

COMPOSITION

Nixon 250 mg IM/IV Injection: Each vial contains dry powder equivalent to 250 mg Ceftriaxone (as sterile Ceftriaxone Sodium EP) and each ampoule contains 2 ml Lidocaine HCl USP1% injection for IM injection or 5 ml Water for injection USP for IV injection.

Nixon 500 mg IM/IV Injection: Each vial contains dry powder equivalent to 500 mg

Nixon 300 mg IM/IV Injection: Each Vial contains dry powder equivalent to 500 mg Ceftriaxone (as sterile Ceftriaxone Sodium EP) and each ampoule contains 2 ml Lidocaine HCI USP1% injection for IM injection or 5 ml Water for injection USP for IV injection.

Nixon 1 g IM/IV Injection: Each vial contains dry powder equivalent to 1 g Ceftriaxone (as sterile Ceftriaxone Sodium EP) and each ampoule contains 3.5 ml Lidocaine HCI USP 1%

injection for IM injection or 10 ml Water for injection USP for IV injection.

Nixon 2 g IV Injection: Each vial contains dry powder equivalent to 2 g Ceftriaxone (as sterile Ceftriaxone Sodium EP) and each of two ampoules contains 10 ml Water for injection USP for IV injection

PHARMACOLOGY

Nixon contains Ceftriaxone which is a 3rd generation broad-spectrum parenteral cephalosporin antibiotic. It has potent bactericidal activity against a wide range of Gram-positive and Gram-negative organisms. Like other cephalosporins and penicillins, Nixon kills bacteria by interfering with the synthesis of the bacterial cell wall. Nixon has a high degree of stability in the presence of beta lactamases. A remarkable feature of Nixon is its relatively long plasma elimination half-life of about 6 to 9 hours, which makes single or once-daily dosage of the drug appropriate for most patients. **Nixon** is not metabolized in the body. About 40-65% of a dose of **Nixon** is excreted unchanged in the urine; the remainder is body. About 4-05 % of a dose of Mixon's exclete unitrialiged in the line, the remainder is excreted in the bile and ultimately found in the feces as unchanged drug and microbiologically inactive compound. The drug is highly protein bound (95%).

INDICATION

Nixon is indicated for the treatment of the following major infections:

- Lower respiratory tract infections
- Acute Bacterial Otitis Media
- Skin and skin structure infections
- Urinary tract infections
- Gonorrhea
- Bacterial Septicemia
- Bone and joint infections
- Meningitis
- Prevention of postoperative infections
 Perioperative prophylaxis of infections associated with surgery

DOSAGE AND ADMINISTRATION

Adult: The usual dose is 1 to 2 gm by intravenous or intramuscular administration once a day (or in equally divided doses twice a day).

Indication	Dosage
Pneumonia, Bronchitis, Acute bacterial otitis media, Skin and skin structure infection, Urinary tract infections, Bacterial Septicemia, Bone and joint infections, Meningitis	1 to 2 g IV or IM once a day (or in equally divided doses twice a day); Maximum dose: 4 gm/day
Uncomplicated gonococcal infections	250 mg IM as a single dose
Surgical prophylaxis	1 g IV as a single dose 30 to 120 minutes before surgery

Infants and Children (01 month or older): The usual dose is 50 to 75 mg/kg intravenous or intramuscular administration once a day (or in equally divided doses twice a day).

Indication	Dosage
Pneumonia, Bronchitis, Skin and skin structure infection, Urinary tract infections, Bacterial Septicemia, Bone and joint infections.	50 to 75 mg/kg IV or IM once a day (or in equally divided doses twice a day); Maximum dose: 2 gm/day
Acute bacterial otitis media	50 mg/kg IM in single dose; Maximum dose: 1 gm/day
Meningitis	100 mg/kg IV or IM in single daily dose or (or in equally divided doses twice a day); Maximum dose: 4 gm/day

Duration of therapy: Continue for more than 2 days after signs and symptoms of infection have disappeared. Usual duration is 4 to 14 days; in complicated infections, longer therapy may be required.

Preparation of Solutions for Intramuscular / Intravenous Injections: For Intramuscular Injection: 250 mg or 500 mg Nixon should be dissolved in 2 ml

Lidocaine HCI USP 1% injection or 1 g Nixon in 3.5 ml of Lidocaine HCI USP 1% injection For Intravenous Injection: 250 mg or 500 mg Nixon should be dissolved in 5 ml of Water for injection USP or 1 g Nixon in 10 ml of Water for injection USP or 2 g Nixon in 20 ml of Water for injection USP

The injection should be administered over 2-4 minutes, by Intramuscular or Intravenous injection or by tubing infusion over a period of 30 minutes at concentration between 10 mg/mL and 40 mg/mL. Before starting treatment through Ceftriaxone injection, patient tolerance test should be checked by administration of a test dose.

