

## SUMMARY OF PRODUCTS CHARACTERISTICS

### 1. NAME OF THE FINISHED PHARMACEUTICAL PRODUCT

GASTICA SUSPENSION (Simethicone Emulsion, Calcium Carbonate, Magnesium Hydroxide & Magnesium Trisilicate Suspension)

### 2. QUALITATIVE AND QUANTITATIVE COMPOSITION

Each 5 ml. (one teaspoonful) Contains:

|                                |        |
|--------------------------------|--------|
| Simethicone Emulsion (30%) USP | 83 mg  |
| Calcium Carbonate BP           | 400 mg |
| Magnesium Hydroxide BP         | 120 mg |
| Magnesium Trisilicate BP       | 50 mg  |
| Flavoured base                 | QS     |

### 3. PHARMACEUTICAL FORM

Suspension

### 4. CLINICAL PARTICULARS

#### 4.1 Therapeutic indications

GASTICA Suspension is used for relief of

- Acidity
- Indigestion
- Heart burn
- Flatulence

#### 4.2 Posology and method of administration Method of administration: Oral Posology:

Two teaspoonfuls (10 ml) to be taken  $\frac{1}{2}$  - 1 hour after meals or as directed by the physician.

#### 4.3 Contraindications

GASTICA Suspension is contraindicated in those patients who have shown hypersensitivity to any of the ingredients used in GASTICA Suspension.

#### 4.4 Special warnings and precautions for use

GASTICA Suspension should be given with caution to patients with renal impairment or diseases associated with hypercalcaemia. Generally GASTICA Suspension should be avoided in patient with calcium renal calculi or history of renal calculi.

#### **4.5 Interaction with other medicinal products and other forms of interaction**

-Hypercalcaemia has occurred when calcium salts are given with thiazide diuretics or vitamin D.

-Calcium enhances the effects of digitalis glycosides on the heart.

-Calcium salts reduce the absorption of a number of other drugs such as bisphosphonates fluoride, fluoroquinolones & tetracycline.

-Antacid, including magnesium salts, interact with many other drugs both by alterations in gastric pH and emptying and by formation of complexes that are not absorbed.

Interactions can be minimised by giving the antacid and any other medications 2 to 3 hours apart.

#### **4.6 Pregnancy and Lactation**

Gastica Suspension is contraindicated in pregnancy and lactation.

#### **4.7 Effects on ability to drive and use machines**

Caution should be exercised during driving activity.

#### **4.8 Undesirable effects**

GASTICA Suspension at recommended dose is safe. Calcium carbonate may occasionally cause constipation. High doses or prolonged use of calcium carbonate may lead to gastric hypersecretion & acid rebound.

Magnesium hydroxide may cause diarrhoea, an effect that is dose dependent. Hypermagnesaemia may occur, usually in patient with renal impairment.

#### **Reporting of suspected adverse reactions**

Reporting suspected adverse reactions after authorisation of the medicinal product is important. It allows continued monitoring of the benefit/risk balance of the medicinal product. Healthcare professionals are asked to report

any suspected adverse reactions via <https://pv.pharmacyboardkenya.org>

#### **4.9 Overdose**

Do not exceed the recommended dose. In case of over dosage consult the physician immediately.

### **5. PHARMACOLOGICAL PROPERTIES**

#### **5.1 Pharmacodynamic properties**

##### **Pharmacodynamics**

Gastica suspension contains Simethicone Emulsion, Calcium Carbonate, Magnesium Hydroxide & Magnesium Trisilicate suspension as an active ingredient. This combination is used as Antacid and Ant flatulent.

Simethicone Emulsion works by changing the surface tension of gas bubbles in the stomach and intestines. This causes them to combine into larger bubbles that can be passed more easily. Magnesium hydroxide neutralizes gastric acidity; causes water retention in stool, producing laxative effect. Magnesium trisilicate works by increasing the pH of gastric juice via a neutralisation reaction. It also precipitates colloidal silica, which can coat gastrointestinal mucosa conferring further protection. Calcium carbonate is a basic compound that acts by neutralizing hydrochloric acid in gastric secretions. Subsequent increases in pH may inhibit the action of pepsin. An increase in bicarbonate ions and prostaglandins may also confer cytoprotective effects

## **5.2 Pharmacokinetic properties**

### Simethicone Emulsion:

Absorption: Simeticone is not absorbed from the gastrointestinal tract. Excretion: Excreted unchanged in feces.

### Calcium Carbonate:

Absorption: Maximal absorption occurs at doses of 500 mg or less taken with food. Oral bioavailability depends on intestinal pH, the presence of food and dosage.

Distribution: Calcium is rapidly distributed taken up by skeletal tissues following absorption and distribution into extracellular fluids. Bone contains 99% of the body's calcium and the remaining 1% is approximately equally distributed between intracellular and extracellular fluids.

Calcium acts as a co-factor to numerous enzymes. Excretion:

Excretion: Excreted mainly in the feces. The majority of renally filtered calcium is reabsorbed in the ascending limb of the loop of Henle and the proximal and distal convoluted tubules. Also secreted by sweat glands.

### Magnesium Hydroxide

Absorption: About 15%-50% of magnesium hydroxide is absorbed very slowly through the small intestine.

Distribution: The peak action and distribution of magnesium hydroxide are variable. Metabolism: Unless a patient is deficient in magnesium, very little is absorbed by the intestine. Overall, about 15%-50% of the magnesium hydroxide suspension is absorbed systemically. However, it does not undergo any metabolism as it is rapidly excreted in the urine.

Elimination: After oral administration, up to 50% of the magnesium hydroxide suspension may be absorbed as magnesium ions through the small intestines and then rapidly excreted in the urine through the kidneys. The unabsorbed drug is mainly excreted in the feces and saliva.

### Magnesium Trisilicate

Absorption: The hydrated silicon dioxide formed in the stomach and passes into the intestinal track where, silica can be partly absorbed.

Distribution: The hydrated silicon dioxide formed in the stomach and passes into the intestinal track.

Elimination: Excreted in the urine.

### **5.3 Preclinical safety data**

Not known

## **6. PHARMACEUTICAL PARTICULARS**

### **6.1 List of Excipients**

Sodium Methyl Paraben

Sodium Propyl Paraben

Sodium Benzoate

Guar (Delca P 225)

Arrow Gum Super

Xanthan Gum

Sorbitol Solution 70%

Sodium Saccharin

Citric Acid

Sodium Citrate

Bronopol

Enisweet EP Powder

Peppermint oil M-6509 flavour

Purified Water

### **6.2 Incompatibilities**

Not applicable

### **6.3 Shelf life**

24 months

### **6.4 Special precautions for storage**

Store below 30°C, at a dry place.

Protect from light.

### **6.5 Nature and contents of container**

200 ml amber coloured pet bottle packed in a Primary Carton along with the Pack Insert.

## **7. MARKETING AUTHORISATION HOLDER**

**Star Biotech Uganda Ltd.**

Plot No.78/4, Kampala Road, P.O.Box-37555, Kampala, Uganda.

## **8. MARKETING AUTHORISATION NUMBER**

H2022/CTD8237/16530

**9. DATE OF FIRST REGISTRATION/RENEWAL OF THE REGISTRATION**

16/11/2022

**10. DATE OF REVISION OF TEXT**

16/11/2022