PHENOBARBITAL- phenobarbital tablet C.O. Truxton, Inc.

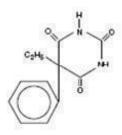
Disclaimer: This drug has not been found by FDA to be safe and effective, and this labeling has not been approved by FDA. For further information about unapproved drugs, click here.

Phenobarbital Tablets, USP

Rev. 10/12 $C_{\rm IV}$ $\boldsymbol{R_x}$ only

DESCRIPTION

Phenobarbital is a barbituric acid derivative for oral administration and occurs as a white, odorless, slightly bitter powder that is soluble in chloroform, freely soluble in alcohol or ether, and slightly soluble in water. Its saturated solution has a pH of about 5.6. Chemically, it is 5-ethyl-5-phenylbarbituric acid with the molecular formula $C_{12}H_{12}N_2O_3$ (232.24). The structural formula is as follows:



Each Phenobarbital Tablet, USP contains 15 mg, 30 mg, 60 mg or 100 mg of phenobarbital, USP. Inactive ingredients are as follows:

15 mg, 30 and 60 mg: Calcium Stearate, Colloidal Silicon Dioxide, Corn Starch, and Microcrystalline Cellulose.

100 mg: Anhydrous Lactose, Colloidal Silicon Dioxide, Corn Starch, Docusate Sodium, Lactose Monohydrate, Magnesium Stearate, Microcrystalline Cellulose, and Sodium Starch Glycolate.

CLINICAL PHARMACOLOGY

Phenobarbital, a long-acting barbiturate, is a central nervous system depressant. In ordinary doses, the drug acts as a sedative and anticonvulsant. Its onset of action occurs within 30 minutes, and the duration of action ranges from 5 to 6 hours. It is detoxified in the liver.

INDICATION AND USAGE

Phenobarbital Tablets, USP are indicated for use as a sedative or anticonvulsant.

CONTRAINDICATIONS

Phenobarbital is contraindicated in patients who are hypersensitive to barbiturates. In such patients, severe hepatic damage can occur from ordinary doses and is usually associated with dermatitis and involvement of parenchymatous organs. A personal or familial history of acute intermittent porphyria represents one of the few absolute contraindications to the use of barbiturates. Phenobarbital is also

contraindicated in patients with marked impairment of liver function, or respiratory disease in which dyspnea or obstruction is evident. It should not be administered to persons with known previous addiction to the sedative/hypnotic group, since ordinary doses may be ineffectual and may contribute to further addiction.

WARNINGS

In small doses, the barbiturates may increase the reaction to painful stimuli. Taken by themselves, the barbiturates cannot be relied upon to relieve pain or even to produce sedation or sleep in the presence of severe pain.

PRECAUTIONS

General Precautions:

Barbiturates induce liver microsomal enzyme activity. This accelerates the biotransformation of various drugs and is probably part of the mechanism of the tolerance encountered with barbiturates. Phenobarbital, therefore, should be used with caution in patients with decreased liver function. This drug should also be administered cautiously to patients with a history of drug dependence or abuse(see DRUG ABUSE AND DEPENDENCE).

Phenobarbital may decrease the potency of coumarin anticoagulants; therefore, patients receiving such concomitant therapy should have more frequent prothrombin determinations. As with other sedatives and hypnotics, elderly or debilitated patients may react to barbiturates with marked excitement, depression, or confusion.

The systemic effects of exogenous hydrocortisone and endogenous hydrocortisone (cortisol) may be diminished by phenobarbital. Thus, this product should be administered with caution to patients with borderline hypoadrenal function, regardless of whether it is of pituitary or of primary adrenal origin.

Information for Patients:

Phenobarbital may impair the mental and/or physical abilities required for the performance of potentially hazardous tasks, such as driving a car or operating machinery. The patient should be cautioned accordingly.

Drug Interactions:

Phenobarbital in combination with alcohol, tranquilizers, and other central nervous system depressants has additive depressant effects, and the patients should be so advised. Patients taking this drug should be warned not to exceed the dosage recommended by their physician. Toxic effects and fatalities have occurred following overdoses of phenobarbital alone and in combination with other central nervous system depressants. Caution should be exercised in prescribing unnecessarily large amounts of phenobarbital for patients who have a history of emotional disturbances or suicidal ideation or who have misused alcohol and other CNS drugs (see OVERDOSAGE).

