

Favivir®

Favipiravir INN

Description

Favipiravir is a drug the use of which is considered only when there is an outbreak of novel or re-emerging influenza virus infections in which other anti-influenza virus agents are not effective or insufficiently effective and prescribe only to appropriate patients.

Mode of action

The mechanism of actions is related to the selective inhibition of viral RNA-dependent RNA polymerase.

Pharmacokinetics

Absorption: The bioavailability of Favipiravir is almost complete at 97.6%. The mean C_{max} for the recommended dosing schedule of Favipiravir is 51.5 ug/mL.

Distribution: The apparent volume of distribution of Favipiravir is 15 - 20L.

Metabolism: Favipiravir is extensively metabolized with metabolites excreted mainly in the urine. The antiviral undergoes hydroxylation primarily by aldehyde oxidase and to a lesser extent by xanthine oxidase to the inactive metabolite.

Elimination: Favipiravir's metabolites are primarily renally cleared.

Half-life: The elimination half-life of Favipiravir is estimated to range from 2 to 5.5 hours.

Protein binding: Favipiravir is 54% plasma protein-bound. 65% is bound to serum albumin and 6.5% is bound to α 1-acid glycoprotein.

Composition

Favivir® 200 mg Tablet: Each tablet contains Favipiravir INN 200 mg.

Indications

Favipiravir has shown activity against influenza viruses, West Nile virus, yellow fever virus, foot-and-mouth disease virus as well as other flaviviruses, arenaviruses, bunyaviruses and alphaviruses. Novel or re-emerging influenza virus infections (limited to cases in which other anti-influenza virus agents are not effective or insufficiently effective).

Dosage & administration

The usual dosage of Favipiravir for adults is 1600 mg orally twice daily from day 1 followed by 600 mg orally twice daily from day 2-10. The total administration period should be 10 days.

Contraindications

Favipiravir is contraindicated in the following patients:

1. Women known or suspected to be pregnant.
2. Patients with a history of hypersensitivity to any ingredient of the drug.

Side effects

Major adverse reactions included increase of blood uric acid level, diarrhea, decrease of neutrophil, increase of Aspartate aminotransferase (AST) (GOT), increase of alanine aminotransferase (ALT) (GPT).

Use in pregnancy & lactation

Not recommended in pregnancy and lactation.

Precautions

The administration should be started promptly after the onset of influenza-like symptoms. Patients with gout or a history of gout, and patients with hyperuricaemia. Blood uric acid level may increase, and symptoms may be aggravated.

Drug interactions

Favipiravir is not metabolized by cytochrome P-450 (CYP), mostly metabolized by aldehyde oxidase (AO) and partly metabolized by xanthine oxidase (XO). The drug inhibits AO and CYP2C8, but does not induce CYP. Favipiravir should be administered with care when co-administered with the following drugs: Pyrazinamide, Repaglinide, Theophylline, Fampiclovir, Sulindac.

Over dosage

Symptoms of overdose appear to include but are not limited to reduced body weight, vomiting, and decreased locomotor activity.

Storage

Store in a cool (Below 25°C temperature) and dry place protected from light.

Packaging

Favivir® 200 mg Tablet: Each carton contains 10X1 tablet in Alu- Alu blister in Alu-Alu sachet pack.



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Rupatali, Barishal, Bangladesh.
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