Material Safety Data Sheet
Omeprazole Delayed-release Capsules, USP

Strength: 10/20/40 mg per Capsule    Pack Size: 30/90/100/500/1000 capsules per bottle    Revision No.: 00

---

**EMERGENCY OVERVIEW**

Omeprazole Delayed-release capsule for oral administration that contains omeprazole and excipients generally considered to be non-toxic and non-hazardous in small quantities and under conditions of normal occupational exposure.

---

**Section 1. Identification of the substance**

**Identification of the product**

<table>
<thead>
<tr>
<th><strong>Product name:</strong></th>
<th>Omeprazole Delayed-release Capsules, USP</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Formula:</strong></td>
<td>C₁₇H₁₉N₃O₅S</td>
</tr>
<tr>
<td><strong>Chemical Name:</strong></td>
<td>substituted benzimidazole, 5-methoxy-2-[(4-methoxy-3, 5-dimethyl-2-pyridinyl) methyl] sulfinyl]1H-benzimidazole</td>
</tr>
<tr>
<td><strong>Therapeutic Category</strong></td>
<td>Proton Pump Inhibitor (PPI)</td>
</tr>
</tbody>
</table>

---

**Manufacturer / supplier identification**

**Company:** Cadila Healthcare Ltd. Ahmedabad, India

**Contact for information:** Tel.: +91 79 6868100   Fax: +91 79 3750319

**Emergency telephone No.** Tel.: +91 79 6868100

---

**Section 2. Composition / information on ingredients**

<table>
<thead>
<tr>
<th><strong>Component</strong></th>
<th><strong>Exposure Limit</strong></th>
<th><strong>CAS No.</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Principle Component:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Omeprazole</td>
<td>Not Found</td>
<td>73590-58-6</td>
</tr>
<tr>
<td><strong>Inactive Ingredients:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Acetone</td>
<td>Not Found</td>
<td>67-64-1</td>
</tr>
<tr>
<td>di-sodium hydrogen phosphate dihydrate</td>
<td>Not Found</td>
<td>10028-24-7</td>
</tr>
</tbody>
</table>
**Section 3. Health Hazards Information**

**Dose and Administration**

Omeprazole delayed-release capsules should be taken before eating. Patients should be informed that the omeprazole delayed-release capsules should be swallowed whole.

- **Short-Term Treatment of Active Duodenal Ulcer** - The recommended adult oral dose of omeprazole is 20 mg once daily.

- **H. pylori Eradication for the Reduction of the Risk of Duodenal Ulcer Recurrence**

  **Triple Therapy (omeprazole/clarithromycin/amoxicillin)**
  The recommended adult oral regimen is omeprazole 20 mg plus clarithromycin 500 mg plus amoxicillin 1000 mg each given twice daily for 10 days. In patients with an ulcer present at the time of initiation of therapy, an additional 18 days of omeprazole 20 mg once daily is recommended for ulcer healing and symptom relief.

  **Dual Therapy (omeprazole/clarithromycin)**
  The recommended adult oral regimen is omeprazole 40 mg once daily plus clarithromycin 500 mg three times daily for 14 days. In patients with an ulcer present at the time of initiation of therapy, an additional 14 days of omeprazole 20 mg once daily is recommended for ulcer healing and symptom relief.

- **Gastric Ulcer**
  The recommended adult oral dose is 40 mg once daily for 4 to 8 weeks.

- **Gastroesophageal Reflux Disease (GERD)**
  The recommended adult oral dose for the treatment of patients with symptomatic GERD and no esophageal lesions is 20 mg daily for up to 4 weeks. The recommended adult oral dose for the treatment of patients with erosive esophagitis and accompanying symptoms due to GERD is 20 mg
daily for 4 to 8 weeks.

- **Maintenance of Healing of Erosive Esophagitis**
The recommended adult oral dose is 20 mg daily.

- **Pathological Hypersecretory Conditions**
The dosage of omeprazole in patients with pathological hypersecretory conditions varies with the individual patient. The recommended adult oral starting dose is 60 mg once daily. Doses should be adjusted to individual patient needs and should continue for as long as clinically indicated. Doses up to 120 mg three times daily have been administered. Daily dosages of greater than 80 mg should be administered in divided doses. Some patients with Zollinger-Ellison syndrome have been treated continuously with omeprazole for more than 5 years.

