

Composition

Metrosil® 400 Tablet: Each tablet contains Metronidazole BP 400 mg.

Metrosil® Suspension: Each 5 ml contains Benzoyl Metronidazole equivalent to 200 mg Metronidazole BP.

Description

Metrosil® (Metronidazole) was the first clinically effective 5-nitro-imidazole drug and that received widespread therapeutic use in the treatment of various infections.

Pharmacology

Mode of action: Metronidazole is an antimicrobial drug that is primarily active against obligate anaerobic microorganism both bacteria and protozoa. Which binds to DNA and inhibits further nucleic acid synthesis and causes subsequent breakdown of DNA strand. **Metrosil®** may also inhibit pyruvate and phosphate metabolism by inhibiting a hydrogenase occurring in clostridia and other anaerobes.

Absorption

Metronidazole is well absorbed from gastro-intestinal tract (90-100%). Similar levels to those in plasma appear in milk, but in the suckling infant blood levels are low.

Half-life: The plasma half-life of the drug is 6-9 hours.

Excretion: Major route of excretion is urine (75%) and the remaining part is excreted in the faeces.

Indication

Acute amoebic dysentery, amoebic hepatitis, amoebic abscess in liver and other organs, amoebic cyst eradication, Trichomonas infections, acute ulcerative gingivitis, Giardia lamblia infestations, anaerobic infections. Intra abdominal infection caused by Bacteroides fragilis, Fusobacteria, Clostridia, Anaerobic Streptococci and Eubacteria species. Ulcer caused by Vincent's organisms, Guinea worm infestations (Dracontiasis), Dracunculus medinensis.

Dosage and administration

The following dosage schedule may be followed.

Diseases	Adult	Child
Invasive intestinal amoebiasis	800 mg every 8 hours for 5 days	1- 3 years: 200 mg every 8 hours 3-7 years: 200 mg every 6 hours 7-10 years: 400 mg every 8 hours
Extra intestinal ameobiasis (including liver abscess) and symptomless amoebic cyst passers	400-800 mg every 8 hours for 5-10 days	1-3 years: 100-200 mg every 8 hours 3-7 years: 100-200 mg every 6 hours 7-10 years: 200-400 mg every 8 hours
Urogenital trichomoniasis	200 mg every 8 hours for 7 days or 400-500 mg every 12 hours for 5-7 days or 2 g as a single dose	1-3 years: 50 mg every 8 hours for 7 days 3-7 years: 100 mg every 12 hours 7-10 years: 100 mg every 8 hours
Giardiasis	2 g daily for 3 days or 400 mg 3 times daily for 5 days or 500 mg twice daily for 7-10 days	1-3 years: 500 mg daily for 3 days 3-7 years: 600-800 mg daily 7-10 years: 1 g daily

Note: Dose schedule should be recommended by registered physician.

Trichomoniasis

- 1) A second course of treatment may be given, if needed after 4-5 weeks.
- $2) \ Concomitant \ treatment \ of \ sexual \ consorts \ is \ recommended.$
- 3) In elderly women hormone therapy may be necessary to clear up reaginitis.

Adverse Reaction

Metallic taste, furred tongue, nausea, vomiting, diarrhoea, drowsiness, rashes and mild reversible leucopoenia may be observed during treatment. It is thus a relatively safe drug although when used in large doses over several months a few cases of severe peripheral neuropathy have occurred.

Precaution

Vaginitis due to organisms other than T. vaginalis dose not responds to Metronidazole. Without specific indication the drug should not be used in first trimester of pregnancy and also during lactation period. Alcohol should be avoided during treatment with Metronidazole because it may cause disulfiram like action.

Contraindication

Metronidazole is contraindicated in patients with a prior history of hypersensitivity to Metronidazole or other nitroimidazole derivatives.

Commercial pack

Metrosil® 400 Tablet: Box containing 10x10's tablets in blister pack.

Metrosil® Suspension: 60 ml suspension in sealed cap bottle.

