

Cepoxid

Cefpodoxime Proxetil USP

Composition

Cepoxid 200 Tablet : Each tablet contains Cefpodoxime Proxetil USP equivalent to 200 mg Cefpodoxime.

Cepoxid PFS : When reconstituted each 5 ml suspension contain Cefpodoxime Proxetil USP equivalent to 40 mg Cefpodoxime.

Pharmacology

Cepoxid (Cefpodoxime Proxetil) is an orally administered extended spectrum, semi-synthetic 3rd generation antibiotic of cephalosporin group. Cefpodoxime Proxetil is a bactericidal drug that acts by inhibition of bacterial cell wall synthesis. Cefpodoxime Proxetil is highly stable in the presence of beta-lactamases produced by most gram-negative pathogens and active against organisms that are resistant to other beta-lactam antibiotics because of beta-lactamase production. Cefpodoxime Proxetil is a prodrug, is absorbed from the GIT and de-esterified to its active metabolite, Cefpodoxime.

Indication

Cepoxid (Cefpodoxime) is indicated in the following infections: **(1) Lower Respiratory Tract Infections (LRTI)**: Acute community acquired pneumonia (CAP), Acute bacterial exacerbation of chronic bronchitis. **(2) Upper Respiratory Tract Infections (URTI)**: Acute otitis media, Acute maxillary sinusitis, Pharyngitis, Tonsillitis. **(3) Sexually Transmitted Diseases (STD)**: Acute uncomplicated urethral & cervical gonorrhoea, Acute ano-rectal infection in woman caused by N. gonorrhoea. **(4) Uncomplicated Urinary Tract Infections (UUTI)**: Cystitis, Pyuria. **(5) Skin & Soft Tissue Infections (SSTI)**: Furuncle, Cellulitis, Subcutaneous abscess, infectious atheroma & periproctal abscess. **(6) Enteric Fever**: Typhoid, Para-typhoid.

Dosage & Administration

Cepoxid Suspension may be given without regard to food. The recommended doses, duration of treatment, applicable patient population are as below:

Adults (including age 12 years & older) :

Type of infection	Total daily dose	Dose Frequency	Duration
Acute community acquired pneumonia	400 mg	200 mg 12 hourly	14 days
Acute Bacterial exacerbation of chronic bronchitis	400 mg	200 mg 12 hourly	10 days
Uncomplicated gonorrhoea (men+women)	200 mg	Single dose 200 mg	
Rectal gonococcal infection in (women)	200 mg	Single dose 200 mg	
Skin & Soft tissue infection	800 mg	400 mg 12 hourly	7 to 14 days
Pharyngitis and/or tonsillitis	200 mg	100 mg 12 hourly	5 to 10 days
Uncomplicated urinary tract infection	200 mg	100 mg 12 hourly	7 days
Acute maxillary sinusitis	400 mg	200 mg 12 hourly	10 days

Children:

15 days - 6 months : 4 mg/kg every 12 hours

6 months - 2 years : 40 mg every 12 hours

3 years - 8 years : 80 mg every 12 hours

Over 9 years : 100 mg every 12 hours

Patients with renal dysfunction : For patients with severe renal impairment (creatinine clearance < 30 ml/min) the dosing intervals should be increased to 24 hourly.

Patients with liver cirrhosis : Cefpodoxime Proxetil pharmacokinetics in cirrhotic patients are similar to those in healthy subjects. Dose adjustment is not necessary in this population.

Contraindication

Cepoxid is contraindicated in known hypersensitivity to Cefpodoxime or to the Cephalosporin group of antibiotics and in porphyria.

Precaution

In renal insufficiency, the total daily dose of Cefpodoxime proxetil should be reduced. Cefpodoxime, like other cephalosporins, should be administered with caution to patients receiving concurrent treatment with potent diuretics.

Side Effect

Cefpodoxime has very few side effects. The side effects include diarrhea, nausea, abdominal pain, headache, chest pain, myalgia, dyspepsia, dizziness, vertigo, cough etc.

Use in Pregnancy & Lactation

Pregnancy: The drug should be used during pregnancy only if clearly needed. Pregnancy Category B.

Lactation: Cefpodoxime is excreted in human milk. So patient taking this drug should not breast-feed.

Drug Interaction

Antacids: Concomitant administration of antacids or H₂ blockers reduces absorption of Cefpodoxime. **Probenecid**: Inhibited renal excretion of Cefpodoxime.

Direction For Reconstitution of Suspension

First shake the bottle until all powder flows freely. Then add boiled & cool water 25 ml (5 teaspoonfull) in the bottle and shake vigorously to suspend powder. For better mixing add total water in two portion and shake vigorously each time.

Note: After reconstitution keep the bottle tightly closed and shake the bottle well before each use. Reconstituted suspension must be used within 7 days if kept at room temperature or within 10 days when stored in a refrigerator.

Overdose

Overdosage may cause toxic reaction. Toxic symptoms include nausea, vomiting, epigastric distress, diarrhea.

Storage

Keep away from light & moisture and store below 30° C. Keep out of the reach of children.

Packaging

Cepoxid 200 Tablet : Each box contains 2 X 7's tablet in Alu-Alu blister pack.

Cepoxid PFS : Bottle containing powder to make 50 ml suspension.