

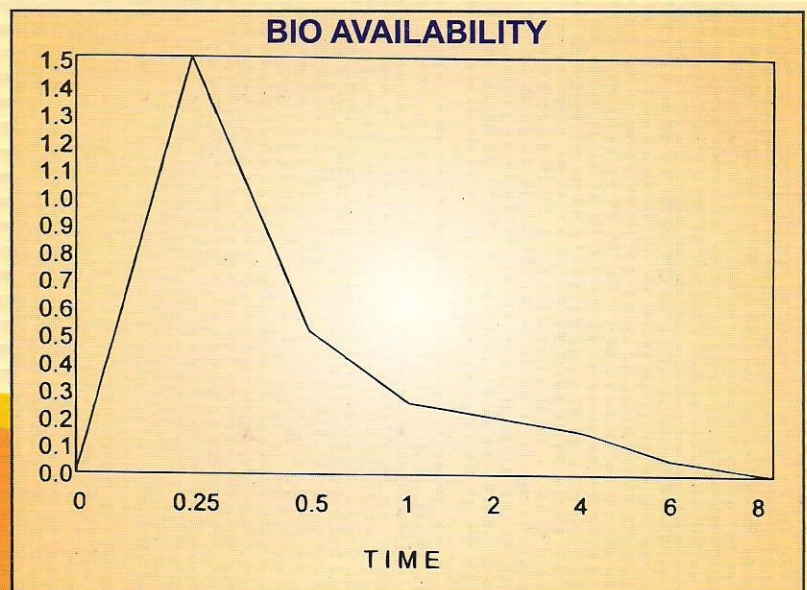
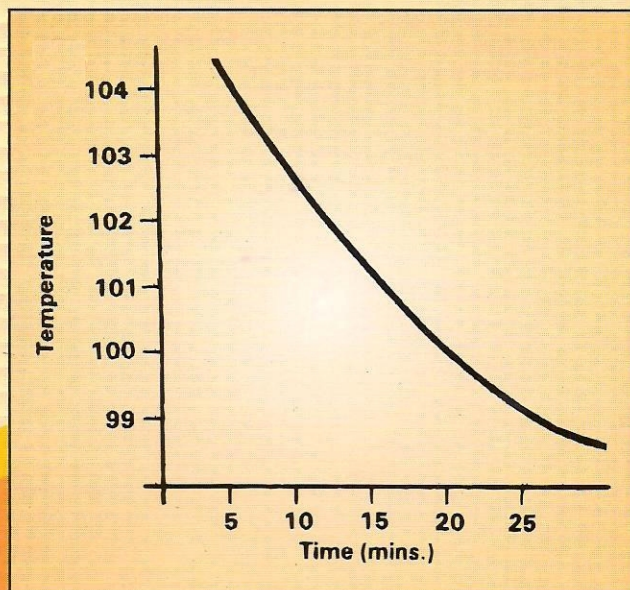
AEKNIL INJECTION

Paracetamol

**EFFECTIVE
&
SAFE**



- ➡ **A Research Product of THERAPEUTIC PHARMACEUTICALS.**
- ➡ Available to the Medical Profession for over 3 decades.
- ➡ Effective Reduction of Hyperpyrexia (Fever).
- ➡ Absolutely Safe & devoid of Side Effects.
- ➡ Can be administered to all ages.



CLINICAL STUDIES :

Heat dissipation is apparently increased by mobilising water, dilating cutaneous blood vessels and increasing perspiration. Its Analgesic action is manifested by raising the pain threshold at the level of thalamus. Absorption takes place rapidly after oral administration and peak levels are reached in about 1 to 2 hours following administration.

| (A) Diagnosis | U.R.T.I. | Febrile Convulsions | Bronchiolitis Broncho pneumonitis | P.U.O. | Meningitis + Encephalitis | Miscellaneous | Total |
|----------------------|----------|------------------------|---|--------|---------------------------------|---------------|-------|
| AEKNIL | 48 | 4 | 10 | 40 | 8 | 10 | 120 |
| A.P.C. | 42 | 6 | 14 | 36 | 10 | 12 | 120 |
| Mist. Diaphoretic | 40 | 8 | 12 | 32 | 12 | 16 | 120 |

Good : When temperature subsided completely or was reduced by at least 3F within 12 to 24 hours of administering.

Fair : When temperature was reduced by at least 2F within 24 to 48 hours of Administering the drug.

Poor : When there was no reduction in pyrexia after 48 hours treatment.

The Antipyretic was administered for 2 to 5 days. Results are tabulated below.

| | Good | Fair | Poor | Total |
|-------------------|------|------|------|-------|
| AEKNIL | 48 | 60 | 12 | 120 |
| A.P.C. | 44 | 53 | 23 | 120 |
| MIST. DIAPHORETIC | 25 | 61 | 34 | 120 |

SIDE EFFECTS

No serious side effects due to AEKNIL were noted in this trial. No cyanosis due to methaemoglobinemia was seen on any occasion.

| Side Effects | AEKNIL | A.P.C. | Mist. Diaphoretic |
|------------------|--------|--------|-------------------|
| Nil | 117 | 104 | 116 |
| Skin Rash | 1 | 5 | 1 |
| Flushing of Face | - | 3 | - |
| Collapse | - | 4 | 3 |
| Vomiting | 2 | 2 | - |
| Haematemesis | - | 2 | - |
| Total | 120 | 120 | 120 |

Conclusion

From this clinical trial, we conclude that AEKNIL is of considerable value when used as an antipyretic in wide range of common paediatric ailments. The great advantage is that it is almost free from any side effect and because of its complete miscibility in water, it could be used both in oral and intra-muscular form.

