

- Kampo product -

OHSUGI Shoseiryuto Extract Granules G
(Shoseiryuto)

Storage: Store at room temperature.
See the section "PRECAUTIONS FOR HANDLING"
Expiration date: The expiration date is specified on the container or the outer package.

Approval No.	(61AM) 3886
Date of listing in the NHI reimbursement price	October 1986
Date of initial marketing in Japan	October 1986
Date of latest reevaluation	March 1996
Date of latest reevaluation	April 2014

CONTRAINDICATIONS (Shoseiryuto is contraindicated in the following patients.)

1. Patients with aldosteronism
 2. Patients with myopathy
 3. Patients with hyperkalemia
- [1-3: These diseases or symptoms may be aggravated]

DESCRIPTION

(1) The daily dose of this product, 7.5g, contains 4.1g of the dried extract (Shoseiryuto extract) from the following mixed crude drugs.

JP Ephedra Herb	3.0 g
JP Cinnamon Bark	3.0 g
JP Peony Root	3.0 g
JP Asiasarum Root	3.0 g
JP Processed Ginger	3.0 g
JP Schisandra Fruit	3.0 g
JP Glycyrrhiza	3.0 g
JP Pinellia Tuber	6.0 g

(JP: The Japanese Pharmacopeia)

The inactive ingredients contained are Lactose Hydrate, Corn Starch and Magnesium Stearate.

(2) This product is light yellowish brown to light grayish brown-colored granules, smells slightly, and tastes slightly acidic, bitter and hot. The taste remains.

ID Code: SG-19

INDICATIONS

Watery sputum, watery nasal discharge, nasal obstruction, sneezing, stridor, coughing, lacrimation in the following diseases:

Bronchitis, bronchial asthma, rhinitis, allergic rhinitis, allergic conjunctivitis, and common cold

DOSAGE AND ADMINISTRATION

The usual adult dose is 7.5 g/day orally in 2 or 3 times before or between meals. The dosage may be adjusted according to the patient's age, body weight, and symptoms.

PRECAUTIONS**(1) Careful Administration (Shoseiryuto should be administered with care in the following patients.)**

- 1) Patients in a period of weakness after disease or with greatly declined constitution [Adverse reactions are likely to occur, and the symptoms may be aggravated.]
 - 2) Patients with an extremely weak gastrointestinal tract [Anorexia, epigastric distress, nausea, vomiting, abdominal pain, diarrhea, etc. may occur.]
 - 3) Patients with anorexia, nausea or vomiting [These symptoms may be aggravated]
 - 4) Patients showing a remarkable tendency of sweating [Excess sweating and/or generalized weakness may occur.]
 - 5) Patients with cardiovascular disorders including angina pectoris and myocardial infarction, etc. or those with a history of such disorders.
 - 6) Patients with severe hypertension
 - 7) Patients with severe renal dysfunction
 - 8) Patients with dysuria
 - 9) Patients with hyperthyroidism
- [5)- 9): These disease and symptoms may be aggravated.]

(2) Important Precautions

- 1) When this product is used, the patient's "SHO" (constitution/symptoms) should be taken into account. The patient's progress should be carefully monitored, and if no improvement in symptoms/findings is observed, continuous treatment should be avoided.
- 2) Since this product contains Glycyrrhiza, careful attention should be paid to the serum potassium level, blood pressure, etc., and if any abnormality is observed, administration should be discontinued.
- 3) When this product is coadministered with other Kampo-products (Japanese traditional herbal medicines), etc., attention should be paid to the duplication of the contained crude drugs.

(3) Drug Interactions

Precautions for coadministration (Shoseiryuto should be administered with care when coadministered with the following drugs.)

Drugs	Signs, Symptoms, and Treatment	Mechanism and Risk Factors
(1) Preparations containing Ephedra Herb (2) Preparations containing ephedrine-related compounds (3) Monoamine oxidase (MAO) inhibitors (4) Thyroid preparations Thyroxine Liothyronine (5) Catecholamine preparations Adrenaline Isoprenaline (6) Xanthine preparations Theophylline Diprophylline	Insomnia, excessive sweating, tachycardia, palpitation, generalized weakness, mental excitation, etc. are likely to occur. In such cases, this product should be administered with care by measures such as reducing the dosage.	An enhancement of the sympathetic nerve- stimulating action has been suggested.
(7) Preparations containing Glycyrrhiza (8) Preparations containing glycyrrhizinic acid or glycyrrhizines (9) Loop diuretics Furosemide Ethacrynic acid (10) Thiazide diuretics Trichloromethiazide	Pseudoaldosteronism is likely to occur. Besides, myopathy is likely to occur as a result of hypokalemia. (Refer to the section "Clinically significant adverse reactions".)	Since glycyrrhizinic acid has an accelerating action on the potassium excretion at the renal tubules, an acceleration of decrease in the serum potassium level has been suggested.