Usage in Pregnancy:

Pregnancy Category B – Reproduction studies have been performed in animals and have revealed no evidence of impaired fertility or harm to the fetus due to phenobarbital. There are, however, no adequate and well-controlled studies in pregnant women. Because animal reproduction studies are not always predictive of human response, this drug should be used during pregnancy only if clearly needed.

Nursing Mothers:

Caution should be exercised when phenobarbital is administered to a nursing woman.

ADVERSE REACTIONS

The following adverse reactions have been reported:

CNS Depression:

Residual sedation or "hangover", drowsiness, lethargy, and vertigo. Emotional disturbances and phobias may be accentuated. In some persons, barbiturates such as phenobarbital repeatedly produce excitement rather than depression, and the patient may appear to be inebriated. Like other nonanalgesic hypnotic drugs, barbiturates, such as phenobarbital, when given in the presence of pain, may cause restlessness, excitement, and even delirium. Rarely, the use of barbiturates results in localized or diffused myalgic, neuralgic, or arthritic pain, especially in psychoneurotic patients with insomnia. The pain may appear in paroxysms, is most intense in the early morning hours, and is mot frequently located in the region of the neck, should girdle, and upper limbs. Symptoms may last for days after the drug is discontinued.

Respiratory/Circulatory:

Respiratory depression, apnea, circulatory collapse.

Allergic:

Acquired hypersensitivity to barbiturates consists chiefly in allergic reactions that occur especially in persons who tend to have asthma, urticaria, angioedema, and similar conditions. Hypersensitivity reactions in this category include localized swelling, particularly of the eyelids, cheeks, or lips, and erythematous dermatitis. Rarely, exfoliative dermatitis (e.g., Stevens-Johnson syndrome and toxic epidermal necrolysis) may be caused by phenobarbital and can prove fatal. The skin eruption may be associated with fever, delirium, and marked degenerative changes in the liver and other parenchymatous organs. In a few cases, megaloblastic anemia has been associated with the chronic use of phenobarbital.

Other:

Nausea and vomiting; headache.

To report SUSPECTED ADVERSE REACTIONS, contact West-ward Pharmaceutical Corp. at 1-877-233-2001, or the FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

DRUG ABUSE AND DEPENDENCE

Controlled Substance – Phenobarbital is a Schedule IV drug.

Dependence:

Prolonged, uninterrupted use of barbiturates (particularly the short-acting drugs), even in therapeutic doses, may result in psychic and physical dependence. Withdrawal symptoms due to physical dependence following chronic use of large doses of barbiturates may include delirium, convulsions, and death.

OVERDOSAGE

The signs and symptoms of barbiturate poisoning are referable especially to the central nervous system and the cardiovascular system. Moderate intoxication resembles alcoholic inebriation. In severe intoxication, the patient is comatose, the level of reflex activity conforming in a general way to the intensity of the central depression. The deep reflexes may persist for some time despite coexistent coma. The Babinski sign is often positive. The EEG may be of the "burst-suppression" type, with brief periods of electrical silence. The pupils may be constricted and react to light, but late in the courage of barbiturate poisoning they may show hypoxic paralytic dilatation. Respiration is affected early. Breathing may be either slow or rapid and shallow; Cheyne-Stokes rhythm may be present. Respiratory minute volume is diminished, and hypoxia and respiratory acidosis may develop. The blood pressure falls, owing partly to depression of medullary vasomotor centers; partly to a direct action of the drug on the myocardium, sympathetic ganglia, and vascular smooth muscle; partly to hypoxia.

The patient thus develops a typical shock syndrome, with a weak and rapid pulse, cold and clammy skin, and a rise in the hematocrit. Respiratory complications (atelectasis, pulmonary edema, and bronchopneumonia) and renal failure are much dreaded and not infrequent concomitant of severe barbiturate poisoning. There is usually hypothermia, sometimes with temperatures as low as 32°C.