EXTRACT FROM :
CLINICAL TRIALS WITH AEKNIL INJ.
Dr. S. N. Lohe & Dr. P. R. Deshpande

THERAPEUTIC

AEKNIL INJECTION

PARAMETERS OF PHARMACOKINETIC BEHAVIOUR

The parameters of pharmacokinetic behavior considered are:

1. The peak height concentration (C max)
2. The time to peak concentration (T max)
3. The area under the serum concentration time (AUC)

TABLE 2
AVERAGE SERUM CONCENTRATION AT EACH SAMPLING TIME

| HOUR | Average Serum Concentration (mg/ml) | | T-TEST |
|------|-------------------------------------|--------------------------|--------|
| | STANDARD | TEST AEKNIL 150 mg/ml | |
| 0 | | 0 | |
| 0 | | 0.036 | |
| 0.25 | | 1.494 | |
| 0.5 | | 0.535 | |
| 1.0 | | 0.311 | |
| 2.0 | | 0.281 | |
| 4.0 | | 0.203 | |
| 6.0 | | 0.055 | |
| 8.0 | | 0.010 | |

TABLE 3
PARAMETERS OF BIOAVAILABILITY

| | STANDARD | TEST AEKNIL 150 mg/ml | VARIANCE % |
|---------------------------|----------|--------------------------|------------|
| G (mg \pm S.E.M) Max | | 1.494 + 0.374 | |
| T (mg \pm S.E.M) Max | | 0.25 + 0.025 | |
| AUC (mg/8hr) | | 1.76 | |

AEKNIL (brand of Paracetamol) is well absorbed following an intra-muscular injection. Peak plasma concentration well above the peak plasma concentration attained after oral administration is attained 15 minutes after the intra-muscular injection. Thereafter the plasma concentration rapidly declines. Approximately 20% of the peak plasma concentration is present in the blood at 1 hour and 3% at 6 hours after injection.

EXTRACT FROM :
CLINICAL TRIALS WITH AEKNIL INJ.
Philippine Heart Centre, Manila.

THERAPEUTIC

AEKNIL INJECTION

CLINICAL STUDIES :

When quick Analgesic is required one needs an Injectable form. The optimal dose recommended for Acetaminophen is 0.3 to 0.6 gms per dose, which is equivalent to most of the popular antipyretics and analgesics like Salicylates and other Para Aminophenol derivatives. As the drug is considered as a drug of choice when treatment is required for prolonged time, it is obvious that the toxic effects would be less.

Any child in the pediatric ward with temperature above 101 F was taken for study.

The dose of AEKNIL (Paracetamol) is 0.3 to 0.6 gms/dose. In children the usual practice is to give 60-mgm per each year of age till the maximum is reached. Injection AEKNIL (Paracetamol) contains 150mg/ml.

Table 1 : AGE and SEX

| Drug used | 1day-1yr. | 1-3yr. | 3-10yr. | Above 10 | Total |
|-------------|-----------|--------|---------|----------|-------------------|
| Paracetamol | 19 | 15 | 34 | 7 | 75 (48M) (27F) |
| Analgin | 18 | 10 | 19 | 3 | 50 (34M) (16F) |
| Oral | 2 | 3 | 6 | 1 | 12 (7M) (5F) |

Table 3 : RESULTS

| Result | Paracetamol | Analgin | Oral |
|--------|-------------|---------|----------|
| GOOD | 48(64%) | 32(64%) | 4(33.3%) |
| FAIR | 19(25.3%) | 11(22%) | 2(16.7%) |
| POOR | 8(10.7%) | 7(14%) | 6(50%) |

In conclusions, AEKNIL (Paracetamol) is a very safe drug when given intramuscularly. It can be given safely to all age groups including newborn babies. In all types of illnesses, specific or nonspecific, it is very useful in Lowering the temperature to normal within a short time. Even when the temperature did not touch normal, it was lowered by 2 F to 3 F, which brings about considerable relief and comfort to the patients. It is not toxic can be safely used. No local pain was complained of by order children.

EXTRACT FROM :
CLINICAL STUDIES ON AEKNIL INJECTION IN PEDIATRICS
Dr. Versha Modi & Dr. Mrs. A. B. Desai



| | |
|--------------|--|
| Composition | : Each ml. contains: PARACETAMOL I.P. 150 mg. |
| Indications | : In severe pains & spasms. For relief from pyrexia of unknown origin, or that resulting from upper and lower respiratory tract infections like acute tonsillitis, bronchitis, pharyngitis, trachio-bronchitis, sinusitis, pneumonia, meningitis, mumps, otitis media, measles post-vaccination reaction, rheumatism and allied disorders, influenza etc. For prevention of Febrile convulsions. |
| Precautions | : Should be avoided in case of patients having impaired kidney or damaged liver conditions. |
| Dosage | : Adults: 2 ml. to be injected deep, intramuscularly, preferable into the gluteal muscles, every 4-6 hrs. Children: 1/2 to 1 ml. (intra-muscularly) per dose, every 4-6 hours. |
| Presentation | : 2 ml. ampoules & 15 ml. vials. |