Summary of Product Characteristics

1. Name of the Medicinal Product
Coastat Plus

2. Qualitative & Quantitative Composition:
Each film-coated tablet contains;
Tranexamic acid BP.....500mg
Etamsylate.....250mg

For full list of excipients, see section 6.2 of the SmPC

3. Pharmaceutical Form:
Film Coated Tablet

4. Clinical Particulars
4.1 Therapeutic Indications:
COASTAT PLUS TABLETS are indicated for short term use for haemorrhage or risk of haemorrhage in those with increased fibrinolysis or fibrinogenolysis. Local fibrinolysis as occurs in the following conditions:
a) Prostatectomy and bladder surgery
b) Menorrhagia
c) Epistaxis
d) Conisation of the cervix
e) Traumatic hyphaema
2. Management of dental extraction in haemophiliacs.
3. Hereditary angioneurotic oedema.

4.2 Posology and Method of administration:

4.3 Contraindications:
Tranexamic Acid:
- Hypersensitivity to the active substance or any of the excipients listed in section 6.1.
- Active thromboembolic disease.
- History of venous or arterial thrombosis.
- Fibrinolytic conditions following consumption coagulopathy.
- Severe renal impairment because of risk of accumulation.
- History of convulsions

Etamsylate:
Contraindicated in patients with known hypersensitivity and porphyria (a blood disorder).

4.4 Special warning and precautions for use
- Caution is advised in treating those with massive haematuria from the upper urinary tract, especially in haemophiliacs, as there have been some cases of ureteric obstruction.
- In those patients requiring long term administration of Coastat Plus Tablets such as those with hereditary angioneurotic oedema, regular eye examinations (e.g.

visual acuity, slit lamp, intraocular pressure, visual fields) and liver function tests should be performed.

- Patients who experience visual disturbance should be withdrawn from treatment.
- Patients with irregular menstrual bleeding should not use tablet until the cause of irregular bleeding has been established. If menstrual bleeding is not adequately reduced by Coastat Plus Tablets, an alternative treatment should be considered.
- Patients with a previous thromboembolic event and a family history of thromboembolic disease (patients with thrombophilia) should use Coastat Plus Tablets only if there is a strong medical indication and under strict medical supervision.
- The use of Coastat Plus Tablets in cases of increased fibrinolysis due to disseminated intravascular coagulation is not recommended.
- Clinical experience with Coastat Plus Tablets in menorrhagic children under 15 years of age is not available.
- Coastat Plus Tablets should be administered with care in patients receiving oral contraceptives because of the increased risk of thrombosis.
- Caution should be exercised in patients with history of coeliac disease, during pregnancy and breastfeeding

4.5 Interactions with other medicinal products and other forms of Interactions
Tranexamic Acid will counteract the thrombolytic effect of fibrinolytic preparations.

4.6 Pregnancy and Lactation
There is no evidence from animal studies that tranexamic acid has any teratogenic effect,however, the usual caution with use of drugs in pregnancy should be observed. Tranexamic acid crosses the placenta. Tranexamic acid passes into breast milk to a concentration of approximately one hundredth of the concentration in the maternal blood. An antifibrinolytic effect in the infant is unlikely.

4.7 Effects on ability to drive and use machine*:
Not Applicable

4.8 Undesirable Effects*:
Headache, skin rash, nausea, and low blood pressure, Hypersensitivity, Convulsions, vomiting, Allergic skin reactions

Reporting of suspected adverse reactions: Healthcare professionals are requested to report any suspected adverse reactions via pharmacy and poisons board, Pharmacovigilance Reporting System (PvERS) https://pv.pharmacyboardkenya.org.

4.9 Overdose:
No cases of overdosage have been reported. Symptoms may be nausea, vomiting, orthostatic symptoms and/or hypotension. Initiate vomiting, then stomach lavage, and charcoal therapy. Maintain a high fluid intake to promote renal excretion. There is a risk of thrombosis in predisposed individuals. Anticoagulant treatment should be considered.

