

CEFPODOXIME PROXETIL

PODOXI

200 mg Film-Coated Tablet
Antibacterial

FORMULATION:

Each film-coated tablet contains:
Cefpodoxime Proxetil eq. to Cefpodoxime..... 200 mg

PHARMACOKINETICS:

Cefpodoxime proxetil is the prodrug of cefpodoxime and is de-esterified in the intestinal epithelium after oral doses, to release active Cefpodoxime in the bloodstream. Bioavailability is about 50% in fasting subjects and may be increased in the presence of food.

Absorption is decreased in conditions of low gastric acidity. Peak plasma concentrations of about 1.5, 2.5, and 4.0 micrograms/mL have been achieved 2 to 3 hours after oral doses of 100, 200 and 400 mg Cefpodoxime respectively. About 20 to 30% of Cefpodoxime is bound to plasma proteins. The plasma half-life is about 2 to 3 hours and is prolonged in patients with renal impairment.

Cefpodoxime reaches therapeutic concentrations in the respiratory and genito-urinary tracts and bile. It has been detected in low concentrations in breast milk.

Cefpodoxime is excreted unchanged in the urine. Some is removed by dialysis.

INDICATION:

Cefpodoxime proxetil is given orally in the treatment of susceptible infections including gonorrhoea, otitis media, pharyngitis, lower respiratory-tract infections such as bronchitis and urinary-tract infections.

DOSAGE AND ADMINISTRATION:

The usual dose for adults is 100 to 200 mg every 12 hours for respiratory-tract and urinary-tract infections. A dose of 200 or 400 mg every 12 hours may be used for skin and soft-tissue infections. For uncomplicated gonorrhoea, a single dose of 200 mg may be given. Or as prescribed by the physician.

DRUG INTERACTIONS:

Absorption of Cefpodoxime is decreased by antacids or histamine H2-receptor antagonists. Probenecid reduces the renal excretion of Cefpodoxime.

ADVERSE EFFECTS:

The most common are hypersensitivity reactions including skin rashes, urticaria, eosinophilia, fever, reactions resembling serum sickness and anaphylaxis.

There may be a positive response to the Coombs' test although haemolytic anaemia rarely occurs. Neutropenia and thrombocytopenia have occasionally been reported. Agranulocytosis has been associated rarely with some cephalosporins.

Bleeding complications related to hypoprothrombinaemia and/or platelet dysfunction have occurred especially with cephalosporins and cephamycins having an N-methylthiotetrazole side-chain including: cefamandole, cefbuperazone, cefmenoxime, cefmetazole, cefonicid, cefoperazone, ceforanide, cefotetan, cefpiramide, latamoxef.

The presence of methylthiadiazolethiol side-chain, as in cefazolin or an N-methylthiotriazine ring, as in ceftriaxone, might also be associated with such bleeding disorders. Hypoprothrombinaemia which is usually reversible with vitamin K, was once thought to be due to an alteration in intestinal flora but interference with prothrombin synthesis now seems more likely.

Nephrotoxicity has been reported with Cefpodoxime proxetil although it is less toxic than cefaloridine. Acute renal tubular necrosis has followed excessive dosage and has also been associated with its use in older patients or those with pre-existing renal impairment, or when used with nephrotoxic drugs such as aminoglycosides. Acute interstitial nephritis is also a possibility as a manifestation of hypersensitivity.

Transient increases in liver enzyme values have been reported. Hepatitis and cholestatic jaundice have occurred rarely with some cephalosporins.

Convulsions and other signs of CNS toxicity have been associated with high doses, especially in patients with severe renal impairment.

Gastrointestinal adverse effects such as nausea, vomiting and diarrhoea have been reported rarely. Prolonged use may result in overgrowth of non-susceptible organisms and as with other broad-spectrum antibiotics, pseudomembranous colitis may develop.

AVAILABILITY:

Cefpodoxime Proxetil (Podoxi) 200 mg Film-Coated Tablet is available in Alu-Alu Blister pack of 10's (Box of 10's & 30's).

CAUTION:

Foods, Drugs, Devices, and Cosmetics Act prohibits dispensing without prescription.

STORE AT TEMPERATURES NOT EXCEEDING 30° C.

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