- **Pediatric Patients**
For the treatment of GERD and maintenance of healing of erosive esophagitis, the recommended daily dose for pediatric patients 1 to 16 years of age is as follows:

<table>
<thead>
<tr>
<th>Patient Weight</th>
<th>Omeprazole Daily Dose</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 &lt; 10 kg</td>
<td>5 mg</td>
</tr>
<tr>
<td>10 &lt; 20 kg</td>
<td>10 mg</td>
</tr>
<tr>
<td>≥20 kg</td>
<td>20 mg</td>
</tr>
</tbody>
</table>

Alternative administrative options can be used for pediatric patients unable to swallow an intact capsule

- **Alternative Administration Options**
For patients who have difficulty swallowing capsules, the contents of an omeprazole delayed-release capsule can be added to applesauce. One tablespoon of applesauce should be added to an empty bowl and the capsule should be opened. All of the pellets inside the capsule should be carefully emptied on the applesauce. The pellets should be mixed with the applesauce and then swallowed immediately with a glass of cool water to ensure complete swallowing of the pellets. The applesauce used should not be hot and should be soft enough to be swallowed without chewing. The pellets should not be chewed or crushed. The pellets/applesauce mixture should not be stored for future use.

**Use with clopidogrel**
Avoid concomitant use of clopidogrel and omeprazole. Coadministration of clopidogrel with 80 mg omeprazole, a proton pump inhibitor that is an inhibitor of CYP2C19, reduces the pharmacological activity of clopidogrel if given concomitantly or if given 12 hours apart.

**Over Dose Effect**
confusion, drowsiness, blurred vision, tachycardia, nausea, vomiting, diaphoresis, flushing, headache, dry mouth, and
Material Safety Data Sheet  
Omeprazole Delayed-release Capsules, USP  

Strength: 10/20/40 mg per Capsule  
Pack Size: 30/90/100/500/1000 capsules per bottle  
Revision No.: 00  

Medical Conditions  
Tell your doctor about all your medical conditions, including if you:
- have been told that you have low magnesium levels in your blood
- have liver problems
- are pregnant or plan to become pregnant. It is not known if omeprazole will harm your unborn baby. Talk to your doctor if you are pregnant or plan to become pregnant.
- are breastfeeding or planning to breastfeed. You and your doctor should decide if you will take omeprazole or breastfeed. You should not do both.

Tell your doctor about all of the medicines you take including prescription and non-prescription drugs, anti-cancer drugs, vitamins and herbal supplements. Omeprazole may affect how other medicines work, and other medicines may affect how omeprazole works. In some cases, a drug you may be taking may need to be temporarily withdrawn. Especially tell your doctor if you take: atazanavir (Reyataz®), nelfinavir (Viracept®), saquinavir (Fortovase®), cilostazol (Pletal®), ketoconazole (Nizoral®), voriconazole (Vfend®), ampicillin (Unasyn®), products that contain iron, warfarin (Coumadin®), digoxin (Lanoxin®, Lanoxincaps®), tacrolimus (Prograf®), diazepam (Valium®), phenytoin (Dilantin®), disulfiram (Antabuse®), clopidogrel (Plavix®), St. John’s Wort (Hypericum perforatum), Rifampin, erlotinib, methotrexate

Contraindications  
Omeprazole delayed-release capsules are contraindicated in patients with known hypersensitivity to substituted benzimidazoles or to any component of the formulation. Hypersensitivity reactions may include anaphylaxis, anaphylactic shock, angioedema, bronchospasm, interstitial nephritis, and urticaria

Pregnancy Comments  
There are no adequate and well-controlled studies on the use of omeprazole in pregnant women. This drug should be used during pregnancy only if clearly needed.

Pregnancy Category  
Pregnancy Category C

Section 4. First aid measures

General  
Inhalation: Remove to fresh air. If not breathing give artificial respiration. If breathing is difficult, give oxygen. Seek medical attention.

Contact with skin: Immediately wash skin with soap and copious amounts of water for at least 15 minutes. If irritation persists, seek medical attention.

Contact with eyes: Immediately flush eyes with copious amounts of water for at least 15 minutes. Seek medical advice

Ingestion: If swallowed, wash out mouth with water, provided person is conscious. Seek medical advice. Remove and wash/dispose of contaminated clothing promptly.
Overdose Treatment
No specific antidote for omeprazole overdosage is known. Omeprazole is extensively protein bound and is, therefore, not readily dialyzable. In the event of overdosage, treatment should be symptomatic and supportive.

