Drug/ Drug Class: Cefuroxime Sodium
Oxifadz 750®
Antibacterial (I.M./ I.V.)


## Pharmacodynamics

Pharmacotherapeutic group: Antibacterial for systemic use, second-generation cephalosporins.

## Formulation

Each vial contains:
Cefuroxime (as sodium) USP – 750mg
Each ampoule contains:
Sterile Water for injection BP – 10ml

## Availability

- 750 mg (vial with diluent)
- Box of 20ml USP Type III clear glass vial + glass ampoule x 10ml diluent

## Mechanism of Action

Cefuroxime inhibits bacterial cell wall synthesis following attachment to penicillin-binding proteins (PBPs). This result in the interruption of cell wall (peptidoglycan) biosynthesis, which leads to bacterial cellysis and death.

## Dosage & Administration

Cefuroxime may be administered intravenously or intramuscularly.
**Adults:** The usual dose Cefuroxime is 750mg three times daily by I.M. or I.V. injection which may be increased to 1.5g three times daily I.V. in severe infections. The frequency of administration can be increased to six-hourly if necessary, giving total doses of 3g to 6g daily.
**Infants and children:** 30 to 60 mg/kg/day increases to 100 mg/kg daily, if necessary, given as three or four divided doses. A dose of 60 mg/kg/day will be appropriate for most infections.
**Elderly:** As prescribed by the physician
**Dosage in Impaired Renal Function:** As Cefuroxime is excreted by the kidneys, the dosage of the Cefuroxime should be reduced in patients with creatinine clearance below 20ml/min, 750mg twice daily is recommended and with 10 ml/min, 750mg once daily is adequate. For patients on hemodialysis, a further 750mg dose should be given at the end of each dialysis. In case of continuous peritoneal dialysis, 750mg twice daily is recommended.

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## Indication

Used in the treatment of susceptible infections such as bone and joint infections, bronchitis (and other lower respiratory tract infections), gonorrhea, meningitis (although treatment failures have been reported in H. influenzae meningitis), otitis media, peritonitis, pharyngitis, sinusitis, skin infection (including soft-tissue infections, and UTI. It also used for surgical infection prophylaxis.

## Adverse Drug Reactions

Cefuroxime is generally well tolerated. Adverse reactions have been generally mild and transient in nature. **Local reaction:** Transient pain at the site of intramuscular injection, which is more likely occur with higher doses.
**Hypersensitivity reactions**: Skin rashes (maculopapular and urticaria), drug fever and very rarely anaphylaxis have been reported.
**Gastrointestinal:** Diarrhea and nausea. Pseudomembranous colitis may occur during or after treatment.
**Blood:** Decreased hemoglobin concentration and/or eosinophilia, leukopenia and neutropenia may occur. As with other cephalosporins, there have been very rare reports of thrombocytopenia.
**Hepatic:** Transient rise in serum glutamic oxaloacetic transaminase (SGOT) and serum glutamic pyruvic transaminase (SGPT, and bilirubin may occur.

## Drug Interactions

Cephalosporin antibiotics at high dosage should be given with a caution to patients receiving concurrent treatment with potent diuretics, like furosemide and aminoglycosides, as these combinations are suspected of adversely affecting renal function, through this is not likely to be a problem at the recommended dose level.

## Pregnancy and Lactation

As there are no well-controlled clinical trials of Cefuroxime in pregnant woman, it should be administered only if necessary and with caution. Cefuroxime is excreted in human milk, and consequently, caution should be exercised when Cefuroxime is administered to a nursing mother.

## Shelf Life & Storage Condition

- 36 mos.
- Store at temperatures not exceeding 30 °C.

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| **Manufactured by:** | Rainbow Life Sciences Pvt. Ltd.<br>Plot No. R-914/915 T.T.C. Industrial Area, Rabale, Navi Mumbai-400 701, M.S. India |
| **Imported by:** | Ambica International Corporation<br>No. 9 Amsterdam Extension, Merville Park Subd., Parañaque City, Metro Manila, Philippines<br>www.ambicaglobal.com |
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