For the use of Registered Medical Practitioner or Hospital or a Laboratory only

Mannitol & Glycerin injection

NIRTOL-G®*

COMPOSITION:

Each 100 mL Contains:

Mannitol IP	10.0 gms
Glycerin IP	10.0 gms
Water for injection IP	q.s.

RATIONALE OF NIRTOL-G®*:

NIRTOL-G®* Contains mannitol and glycerine, two sugar with good osmotic diuretic properties. Mannitol in dose of 1.5 to 2kg. Reduce cerebral intracranial tension and to treat cerebral edema. Glycerine in dose of 1.2 gm/kg. Reduce edema. Either glycerine or mannitol can be administered individually. However the addition of glycerine to mannitol avoids reoccurrence of oedema likely to be observe with intravenous administration of only mannitol.

This provide strong synergic effect of mannitol and glycerin combination in management of cerebral edema and raised intra cranial pressure.

NIRT NIRTOL-G®* OL-G® is very much effective to increase the diffusion of water from cerebrospinal fluid back in to plasma by elevating the osmolality of plasma.

NIRTOL-G®* rapidly enter to CSF and brain compartment and favorably affect the stroke process by two ways

- Redistribution of cerebral blood flow with increase in regional cerebral blood flow and regional cerebral blood volume
- NIRTOL-G®* may become alternative source of energy either by enhancing lipogenesis
- NIRTOL-G®* is useful drug in cerebral edema with or without hypertension and gastric ulcer because mannitol is superior then dexamethasone
- NIRTOL-G®* is drug of choice in diabetic ketoacidosis with cerebral edema, glycerine in this preparation acts as a free radical scavenger and activator of plasma prostaglandine (PG12) Resulting in validation. Further, Glycerine may improve ischemic brain energy metabolism.

INDICATION:

- Prevention of renal shutdown
- Toxaemia
- Cerebral infarction
- Cerebral edema
- Tuberculosis meningitis
- Encephalitis

- Diabetic Ketoacidosis
- Energy source in diabetic patient
- Head injury
- Brain abscess
- Intracranial tumor
- Ophthalmic surgeries

CONTRAINDICATIONS:
NIRTOL-G®* is contraindicated in patient with:
Congestive heart failure as it increases extracellular fluid and there by increases load on the already decomposited heart.
Pulmonary congestion.
The electrolyte depletion should be overcome before administering NIRTOL-G®*.
Severe dehydration.
Well established anuria due to sever renal disease.
Acute intracranial bleeding except during craniotomy.
Progressive renal damage or dysfunction after institution of mannitol therapy; including increasing oligouria and azotemia.

PRECAUTION FOR NIRTOL-G®*:
Patients of pulmonary congestion
Patient of CHF (congestive heart failure)
Electrolyte depletion should be overcome before administration of NIRTOL-G®*
Rapid infusion of should not be used to treat renal failure
No evidence of use of NIRTOL-G®* in pregnant or lactating women

DOSAGE & ADMINISTRATION:
50-200 gm (250 to 1000 ml) over a period of time of 24 hrs.
In glaucoma: 1.5-2 gm/ kg body wt. over the period of time of 30-60 mins.
Kidney test dose: 200 mg / kg body wt. Over a period of 3-5 mins.
Administration:
Rate of infusion for cerebral edema should not exceed then 40 drops per minute.
In other indication the rate may be adjusted according to the patient's requirement

ROUTE AND RATE OF ADMINISTRATION:
Route of administration: Intravenous administration (I.V.)
Rate of infusion for cerebral edema should not exceed then 40 drops per minute.
In other indication the rate may be adjusted according to the patient's requirement.

STORAGE AND HANDLING INSTRUCTIONS:
Store in a dark place until ready for use.

PRESENTATION:
100 mL FFS plastic bottle.

ACULIFE®
Manufactured in India by:
Aculife Healthcare Pvt. Ltd.
Sachana, Gujarat 382150, India.
* TM owners-Nirma Ltd.