

Safety Data Sheet
Divalproex Sodium Extended-release Tablets

Strength: 250mg and 500mg. **Pack Size:** 60/90/100/500 Tablets Per bottle for 250 mg and 90/100/500
Tablets Per bottle for 500mg

Revision No.: 02

EMERGENCY OVERVIEW

Each Divalproex sodium extended-release Tablet intended for oral administration contains 250 mg or 500 mg of divalproex sodium equivalent to 250 mg or 500 mg of valproic acid and excipients generally considered to be non-toxic and non-hazardous in small quantities and under conditions of normal occupational exposure.

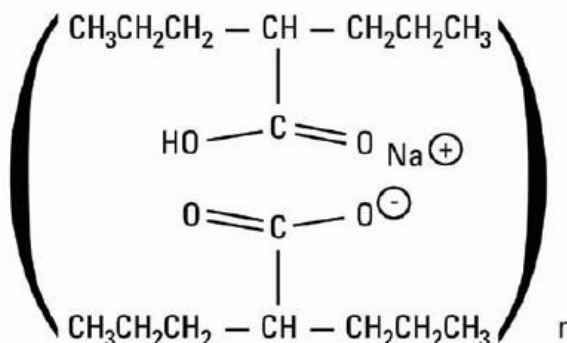
Section 1. Identification

Identification of the product

Product name: Divalproex Sodium Extended-release Tablets

Formula: $(C_{16}H_{31}NaO_4)_n$

Chemical Name: Sodium hydrogen bis (2-propylpentanoate)



Manufacturer / supplier identification

Company: Cadila Healthcare Ltd. Ahmedabad, India

Address: Sarkhej – Bavla. N.H. 8A, Moraiya. Tal. Sanand.
Dist. Ahmedabad – 382210. State: Gujarat. India

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**Recommended use /
Therapeutic Category** Anti-epileptic.

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**Restriction on Use /
Contraindications:**

Divalproex sodium extended-release tablets should not be administered to patients with hepatic disease or significant hepatic dysfunction.

Divalproex sodium extended-release tablets are contraindicated in patients with known hypersensitivity to the drug.

Divalproex sodium extended-release tablets are contraindicated in patients with known urea cycle disorders.

Divalproex sodium extended-release tablets are contraindicated for use in prophylaxis of migraine headaches in pregnant women.

Section 2. Hazard(s) Information

**Dose and
Administration**

Divalproex sodium extended-release tablets are intended for once- a-day oral administration. Divalproex sodium extended-release tablets should be swallowed whole and should not be crushed or chewed.

Mania: Initial dose is 25 mg/kg/day, increasing as rapidly as possible to achieve therapeutic response or desired plasma level. The maximum recommended dosage is 60 mg/kg/day .

Complex Partial Seizures: Start at 10 to 15 mg/kg/day, increasing at 1 week intervals by 5 to 10 mg/kg/day to achieve optimal clinical response; if response is not satisfactory, check valproate plasma level; see full prescribing information for conversion to monotherapy. The maximum recommended dosage is 60 mg/kg/day.

Absence Seizures: Start at 15 mg/kg/day, increasing at 1 week intervals by 5 to 10 mg/kg/day until seizure control or limiting side effects. The maximum recommended dosage is 60 mg/kg/day.

Migraine: The recommended starting dose is 500 mg/day for 1 week, thereafter increasing to 1000 mg/day.

Adverse Effects

Most common adverse reactions (reported > 5%) reported in adult studies are nausea, somnolence, dizziness, vomiting, asthenia, abdominal pain, dyspepsia, rash, diarrhea, increased appetite, tremor, weight gain, back pain, alopecia, headache, fever, anorexia, constipation, diplopia, amblyopia/blurred, ataxia, nystagmus, emotional lability, thinking abnormal, amnesia, flu syndrome, infection, bronchitis, rhinitis, ecchymosis, peripheral

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edema, insomnia, nervousness, depression, pharyngitis, dyspnea, tinnitus.

