



Prednol & Prednol-a

Prednol cream 30 g / Prednol ointment 30 g
Prednol-a cream 30 g / Prednol-a ointment 30 g

COMPOSITION: Each tube contains 0.125 % prednacinolone.

Each tube contains 0.125 % prednacinolone and 3 % iodochlorhydroxyquin (vioform).

PHARMACOLOGICAL PROPERTIES:

- A non-flourinated local corticosteroid devoid of the adverse effects of flourinated corticost roids.
- Low systemic effects, very potent local effects.
- Since Prednol-a formulation contains an antiseptic, iodochlorhydroxyquin, has antibacterial and antifungal effects.
- Provides economical therapy.

INDICATIONS:

Prednol cream/ointment;

- Contact, chronic, allergic seborrheic dermatitis
- Nummular acute or chronic eczema
- Psoriasis
- Anogenital and senile pruritus
- Dyshidrosis
- Sycosis
- Neurodermatitis
- Lichen ruben planus
- Lichen simplex chronicus
- Sun burns
- Erythoderma
- Diaper dermatitis

Prednol-a cream/ointment;

- Contact, chronic, allergic seborrheic dermatitis
- Nummular acute or chronic eczemas
- Psoriasis
- Anogenital or senile pruritus
- Lichen ruben planus
- Lichen simplex chronicus with bacterial and/or fungal infections

CONTRAINDICATIONS: Should not be used in patients receiving live virus vaccination.

WARNINGS AND PRECAUTIONS: Dermal absorption of local corticosteroids during administration over a large surface area or for prolonged periods of time may cause reversible hypothalamus-pituitary-adrenal cycle suppression, signs of Cushing syndrome, hyperglycemia and glucosuria. Upon discontinuation of the drug, these signs return to normal. Rarely, due to the sudden discontinuation of therapy, systemic corticosteroid therapy may be required in some cases. The growth and development of infants and children should be closely observed during prolonged treatments because corticosteroids can cause growth suppression in infants, children and adolescents.



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Therefore, therapy should be administered according to the recommendations and under the monitoring of the physician for short periods at minimum doses when possible. Corticosteroids may mask some signs of infections or may cause resistance to therapy. An appropriate antibiotic should be added to therapy in such cases. Corticosteroids, due to their immunosuppressive effects, have a negative effect on T-cells and macrophage function and may facilitate the emergence of latent diseases. Patients should not be exposed to direct sunlight while receiving treatment. In case of dermatological infections, an appropriate antibacterial or antifungal therapy should be co-administered. If response is obtained in an acceptable period of time, local corticosteroid administration should be discontinued. If irritation develops, the drug should be discontinued. Any contact with the eyes should be avoided. **Administration during pregnancy or lactation:** Should not be used during pregnancy unless there is a medical necessity. If it must be used, it should be given under the surveillance of a physician on a small surface for a short period of time.

SIDE EFFECTS / ADVERSE EFFECTS: Burning, itching, skin irritation and/or dryness, folliculitis, acne, eruption, skin atrophy, hyperpigmentation, perioral dermatitis, allergic contact dermatitis, maceration of skin and secondary infections can be seen rarely during local corticosteroid administration. It can cause photosensitivity.

DOSAGE AND ADMINISTRATION: Should be applied to the affected area as a thin film 2 or 3 times a day.

STORAGE CONDITIONS: Should be kept out reach of children, at room temperature (< 25°C) and in its package.

AVAILABLE FORMS:

PREDNOL cream/ointment, 30 g tube

PREDNOL-A cream/ointment, 30 g tube

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