TRIVOGLITOR

For the use of a Registered Medical Practitioner or a Hospital or a Laboratory Only

Abbreviated Prescribing information for TRIVOGLITOR

(Metformin Hydrochloride (Sustained Release), Glimepiride & Voglibose Tablets)

[Please refer the complete prescribing information for details].

PHARMACOLOGICAL PROPERTIES:

Mechanism of Action: ***Metformin Hydrochloride:*** Metformin is a biguanide with antihyperglycaemic effects, lowering both basal and postprandial plasma glucose. It does not stimulate insulin secretion and therefore does not produce hypoglycaemia. Metformin may act via 3 mechanisms: Reduction of hepatic glucose production by inhibiting gluconeogenesis and glycogenolysis. In muscle, by increasing insulin sensitivity, improving peripheral glucose uptake and utilization. And delay of intestinal glucose absorption. Metformin stimulates intracellular glycogen synthesis by acting on glycogen synthase. Metformin increases the transport capacity of all types of membrane glucose transporters (GLUTs) known to date. ***Glimepiride:*** Glimepiride acts mainly by stimulating insulin release from pancreatic beta cells. As with other sulfonylureas this effect is based on an increase of responsiveness of the pancreatic beta cells to the physiological glucose stimulus. In addition, glimepiride seems to have pronounced extrapancreatic effects also postulated for other sulfonylureas. ***Voglibose:***Voglibose is an alpha glucosidase inhibitor which reduces intestinal absorption of starch, dextrin, and disaccharides by inhibiting the action of α-glucosidase in the intestinal brush border. Inhibition of this enzyme catalyzes the decomposition of disaccharides into monosaccharides and slows the digestion and absorption of carbohydrates; the post-prandial rise in plasma glucose is blunted in both normal and diabetic subjects resulting in improvement of post prandial hyperglycemia and various disorders caused by hyperglycemia. A-Glucosidase inhibitors do not stimulate insulin release and therefore do not result in hypoglycemia. These agents may be considered as monotherapy in elderly patients or in patients with predominantly post prandial hyperglycemia. α-Glucosidase inhibitors are typically used in combination with other oral antidiabetic agents and/or insulin. Voglibose should be administered at the start of a meal as it is poorly absorbed.

INDICATION: It is used in Treatment of patients with type 2 diabetes mellitus, when diet, exercise and therapy with two agents do not result in adequate glycemic control.

DOSAGE AND ADMINISTRATION: TRIMETRIDE tablets should be administered orally. Do not crush or chew the tablet. Swallow as a whole. The daily recommended dose is as directed by the Physician.

CONTRAINDICATION: Hypersensitivity to metformin or to glimepiride or other sulfonylureas or sulphonamides or Voglibose or to any of the excipients. Any type of acute metabolic acidosis (such as lactic acidosis, diabetic ketoacidosis), Diabetic pre-coma, Severe renal failure (GFR < 30 mL/min), Acute conditions with the potential to alter renal function such as: dehydration, severe infection, shock, Disease which may cause tissue hypoxia (especially acute disease, or worsening of chronic disease) such as: decompensated heart failure, respiratory failure, recent myocardial infarction, shock, Hepatic insufficiency, acute alcohol intoxication, alcoholism, insulin dependent diabetes, diabetic coma, ketoacidosis, Severe renal or hepatic function disorders, In case of severe renal or hepatic function disorders, a changeover to insulin is required, Severe infection, before and after operation or with, Serious trauma and Gastrointestinal obstruction or predisposed to it.