5. Pharmacological properties:
5.1 Pharmacodynamic Properties:
A] Tranexamic Acid:

Tranexamic acid is an antifibrinolytic compound which is a potent competitive inhibitor of the activation of plasminogen to plasmin. At much higher concentrations it is a non-competitive inhibitor of plasmin. The inhibitory effect of tranexamic acid in plasminogen activation by urokinase has been reported to be 6-100 times and by streptokinase 6-40 times greater than that of aminocaproic acid. The antifibrinolytic activity of tranexamic acid is approximately ten times
greater than that of aminocaproic acid.

B] Etamsylate:
Ethamsylate is a haemostatic agent; also promotes angioprotective and proaggregant action. It stimulates thrombopoiesis and their release from bone marrow. Haemostatic action is due to activation of thromboplastin formation on damaged sites of small blood vessels and decrease of PgI2 (Prostacyclin I2) synthesis; it also facilitates platelet aggregation and adhesion, that at last
induce decrease and stop of hemorrhage.

5.2 Pharmacokinetics Properties*:
a] Absorption and Metabolism:
Tranexamic Acid:
Peak plasma Tranexamic acid concentration is obtained immediately after intravenous administration (500mg). Then concentration decreases until the 6th hour. Elimination half-life is about 3 hours.

Etamsylate: Absorbed from the GI tract (oral)

b] Distribution:
Tranexamic Acid:
Tranexamic acid administered parenterally is distributed in a two-compartment model.Tranexamic acid is delivered in the cell compartment and the cerebrospinal fluid with delay.The distribution volume is about 33% of the body mass.Tranexamic acid crosses the placenta, and may reach one hundredth of the serum peak concentration in the milk of lactating women. Tranexamic acid crosses the blood brain barrier.

Etamsylate: Enters breast milk.
c] Elimination:
Tranexamic Acid:
Tranexamic acid is excreted in urine as unchanged compound. 90% of the administered dose is excreted by the kidney in the twelve first hours after administration (glomerular excretion without tubular reabsorption).Following oral administration, 1.13% and 39% of the administered dose were recovered after 3 and 24 hours respectively.

Etamsylate: via urine (as unchanged).

5.3 Preclinical Safety Data
Focal areas of retinal degeneration have developed in cats, dogs and rats following oral or intravenous tranexamic acid at doses between 250 to 1600 mg/kg/day (6 to 40 times the recommended usual human dose) from 6 days to 1 year. The incidence of such lesions has varied from 25% to 100% of animals treated and was dose related. At lower doses some lesions have appeared to be reversible. Limited data in cats and

rabbits showed retinal changes in some animals with doses as low as 126 mg/kg/day (only about 3 times the recommended human dose) administered for several days to two weeks.

6. Pharmaceutical particulars:

6.1 List of Excipients:

microcrystalline cellulose, povidone, purified water, purified talc, magnesium stearate, colloidal anhydrous silica, sodium starch glycolate, hypromellose, ethyl cellulose, titanium dioxide, purified talc, lake of colour erythrosine, polyethylene glycol 200, isopropyl alcohol, dichloromethane

6.2 Incompatibilities:

The API is compatible with all excipients and in study no incompatibilities were observed.

6.3 Shelf life:

24 months

6.4 Special Precautions for storage:

Keep in cool and dry place. Protected from light.

6.5 Nature and contents of container:

The immediate container of the product is a strip pack of 10 tablets in one strip. Such 10 Strip of ten tablets are placed in one duplex board carton & such 50 cartons are placed in 5 ply Corrugated boxes.

6.6 Special precautions for disposal:

NA

7. Marketing Authorization Holder:

Concept Pharmaceuticals Ltd
501, Jaisingh Business Center 119
Sahar Road, Andheri (E)
Mumbai - 400 099
India.

Manufacturing Site Address:

Concept Pharmaceuticals Limited
Concept - Kharsa No.104, Asaf Nagar Roorkee Dist Haridwar Uttarakhand India

8. Marketing Authorization Numbers:

H2021/CTD6576/12331

9. Date of first registration /renewal of the registration:

2021 September 01

10. Date of revision of text:

2021 September 01