

For the Management of Metabolic Acidosis in Chronic Kidney Disease Patients,

SOBISIS

Sodium Bicarbonate 500 mg Tablets

SOBISIS FORTE

Sodium Bicarbonate 1000 mg Tablets

**NOW
AVAILABLE IN
SMALLER SIZE
TABLETS**



**40%
Reduced
Tablet Size**

**Easy
to
swallow**

**Increases
patient
compliance**

**Improves
treatment
outcome***

*Due to increased
patient compliance

SOBISIS

Sodium Bicarbonate 500 mg Tablets

SOBISIS FORTE

Sodium Bicarbonate 1000 mg Tablets

BACKGROUND:

- Metabolic acidosis is commonly found in patients with chronic kidney disease (CKD). Metabolic acidosis of CKD has been estimated to be present in 2.3% to 13% of individuals with stage 3 CKD and 19% to 37% of individuals with stage 4 CKD. Metabolic acidosis is also associated with accelerated progression of chronic kidney disease (CKD).
- Metabolic acidosis is defined as a serum bicarbonate concentration <22 mEq/L in individuals with decreased kidney function.

DESCRIPTION:

- SOBISIS** and **SOBISIS-FORTE** contains 500 mg & 1000 mg of Sodium Bicarbonate which is used for cases of acidosis, or when insufficient sodium or bicarbonate ions are in the blood.
- Sodium bicarbonate is a chemical compound with the formula NaHCO_3 . It is a salt composed of sodium ions and bicarbonate ions.

INDICATION:

SOBISIS / SOBISIS-FORTE is indicated for the chronic management of Metabolic Acidosis in CKD patient.

MECHANISM OF ACTION:

Sodium Bicarbonate dissociates to provide bicarbonate ions which buffers excess hydrogen ion concentration and raises blood pH, thereby reversing the clinical manifestations of metabolic acidosis.

DOSAGE:

The recommended starting dose for moderate metabolic acidosis is 325 to 2000 mg orally 1 to 4 times a day.

Calculation of Dosage:

- 1 mEq NaHCO_3 is equivalent to 84 mg; each g of NaHCO_3 provides ~12 mEq each of sodium and bicarbonate ions.
- Metabolic acidosis in patients with chronic kidney disease: KDIGO guidelines suggest oral replacement when plasma HCO_3^- concentrations are <22 mEq/L.
- Initial: 15.4 to 23.1 mEq/day in divided doses (eg, 500 mg tablet 2 to 3 times daily); titrate to normal serum bicarbonate concentrations (eg, 23 to 29 mEq/L).

MAJOR POTENTIAL BENEFITS OF SOBISIS / SOBISIS-FORTE IN CKD:

- Reduces risk for CKD progression
- Increases skeletal muscle mass and strength
- Reduces bone buffering and preserve bone mineral
- Reduces serum potassium if hyperkalemic

References:

1. AJKD Vol 74 | Iss 2 | August 2019. 2. Am J Kidney Dis. 2016;67 (2):307-317

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Mail me at: _____