Treatment:

General management should consist of symptomatic and supportive therapy, including gastric lavage, administration of intravenous fluids, and maintenance of blood pressure, body temperature and adequate respiratory exchange. Dialysis will increase the rate of removal of barbiturates from the body fluids. Antibiotics may be required to control pulmonary complications.

DOSAGE AND ADMINISTRATION

Oral Sedative Dose, Adults – 30 to 120 mg daily in 2 or 3 divided doses. Children – 6 mg/kg of body weight daily in 3 divided doses.

Oral Hypnotic Dose, Adults – 100 to 320 mg.

Oral Anticonvulsant Dose, Adults – 50 to 100 mg 2 or 3 times daily.

Children – 15 to 50 mg 2 or 3 times daily.

HOW SUPPLIED

Phenobarbital Tablets, USP 15 mg: White, Round Tablet; Debossed "West-ward 445" on one side and plain on the other side.

Bottles of 100 and 1000 tablets

Phenobarbital Tablets, USP 30 mg: White, Round, Scored Tablet; Debossed "West-ward 450" on one side and Scored on the other side.

Bottles of 100 and 1000 tablets

Phenobarbital Tablets, USP 60 mg: White, Round Tablet; Debossed "WW 455" on one side and plain on the other side.

Bottles of 100 and 1000 tablets

Phenobarbital Tablets, USP 100 mg: White, Round, Scored Tablet; Debossed "WW 458" on one side and Scored on the other side.

Bottles of 100 and 1000 tablets

Store at 20-25°C (68-77°F) [See USP Controlled Room Temperature]. Protect from light and moisture.

Dispense in a tight, light-resistant container as defined in the USP using a child-resistant closure.

Manufactured by:

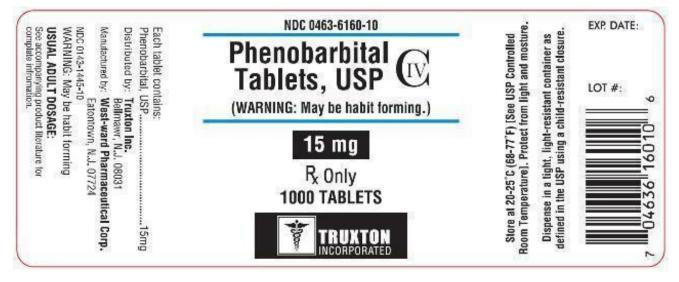
West-ward Pharmaceutical Corp.

