1.3 Product Information

1.3.1 Summary of Product Characteristics (SmPC)

1. Name of the medicinal product

1.1 (Invented) name of the medicinal product:

Generic Name/Inn Name: Zopiclone Tablets BP

Brand Name: ZOPIMAX

1.2 Strength:

Each film coated tablet contains:
Zopiclone BP : 7.5 mg
Excipients : Q.S.
Colour : Titanium Dioxide BP

1.3 Pharmaceutical form: Tablets

2. Qualitative and quantitative composition:

Sr. No.	Ingredients	Label Claim (mg)	Actual Qty/Tablet (mg)	Function
Dry Mixing				
1	*Zopiclone	7.5	7.5	Active
2	*Microcrystalline cellulose	--	51.0	Diluent
3	Lactose	--	71.30	Diluent
4	Maize Starch	--	25.0	Diluent
5	Colloidal Anhydrous Silica	--	1.5	Glidant
Binding				
1	Maize Starch	--	12.0	Binder
2	Citric acid monohydrate	--	3.0	Acidifying agent
3	Purified water	--	--	Vehicle
Lubrication				
1	Magnesium Stearate	--	1.8	Lubricant
2	Sodium starch glycolate	--	3.6	Disintegrant
3	Purified Talc	--	1.8	Glidant
4	Colloidal Anhydrous Silica	--	1.5	Glidant
Coating#				
1	Film coat Titanium Dioxide	--	--	Coating agent
2	Purified water	--	--	Vehicle
3	Isopropyl Alcohol	--	--	Solvent
Theoretical Avg. wt. of uncoated tablet 180 mg				

Theoretical Avg. wt. of coated tablet 185 mg

Note: * The quantity of active ingredient will change according to the assay of the ingredient calculated as per ERP system. The above quantity is calculated on 100% assay basis. Reduce the quantity of Micro crystalline cellulose powder BP to compensate the increase in quantity of active ingredient due to assay.

Extra coating material may issue to compensate the loss of evaporation of coating solution during operation and to attain the weight gain per tablet.

3. Pharmaceutical form:

- **Dosage Form**: Tablets
- **Visual & Physical characteristics of the product:** White colored round & biconvex film coated tablets.

4. Clinical particulars:

4.1 Therapeutic indications:

ZOPIMAX is indicated for the Short-term treatment of insomnia in adults.

4.2 Posology and method of administration:

Adults:
One tablet (7.5 mg Zopiclone) orally, shortly before retiring. This dose should not be exceeded.

Elderly patients and patients with impaired liver function or chronic respiratory insufficiency:
A lower dose of 3.75 mg Zopiclone (half a tablet) should be employed to start treatment in these patients, and if necessary the dose may be increased to 7.5 mg.

Renal insufficiency:
Accumulation of Zopiclone or its metabolites has not been seen during the treatment of insomnia in patients with renal insufficiency. However, it is recommended that patients with impaired renal function should start treatment with 3.75 mg.

Method of administration: Oral

4.3 Contraindications:

Zopiclone is contra-indicated in patients with a hypersensitivity to Zopiclone, myasthenia gravis, respiratory failure, severe sleep apnoea syndrome and severe hepatic insufficiency.
Zopiclone should not be used in children under the age of 18.
Safety in pregnancy and lactation has not been established.

4.4 Special warnings and precautions for use:

Drowsiness and in coordination on waking can occur. Patients should be cautioned about driving motor vehicles or operating machinery until it has been established that their performance is not affected.
The development of pharmacodependence or abuse cannot be excluded and should be borne in mind when Zopiclone is prescribed. Risk of dependence or abuse increases with dose and duration of treatment, history of alcohol and/or drug abuse, and use with alcohol or other psychotropics.
Some loss of efficacy of Zopiclone may develop after repeated use.
Zopiclone does not constitute a treatment for depression and may even mask its symptoms.
Concomitant intake with alcohol is not recommended since the sedative effect of Zopiclone may be enhanced.
Caution should be exercised with the concomitant use of central depressant medicines such as neuroleptics, hypnotics, anxiolytics/sedatives, antidepressant agents, narcotic analgesics, antiepileptic drugs, anaesthetics, and sedative antihistaminics, as the central depressive effect of Zopiclone may be enhanced in these cases.
Zopiclone should not be used by nursing mothers.

4.5 Interaction with other medicinal products and other forms of interaction:

The sedative effect of Zopiclone may be enhanced when used in combination with alcohol.
In combination with CNS depressants an enhancement of the central depressive effect may occur. The therapeutic effect of co-administration antipsychotics (neuroleptics), hypnotics, anxiolytics/sedatives, antidepressant agents, narcotic analgesics, antiepileptic drugs, anaesthetics and sedative antihistamines should therefore be carefully weighed. Concomitant use of benzodiazepines or benzodiazepine-like agents with narcotic analgesics may enhance their euphoric effect and may lead to an increase in psychic dependence. Compounds which inhibit certain hepatic enzymes (particularly cytochrome P450) may enhance the activity of benzodiazepines and benzodiazepine-like agents.
The effect of erythromycin on the pharmacokinetics of Zopiclone has been studied in 10 healthy subjects. The AUC of Zopiclone is increased by 80% in the presence of erythromycin which indicates that erythromycin can inhibit the metabolism of drugs metabolised by CYP3A4. As a consequence, the hypnotic effect of Zopiclone may be enhanced.

