

Product Information

URAL

COMPOSITION

Each 4 g contains Sodium Bicarbonate 1.76 g, Anhydrous Sodium Citrate 0.63 g, Anhydrous Citric Acid 0.72 g, Tartaric Acid 0.89 g.

Also contains Nature Identical Lemon Flavour Oil, Terpeneless and Saccharin Sodium.

ACTIONS

Urinary and gastric alkaliniser

INDICATIONS

Urinary alkalinisation where indicated in the treatment of urinary tract infection; symptomatic relief of dysuria; to enhance the action of certain antibiotics, especially some sulphonamides, streptomycin, kanamycin, gentamicin; in gout especially when treated with uricosurics, and possibly allopurinol; symptomatic treatment of gastric hyperacidity.

CONTRA-INDICATIONS

Renal failure or hypernatraemia; in conjunction with hexamine mandelate or hexamine hippurate therapy because an acid urine is needed.

Caution is advised in overt and occult cardiac failure. Concomitant use of urinary alkalinisers and quinolone antibiotics should be avoided; crystalluria may be more likely to occur in alkaline urine.

PRECAUTIONS

This preparation contains 644 mg of sodium per sachet which should be taken into account by those on a low sodium diet.

Ural should be used cautiously in patients with cardiac failure, hypertension, impaired renal function, peripheral and pulmonary edema and preeclampsia.

The clinical condition of the patient should be evaluated and laboratory determinations (eg. serum electrolytes, acid-base balance) obtained periodically during Ural therapy, particularly in patients with renal disease.

DRUG INTERACTIONS

General: Alkalisiation of the urine due to the use of Ural, theoretically, may result in a decreased therapeutic effect of the following medications: chlorpropamide, lithium, salicylates and tetracyclines. Alternatively, alkalisiation of the urine due to the use of Ural, theoretically, may result in an increased therapeutic effect of the following medications: amphetamines, ephedrine/pseudoephedrine.

Antacids: Concurrent use of antacids with citrates may result in systemic alkalosis. Concomitant administration of antacids with sodium citrate and sodium bicarbonate may promote the development of calcium stones in patients with uric acid stones and may also cause hypernatremia. Concurrent use of aluminium-containing antacids with citrate salts can increase aluminium absorption, possibly resulting in acute aluminium toxicity, especially in patients with renal insufficiency.

Quinolones: Citrates may reduce the solubility of ciprofloxacin, norfloxacin or ofloxacin in the urine. Patients should be observed for signs of crystalluria and nephrotoxicity.

Laxatives: Concurrent administration of citrates with laxatives may have an additive effect.

Pregnancy:

Studies regarding the effect of citrates on pregnancy have not been done.

Nursing Mothers:

Caution should be exercised when administered to a nursing mother.

ADVERSE REACTIONS

The tartrate component of Ural may be incompletely absorbed. Because of this Ural may exert a mild laxative effect. Prolonged and excessive use may cause a systemic alkalosis and/or hypernatraemia.

DOSAGE AND ADMINISTRATION

4 g to 8 g (1 to 2 sachets) dissolved in cold water four times daily or as prescribed.

PACK

Effervescent granules, 28 x 4 g sachets per pack.

No Restriction-Any State and A.C.T.

SPONSOR

Aspen Pharma Pty Ltd
34-36 Chandos Street,
St. Leonards NSW 2065
Australia

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