(4) Adverse Reactions

This product has not been investigated (drug use investigations, etc.) to determine the incidence of adverse reactions. Therefore, the incidence of adverse reactions is not known.

1) Clinically significant adverse reactions

- ① **Interstitial Pneumonia:** If fever, cough, dyspnea, abnormal pulmonary sound (fine crackle), etc. are observed, administration of this product should be discontinued, and examination such as chest X-ray should be performed immediately and appropriate measures such as administration of adrenocortical hormones should be taken. Besides, the patient should be advised to discontinue this product immediately and to make contact with the physician in the event of fever, cough, dyspnea, etc.
- ② **Pseudoaldosteronism:** Pseudoaldosteronism such as hypokalemia, increased blood pressure, retention of sodium/body fluid, edema, increased body weight, etc. may occur. The patient should be carefully monitored (measurement of serum potassium level, etc.), and if any abnormality is observed, administration should be discontinued and appropriate measures such as administration of potassium preparations should be taken.
- ③ **Myopathy:** Myopathy may occur as a result of hypokalemia. The patient should be carefully monitored, and if any abnormality such as weakness, convulsion/paralysis of limbs, etc. are observed, administration should be discontinued and appropriate measures such as administration of potassium preparations should be taken.
- ④ **Hepatic dysfunction and jaundice:** Hepatic dysfunction, with elevation of AST(GOT), ALT(GPT), Al-P and γ -GTP level, and/or jaundice may occur. The patient should be carefully monitored for abnormal findings. Administration should be discontinued and appropriate therapeutic measures should be taken, if abnormalities are observed.

2) Other adverse reactions

	Incidence Unknown
Hypersensitivity Note 1)	Rash, Redness, Pruritus, etc.
Autonomic	Insomnia, Excess sweating, Tachycardia, Palpitation, Generalized weakness, Mental excitation, etc.
Gastrointestinal	Anorexia, Epigastric distress, Nausea, Vomiting, Abdominal pain, Diarrhea, etc.
Urinary	Urination disorder, etc.

Note 1) If such symptoms are observed, administration should be discontinued.

(5) Use in the Elderly

Because elderly patients often have reduced physiological function, careful supervision and measures such as reducing the dose are recommended.

(6) Use during Pregnancy, Delivery or Lactation

The safety of this product in pregnant woman has not been established. Therefore, the product should be used in pregnant, women who may possibly be pregnant only if the expected therapeutic benefit outweigh the possible risks associated with treatment.

(7) Pediatric Use

The safety of this product in children has not been established. [Insufficient clinical data]

CLINICAL STUDIES

Shoseiryuto improved paroxysmal sneezing, nasal discharge, and nasal obstruction in a double-blind comparative study on perennial nasal allergy. The final global improvement rate is shown below. 1)

	Rate of Improvement (%)	
	"Moderately improved" or better evaluation	"Slightly Improved" or better evaluation
Shoseiryuto group	44.6 (41/92)	83.7 (77/92)
Placebo group	18.1 (17/94)	43.6 (41/94)

PHARMACOLOGY

- 1) Anti-histamine actions: Pre-treatment of mast cells with this drug inhibited degranulation of the mast cells. This drug inhibited histamine release from mast cells induced by DNP-As antigen and Compound 48/80. (in vitro) 2)
- 2) Anti-allergic actions: This drug inhibited 48hr homologous PCA reactions in the rat serum containing anti-DNP-As · IGE antibody. (in vitro) 2)

PRECAUTIONS FOR HANDLING

- Store at dry and cool place, protected from direct sunlight.
- Since this product contains natural crude drugs, some differences may be noted in the color or taste, etc. However, there is no change in the effect.

PACKAGING

500g
735g (2.5g x 294 packets)
210g (2.5g x 84 packets)

REFERENCES

- 1) S. Baba et al.: Practica Otologica, 88 (3) 389-405, 1995
- 2) T. Matsumoto et al.: OTO-RHINO-LARYNGOLOGY, TOKYO, 34 (suppl.4) 289-293, 1991

REQUEST FOR LITERATURE SHOULD BE MADE TO:

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