4.6 Pregnancy and lactation:

Pregnancy: Use in pregnancy is therefore not recommended. If the product is prescribed to a woman of child bearing potential, she should be advised to contact her physician about stopping the product if she intends to become pregnant, or suspects that she is pregnant. Moreover, if Zopiclone is used during the last three months of pregnancy or during labour, due to the pharmacological action of the product, effects on the neonate, such as hypothermia and respiratory depression can be expected. Infants born to mothers who took benzodiazepines or benzodiazepine-like agents chronically during the latter stages of pregnancy may have developed physical dependence and may be at some risk of developing withdrawal symptoms in the postnatal period.

Lactation: Zopiclone is excreted in breast milk and use in nursing mothers must be avoided.

4.7 Effects on ability to drive and use machines:

Do not use ZOPIMAX while drive or use machine.

4.8 Undesirable effects:

The side-effect most commonly observed with Zopiclone is a bitter after-taste. Other effects which have been reported are dizziness, headache, residual somnolence, digestive disturbances such as dyspepsia, nausea and dry mouth, allergic or cutaneous reactions such as pruritus and rash. Anterograde amnesia may occur, especially when sleep is interrupted or when retiring to bed is delayed after the intake of the tablet. To reduce the possibility of anterograde amnesia, patients should ensure that they take the tablet strictly when retiring for the night and that they are able to have a full night's sleep.

Psychiatric Reactions:
Nightmares, irritability, confusion, hallucinations, aggressiveness and inappropriate behaviour possibly associated with amnesia, have also been reported. When they occur, these reactions may be severe. They are more likely to occur in the elderly.
Withdrawal symptoms and transient rebound insomnia have been observed after abrupt discontinuation, especially after prolonged treatment with Zopiclone. It is therefore recommended that the dosage be decreased gradually and that the patient be advised accordingly.
Drowsiness and inco-ordination on waking can occur.

4.9 Overdose:

Overdose is usually manifested by varying degrees of central nervous system depression ranging from drowsiness to coma according to the quantity ingested. Overdosage may be life-threatening especially when combined with central nervous system depressants (including alcohol). Symptomatic and supportive treatment in an adequate clinical environment is recommended; attention should be paid to respiratory and cardiovascular functions. Gastric lavage is only useful when performed soon after ingestion. Haemodialysis is of no value due to the large volume of distribution of Zopiclone. Flumazenil may be a useful antidote.

5. Pharmacological properties:
5.1 Pharmacodynamic properties:

Zopiclone is a hypnotic agent, a member of the cyclopyrrolone group of compounds. Its pharmacological properties are: hypnotic, sedative, anxiolytic, anticonvulsant, and muscle-relaxant. These effects are related to a specific agonist action at central receptors belonging to the GABAa macromolecular complex, modulating the opening of the chloride ion channel.

5.2 Pharmacokinetic properties:

Zopiclone is rapidly absorbed. Peak concentrations of 30 to 60 ng/mL are reached within 1.5 to 2 hours after the administration of 3.75 mg and 7.5 mg respectively. Absorption is not modified by food.

Zopiclone is rapidly distributed from the vascular compartment. Plasma protein binding is weak (approximately 45%) and non saturable. There is very little risk of drug interactions due to protein-binding. The distribution volume is 91.8 to 104.6 litres.
After repeated administration there is no accumulation of Zopiclone and its metabolites.
Individual variations appear to be low.
At recommended doses, the elimination half-life of the unchanged Zopiclone is approximately 5 hours.

6. Pharmaceutical particulars:

6.1 List of Excipients:

Name of Material	**Specification**
Micro crystalline cellulose	BP
Lactose	BP
Maize Starch	BP
Colloidal Anhydrous silica	BP
Citric Acid Monohydrate	BP
Purified water	BP
Magnesium Stearate	BP
Sodium Starch Glycolate	BP
Purified Talc	BP
Film Coat Titanium Dioxide	IHS
Isopropyl Alcohol	BP

6.2 Incompatibilities:

Not Applicable

6.3 Shelf life

36 Months

6.4 Special precautions for storage:

Store below 30°C.
KEEP OUT OF REACH OF CHILDREN

6.5 Nature and contents of container:

3 x 10 Alu-PVC Blister pack in a printed carton along with package insert.

6.6 Special precautions for disposal:

No special instructions needed

7. Registrant:

Name of the manufacturer: SAGA LABORATORIES

Production site address:
Survey No.198/2 & 198/3, Chachrawadi Vasna, Ta: Sanand
District: Ahmedabad – 382 210.
Phone : +91 – 2717- 294272-76
Fax : +91 – 79- 25835739
E-mail : info@sagalabs.com

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Fax : +91 – 79- 25835739
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9. Date of revision of the text
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10. Dosimetry (If Applicable):
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11. Instructions for Preparation of Radiopharmaceuticals (If Applicable):
Not Applicabale.