

# Safety Data Sheet

Product Name: Theophylline Extended Release Tablet  
Strength: 300 mg & 450 mg  
Pack Size: HDPE Bottle: 100's

Revision No.: 00

## EMERGENCY OVERVIEW

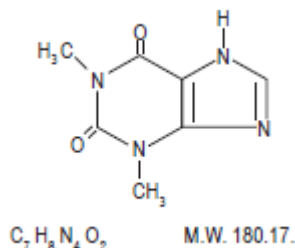
Each Theophylline Extended Release Tablet intended for oral administration contains Theophylline and excipients generally considered to be non-toxic and non-hazardous in small quantities and under conditions of normal occupational exposure.

## Section 1. Identification

### Identification of the product

**Product Name:** Theophylline Extended Release Tablet

**Chemical Name:** 1H-Purine-2, 6-dione, 3,7-dihydro-1, 3-dimethyl-, and is represented by the following structural formula:



### Manufacturer / supplier identification

**Company:** Zydus Lifesciences Ltd., Matoda, India

**Address:** Zydus Lifescience Limited, Plot No- 1A/1 & 2, Pharmez Special Economic Zone, Sarkhej- Bavla N.H. No. 8A, Near Village Matoda, Tal. Sanand, Dist. Ahmedabad-382 213, India

**Contact for information:** Tel: +91-79-26868100 Fax: +91-79-26868533

**Emergency Telephone No.** Tel: +91-79-26868101

**US Customer Service:**

**Recommended use / Therapeutic Category** Theophylline extended-release tablets are indicated for the treatment of the symptoms and reversible airflow obstruction associated with chronic asthma and other chronic lung diseases, e.g., emphysema and chronic bronchitis.

**Restriction on Use / Contraindications:** Theophylline extended-release tablets are contraindicated in patients with a history of hypersensitivity to theophylline or other components in the product.

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## Section 2. Hazard(s) Identification

Taking theophylline extended-release tablets immediately after a high-fat content meal may result in a somewhat higher C<sub>max</sub> and delayed T<sub>max</sub> and somewhat greater extent of absorption. However, the differences are usually not great and this product may normally be administered without regard to meals.

## Dose and Administration

Theophylline extended-release tablets are recommended for chronic or long-term management and prevention of symptoms and not for use in treating acute symptoms of asthma and reversible bronchospasm.

Adverse reactions associated with theophylline are generally mild when peak serum theophylline concentrations are < 20 mcg/mL and mainly consist of transient caffeine-like adverse effects such as nausea, vomiting, headache and insomnia. When peak serum theophylline concentrations exceed 20 mcg/mL, however, theophylline produces a wide range of adverse reactions including persistent vomiting, cardiac arrhythmias and intractable seizures which can be lethal.

## Adverse Effects

The transient caffeine-like adverse reactions occur in about 50% of patients when theophylline therapy is initiated at doses higher than recommended initial doses (e.g., > 300 mg/day in adults and > 12 mg/kg/day in children beyond 1 year of age). During the initiation of theophylline therapy, caffeine-like adverse effects may transiently alter patient behavior, especially in school age children, but this response rarely persists. Initiation of theophylline therapy at a low dose with subsequent slow titration to a predetermined age-related maximum dose will significantly reduce the frequency of these transient adverse effects.

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## Overdosage

The chronicity and pattern of theophylline overdosage significantly influences clinical manifestations of toxicity, management and outcome. There are two common presentations: (1) acute overdose, i.e., ingestion of a single large excessive dose (> 10 mg/kg) as occurs in the context of an attempted suicide or isolated medication error and (2) chronic overdosage, i.e., ingestion of repeated doses that are excessive for the patient's rate of theophylline clearance. The most common causes of chronic theophylline overdosage include patient or care giver error in dosing, healthcare professional prescribing of an excessive dose or a normal dose in the presence of factors known to decrease the rate of theophylline clearance and increasing the dose in response to an exacerbation of symptoms without first measuring the serum theophylline concentration to determine whether a dose increase is safe.

## Pregnancy Comments

There are no adequate and well-controlled studies in pregnant women. Theophylline should be used during pregnancy only if the potential benefit justifies the potential risk to the fetus.