The safety and tolerability of valproate in pediatric patients were shown to be comparable to those in adults.

Over Dose Effect

Over dosage with valproate may result in somnolence, heart block, and deep coma. Fatalities have been reported; however patients have recovered from valproate levels as high as 2120 mcg/mL.

Medical Conditions

Before you take divalproex sodium, tell your healthcare provider if you:

- drink alcohol
- are pregnant or breastfeeding. Divalproex sodium can pass into breastmilk. Talk to your healthcare provider about the best way to feed your baby if you take divalproex sodium.
- have or have had depression, mood problems, or suicidal thoughts or behavior
- have any other medical conditions.

Tell your healthcare provider about all the medicines you take, including prescription and nonprescription medicines, vitamins, herbal supplements and medicines that you take for a short period of time.

Taking divalproex sodium with certain other medicines can cause side effects or affect how well they work. Do not start or stop other medicines without talking to your healthcare provider.

Know the medicines you take. Keep a list of them and show it to your healthcare provider and pharmacist each time you get a new medicine.

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Pregnancy Category

If you take divalproex sodium during pregnancy for any medical condition, your baby is at risk for serious birth defects. The most common birth defects with divalproex sodium affect the brain and spinal cord and are called spina bifida or neural tube defects. These defects occur in 1 to 2 out of every 100 babies born to mothers who use this medicine during pregnancy. These defects can begin in the first month, even before you know you are pregnant. Other birth defects can happen.

Birth defects may occur even in children born to women who are not taking any medicines and do not have other risk factors.

If you take divalproex sodium during pregnancy for any medical condition, your child is at risk for having a lower IQ.

Women who are pregnant must not take divalproex sodium to prevent migraine headaches.

All women of childbearing age should talk to their healthcare provider about using other possible treatments instead of divalproex sodium. If the decision is made to use divalproex sodium, you should use effective birth control (contraception).

Tell your healthcare provider right away if you become pregnant while taking divalproex sodium. You and your healthcare provider should decide if you will continue to take divalproex sodium while you are pregnant.

Pregnancy Registry: If you become pregnant while taking divalproex sodium, talk to your healthcare provider about registering with the North American Antiepileptic Drug Pregnancy Registry. You can enroll in this registry by calling 1-888-233-2334. The purpose of this registry is to collect information about the safety of antiepileptic drugs during pregnancy.

Pregnancy Category

Pregnancy Category D for epilepsy and for manic episodes associated with bipolar disorder.

Pregnancy Category X for prophylaxis of migraine headaches.

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Section 3. Composition / information on ingredients

Component	Exposure Limit	CAS No.
Principle Component :		
Divalproex sodium	Not Found	76584-70-6
Inactive Ingredients :		
Hydroxypropyl cellulose	Not Found	9004-64-2
Hypromellose	Not Found	9004-65-3
Lecithin	Not Found	8002-43-5
Magnesium stearate	Not Found	577-04-0
Silicon dioxide	Not Found	7631-86-9
Polyethylene glycol	Not Found	25322-68-3
Polyvinyl alcohol	Not Found	9002-89-5
Xanthan gum	Not Found	11138-66-2
Talc	Not Found	14807-96-6
Titanium dioxide.	Not Found	13463-67-7

Section 4. First - aid measures

General

Skin Contact: Wash contaminated area with soap and water.

Eye Contact: Flush with running water for 15 minutes holding eyelids open.

Inhalation: No specific treatment is necessary since this product is not likely to be hazardous by inhalation if tablet is left intact.

Ingestion: Get medical attention immediately; induce vomiting if victim is Conscious.

Overdose Treatment

In overdose situations, the fraction of drug not bound to protein is high and hemodialysis or tandem hemodialysis plus hemoperfusion may result in significant removal of drug. The benefit of gastric lavage or emesis will vary with the time since ingestion. General supportive measures should be applied with particular attention to the maintenance of adequate urinary output. Naloxone has been reported to reverse the CNS depressant effects of valproate over dosage. Because naloxone could theoretically also reverse the antiepileptic effects of valproate, it should be used with caution in patients with epilepsy.