Eatontown, NJ 07724

Revised March 2012

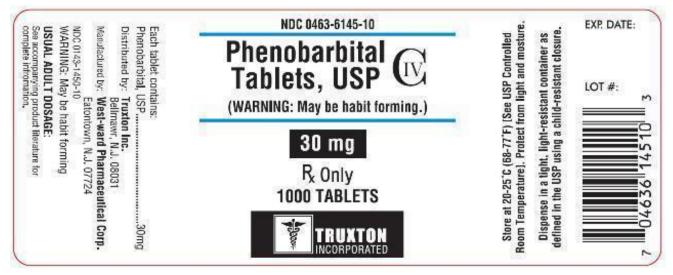
PRINCIPAL DISPLAY PANEL

Phenobarbital Tablets, USP 15 mg 1000s 046-6160



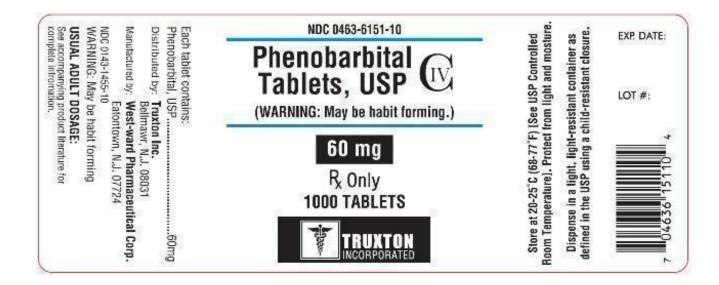
PRINCIPAL DISPLAY PANEL

Phenobarbital Tablets, USP 30mg 1000s 0463-6145



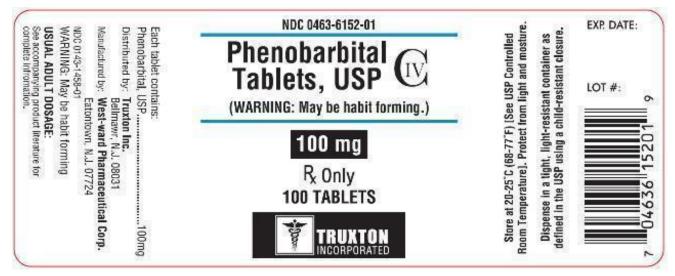
PRINCIPAL DISPLAY PANEL

Phenobarbital Tablets, USP 60 mg 1000s 0463-6151



PRINCIPAL DISPLAY PANEL

Phenobarbital Tablets, USP 100 mg 100s 0463-6152



PHENOBARBITAL					
phenobarbital tablet					
Product Information					
Product T ype	HUMAN PRESCRIPTION DRUG	Item Code (Sour	ce)	NDC	:0463-6160
Route of Administration	ORAL	DEA Schedule		CIV	
Active Ingredient/Active Moi	ety				
In	gredient Name		Basis of Stren	gth	Strength
PHENOBARBITAL (UNII: YQE403BP4)	D) (PHENOBARBITAL - UNII:YQE4	03BP4D)	PHENOBARBITAL		15 mg
Inactive Ingredients					
	Ingredient Name			St	rength

CALCIUM STEARATE (UNII: 776XM7047L)									
SILICON DIO XIDE (UNII: ETJ7Z6 XBU4)									
STARCH, CORN (UNII: 082	STARCH, CORN (UNII: 08232NY3SJ)								
CELLULOSE, MICROCRYS	STALLINE	(UNII: OP1R32D61U)							
Product Characterist	ics								
Color	WHITE	Score				no score			
Shape	ROUND	Size				6 m m			
Flavor		Imprint Co	ode			Westward;445			
Contains									
Packaging									
# Item Code	Pac	kage Description	Mar	keting	Start Date	Ma	rketing E	and Date	
1 NDC:0463-6160-01	100 in 1 H	•		0			8		
2 NDC:0463-6160-10	1000 in 1	BOTTLE							
Marketing Inform	ation								
Marketing Category	Applic	ation Number or Mon	ograph C	itation	Marketing	g Start Date	Marketi	ng End Date	
UNAPPROVED DRUG OTHEI	R				0 3/0 1/20 12				
PHENOBARBITA	L								
phenobarbital tablet									
1									
Product Information									
Product Type HU		HUMAN PRESCRIPTION	AN PRESCRIPTION DRUG Item Code (Sour		ode (Sourc	e)	NDO	2:0463-6145	
Route of Administration	ORAL DEA Sche dule			CIV					
Active Ingredient/Act	ive Moi	ety							
	In	gredient Name				Basis of St	trength	Strength	
PHENOBARBITAL (UNII: YQE403BP4D) (PHENOBARBITAL - UNII: YQE403BP4D) PHENOBARBITAL 30 mg									

Inactive Ingredients	
Ingredient Name	Strength
CALCIUM STEARATE (UNII: 776 XM70 47L)	
SILICON DIO XIDE (UNII: ETJ7Z6 XBU4)	
STARCH, CORN (UNII: O8232NY3SJ)	
CELLULOSE, MICROCRYSTALLINE (UNII: OP1R32D61U)	
Product Characteristics	

