Healthy Life forever with 9-VIT

Vitamins in One Sterile Solution

9-VIT

MULTIVITAMIN INFUSION

Oil Soluble:

1. Vitamin A (as palmitate)
2. Vitamin D3 (Cholecalciferol)
3. Vitamin E (Alpha Tocopheryl Acetate)

Water Soluble:

4. Vitamin B1 (Thiamine Hydrochloride)
5. Vitamin B6 (Pyridoxine Hydrochloride)
6. Vitamin B2 (Riboflavin Sodium Phosphate)
7. Vitamin C (Ascorbic Acid)
8. Nicotinamide
9. Dexapanthenol

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COMPOSITION:

Each ml contains:

Oil-Soluble Vitamins

Vitamin A BP (as palmitate)	1100 IU
Vitamin D BP (Cholecalciferol)	100 IU
Vitamin E BP (Alpha Tocopheryl Acetate)	0.50 mg

Water-Soluble Vitamins

Vitamin B_1 BP (Thiamine Hydrochloride)	5.0 mg
Vitamin B_6 BP (Pyridoxine Hydrochloride)	1.65 mg
Vitamin B_2 BP (Riboflavin Sodium Phosphate)	1.40 mg
Vitamin C BP (Ascorbic Acid)	50.0 mg
Nicotinamide BP	10.0 mg
Dexapanthenol BP	2.5 mg

*Benzyl Alcohol BP (as preservative) 1.0% w/v
(Appropriate Overages of Vitamins added to compensate for loss on storage.)

The Abbreviated Prescribing Information

INDICATIONS:
9-VIT is indicated in surgery, extensive burns, fractures, and other trauma, severe infectious diseases and comatose states which may provoke a stress situation with profound alterations in the body's metabolic demands and consequent tissue depletion of nutrients. When administered under proper dilution contributes toward the intake of these vitamins that are necessary to maintain the body's normal resistance and repair processes.

The Physician should not await the development of clinical signs of vitamin deficiency before initiating vitamin therapy.

Patients with multiple vitamin deficiencies or with markedly increased requirements may be given multiples of the daily dosage for two or more days as indicated by the clinical status. Clinical testing indicates that some patients do not maintain adequate levels of certain vitamins when this formulation is recommended amounts to the sole source of vitamins.

DOSAGE AND ADMINISTRATION:
9-VIT is used for immediate use in adults and children aged 11 years and above when added directly to intravenous infusion fluids like dextrose, saline or similar infusion solutions. 9-VITshould not be given as a direct, undiluted intravenous injection as it may give rise to dizziness, faintness and possible tissue irritation.

9-VIT should be added directly to 500ml and preferably 1000 ml of intravenous solutions. Discard any unused portion. 9-VIT is diluted in an intravenous infusion, the resulting solution should be refrigerated unless it is to be used immediately. The solution should be used within 24 hours after dilution. Some of the vitamins in this product particularly A, D and riboflavin are light sensitive; therefore, exposure to light should be minimized.

SIDE EFFECTS:
There have been rare reports of anaphylactoid reactions following large intravenous doses of thiamine. The risk however is negligible if thiamine is co-administered with other vitamins in the B group. There have been no reports of fatal anaphylactoid reactions associated with 9-VIT.

DRUG-INTERACTIONS:
Several vitamins have been reported to decrease the activity of certain antibiotics. Thiamine, Riboflavin, Pyridoxine, Niacinamide and Ascorbic acid have been reported to decrease the antibiotic activity of Erythromycin, Kanamycin, Streptomycin, Doxycycline and Lincomycin. Some of the vitamins in 9-VIT may react with vitamin K bisulfite or sodium bisulfite; if bisulfite solutions are necessary, patients should be monitored for vitamin A and thiamine deficiencies.

CLINICAL INTERACTIONS:
A number of interactions between vitamins and drugs have been reported which may affect the metabolism of either agent. The following are examples.

Pyridoxine may decrease the efficacy of levodopa by increasing its metabolism. Concomitant administration of hydralazine or isoniazid may increase pyridoxine requirement. In patients with pernicious anemia, the hematologic response to vitamin B12 therapy may be inhibited by concomitant administration of chloramphenicol. Ascorbic acid in the urine may cause false negative urine glucose determinations.

PRECAUTIONS:
In patients receiving parenteral multivitamins, blood vitamin concentrations should be periodically monitored to determine if vitamin deficiencies or excesses are developing. 9-VIT should be aseptically transferred to the infusion fluid.

PREGNANCY:
Pregnant women should follow the recommended dose for their condition, because their vitamin requirements may exceed those of nonpregnant women.

NURSING MOTHER:
Lactating women should follow the recommended dose for their condition, because their vitamin requirements may exceed those of non lactating women.

PEDIATRIC USE:
Safety and effectiveness in children below the age of 11 years have not been established.

PRESENTATION:
10ml Ampoule in clear plastic tray in individual carton.

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