

Revised: June 2008(3rd version)

Standard Commodity Classification No. of Japan
875200

-Kampo-preparation-

SANWA Kakkonto Extract Fine Granules<kakkonto>
S-17

This product is easy to take, fine granules made from the extract of "kakkonto" listed in "SHOKANRON" "KINKIYORYAKU".

Storage. Precautions for handling

Since this product is hygroscopic property, keep a container tightly closed in a cool place away from direct rays after use.

Expiration date

Use before the expiration date indicated on the label or the package.

Approval No.	(61AM)3596
Date of listing in the NHI reimbursement price	October 1986
Date of initial marketing in Japan	November 1986

DESCRIPTION**Composition**

7.5g/day of this product contains 4.1g of a dried JP kakkonto extract of the following mixed crude drugs.

JP Pueraria Root.....	4.0g
JP Ephedra Herb.....	3.0g
JP Cinnamon Bark.....	2.0g
JP Glycyrrhiza.....	2.0g
JP Peony Root.....	2.0g
JP Jujube.....	3.0g
JP Ginger.....	1.0g

(JP: The Japanese Pharmacopoeia)

It also contains Lactose Hydrate, Corn Starch, Microcrystalline Cellulose, Partly Pregelatinized Starch, Light Anhydrous Silicic Acid as inactive ingredients.

Product Description

This product is fine granules, brown color, it has characteristic smell, and it tastes bitter and sweet.

ID code: S-17

INDICATIONS

The following symptoms of those patients with comparatively strong constitution who have headache, fever, rigor and shoulder or back stiffness without spontaneous sweating:

Common cold, coryza, tonsillitis, otitis media, empyema, conjunctivitis, mastitis, shoulder stiffness, and brachial neuralgia

DOSAGE AND ADMINISTRATION

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

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

- (1) Patient 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, 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-preparations (Japanese traditional herbal medicines), etc., attention should be paid to the duplication of the contained crude drugs.

SHO: The term "SHO" refers to a particular pathological status of a patient evaluated by the Kampo diagnosis, and is patterned according to the patient's constitution, symptoms, etc. Kampo-preparations (Japanese traditional herbal medicines) should be used after confirmation that it is suitable for the identified "SHO" of the patient.

3. Drug Interactions

Precautions for coadministration (Kakkonto 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, general 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.
(1) Preparations containing Glycyrrhiza (2) Preparations containing glycyrrhizinic acid or glycyrrhizinate	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) 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.
- 2) 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.
- 3) Hepatic dysfunction and jaundice:** Hepatic dysfunction and /or jaundice with elevation of AST (GOT), ALT (GPT), Al-P and γ -GTP or other symptoms 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 ^{Note1)}	Rash, Redness, Pruritus, etc.
Autonomic	Insomnia, Excess sweating, Tachycardia, Palpitation, Generalized weakness, Mental excitation, etc.
Gastrointestinal	Anorexia, Epigastric distress, Nausea, Vomiting, etc.
Urinary	Urination disorder, etc.

Note1) 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 women has not been established. Therefore, the product should be used in pregnant women, women who may possibly be pregnant only if the expected therapeutic benefits outweigh the possible risks associated with treatment.

7. Pediatric Use

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

8. Other Precautions

Eczema, dermatitis, etc. may be aggravated.

PACKAGING

Bottles of 500g
2.5g x 300 packets

Manufactured and Distributed by:

Sanwa Shoyaku Co., Ltd.
6-1, Hiraide-Kogyo-Danchi, Utsunomiya-city, Tochigi, 321-0905, Japan