15-30 minutes, peak activity occurring after approximately one hour. Phenylephrine is readily and completely absorbed after oral administration. It is excreted largely unchanged in urine.

### INDICATIONS

CHERICOF cough formula is indicated for symptomatic relief of nonproductive, dry cough and upper respiratory symptoms such as irritation of throat, running nose, nasal congestion and watery eyes associated with allergy or common cold. It may also be useful in coughs associated with upper respiratory tract infection.

### DOSAGE

Adults	:	10 ml (2 teaspoonfuls)	3-4 times a day.
Children	:	6-12 years	: 5 ml (1 teaspoonful) 3-4 times a day.
	:	2-6 years	: 2.5 ml (1/2 teaspoonful) 3-4 times a day or as directed by the physician.

## PRECAUTIONS

### General

CHERICOF should be used with caution in patients with a history of asthma, narrow angle glaucoma, gastrointestinal obstruction or urinary bladder neck obstruction because of its antihistamine component. CHERICOF contains a sympathomimetic and like all such preparations, it should be used with caution in patients with hypertension, heart disease, uncontrolled diabetes or hyperthyroidism.

### Warnings

In infants and small children overdosing of antihistamines can cause excitation, hallucinations and convulsions. Antihistamines can cause reduced mental alertness and patients should be careful about engaging in activities such as driving or operating dangerous machinery.

### Contraindications

Hypersensitivity to any of the ingredients. Do not use in the new-born, in premature infants, in nursing mothers, in patients with severe hypertension or severe coronary artery disease or those receiving monoamine oxidase (MAO) inhibitors. Antihistamines should not be used in treatment of bronchial asthma.

### Drug Interactions

Antihistamines have additive effect with alcohol and other CNS depressants. MAO inhibitors can prolong the anticholinergic effect of antihistamines and may enhance the effect of Phenylephrine. Sympathomimetics may reduce the effect of antihypertensive drugs.

### PREGNANCY

CHERICOF should be given to pregnant women only if clearly needed.

### Adverse Effects

CHERICOF is well tolerated in most patients and usual side effects are mild and transient. Side effects attributed to Dextromethorphan are uncommon; occasionally nausea, vomiting or gastrointestinal disturbance may occur in some patients. Side effects like sedation, dryness of mouth, nose and throat, thickening of bronchial secretions and dizziness may occur. Insomnia, difficulty in micturition, tightness of chest and cardiovascular side effects are uncommon with usual dosage. Rarely, hypersensitivity reactions may occur.

### OVERDOSAGE

CNS effects from overdosage of chlorpheniramine maleate may vary from depression to stimulation especially in children. Anticholinergic effects may be noted. Toxic doses of Phenylephrine may cause cardiovascular and CNS symptoms. Dextromethorphan in toxic doses can cause drowsiness and other CNS effects. Symptomatic and supportive measures should be instituted.

### STORAGE

Store at a temperature not exceeding 25°C, protected from light.

### SUPPLY

60 ml & 100 ml bottle.

KEEP ALL MEDICINED OUT OF THE REACH OF CHILDREN.

### REFERENCES

1. *Drug Information for the Health Care Professional USP-DI (Vol. 1) 1996; 16th Ed.: 326-42, 1180-83, 2395-99.*
2. *Martindale - The Extra Pharmacopoeia 1996; 31st Ed.: 436-438, 1066-67, 1586-87.*  
Information compiled in May' 2001

Manufactured in India by:  
**Sun Pharmaceutical Ind. Ltd.**  
At: 35-A/4, LAXMIBAI NAGAR,  
INDL. ESTATE, INDORE – 452 006

Product License Holder:  
**Sun Pharmaceutical Ind. Ltd.**  
101, Gram Lasudia Mori dewas Naka,  
A.B Road, Indore-452010

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**[ 5119339 ] - LIT CHERICOF COUGH FORMULA,  
MARKET - MYMR, SIZE: 95 x 145 mm, (AW 1.5 TIMES) (Folded Size 95 x 37 MM)  
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