Tsumura & Co.

Revised: March 2013 (5th version)

Standard Commodity Classification No. of Japan 875200

- Kampo-preparation-

TSUMURA Tokito Extract Granules for Ethical Use

<tokito>

	Storage	
Store in	light-resistant,	air-tight con-
tainers.		

Expiration date		
Use before the expiration date indi-		
cated on the container and the outer		
package.		

Approval No.	(61AM)3294
Date of listing in the NHI reimbursement price	October 1986
Date of initial marketing in Japan	October 1986

DESCRIPTION

Composition	7.5 g of TSUMURA	Tokito extract granules con-	
	tains 4.75 g of a dried extract of the following mixed		
	crude drugs.		
	JP Japanese Angelica	Root 5.0 g	
	JP Pinellia Tuber 5.0 g		
	JP Cinnamon Bark 3.0 g		
	JP Magnolia Bark 3.0 g		
	JP Peony Root 3.0 g		
	JP Ginseng 3.0 g		
_	JP Astragalus Root 1.5 g		
	JP Processed Ginger 1.5 g		
	JP Zanthoxylum Fruit 1.5 g		
	JP Glycyrrhiza 1.0 g		
	(JP: The Japanese Pharmacopoeia)		
		JP Magnesium Stearate	
	Inactive ingredients	JP Lactose Hydrate	
		Sucrose Esters of Fatty Acids	
Description	Dosage form	Granules	
	Color	Light brown	
	Smell	Characteristic smell	
	Taste	Slightly sweet and astringent	
	ID code	TSUMURA/102	

INDICATIONS

TSUMURA Tokito Extract Granules (hereafter TJ-102) is indicated in patients who have a feeling of coldness in the back and feeling of enlarged abdomen or abdominal pain

DOSAGE AND ADMINISTRATION

The usual adult dose is 7.5 g/day orally in 2 or 3 divided doses before or between meals. The dosage may be adjusted according to the patient's age and body weight, and symptoms.

PRECAUTIONS

- 1. Careful administration (TJ-102 should be administered with care in the following patients.)
 - (1) Patients with an extremely weak gastrointestinal tract [Anorexia, epigastric distress, nausea, diarrhea, etc. may occur.]

(2) Patients with anorexia, nausea or vomiting [These symptoms may be aggravated.]

2. Important Precautions

- (1) When TJ-102 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 TJ-102 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 TJ-102 is coadministered with other Kampopreparations (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 (TJ-102 should be administered with care when coadministered with the following drugs.)

Drugs	Signs, Symptoms, and Treatment	Mechanism and Risk Factors
(1) Preparations containing Glycyrrhiza(2) Preparations containing glycyrrhizinic acid or glycyrrhizinates	Pseudoaldosteronism is likely to occur. Besides, myopathy is likely to occur as a result of hypokale- mia. (Refer to the section "Clinically signifi- cant adverse reac- tions".)	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.

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4. Adverse Reactions

TJ-102 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.

(2) Other adverse reactions

	Incidence unknown	
Hypersensitivity Note 1)	Rash, Redness, Pruritus, Uriticaria, etc.	
Gastrointestinal	Anorexia, Epigastric distress, Nausea, Diarrhea, etc.	

Note 1) 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 TJ-102 in pregnant women has not been established. Therefore, TJ-102 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 TJ-102 in children has not been established. [Insufficient clinical data]

8. Other Precautions

Eczema, dermatitis, etc. may be aggravated.

PACKAGING

Bottles of 500 g 2.5 g \times 42 packets 2.5 g \times 189 packets

REQUEST FOR LITERATURE SHOULD BE MADE TO:

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Manufactured and Distributed by:

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