Color	WHITE	Score				2 pieces		
Shape	ROUND	Size				6mm		
Flavor		Imprint	Code			Westward;45	0	
Contains								
Packaging								
# Item Code	Pacl	kage Description	Mar	keting	Start Date	Ma	arketing E	nd Date
1 NDC:0463-6145-01	100 in 1 B	OTTLE						
2 NDC:0463-6145-10	1000 in 1	BOTTLE						
Marketing Inform								
Marketing Category	Applic	ation Number or Mo	onograph C	itation		-	Marketi	ng End Date
UNAPPROVED DRUG OTHER	2				0 3/0 1/20 12			
	Ŧ							
PHENOBARBITA	L							
phenobarbital tablet								
Product Information								
Product Type		HUMAN PRESCRIPTIO	IAN PRESCRIPTION DRUG Item Code (So		ode (Sour	Irce) ND ⁴		C:0463-6151
Route of Administration		ORAL	ORAL DEA Schedu		chedule	dule Cr		,
Active Ingredient/Act	ive Moi	ety						
	In	gredient Name				Basis of S	Strength	Strength
PHENOBARBITAL (UNII: YC	E403BP4	D) (PHENOBARBITAL	- UNII:YQE40	3BP4D)		PHENOBAR	BITAL	60 mg
Inactive Ingredients								
0		Ingredient Na	ıme				S	trength
CALCIUM STEARATE (UNII	: 776 XM70	-						3
SILICON DIO XIDE (UNII: ET								
STARCH, CORN (UNII: 0823	32NY3SJ)							
CELLULOSE, MICROCRYS	TALLINE	(UNII: OP1R32D61U)						
Product Characteristi								
Color	WHITE		ore			no	score	
Shape	ROUN					81	nm	
Flavor		Imj	print Code			W	W;455	
Contains								
Packaging								
- uchugnig								

#	Item Code	Package Description	Marketing S	Start Date	Marketing End Date
1	NDC:0463-6151-01	100 in 1 BOTTLE			
2	NDC:0463-6151-10	1000 in 1 BOTTLE			
N	Aarketing Inform	ation			
	Marketing Category	Application Number or Mon	ograph Citation	Marketing Start D	ate Marketing End Date
U	NAPPROVED DRUG OTHER			03/01/2012	
				00/01/2012	

PHENOBARBITAL

phenobarbital tablet

Product Information					
Product Type	HUMAN PRESCRIP	TION DRUG	Item Code (Sourc	e)	NDC:0463-6170
Route of Administration	ORAL		DEA Schedule		CIV
Active Ingredient/Active	Moiety				
	Ingredient Name			Basis of Streng	gth Strengt
PHENOBARBITAL (UNII: YQE40	3BP4D) (PHENOBARBITA	AL - UNII:YQE4	03BP4D)	PHENOBARBITAL	100 mg
Inactive Ingredients					
	Ingredien	t Name			Strength
ANHYDROUS LACTOSE (UNII:	3SY5LH9PMK)				
SILICON DIOXIDE (UNII: ETJ7Z	6 XBU4)				
STARCH, CORN (UNII: 08232N)	/3SJ)				
DOCUSATE SODIUM (UNII: F05	Q2T2JA0)				
LACTOSE MONOHYDRATE (U	NII: EWQ57Q8I5X)				
MAGNESIUM STEARATE (UNII:	70097M6I30)				
CELLULOSE, MICROCRYSTAI	L LINE (UNII: OP1R32D61U	J)			
SODIUM STARCH GLYCOLAT	E TYPE A POTATO (UNI	I: 5856J3G2A2)			
Product Characteristics		-		. .	
	WHITE	Score		2 pieces	5
o mup e	ROUND	Size		10 mm	2
Flavor		Imprint Code	!	WW;458	3
Contains					
Packaging					
# Item Code	Package Description	Max	keting Start Date	Markati	ng End Date

#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1 ND	C:0463-6170-01	100 in 1 BOTTLE		
2 ND	C:0463-6170-10	1000 in 1 BOTTLE		

Marketing Information						
Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date			
UNAPPROVED DRUG OTHER		0 3/0 1/20 12				
UNAPPROVED DRUG OTHER		0 3/0 1/20 12				

Labeler - C.O. Truxton, Inc. (011157559)

Establishment							
Name	Address	ID/FEI	Business Operations				
West-ward Pharmaceutical Corp		001230762	manufacture(0463-6160, 0463-6145, 0463-6151, 0463-6170) , analysis(0463-6160, 0463- 6145, 0463-6151, 0463-6170) , pack(0463-6160, 0463-6145, 0463-6151, 0463-6170)				

Establishment

Name	Address	ID/FEI	Business Operations
Apotheca Inc.		051457844	repack(0463-6160, 0463-6145, 0463-6151, 0463-6170), label(0463-6160, 0463-6145, 0463-6151, 0463-6170)

Revised: 10/2012

C.O. Truxton, Inc.