Womfly I Tablet

Ivermectin (6mg) + Albendazole (400mg) Tablet

Category: Anthelmintic (Anti-parasitic) Dosage Form: Oral Tablet

Description:

The combination of Ivermectin (6mg) and Albendazole (400mg) is an effective antiparasitic treatment used to treat a variety of intestinal and systemic parasitic infections. This combination therapy targets different types of parasitic worms and is commonly prescribed to treat both nematode (roundworm) and trematode (flatworm) infections.

- Ivermectin works by interfering with the nervous system of the parasites, leading to their paralysis and death. It is particularly effective against ectoparasites like lice, scabies, and strongyloides.
- Albendazole is a broad-spectrum anti-helminthic that works by inhibiting the parasite's ability to absorb glucose, leading to the depletion of its energy reserves and eventually its death. It is effective against a variety of intestinal worms and systemic helminths, including tapeworms, hookworms, and roundworms.

This combination is typically used in tropical and subtropical regions where parasitic infections are prevalent and may require simultaneous treatment for multiple types of worms. **Composition (Per Tablet):**

- Ivermectin (6mg)
- Albendazole (400mg)

Indications:

This combination tablet is used for the treatment of:

- 1. Strongyloidiasis (caused by Strongyloides stercoralis): A parasitic infection of the intestines and other organs.
- 2. Lymphatic filariasis: Caused by filarial worms, leading to severe swelling and deformity of limbs.
- 3. Onchocerciasis (River blindness): Caused by the Onchocerca volvulus parasite.
- 4. Intestinal helminthic infections: Including roundworms (Ascaris lumbricoides), hookworms, tapeworms, and whipworms (Trichuris trichiura).
- 5. Neurocysticercosis: An infection caused by the larvae of the pork tapeworm Taenia solium in the brain or central nervous system.
- 6. Giardiasis and Amebiasis: Protozoal infections, though primarily treated with other agents, may benefit from combination therapy in certain cases.

Dosage and Administration:

- Recommended Dosage:
 - For Strongyloidiasis and Onchocerciasis: Take one tablet (Ivermectin 6mg + Albendazole 400mg) as a single dose, typically repeated after a week or as directed by a healthcare provider.
 - For Lymphatic Filariasis: The typical dose is one tablet per day for 1-2 weeks, depending on the severity and patient condition.
 - For Intestinal Worms (e.g., Roundworm, Hookworm, Tapeworm): Take one tablet as a single dose, possibly repeated after several weeks based on the specific type of infection.
 - Neurocysticercosis: Treatment usually involves a longer course of therapy, often in combination with other antiparasitic agents.
- Administration:
 - The tablet should be swallowed whole with water, with or without food.
 - The exact dosage and duration will depend on the type of parasitic infection and the patient's condition. Always follow the prescribed regimen.

Mechanism of Action:

• Ivermectin works by binding to specific channels in the parasite's nervous system, increasing the permeability of the cell membrane to chloride ions. This disrupts the function of the parasite's nervous system, causing paralysis and eventually the death of the parasite. Ivermectin is particularly effective against ectoparasites like lice, scabies, and internal parasites such as strongyloides.

Albendazole works by inhibiting tubulin polymerization, leading to the disruption of the parasite's microtubules and thereby preventing its ability to absorb glucose. This results in a lack of energy, eventually causing the death of the parasite.
Albendazole is effective against a wide range of intestinal helminths and systemic infections like neurocysticercosis.

Contraindications:

- Hypersensitivity to Ivermectin, Albendazole, or any other ingredient in the formulation.
- Pregnancy (especially during the first trimester): Ivermectin and
 Albendazole can be harmful to the developing fetus, and should only be used during pregnancy when clearly necessary and prescribed by a healthcare provider.
- Lactation: These drugs may pass into breast milk, so should be used with caution in breastfeeding mothers.
- Severe Liver Disease: Both Ivermectin and Albendazole are metabolized by the liver, and patients with severe liver disease should use this combination with caution.
- Children under 2 years of age: Use with caution and under medical supervision, particularly in children who are under the recommended weight for these medications.

Warnings and Precautions:

- 1. Neurocysticercosis Treatment: Patients with neurocysticercosis should be monitored for potential cerebral edema (brain swelling) during treatment, as Albendazole may cause inflammation of the brain tissue.
- 2. Liver Function Monitoring: Albendazole and Ivermectin are metabolized in the liver, so liver function tests should be conducted periodically during long-term therapy.
- 3. Toxicity Risk in Severe Infections: In some cases, high parasite loads may cause severe toxicity (such as toxemia) as the parasites die off, especially in onchocerciasis. Supportive care may be needed in such cases.
- 4. Pregnancy and Breastfeeding: The combination is contraindicated during pregnancy, and caution should be exercised when used during breastfeeding.
- 5. Drug Interactions:
 - Ivermectin can interact with CYP3A4 inhibitors (e.g., ketoconazole, itraconazole), which may increase its concentration in the blood.
 - Albendazole may interact with other anti-parasitic drugs or medications metabolized by the liver.

- Headache, dizziness, or fatigue.
- Nausea or vomiting.
- Abdominal discomfort or diarrhea.
- Skin rashes.
- Hair loss (rare).

Serious Side Effects:

- Liver damage: Elevated liver enzymes, jaundice.
- Severe allergic reactions: Anaphylaxis, swelling, or difficulty breathing.
- Neurological effects: Seizures, confusion, or visual disturbances (rare).
- Bone marrow suppression: Longterm use of Albendazole may rarely cause leukopenia (low white blood cells).

Drug Interactions:

- CYP3A4 Inhibitors (e.g., ketoconazole, itraconazole): May increase Ivermectin levels, leading to potential toxicity.
- Anti-convulsants (e.g., phenytoin, carbamazepine): May reduce the effectiveness of Albendazole by increasing its metabolism.
- Corticosteroids: Concurrent use with Albendazole may increase the risk of increased intracranial pressure in patients being treated for neurocysticercosis.

Storage Instructions:

Store at room temperature (15°C - 30°C).

Adverse Effects:

Common Side Effects:

- Keep away from moisture and direct sunlight.
- Keep out of reach of children.

Key Points for Use:

- Ivermectin (6mg) + Albendazole (400mg) is an effective combination treatment for intestinal and systemic parasitic infections.
- The combination therapy provides broad-spectrum action against a wide range of helminths and ectoparasites.
- This medication should be used as prescribed and for the full duration to ensure the complete eradication of the infection.
- Liver function and potential neurological effects should be monitored, especially in long-term use.

Please consult your healthcare provider for personalized advice regarding the dosage and usage of this medication, especially if you have any pre-existing medical conditions.

Manufactured in India for:

