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PRESS RELEASE

FOR IMMEDIATE RELEASE

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Contact:

American Regent, Inc.

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American Regent announces the availability of Clonidine Hydrochloride Injection

Shirley, NY – (May 4, 2010): American Regent, Inc. purchased PharmaForce, Inc. (Columbus, OH) on December 29, 2009 and is pleased to announce the addition of Clonidine HCl Injection to its product line.

Clonidine Hydrochloride Injection		
American Regent NDC # (NEW):	00517-0730-01	00517-0731-01
PharmaForce NDC # (PREVIOUS):	40042-052-10	40042-053-10
FORM	Injection	Injection
STRENGTH:	100 mcg/mL (10 mL vial)	500 mcg/mL (10 mL vial)
SHELF PACK SIZE:	1	1

It is “AP” rated and it’s Preservative and Latex free.

Headquartered in Shirley, NY, American Regent, Inc., distributes over 80 pharmaceutical products under the PharmaForce or their own label, including Venofer (iron sucrose injection , USP) the #1 selling IV iron therapy in the U.S. For more information about this or other American Regent or PharmaForce products, please contact our customer service department at 1-800-645-1706.

Source: American Regent, Inc.

See accompanying Important Safety Information and Full Prescribing Information

IMPORTANT SAFETY INFORMATION

Clonidine hydrochloride injection is not recommended for obstetrical, postpartum, or perioperative pain management. The risk of hemodynamic instability, especially hypotension and bradycardia, from epidural clonidine may be unacceptable in these patients. However, in a rare obstetrical, postpartum or perioperative patient, potential benefits may outweigh the possible risks. The 500mg/mL strength product should be diluted prior to use in an appropriate solution.

Clonidine hydrochloride injection is contraindicated in patients with a history of sensitization or allergic reactions to clonidine. Epidural administration is contraindicated in the presence of an injection site infection, in patients on anticoagulant therapy, and in those with a bleeding diathesis.

Administration of clonidine hydrochloride injection above the C4 dermatome is contraindicated since there are no adequate safety data to support such use. Because severe hypotension may follow the administration of clonidine, it should be used with caution in all patients. It is not recommended in most patients with severe cardiovascular disease or in those who are otherwise hemodynamically unstable. Vital signs should be monitored frequently, especially during the first few days of epidural clonidine therapy. Sudden cessation of clonidine treatment, regardless of the route of administration, has, in some cases, resulted in symptoms such as nervousness, agitation, headache, and tremor, accompanied or followed by a rapid rise in blood pressure.

Adverse reactions seen during continuous epidural clonidine infusion are dose-dependent and typical for a compound of this pharmacologic class. The adverse events most frequently reported in the pivotal controlled clinical trial of continuous epidural clonidine administration consisted of hypotension, postural hypotension, decreased heart rate, rebound hypertension, dry mouth, nausea, confusion, dizziness, somnolence, and fever. Hypotension is the adverse event that most frequently requires treatment.