

# Sitrim<sup>®</sup>

Sulphamethoxazole and Trimethoprim

## COMPOSITION :

Sitrim<sup>®</sup> Suspension : Each 5 ml contains sulphamethoxazole BP 200 mg and trimethoprim BP 40 mg.

Sitrim<sup>®</sup> Tablet : Each tablet contains sulphamethoxazole BP 400 mg and trimethoprim BP 80 mg.

Sitrim<sup>®</sup> DS Tablet : Each tablet contains sulphamethoxazole BP 800 mg and trimethoprim BP 160 mg.

## PHARMACOLOGY :

Sitrimoxazole is a mixture of the sulphonamides sulphamethoxazole with trimethoprim in the proportions of 5 to 1. The two components act synergistically to produce a bactericidal or bacteriostatic action against a wide range of gram-positive and gram-negative organisms and some protozoa. It is also active against pneumocystis carinii. Sulphamethoxazole inhibits the enzyme dihydropteroate reductase, which catalyzes the reduction of folic acid to dihydrofolic acid whilst trimethoprim prevents the reduction of dihydrofolic acid to tetrahydrofolic acid by competitive inhibition of dihydrofolate reductase, thereby interfering with cell replication. Both drugs are rapidly and almost completely absorbed from the bowel reaching peak plasma concentrations 1-4 hours after ingestion. Sulphamethoxazole is 65% and trimethoprim is 40% protein bound.

## INDICATION :

Respiratory tract infections: Acute and chronic bronchitis, bronchiectasis, lobar and bronchopneumoniae, pneumocystis carinii pneumonitis, otitis media and sinusitis.

**Genito-urinary tract infections:** Urethritis, cystitis, prostatitis, pyelonephritis, gonorrhoea.

**Skin infections:** Pyoderma, abscess and wound infections.

**Other bacterial infections:** Acute and chronic osteomyelitis, acute brucellosis, septicaemias, nocardiosis and other infections caused by susceptible organisms.

## DOSAGE AND ADMINISTRATION :

Sitrim<sup>®</sup> For severe infections: 1.5 tablets twice daily.

Long term therapy (>14 days): 0.5 tablet twice daily.

Gonorrhoea: 2 tablets every 12 hours for two days or 2.5 tablets followed by a further dose of 2.5 tablets after 8 hours.

Sitrim<sup>®</sup> tablet: over 12 years

For mild to moderate infections: 2 tablets twice daily.

For severe infections: 2 tablets thrice daily.

Long term therapy: (>14 days): 1 tablet twice daily.

Sitrim<sup>®</sup> suspension: Under 12 years

6-12 years: 2 teaspoonful twice daily.

6 month - 5 years: 1 teaspoonful twice daily.

6 weeks - 6 months: 0.5 teaspoonful twice daily.

## CONTRAINDICATION AND PRECAUTION :

Severe hepatic and renal insufficiency, blood dyscrasias, sulphonamides sensitivity, patients with documented megaloblastic anaemia due to folate deficiency. Sitrim<sup>®</sup> is also contraindicated in pregnancy and during nursing because sulphonamides pass the placenta and are excreted in milk and may cause kernicterus.

## SIDE EFFECT :

At the recommended dose side effects are rare and mild. About 75% of the untoward effects involve the skin. Exfoliative dermatitis, Stevens-Johnson syndrome and toxic epidermal necrolysis (Lyell's syndrome) are rare. Nausea and vomiting constitute the bulk gastrointestinal reactions. Diarrhoea, glossitis, and stomatitis are uncommon. Hematological reactions include various types of anemia, granulocytopenia, purpura and agranulocytosis.

## HOW SUPPLIED :

Sitrim<sup>®</sup> tablet : Box containing 10 x 10 tablets in blister pack.

Sitrim<sup>®</sup> DS tablet : Box containing 10 x 10 tablets in blister pack.

Sitrim<sup>®</sup> suspension : Box containing 60 ml in sealed cap bottle.

Manufactured by :  
 **Silva**  
Pharmaceuticals Limited  
Majjdee, Noakhali, Bangladesh