Capsules

Dekomycin

Doxycycline U.S.P.

کیپسولز

ڈیکومائسین

ڈوکسی سائیکلین یو۔ایس۔پی

COMPOSITION:

Each capsule contains:

Doxycycline Hyclate eq. to Doxycycline.....100mg

PROPERTIES AND ANTIMICROBIAL SPECTRUM:

Dekomycin is an oral wide-spectrum semisynthetic antibiotic, belonging to the group of tetracyclines with pronounced bacteriostatic activity. The antibiotic suppresses the protein synthesis in the microbial cell by tRNA and mRNA binding in the ribosomal complex. Dekomycin possesses broad antimicrobial spectrum, similar to tetracyclin. The antibiotic displays high activity against Brucella, Pasteurella, Chlamydia, Mycoplasma pneumoniae, Rickettsia, Neisseria gonorrhoeae, Treponema, Spirocheta, Vibrio cholerae, Corynebacterium acnae. Dekomycin is used for the treatment of infections caused by Staphylococcus, Streptococcus, Pneumococcus, Salmonella typhi, Shigella, Klebciella,Morganella morgani, Escherichia coli, Haemophilus influenzae, Clostridium, Bacteroides, Fusobacterium, Legionella pneumophila. Laboratory sensitivity to Dekomycin should be determined on isolation of the causative microorganism due to the increased resistance to many strains of the aforementioned microorganisms.

PHARMACOKINETICS:

Dekomycin is rapidly absorbed and almost entirely (up to 90-100%) from the gastrointestinal tract. Food does not interfere considerably with its absorption. Though, the absorption is reduced significantly by dairy products due to the calcium content, which takes part in the formation of chelate compounds. Peak plasma concentrations of 2-4 µg/ml are attained within 2-4 hours after oral administration of 200 mg Dekomycin, and 24 hours after the intake the plasma concentrations are approx. 1 µg/ml. The drug's plasma half-life varies from 15 to 22 hours and is not altered in case of renal impairment. The antibiotic becomes bound to the plasma proteins to the extent of between 85 and 96%. Dekomycin well penetrates in the body tissues and fluids and attains high concentrations in the bile, sputum, pleural, ascite and synovial fluid. Therapeutic concentrations of the drug are maintained in the lungs, adnexa, prostate, testes and liver. The antibiotic accumulates in the bones and teeth. It crosses the placental barrier and is excreted in the breast-milk. Dekomycin penetrates in the cerebrospinal fluid in very low concentrations unless the meanings are not inflamed. The drug becomes metabolized in the liver. Part of the antibiotic is reabsorbed from the intestines and further included in the enterohepatal circulation. In contrast to the other Tetracyclines, Dekomycin is excreted predominantly in the gastrointestinal tract (up to 70%). This antibiotic is a drug of choice in cases of extra renal infections in presence of renal insufficiency.

INDICATIONS:

Dekomycin is suitable for the treatment of infections, caused by Dekomycin - susceptible microorganisms:

Respiratory Tract Infections - Tonsillitis, Pharyngitis, Otitis, Sinusitis, Bronchitis, Pneumonia, Bronchopneumonia;

Biliary Tract Infection;

Urogenital Infections - Urethritis, Cystitis, Pyelonephritis, Prostatitis;

Infections Of The Pelvis ;

Intestinal Infections - Intestinal Amoebiasis And Etc.;

Infections Of The Skin And Soft Tissues - Impetigo, Cellulitis, Furunculosis, Acne, Infected Traumatic And Post-operative Wounds;

Other Infections - Osteomyelitis, Thrombophlebitis, Ophthalmia

CONTRAINDICATIONS:
Hypersensitivity to tetracyclines. Severe liver impairment. Children under 8 years of age. Pregnancy and breast-feeding.

ADVERSE EFFECTS:
Dekomycin may cause nausea, vomiting, diarrhoea. Long-term high-dose administration of the antibiotic may cause ulcers on the esophageal mucosa, glositis, oral candidiasis. Rarely, liver lesions and transitory changes in the hematological indices may be encountered. Dekomycin may cause photosensibilisation. Skin allergic reactions and in rare cases other severe allergic reactions (anaphylaxis, Quincke's edema) have been observed during Dekomycin treatment.

PRECAUTIONS:
Dekomycin should cautiously be employed in presence of damaged liver function (due to risk of accumulation), in patients with impaired esophageal mucosa, ulcer of the stomach and duodenum, intensive sun irradiation.

DRUG INTERACTIONS:
Antiacid preparations containing calcium, magnesium or aluminium or iron containing preparations may reduce considerably Dekomycin absorption.

Dekomycin enhances the hepatotoxic and nephrotoxic effects of lithium salts, general anaesthetics and other preparations possessing similar effect.

Dekomycin may potentiate the anticoagulant activity of indirect anticoagulant.

Concomitant administration of enzyme inductors may decrease the chemotherapeutic effect of Dekomycin.

DOSAGE AND MODE OF ADMINISTRATION:
Dekomycin should not be taken immediately before bed -time and should be swallowed with sufficient amount of liquid in order to avoid its ulcerous effect on esophagus.

The usual dosage for adults is 100 mg every 12 hours for the first day and 100 mg every 24 hours for the next days. On physician's prescription could be taken 100 mg every 12 hours during the whole therapy regimen. In gonococcal urethritis in man the treatment is carried out with an initial dose of 300 mg for the first day and further maintenance dose of 200 mg in 2 intakes for 2-4 more days.

In primary and secondary syphilis the treatment is carried out with a dose of 300 mg daily in 3 intakes in the course of 10 days.

Children over 8 years should be given daily dosage of 4 mg/kg body weight.

In patients with renal insufficiency the excretion of the preparation in the urine is reduced on account of the increased excretion with the feces. Therefore, the antibiotic can be used in patients with renal insufficiency.

PRESENTATION:
Dekomycin capsules are supplied in a blister pack of 8 capsules and 100 capsules.

تمام ادویات بچوں کی پہنچ سے دور رکھیں۔
دوا ڈاکٹر کی ہدایات کے مطابق استعمال کریں۔
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Manufactured by:
REKO PHARMACAL (Pvt.) LTD.
13-km, Multan Road, Lahore-Pakistan
www.rekopharmacal.com

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