RANIFLAX® (RANITIDINE)

Indications:
- Gastroesophageal Reflux Disease
- Gastric Ulcer, Benign
- Erosive Esophagitis
- Hypersecretory Conditions
- Stress Ulcer Prophylaxis (Off-label)

Pharmacological Category:
Histamine H2 Antagonists

Pregnancy:
Pregnancy category: B
Manufacturer advices avoid unless essential, but not known to be harmful

Lactation:
Significant amount present in milk, but not known to be harmful

Side effects:
Common adverse effects are as follow:
Headache, Abdominal pain, Agitation, Alopecia, Confusion, Constipation, Diarrhea, Dizziness, Hypersensitivity reaction, Nausea, Vomiting

Contraindications:
Hypersensitivity to ranitidine or components of the formulation

Interactions:
Procainamide,Warfarin, Atazanavir, Delavirdine, Gefitinib, Glipizide, Ketoconazole, Midazolam, Triazolam
Note: Ranitidine may alter the absorption of drugs in which gastric pH is an important determinant of bioavailability. (e.g., triazolam, midazolam, glipizide) or a decrease in absorption (e.g., ketoconazole, atazanavir, delavirdine, gefitinib).

Dose:
Adult:
- Gastroesophageal Reflux Disease

150 mg PO q12hr
- Gastric Ulcer, Benign

Treatment: 150 mg PO q12hr or 300 mg PO at bedtime
Maintenance of healing: 150 mg PO at bedtime
- Erosive Esophagitis

Treatment: 150 mg PO q6hr
Maintenance of healing: 150 mg PO q12hr
- Hypersecretory Conditions

150 mg PO q12hr; up to 6 g/day used
- Stress Ulcer Prophylaxis (Off-label)

150 mg PO or NG q12hr

Pediatric:
- Active Duodenal/Gastric Ulcer

Treatment: 4-8 mg/kg PO q12hr; not to exceed 300 mg/day
Maintenance: 2-4 mg/kg PO once daily; not to exceed 150 mg/day
- Gastroesophageal Reflux Disease

1 month - 16 years
5-10 mg/kg/day PO divided q12hr; not to exceed 300 mg/day
- Erosive Esophagitis

1 month - 16 years
5-10 mg/kg/day PO divided q12hr; not to exceed 300 mg/day
- Neonates (Off-label)

Term Neonates (<29 days)
2-4 mg/kg/day PO divided q8-12hr

Administration:
The presence of food in the GI tract does not appear to affect the extent or rate of absorption. So it may be administered without regard to meals and may administer with food, water, or milk to minimize gastric irritation.

Dosage Form:
150 & 300 mg tablets
Ranitidine exists as ranitidine hydrochloride in the formulation.

References:

1) British National Formulary 68, September 2014- March 2015, pages 53-54
2) Lexicomp,s Drug Reference Handbooks, American Pharmacists Association, 20th edition, pages 1508-1510
3) https://www.drugs.com/pro/ranitidine.html
4) http://www.pdr.net/drug-summary/Ranitidine-Hydrochloride-ranitidine-hydrochloride-2965
5) http://reference.medscape.com/drug/zantac-ranitidine-342003