**Pregnancy Category** Category C

### Section 3. Composition / information on ingredients

Component	Exposure Limit	CAS No.
<b>Principle Component:</b>		
Theophylline	150 mcg/day	58-55-9
<b>Inactive ingredients:</b>		
Lactose monohydrate	Not Found	10039-26-6
Hypromellose	Not Found	9004-65-3
Povidone K-30	Not Found	9003-39-8
Magnesium stearate	Not Found	557-04-0

### Section 4. First -aid measures

**In Case of Inhalation** Move to fresh air. Call a physician immediately.

**In Case of Skin Contact** Rinse immediately with plenty of water and seek medical advice.

**In Case of Eye Contact** In the case of contact with eyes, rinse immediately with plenty of water and seek medical advice.

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<b>In case of Ingestion</b>	Do not induce vomiting without medical advice. Never give anything by mouth to an unconscious person. Consult a physician
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## Section 5. Fire -fighting measures

<b>Protective equipment</b>	As in any fire, wear self-contained breathing apparatus pressure-demand, MSHA/NIOSH (approved or equivalent) and full protective gear
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<b>Suitable extinguishing media</b>	Use dry chemical, CO <sub>2</sub> , water spray or "alcohol" foam
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## Section 6. Accidental release measure

<b>Personal precautions &amp; Protective equipment</b>	Use personal protective equipment.
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<b>Environmental precautions:</b>	Prevent product from entering drains.
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<b>Methods and material for containment and cleaning up:</b>	Sweep up and shovel into suitable containers for disposal.
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## Section 7. Handling and Storage

<b>Handling</b>	Use only in area provided with appropriate exhaust ventilation.
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<b>Storage</b>	Room Temperature
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<b>Safe handling advice</b>	Wear personal protective equipment.
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<b>Technical measures/storage conditions</b>	Keep containers tightly closed in a cool, well-ventilated place.
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<b>Incompatible products:</b>	Oxidising and spontaneously flammable products.
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## Section 8. Exposure control / Personal Protection

<b>General protective and hygienic measures</b>	Handle in accordance with good industrial hygiene and safety practice.
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<b>Eye Protection</b>	Safety glasses with side-shields
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<b>Protection of hands</b>	PVC or other plastic material gloves
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<b>Skin and body protection</b>	Usual safety precautions while handling the product will provide adequate protection against this potential effect.
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<b>Respiratory protection</b>	Breathing apparatus only if aerosol or dust is formed.
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## Section 9. Physical and chemical properties

<b>Physical States / Description</b>	Description of Theophylline Extended Release Tablet 300 is White to off-white, capsule shaped, biconvex, uncoated tablet,
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debossed with '7' and '28' on either side of score on one side and plain on the other side.

Description of Theophylline Extended Release Tablet 450 mg is White to off-white, capsule shaped, biconvex, uncoated tablet, debossed with '7' and '29' on either side of score on one side and plain on the other.

<b>Solubility / Miscibility in water</b>	Soluble	<b>Decomposition Temperature:</b>	No Data
<b>Molecular weight</b>	180.2	<b>Melting Point</b>	270-274
<b>Evaporation rate</b>	No Data	<b>Vapour density</b>	No Data
<b>Reactivity in water</b>	No Data	<b>Vapour pressure</b>	No Data
<b>% Volatile by volume</b>	No Data	<b>Specific gravity</b>	No Data

## Section 10. Stability and Reactivity

<b>Stability</b>	Stable under recommended storage conditions.
<b>Polymerization</b>	None under normal processing.
<b>Hazardous decomposition products:</b>	Nitrogen oxides (NO <sub>x</sub> )/ammonia
<b>Materials to avoid:</b>	Strong oxidizing agents.
<b>Condition to avoid</b>	Exposure to air or moisture over prolonged periods

## Section 11. Toxicological information

<b>Chronic toxicity:</b>	Chronic exposure may cause nausea and vomiting, higher exposure causes unconsciousness.
<b>Local effects:</b>	Symptoms of overexposure may be headache, dizziness, tiredness, nausea and vomiting.
<b>Specific effects:</b>	May include moderate to severe erythema (redness) and moderate edema (raised skin), nausea, vomiting, headache.

## Section 12. Ecological information

<b>Toxicity: Aquatic toxicity</b>	May cause long-term adverse effects in the aquatic environment.
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## Section 13. Disposal Consideration

Dispose in accordance with local, state, and federal regulations

## Section 14. Transport Information

The product is not hazardous when shipping via air (IATA), ground (DOT), or sea (IMDG). In accordance with ADR / RID / IMDG / IATA / AND.

## Section 15. Regulatory Information

Under Approval

## Section 16. Other information

None

**Date of issue: 28/01/24**

**Supersedes edition: New Edition**

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