

Hovid Tetracycline Capsule

VITET01-M

Description

Hovid Tetracycline Capsule B.P. 250 mg : Orange opaque and yellow opaque capsule with "HD" printed on one end and "TR 250" on the other end of the capsule.

Hovid Tetracycline Capsule B.P. 500 mg : Grey and yellow capsule with "HD" printed on one end and "TR 500" on the other end of the capsule.

Composition

Hovid Tetracycline Capsule B.P. 250 mg : Tetracycline hydrochloride 250 mg/capsule.

Hovid Tetracycline Capsule B.P. 500 mg : Tetracycline hydrochloride 500 mg/capsule.

Actions and Pharmacology

Tetracyclines are broad-spectrum bacteriostatic agents and act by inhibiting protein synthesis by blocking the binding of transfer RNA to the messenger RNA ribosome complex. Reversible binding occurs primarily at the 30S ribosomal subunit of susceptible organisms. Oral absorption is reduced by milk and food and also by the presence of divalent and trivalent metals. It is subject to enterohepatic circulation and it undergoes renal and faecal excretion.

Indications

For treatment of:

- Rickettsial infections including typhus, Rocky Mountain spotted fever and Q fever.
- Chlamydial infections including psittacosis, lymphogranuloma venereum, trachoma and inclusion conjunctivitis.
- Respiratory tract infections, urinary tract infections, skin and soft-tissue infections and other infections caused by susceptible organisms.

Contraindications

Not recommended in hypersensitive patients, pregnancy, infants and children under 12 years of age, renal function impairment, hepatic function impairment and systemic lupus erythematosus.

Precautions

Caution in patients with known histories of allergy, liver function impairment and in lactation.
Cross-resistance between tetracyclines may develop in micro-organisms and cross-sensitisation in patients.

Pregnancy and Lactation

The use of tetracyclines in pregnancy should be avoided. When administration to women during the latter half pregnancy, to nursing mothers or during children up to the age of 12 years, permanent discoloration of the child's teeth may occur.

Main Side/Adverse Effects

- Gastrointestinal disturbances such as nausea, vomiting, diarrhoea and anorexia. As with all antibiotics, overgrowth of resistant organisms may cause glossitis, stomatitis, vaginitis or staphylococcal enterocolitis.
- Discolouration of infants or children's teeth and occurrences of enamel hypoplasia.
- Photosensitivity and dermatological reactions are rare.
- Bulging fontanelles in infants and benign intracranial hypertension in adults has been reported. Treatment should cease if evidence of raised intracranial pressure develops.

Drug Interactions

- Concurrent use with aminosalicylate calcium, antacids, calcium supplements, iron supplements or magnesium-containing laxatives may result in decreased absorption of tetracycline.
- Co-administration of methoxyflurane may increase the potential for nephrotoxicity.
- Concurrent therapy with penicillins is best avoided since tetracycline may interfere with the bactericidal effect of penicillins.
- Because tetracyclines have been shown to depress plasma prothrombin activity, patients who are on anticoagulant therapy may require downward adjustment of their anticoagulant dosage. Concurrent use of tetracycline may render oral contraceptives less effective. Breakthrough bleeding has been reported.

Overdosage

Clinical features: Nausea, anorexia, diarrhoea, perianal itching, skin eruptions, anaphylaxis.

Treat overdosage by emesis or gastric lavage, if appropriate; with the necessary emergency measures, if required.

Dosage and Administration

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| Adults | : Antibacterial, antiprotozoal | - Oral, 250 to 500 mg every six hours; or 500 mg to 1.0 g every twelve hours. |
| | Antibacterial (antiacne) | - Oral, 500 mg to 2.0 g daily in divided doses initially in severe cases as adjunctive therapy. When improvement is noted (usually after 3 weeks), dosage should be reduced gradually to a maintenance dose of 125 to 500 mg daily. Adequate remission of lesions may also be possible with alternate-day or intermittent therapy. |
| | Gonorrhoea | - Oral, 500 mg every six hours for five days. |
| | Syphilis | - Oral, 500 mg every six hours for fifteen days (early syphilis) or for thirty days (late syphilis). |
| Children | : Antibacterial, antiprotozoal | - Oral, children 8 years of age and over - 6.25 to 12.5 mg/kg of body weight every six hours; or 12.5 to 25 mg per kg body weight every twelve hours. |

Note: The information given here is limited. For further information consult your doctor or pharmacist.

Storage : Store below 25°C. Protect from light and moisture.

Presentation/Packing : Capsule 250 mg x 100's, 500's, 1000's, Blisters of 10 x 10's
(Capsule shell contains Sunset Yellow, Ponceau 4R, Quinoline Yellow, Iron Oxide Yellow and Titanium Dioxide);
Capsule 500 mg x 100's, 500's, Blisters of 10 x 10's
(Capsule shell contains Quinoline Yellow, Blue F.C.F, Carmoisine, Sunset Yellow and Titanium Dioxide).

Product Registration Holder: HOVID Bhd., 121, Jalan Tunku Abdul Rahman, 30010 Ipoh, Malaysia.
Manufactured by: HOVID Bhd., Lot 56442, 7 1/2 Miles, Jalan Ipoh / Chemor, 31200 Chemor, Malaysia.

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