# SINATRIM

TRIMETHOPRIM BP & SULPHAMETHOXAZOLE BP

**Compositions:**
Sinatrim Tablet: Each tablet contains Trimethoprim BP 80 mg and Sulphamethoxazole BP 400 mg. Sinatrim DS Tablet: Each tablet contains Trimethoprim BP 160 mg and Sulphamethoxazole BP 800 mg. Sinatrim Suspension: Each 5 ml contains Trimethoprim BP 40 mg and Sulphamethoxazole BP 200 mg.

**Pharmacology:**
Sinatrim (Co-trimoxazole) having broad spectrum bactericidal activity against a wide range of gram-positive & gram-negative bacteria and some protozoa. Co-trimoxazole containing Trimethoprim BP and Sulphamethoxazole BP in a 1:5 combination exerts its bactericidal action by the sequential blockade of two bacterial enzyme systems in the biosynthesis of folinic acid in the microorganism.

**Dosage And Administration:**
Adult and children over 12 years usual dose: One Sinatrim DS tablet twice daily for at least 5 days or until the patient has been symptom free. For prostatitis and acute brucellosis, it should be maintained for at least 4 weeks and require long term therapy for actinomycetoma. In severe infection and septicemia: Three Sinatrim tablets twice daily. Gonorrhoea: Two Sinatrim DS tablet twice daily over 2 days or, three Sinatrim tablets 8 hourly. Dosage for long-term treatment (>14 days): One Sinatrim tablet twice daily. Prophylaxis of recurrent urinary tract infection: One Sinatrim tablet at night. Pneumocystis carinii infection: 120 mg/kg body weight in divided doses up to 14 days. Children: 6 weeks to 5 months: Sinatrim suspension 1/2 teaspoonful twice daily. 6 months to 5 years: Sinatrim suspension 1 teaspoonful twice daily. 6 years to 12 years: Sinatrim suspension 2 teaspoonful or Sinatrim tablet twice daily.

**Contraindications:**
Co-trimoxazole is contraindicated in patients who have shown hypersensitivity to its ingredients, patients with megaloblastic anaemia, liver damage, blood dyscrasia, severe renal insufficiency. This drug should not be given in pregnancy and infant under 6 week.

**Warning And Precaution:**
To avoid crystalluria, plenty of water should intake during treatment with co-trimoxazole. The drug is to be taken with caution during breast feeding. In prolonged treatment complete blood count is to be performed at monthly intervals

**Side Effects:**
Crystalluria, allergic reaction, haemolysis, thrombocytopenia, neutropenia, agranulocytosis, malaise, headache, purpura, nausea, vomiting, skin rash, erythema multiforme etc.

**Use in Pregnancy and Lactation:**
Pregnancy and during the nursing period, because sulphonamides pass the placenta and are excreted in the breast milk and may cause kernicterus.

**Drug Interaction:**
Trimethoprim is an inhibitor of CYP2C8 as well as OCT2 transporter. Sulfamethoxazole is an inhibitor of CYP2C9. Caution is recommended when Bactrim is co-administered with drugs that are substrates of CYP2C8 and 2C9 or OCT2.

**Overdosage:**
Signs of acute overdosage with trimethoprim include nausea, vomiting, dizziness, headache, mental depression, confusion and bone marrow depression. General principles of treatment include the institution of gastric lavage or emesis, forcing oral fluids, and the administration of intravenous fluids if urine output is low and renal function is normal.

**Storage:**
Keep below 30°C temperature, away from light & moisture. Keep out of the reach of children.

**Packing:**
Sinatrim Tablet: Box contains 10 x 10's tablet in blister strip. Sinatrim DS Tablet: Box contains 10x10's tablet in blister strip. Sinatrim Suspension: Bottle contains 60 ml suspension.

Manufactured By:
The IBN SINA Pharmaceutical Industry PLC.
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