

# Kinoprid

Amp

Each 1ml contains:

Biperiden lactate 5 mg in an aqueous 1.4% sodium lactate solution.

## Pharmacological action:

Biperiden lactate is a weak peripheral anti-cholinergic agent. The mechanism of action of centrally active anti-cholinergic drugs such as Biperiden lactate is considered to relate competitive antagonism of acetylcholine at cholinergic receptors in the corpus striatum, which then restores the balance. Biperiden lactate is an effective and reliable agent for the treatment of acute episodes of extrapyramidal disturbances sometimes seen during treatment with neuroleptic agents. Akathisia, akinesia, dyskinetic tremors, rigor, oculogyric crisis, spasmodic torticollis and profuse sweating are markedly reduced or eliminated.

## Indications:

- As an adjunct in the therapy of all forms of Parkinsonism (idiopathic, post-encephalitic, arteriosclerotic).
- Control of extrapyramidal disorders secondary to neuroleptic drug therapy (e.g., phenothiazin)

## Contraindications:

- Hypersensitivity to Biperiden lactate.
- Narrow angle glaucoma.
- Bowel obstruction.
- Megacolon.

## Warnings:

Caution should be observed in patients with manifest glaucoma, though no rise in intraocular pressure has been noted following either oral or parenteral administration. Patients with prostatism, epilepsy or cardiac arrhythmia should be given this drug with caution.

## Precautions:

The central anti-cholinergic syndrome can occur when anticholinergic agents such as Biperiden lactate.

There is no evidence to suggest that Biperiden lactate presents a particular teratogenic risk.

Since experience with the use of Biperiden lactate during pregnancy is lacking, caution should be exercised, especially in the first trimester. Ablactation is generally recommended since Biperiden lactate is excreted in human milk, and concentration equal to those found in the maternal plasma may be reached.

## Dosage and administration:

The average adult dose is 2 mg intramuscularly or slow intravenously. May be repeated every 30 Minutes until there is resolution of symptoms, but not more than four consecutive doses should be given in a 24 hours period.

## Adverse reactions:

Atropine-like side effects such as dry mouth, blurred vision, drowsiness, euphoria or disorientation, urinary retention, postural hypotension, constipation, agitation and disturbed behavior may be seen. Mild transient postural hypotension and bradycardia may occur. These side effects can be minimized or avoided by slow intravenous administration.

## Overdosage:

**Signs symptoms:** Overdosage with Biperiden lactate produces typical central symptoms of atropine intoxication.

**Treatment:** A small dose of diazepam or a short acting barbiturate may be administered if CNS excitation is observed. Phenothiazines are contraindicated because the toxicity may be intensified due to their anti-muscarinic action, causing coma. Respiratory support, artificial respiration or vasopressor agents may be necessary. Hyperpyrexia must be reversed, fluid volume replacement and acid-base balance should be maintained. Urinary catheterization may be necessary. Routine use of physostigmine for overdose is controversial. Frequent monitoring of clinical signs should be done. Since physostigmine is rapidly destroyed, additional injections may be required every one or two hours to maintain control.

**Supply:** Pack contains 5 ampoules; 5mg/ml per each.

**Storage:** Store at temperature below 30°C at a dry place.

Produced by :



for **DELTA PHARMA**  
**Neuropsychiatry**