(The use of freshly reconstituted solution is recommended. However, it maintains potency for at least 6 hours at room temperature or 24 hours at 5° C).

CONTRAINDICATION

ceftriaxone should not be given to patients with a history of hypersensitivity to cephalosporin antibiotics

As with other cephalosporins,

anaphylactic shock cannot be ruled out even if a thorough patient history is taken. Anaphylactic shock requires immediate countermeasures such as intravenous epinephrine followed by a glucocorticoid. In rare cases, shadows suggesting sludge have been detected by sonograms of the gallbladder. This condition was reversible on discontinuation or completion of **Nixon** therapy.

Even if such findings are associated with pain, conservative, nonsurgical management recommended. During prolonged treatment the blood picture should be checked at regular intervals. SIDE EFFECT

Nixon is generally well tolerated. A few side effects such as gastro-intestinal effects including diarrhea, nausea and vomiting, stomatitis and glossitis; cutaneous reactions including rash, pruritus, urticaria, edema and erythema multiforme; hematologic reactions including eosinophilia, thrombocytopenia, leucopenia, anemia and neutropenia; hepatic reactions including elevations of SGOT or SGPT, bilirubinemia; CNS reactions including nervousness, confusion, sleep disturbances, headache, hyperactivity, convulsion, hypertonia and dizziness minimized by slow injections over 2-4 minutes.

were reported. Local phlebitis occurs rarely following intravenous administration but can be **USE IN PREGNANCY AND LACTATION** Its safety in human pregnancy has not been established. Therefore, it should not be used in

pregnancy unless absolutely indicated. Low concentrations of Ceftriaxone are excreted in human milk. Caution should be exercised when **Nixon** is administered to a lactating mother.

USE IN CHILDREN

Nixon must not be given to neonates if the neonates is premature and newborn (up to 28 days of age).

DRUG INTERACTION No drug interactions have been reported.

OVERDOSE

There is no specific antidote. Treatment of overdosage should be symptomatic. STORAGE CONDITION

Keep in a dry place away from light and heat. Keep out of the reach of children.

PACKAGING Nixon 250 mg IM Injection: Combipack of one vial containing 250 mg Ceftriaxone (as sterile Ceftriaxone Sodium EP) and one ampoule of 2 ml Lidocaine HCI USP 1% injection. It also

contains a complementary pouch comprised of disposable syringe (3 ml), baby needle, alcohol pad and first aid bandage. Nixon 250 mg IV Injection: Combipack of one vial containing 250 mg Ceftriaxone (as sterile Ceftriaxone Sodium EP) and one ampoule of 5 ml Water for injection USP. It also contains a

complementary pouch comprised of disposable syringe (5 ml), alcohol pad and first aid bandage Nixon 500 mg IM Injection: Combipack of one vial containing 500 mg Ceftriaxone (as sterile Ceftriaxone Sodium EP) and one ampoule of 2 ml Lidocaine HCl USP 1% injection. It also

contains a complementary pouch comprised of disposable syringe (3 ml), baby needle, alcohol pad and first aid bandage. Nixon 500 mg IV Injection: Combipack of one vial containing 500 mg Ceftriaxone (as sterile Ceftriaxone Sodium EP) and one ampoule of 5 ml Water for injection USP. It also contains complementary pouch comprised of disposable syringe (5 ml), alcohol pad and first aid

bandage. Nixon 1 g IM Injection: Combipack of one vial containing 1 g Ceftriaxone (as sterile Ceftriaxone Sodium EP) and one ampoule of 3.5 ml Lidocaine HCl USP 1 % injection. It also contains a complementary pouch comprised of disposable syringe (5 ml), alcohol pad and first aid bandage

Nixon 1 g IV Injection: Combipack of one vial containing 1 g Ceftriaxone (as sterile Ceftriaxone Sodium EP) and one ampoule of 10 ml Water for injection USP. It also contains a complementary pouch comprised of disposable syringe (10 ml), butterfly needle, alcohol pad and first aid bandage Nixon 2 g IV Injection: Combipack of one vial containing 2 g Ceftriaxone (as sterile Ceftriaxone Sodium EP) and two ampoules of 10 ml Water for injection USP. It also contains

a complementary pouch comprised of disposable syringe (20 ml), butterfly needle, alcohol pad and first aid bandage.