As with the management of any overdose, the possibility of multiple drug ingestion should be considered.

Section 5. Fire – fighting measures

<table>
<thead>
<tr>
<th>Flash point</th>
<th>Not Found</th>
<th>Upper Flammable limit:</th>
<th>Not Found</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auto-Ignition Temperature:</td>
<td>Not Found</td>
<td>Lower Flammable limit:</td>
<td>Not Found</td>
</tr>
<tr>
<td>Extinguishing Media</td>
<td>Water Spray, dry chemical, carbon dioxide or foam as appropriate for surrounding fire and material.</td>
<td>Fire and Explosion Hazard</td>
<td>This material is assumed to be combustible.</td>
</tr>
</tbody>
</table>

Fire Fighting Procedure
As with all fires, evacuate personnel to a safe area. Fire fighter should use self-contained breathing equipment and protective clothing.

Section 6. Accidental Release Measures

Spill Response
Wear approved respiratory protection, chemically compatible gloves and protective clothing. Wipe up spillage or collect spillage using high efficiency vacuum cleaner. Avoid breathing dust. Place spillage in appropriately labelled container for disposal. Wash spill site.

Section 7. Handling and Storage

Storage
Store at 20° to 25°C (68° to 77°F). Protect from light and moisture. Keep in a tightly closed container. Dispense in a tight, light-resistant container.

Section 8. Exposure controls and personal protection

Respiratory Protection
Protection from inhalation is not normally necessary. If ventilation is inadequate or dust is likely to generate, use of suitable dust mask would be appropriate.

Skin Protection
Skin protection is not normally necessary, however it is good practice to avoid contact with chemical to use suitable gloves when handling.

Eye protection
Eye protection is not normally necessary. If concerned wear protective goggles or glasses. Wash hands prior to touching eye and in particular handling contact lenses.

Protective Clothing
Protective clothing is not normally necessary, however it is good practice to use apron.
Section 9. Physical and chemical properties

**Appearance**

Omeprazole Delayed-release Capsules, USP 10 mg are white to off-white free flowing pellets filled in size ‘3’ hard gelatin capsules with amethyst purple-colored cap printed with “ZA-09” in black ink & white body printed with “10 mg” in black ink.

Omeprazole Delayed-release Capsules, USP 20 mg are white to off-white free flowing pellets filled in size ‘2’ hard gelatin capsules with tan-colored cap printed with “ZA-10” in black ink & white body printed with “20 mg” in black ink.

Omeprazole Delayed-release Capsules USP, 40 mg are off-white to pale brown free flowing pellets filled in size’1’ hard gelatin capsules with Amethyst purple colored cap printed with “ZA-11” in black ink & white body printed with “40 mg” in black ink.

<table>
<thead>
<tr>
<th>Solubility</th>
<th>Odour</th>
<th>Other information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Freely soluble in ethanol and methanol, and slightly soluble in acetone and isopropanol and very slightly soluble in water.</td>
<td>No Data Available</td>
<td>Not Applicable</td>
</tr>
</tbody>
</table>

**Section 10. Stability and Reactivity**

**Condition to avoid**

Avoid exposure to extreme heat, light and moisture. Stable under temperature if Store at 20° to 25°C

**Decomposition Products**

No Data Available

**Incompatibilities**

Reactive with oxidizing substance.

**Section 11. Toxicological information**

**General**

Handling of formulated product is not expected to cause any toxicological affects. The data pertains to the ingredient in formulations, rather than this specie formulation.

**Target organ other**

Eye contact, Skin contact and inhalation is not great risk

**Section 12. Ecological information**

Do not allow product to enter drinking water supplies, waste water or soil
Section 13. Disposal Consideration

Disposal  Dispose the waste in accordance with all applicable Federal, State and local laws.

Section 14. Transport Information

May be shipped normally as a non hazardous material.

Section 15. Regulatory Information

Generic Medicine. Approved by USFDA & the ANDA Number is. 91352

Section 16. Other information

None


The information contained herein is based on the state of our knowledge. It characterises the product with regard to the appropriate safety precautions. It does not represent a guarantee of the properties of the product.