



Machkhan®

Candesartan cilexetil+Amlodipine besylate



Drug information

Rx only

[DOSAGE FORMS AND STRENGTHS] Machkhan tab. 8/5mg Candesartan Cilexetil 8.00mg/Amlodipine Besylate 6.935mg/as Amlodipine 5mg), Machkhan tab. 16/5mg - Candesartan Cilexetil 16.00mg/Amlodipine 5mg, Machkhan tab. 16/5mg - Candesartan Cilexetil 16.00mg/Amlodipine Besylate 6.935mg/as Amlodipine 5mg), Machkhan tab. 16/10mg - Candesartan Cilexetil 16.00mg/Amlodipine Besylate 13.87mg (as Amlodipine 10mg) [INDICATIONS AND USAGE] Primary(Essential) hypertension NOT adequately controlled with on Amlodipine or Candesartan cilexetil monotherapy [Dosage and Administration] The recommended dose is 1 tablet once daily to be taken with some water regardless of meal, preferably at the same time each dayle.g. in the morning). Individual dose titration with the components (i.e. amlodipine and

candesartan cilexetii) is recommended before changing to the fixed dose combination. When clinically appropriate, direct change from monotherator to the fixed dose combination may be considered. • 8/5mg: MACHKHAN tab. 8/5mg may be administered in patients whose blood pressure is not adequately controlled with candesartan cilexetil 8mg or amlodipine 5mg alone. • 16/5mg: MACHKHAN tab. 16/5mg may be administered in patients whose blood pressure is not adequately controlled with candesartan cilexetil 16mg or amlodipine 5mg alone. • 16/10mg: MACHKHAN tab. 16/10mg may be administered in patients whose blood pressure is not adequately controlled with candesartan cilexetil 16mg or amlodipine 10mg alone. For convenience, patients receiving candesartan cilexetil and amlodipine from

separate tablets may be switched to MACHKHAN tab. containing the same individual components doses [WARNINGS AND PRECAUTIONS] When used in pregnancy drugs that act directly on the renin-angiotensinaldosterone(RAAS) system can cause injury and even death to the fetus and neonates. When pregnancy is detected, MACHKHAN tab. should be discontinued as soon as possible. (see 7. Use in pregnancy and nursing mothers) * For further details, please refer to the insert paper.

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