## PF CHLORTETRACYCLINE 15% W/W GRANULE

Composition:

Chlortetracycline as Chlortetracycline Calcium Complex Equivalent to CTC HCL......150mg/g Exp. Qs......1000mg/g

Description

Brown to dark brown granule, not lumpy or mouldy, no unpleasant odor.

**Pharmacodynamics** 

Tetracyclines generally act as bacteriostatic antibiotics inhibiting protein synthesis by reversibly binding to 30S ribosomal subunits of susceptible organisms thereby preventing binding to those ribosomes of aminoacyl transfer-RNA. Tetracyclines are believed to reversibly bind to 50S ribosomes and additionally alter cytoplasmic membrane permeability in susceptible organisms. In high concentrations, tetracyclines can inhibit protein synthesis by mammalian cells. Against gram-positive bacteria, the tetracyclines activity against some of staphylococcus and streptococci, resistance these organisms is increasing. Among gram-negative bacteria that tetracyclines usually have in vitro and in vivo activity include Bordetella spp., Brucella, Bartonella, Haemophilus spp., Pasturella multocida, Shigella, and Yersinia pestis. Many or most strains of E. coli, Klebsiella, Bacteroides, Enterobacter, Proteus and Pseudomonas aeruginosa are resistant to tetracyclines.

**Pharmacokinetics** 

Tetracycline are readily absorbed after oral administration to fasting animals. Tetracyclines as a class are widely distributed in the body, including to the heart, kidney, lungs, muscle, pleural fluid, bronchial secretions, sputum, bile, saliva, urine, synovial fluid, ascitic fluid, and aqueous and vitreous humor. Tetracycline are eliminated unchanged primarily via glomerular filtration.

**For Swine:** Reducing the incidence of cervical lymphadenitis (jowl abscesses) caused by *Group E Streptococci* susceptible to chlortetracycline.

**For Breeding Swine:** Control of leptospirosis (reducing the instances of abortions and shedding of leptospirae) caused by *Leptospira pomona* susceptible to chlortetracycline.

**For Swine:** Treatment of bacterial enteritis caused by *Escherichia coli* and *Salmonella choleraesuis* and bacterial pneumonia caused by *Pasteurella multocida*susceptible to chlortetracycline.

Route of Administration For oral administration

**Recommended dose For Swine:** Reducing the incidence of cervical lymphadenitis (jowl abscesses) caused by *Group E Streptococci* susceptible to chlortetracycline:

55-110g/tonne (367-735g PF CHLORTETRACYCLINE 15% W/W GRANULE/tonne).

**For Breeding Swine:** Control of leptospirosis (reducing the instances of abortions and shedding of leptospirae) caused by *Leptospira pomona* susceptible to chlortetracycline. (Feed continuously for 14 days):

441g/tonne (2940g PF CHLORTETRACYCLINE 15% W/W GRANULE/tonne).

**For Swine:** Treatment of bacterial enteritis caused by *Escherichia coli* and *Salmonella choleraesuis* and bacterial pneumonia caused by *Pasteurella multocida*susceptible to chlortetracycline. (Feed for not more than 14 days):

not more than 14 days): Feed approximately 441g/tonne (2940g PF CHLORTETRACYCLINE 15% W/W GRANULE/tonne), varying with body weight and feed consumption to provide 22mg/kg body weight/day

Contraindications

Chlortetracycline is contraindicated in animals hypersensitive to it or other tetracyclines.

Interaction with other medicinal products

The following drug interactions have either been reported or are theoretical in animals receiving chlortetracycline and may be of significance in veterinary patients:
-Beta-Lactam or Aminoglycoside Antibiotics: Bacteriostatic drugs, like the tetracyclines, may interfere with bactericidal activity of the penicillins, cephalosporins, and aminoglycosides; there is some controversy regarding the actual clinical significance of this

## **Product Registration Holder:**

PANFAST MARKETING (M) SDN.BHD.

PENANG SCIENCE PARK 1102, MUKIM 13, LORONG PERINDUSTRIAN BUKIT MINYAK 18, KAWASAN PERINDUSTRIAN BUKIT MINYAK, 14100 SIMPANG AMPAT, PENANG, MALAYSIA TEL: +604-5016868 FAX: +604-5016866 interaction, however -Divalent or Trivalent Cations (oral antacids, saline cathartics or other GI products containing aluminum, calcium, iron, magnesium, zinc, or bismuth cations): When orally administered, tetracyclines can chelate divalent or trivalent cations that can decrease the absorption of the tetracycline or the other drug if it contains these cations; it is recommended that all oral tetracyclines be given at least 1-2 hours before or after the cation-containing products

Pregnancy and lactation

The use is not recommended during pregnancy or lactation. The treatment of pregnant animals with chlortetracycline may result in adverse effects on skeletal and tooth development in the foetus. Therefore, the product should be used only in pregnant sows according to the benefit/risk assessment of the responsible veterinarian.

Side effects

Chlortetracycline given to young animals can cause discoloration of bones and teeth to a yellow, brown, or gray color. High dosages or chronic administration may delay bone growth and healing. Tetracyclines in high levels can exert an antianabolic effect that can cause an increase in blood urea nitrogen and/or hepatotoxicity, particularly in patients with preexisting renal dysfunction. As renal function deteriorates secondary to drug accumulation, this effect may be exacerbated.

Tetracycline therapy (especially long-term) may result in overgrowth (superinfections) of non-susceptible bacteria or fungi. Tetracyclines have been associated with photosensitivity reactions and, rarely, hepatotoxicity or blood dyscrasias.

Symptoms and treatment of overdose

Tetracyclines are generally well tolerated after acute overdoses. Oral overdoses would most likely be associated with GI disturbances (vomiting, anorexia, and/or diarrhea). Should the patient develop severe emesis or diarrhea, fluids and electrolytes should be monitored and replaced if necessary. Chronic overdoses may lead to drug accumulation and nephrotoxicity.

Storage

Store in a cool dry place (<30°C). Strictly avoid light and heat exposure.

Warning and Precautions

In patients with renal insufficiency or hepatic impairment, chlortetracycline must be used cautiously. Lower than normal dosages are recommended with enhanced monitoring of renal and hepatic function. Avoid concurrent administration of other nephrotoxic or hepatotoxic drugs.

-Jauhkan ubat dari kanak-kanak/Keep out of reach of children.

Shelf life

18 months

Shelf life after opening

24 hours

Shelf life after reconstitution or dilution

24 hours

Withdrawal period

ZERO-DAY WITHDRAWAL PERIOD.

**Packaging** 

25kg

Revised date: 7/5/2019

Manufactured by:

JINHE BIOTECHNOLOGY CO., LTD

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