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Section 5. Fire - fighting measures

Flash point	Not Found	Upper Flammable Limit:	Not Found
Auto-Ignition Temperature:	Not Found	Lower Flammable Limit:	Not Found
Extinguishing Media	Water Spray, dry chemical, carbon dioxide or foam as appropriate for surrounding fire and material.	Fire and Explosion Hazard	This material is assumed to be combustible. As with all dry powders it is advisable to ground mechanical equipment in contact with the dry material to dissipate the potential build-up of static electricity.
Fire Fighting Procedure	As with all fires, evacuate personnel to a safe area. Fire fighter should use self- contained breathing equipment and protective clothing.		

Section 6. Accidental Release Measures

Spill Response Wear approved respiratory protection, chemically compatible gloves and protective clothing. Wipe up spillage or collect spillage using high efficiency vacuum cleaner. Avoid breathing dust. Place spillage in appropriately labelled container for disposal. Wash spill site.

Section 7. Handling and Storage

Storage Store at 20° to 25°C (68° to 77°F).
Dispense in a tight, light-resistant container.

Incompatibilities: No Data available.

Section 8. Exposure controls / personal protection

Respiratory Protection Protection from inhalation is not normally necessary. If ventilation is inadequate or dust is likely to generate, use of suitable dust mask would be appropriate.

Skin Protection Skin protection is not normally necessary, however it is good practice to avoid contact with chemical to use suitable gloves when handling.

Eye protection Eye protection is not normally necessary. If concerned wear protective goggles or glasses. Wash hands prior to touching eye and in particular handling contact lenses.

Protective Clothing Protective clothing is not normally necessary, however it is good practice to use apron.

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Section 9. Physical and chemical properties

Appearance	Divalproex Sodium Extended-release Tablets, 250 mg are available as white to off-white, capsule-shaped, biconvex, film-coated tablets imprinted with “ZA47” on one side and the other side plain. Divalproex Sodium Extended-release Tablets, 500 mg are available as white to off-white, capsule-shaped, biconvex, film-coated tablets imprinted with “ZA48” on one side and the other side plain.		
Solubility in water	Very soluble in chloroform, freely soluble in methanol and in ethyl ether, soluble in acetone, practically insoluble in acetonitrile.	Odour	Odourless
Boiling point	No Data Available	Melting Point	Between 98 and 102°C
Evaporation rate	No Data Available	Vapour density	No Data Available
Reactivity in water	No Data Available	Evaporation rate	No Data Available
% Volatile by volume	No Data Available	Specific gravity	No Data Available
		Vapour pressure	No Data Available
Other information	Not applicable		

Section 10. Stability and Reactivity

Condition to avoid	Avoid exposure to extreme heat, light and moisture.	Stable	Stable under normal ambient and anticipated storage and handling conditions.
Decomposition Products	No Data Available	Hazardous Reaction	No data available.
Incompatibilities:	No Data Available		

Section 11. Toxicological information

General	Handling of formulated product is not expected to cause any toxicological affects. The data pertains to the ingredient in formulations, rather than this specie formulation.		
Target organ	Eye contact, Skin contact and inhalation is not great risk as this product is tablet.		
Other	Not Applicable		

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Section 12. Ecological information

Do not allow product to enter drinking water supplies, waste water or soil

Section 13. Disposal Consideration

Dispose the waste in accordance with all applicable Federal, State and local laws.

Section 14. Transport Information

The product is not hazardous when shipping via air (IATA), ground (DOT), or sea (IMDG).

Section 15. Regulatory Information

Generic Medicine. Approved by USFDA & the ANDA Number is 078239

Section 16. Other information

None

Date of issue: 28/05/2015

Supersedes edition of: 01

The information contained herein is based on the state of our knowledge. It Characterises the product with regard to the appropriate safety precautions. It does not represent a guarantee of the properties of the product.