

INFORMATION FOR THE PATIENT

DRUGS-ABOUT.COM

APO-TICLOPIDINE TICLOPIDINE HYDROCHLORIDE TABLET

PLEASE READ CAREFULLY

APO-TICLOPIDINE (ticlopidine hydrochloride) is usually prescribed to patients who have had a previous stroke or who experienced one or more warning episodes indicating an increased risk of stroke, such as transient ischemic attacks, ischemic neurological changes or minor strokes. In clinical trials, ticlopidine has been shown to decrease both the stroke mortality and the occurrence of first or repeat stroke in such patients.

APO-TICLOPIDINE contains ticlopidine hydrochloride, a drug that reduces the ability of blood platelets to stick to each other and to the walls of blood vessels. This action reduces the tendency of blood to clot in unwanted places such as in narrowed blood vessels.

APO-TICLOPIDINE has been prescribed to you **to be used strictly as directed by your physician**. As certain adverse reactions may occur in some patients (see below), **you will be required to have a blood test** (to measure your blood count and some biochemical indices) **before you start taking APO-TICLOPIDINE and then every 2 weeks for the first 3 months you are on APO-TICLOPIDINE**. If you stop taking APO-TICLOPIDINE for any reason within the first 3 months, you will still need to have your blood tested for an additional 2 weeks after you have stopped taking APO-TICLOPIDINE. It is also very important that you report to your physician immediately if you have noticed the following:

- **any sign of infection** such as fever, chills, sore throat, ulcers in the mouth, etc.
- **abnormal bleeding and bruising**.
- signs of **jaundice** (yellow eyes or skin, dark urine or light coloured stool).
- **skin rash**.
- persistent **diarrhea**.

If your doctor is not immediately available, discontinue the medication until he/she can be consulted with. In addition, **discuss with your physician any other medication** you may be required to take (ticlopidine is known to interfere with some other drugs).

If you are to have any surgery or dental extraction, **inform the surgeon or dentist that you are on APO-TICLOPIDINE**, which may cause prolonged bleeding.

Adverse Reactions

About 20% of patients will experience some side effects caused by APO-TICLOPIDINE. Most side effects develop during the first three months of treatment and they usually disappear within 1 - 2 weeks after ticlopidine hydrochloride is stopped. The potentially more serious adverse reactions are the following:

- Decreased white blood count occurs in about 2% of patients on ticlopidine treatment. This condition will cause reduced resistance to infection. Regular blood tests are necessary to detect this side effect early and stop the medication. In less than 1% of patients, the white blood count can drop to very low levels, but discontinuation of ticlopidine therapy will almost always result in complete recovery.
- Increased bleeding tendency manifested by prolonged bleeding from traumatic or surgical wounds, bruising, bleeding into the gastrointestinal tract (manifested by black stool), etc. occurs rarely, in less than 1% of patients, but has to be watched for if you have a history of bleeding disorders, gastroduodenal ulcers, etc. (discuss your medical history with your physician), or if you are about to have a surgical procedure (do not forget to inform the surgeon or dentist).
- Very rarely jaundice and/or liver failure, usually reversible upon withdrawal of ticlopidine, have been reported.

More common side effects are upset stomach - (to minimize this possibility, **always take APO-TICLOPIDINE with meals**), diarrhea and skin rashes.

As with any drug, the possibility of an unexpected, previously unknown, potentially serious adverse reaction can never be ruled out.

If you do not understand this information or any part of it, ask your physician.

Warning

Use only as directed.

Keep out of reach of children.

