

*Only for the use of Medical Professionals*

# **Dilup<sup>®</sup>**

Furosemide & Spironolactone

## **Description**

Dilup is a preparation of Furosemide & Spironolactone. Furosemide is a short acting loop diuretic and Spironolactone is a long acting potassium sparing diuretic. Therefore when given combination they produce synergistic action. Furosemide acts by removing salts such as potassium and sodium and Spironolactone blocks the actions of aldosterone.

## **Indications and usage**

Dilup is indicated for

- essential hypertension
- congestive heart failure
- resistant oedema associated with secondary hyperaldosteronism
- swelling due to excess fluid retention
- hepatic cirrhosis with ascites

## **Dosage and administration**

### ***For adult***

Dilup 20/50: 1 to 4 tablets daily according to patient's response

Dilup 40/50: 1 to 2 tablets daily for patient's previously stabilized with higher doses of Spironolactone and Furosemide

## **Use in pregnancy and lactation**

There is a clinical evidence of safety of Furosemide in pregnancy but Spironolactone may cross placental barrier, so it should be used in pregnancy only if the expected benefit outweighs the potential fetal risk. Furosemide passes into breast milk and may inhibit lactation; metabolite of Spironolactone appears in breast milk. This combination should not be used to lactating mother.

## **Precautions**

Combination of Furosemide & Spironolactone should be used cautiously in patients with diabetes, prostatic hypertrophy, kidney failure, liver disease, hypokalemia, hypotension and hypovolaemia.

## **Side effects**

Spironolactone may give rise to headache and drowsiness, gastrointestinal distress including cramp and diarrhea, gynaecomastia, hyponatremia and hypokalemia. Furosemide is generally well tolerated. Bone marrow depression, thrombocytopenia,

agranulocytosis, aplastic anaemia or haemolytic anaemia and eosinophilia are its rare complication.

### **Drug interactions**

When combination of Furosemide & Spironolactone is taken together with potassium salts, drugs which reduce potassium excretion, NSAIDs or ACE inhibitors may cause hyperkalaemia. This combination may increase toxicity of nephrotoxic drugs and aminoglycosides. Spironolactone may cause raised digoxin levels. Sucralfate reduces the effect of Furosemide. Concomitant use of cyclosporine and Furosemide is associated with increased risk of gouty arthritis.

### **Contraindications**

Combination of Furosemide & Spironolactone is contraindicated in patients with renal failure, impaired renal function, hypovolaemia or dehydration, anuria or renal failure with anuria not responding to Furosemide. Hypersensitivity to Furosemide, Spironolactone, sulphonamides or sulphonamide derivatives or any of the excipients of this combination.

### **Overdose**

Symptoms of overdose include severe hypotension (progressing to shock), acute renal failure, thrombosis, delirious states, flaccid paralysis, apathy and confusion. Treatment should therefore be aimed at fluid replacement and correction of the electrolyte imbalance.

### **Pharmaceutical precautions**

Store in a cool, dry place. Protect from light.

### **Presentation**

Dilup 20/50 tablet: White, round shape, film coated tablet. Each tablet contains Furosemide 20mg and Spironolactone 50mg.

Dilup 40/50 tablet: White, round shape, film coated tablet. Each tablet contains Furosemide 40mg and Spironolactone 50mg.

### **Package quantities**

Dilup 20/50 tablet: Cartons of 30 tablets in Alu-PVC blister.

Dilup 40/50 tablet: Cartons of 30 tablets in Alu-PVC blister.

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