WARNINGS & PRECAUTIONS*: Metformin Hydrochloride:* *Lactic acidosis:* a very rare, but serious metabolic complication, most often occurs at acute worsening of renal function or cardiorespiratory illness or sepsis. Metformin accumulation occurs at acute worsening of renal function and increases the risk of lactic acidosis. *Renal function:* GFR should be assessed before treatment initiation and regularly thereafter, Metformin is contraindicated in patients with GFR<30 mL/min and should be temporarily

discontinued in the presence of conditions that alter renal function, *Cardiac function:* Patients with heart failure are more at risk of hypoxia and renal insufficiency. In patients with stable chronic heart failure, metformin may be used with a regular monitoring of cardiac and renal function. ***Glimepiride:*** Glimepiride must be taken shortly before or during a meal. When meals are taken at irregular hours or skipped altogether, treatment with"Glimepiride Tablets" may lead to hypoglycaemia. ***Voglibose:*** Voglibose tablets dissolve in the mouth and need not be swallowed. The administration of Voglibose tablets should be limited to patients who have established diabetes as there are certain other disease conditions such as abnormal glucose tolerance and positive urinary sugar that represent diabetes-like symptoms (renal glycosuria, senile abnormal glucose tolerance, abnormal thyroid function, etc).

DRUG INTERACTIONS: ***Metformin Hydrochloride:*** Alcohol intoxication is associated with an increased risk of lactic acidosis, particularly in case *Iodinated contrast agents*. Some medicinal products can adversely affect renal function which may increase the risk of lactic acidosis. ***Glimepiride:*** If glimepiride is taken simultaneously with certain other medicinal products, both undesired increases and decreases in the hypoglycaemic action of glimepiride can occur. For this reason, other medicinal products should only be taken with the knowledge of the doctor. Glimepiride is metabolized by cytochrome P450 2C9 (CYP2C9). Its metabolism is known to be influenced by concomitant administration of CYP2C9 inducers (e.g. rifampicin) or inhibitors (e.g. fluconazole). ***Voglibose:*** When Voglibose is used in combination with derivative(s) of sulfonylamide, sulfonylurea or biguanide, or with insulin, hypoglycemic symptoms may occur.

ADVERSE REACTIONS: Metformin Hydrochloride: ***Metabolism and nutrition disorders:*** Lactic acidosis. ***Gastrointestinal disorders:*** Gastrointestinal disorders such as nausea, vomiting, diarrhoea, abdominal pain and loss of appetite. ***Hepatobiliary disorders:*** Isolated reports of liver function tests abnormalities or hepatitis resolving upon metformin. ***Skin and subcutaneous tissue disorders:*** Skin reactions such as erythema, pruritus, urticarial. ***Glimepride: Blood and lymphatic system disorders:*** Thrombocytopenia, leukopenia, granulocytopenia, agranulocytosis, erythropenia, haemolytic anaemia and pancytopenia. ***Immune system disorders:*** leukocytoclastic vasculitis, mild hypersensitivity reactions that may develop into serious reactions with dyspnoea, fall in blood pressure and sometimes shock. ***Metabolism and nutrition disorders:*** Hypoglycaemia. ***Eye disorders:*** Visual disturbances, transient, may occur especially on initiation of treatment, due to changes in blood glucose levels. ***Gastrointestinal disorders:*** Nausea, vomiting, diarrhoea, abdominal distension, abdominal discomfort and abdominal pain, which seldom lead to discontinuation of therapy. ***Hepato-biliary disorders:*** Hepatic function abnormal (e.g. with cholestasis and jaundice), hepatitis and hepatic failure. ***Skin and subcutaneous tissue disorders:*** Hypersensitivity reactions of the skin may occur as pruritus, rash, urticaria and photosensitivity. ***Voglibose:*** Gastrointestinal adverse effects such as diarrhoea, loose stools, abdominal pain, constipation, anorexia, nausea, vomiting, or heartburn may occur with the use of Voglibose. Also abdominal distention, increased flatus, and intestinal obstruction like symptoms due to an increase in intestinal gas, may occur with use of Voglibose.

MARKETED BY:

TORRENT PHARMA

TORRENT PHARMACEUTICALS LTD.

IN/TRIVOGLITOR 500, 1/2,0.2 mg/Mar-2026/03/ABPI

(Additional information is available on request)