# 1.3.1 Summary of Product Characteristics (SmPC)

## a. Product Details:

FORTIFIED PROCAINE PENICILLIN FOR INJECTION Each vial contains: FORTIFIED PROCAINE PENICILLIN......4.0 mega Excipient.....Q.S.

**Dosage form**: Powder for Injection

# Strength(s):

FORTIFIED PROCAINE PENICILLIN......4.0 mega

**Route of administration:** i.m./i.v.

Pharmacopoeial Status API:

FORTIFIED PROCAINE PENICILLIN BP

Pharmacopoeial status FP: BP

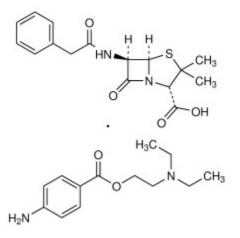
# b. Component of the drug product

## **Active Ingredients**

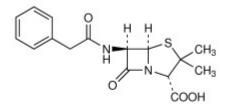
**MC FORIS** is a powder for injection. It has the same antimicrobial action as benzylpenicillin to which it is hydrolysed gradually following deep intramuscular injection. This results in a prolonged effect, but because of the relatively low blood concentrations produced, its use should be restricted to infections caused by micro-organisms that are highly sensitive to penicillin. Procaine benzylpenicillin should not be used as the sole treatment for severe acute infections, or when bacteraemia is present.

Procaine benzylpenicillin is used mainly in the treatment of syphilis; other indications have included anthrax, pneumonia (in children in developing countries), and Whipple's disease.

## **Structure:**



Chemical Structure of Procaine Benzylpenicillin



Chemical Structure of Benzylpenicillin

**Physicochemical Characteristics:** 

# **Procaine Benzylpenicillin**

# **Description :**

A white, crystalline powder.

Solubility: Slightly soluble in water; sparingly soluble in alcohol. A 0.33% solution in

water has a pH of 5.0 to 7.5.

# **Benzylpenicillin Sodium**

# **Description :**

A white or almost white crystalline powder.

**Solubility:** Very soluble in water; practically insoluble in fatty oils and in liquid paraffin. A 10% solution in water has a pH of 5.5 to 7.5.

# **Excipients:**

N/A

1.3.2 Labelling (outer & inner labels)

Will be submitted later

1.3.3 Package Insert (also known as patient information PIL)

# PATIENT INFORMATION LEAFLET

# PATIENT INFORMATION LEAFLET: INFORMATION FOR THE USER FORTIFIED PROCAINE PENICILLIN For Injection (MC FORIS)

#### Fortified Procaine Penicillin for Injection 4 MEGA

DESCRIPTION

# This product is mainly composed of sodium pericillin and Procaine Penicillin. Sodium penicillin, its chemical name (52, 58, 68, 93, 3, 3 dimethyl-6 - (2 - phenyl acetamide) 7 - 0x0-4 -thia-1 ezabley(col [3.2.0] hept-2 - Sodium sait, and may be represented structurally as:

Molecular formula is C16H17N2NaO4S MW 356.38.

Penicillin G proceine, (25.5.Refs.).3-2.1.(25.5.Ref

Molecular formula is C<sub>16</sub>H<sub>18</sub>N<sub>2</sub>O<sub>4</sub>S •C<sub>13</sub>H<sub>20</sub>N<sub>2</sub>O<sub>2</sub>•H<sub>2</sub>O MW 588.72.

#### COMPOSITION

injection contains Procaine Penicillin 3 MEGA, Benzyl Penicillin Sodium 1 MEGA. Each vial of

#### PHARMACOLOGICAL ACTION:

is used to treat a wide variety of bacterial infections. This medication is known as a long-acting This indication is used to treat a write variety of excertai infections. This indication is known as a long-secting natural pencifilities inhibitoit. It works by stopping the growth of bacteria. This antibiotic treats only bacterial infections. It will not work for viral infections (e.g., common cold, flu). Unnecessary use or misuse of any antibiotic can lead to its decreased effectiveness. Method of Administration Procaine penicillin is penicillin's procaine salt, the antimicrobial active ingredient is penicillin. Penicillin plays

Procaine penicillin is penicillin's procaine sait, the antimicrobial active ingredient is penicillin. Penicillin plays on hemolytic streptococcus, Streptococcus, Streptococcus preuronica and Staphylococcus with efficient antibacterial activity. Neisseria gonorthoeae, Neisseria meningitidis bacterium, Corynebacterium diphtheriae, Bacillus anthracis, the bovine type actionny-tects, moniliform chain bacilli, listeria, leptospirosis and spyblits spiroches ensitive to the chenicals. This product is abase muthaeterial activity of Hemosphilus influenzea and pertuasis Berdtella bacteria. This product lostrinium digestion the streptococci and melanin production by Bacteroides anaerobes good antibacterial role of Bacteroides fragilis antibacterial effect. Penicillin play a bactericidal effect by inhibiting bacterial cell wall synthesis.

#### INDICATION

Procaine penicillin is an antibiotic that fights bacterias.

Procaine penicillin is used to treat many different types of infections caused by bacteria, including syphilis (a sexually transmitted disease).

#### CONTRA-INDICATIONS: A previous hyp

ity reaction to any penicillin or to procaine is a contraindication

#### WARNINGS:

WARNINGS: WARNING NOT FOR INTRAVENOUS USE. DO NOT INJECT INTRAVENOUSLY OR ADMIX WITH OTHER INTRAVENOUS SOLUTIONS. THERE HAVE BEEN REPORTS OF INADVERTENT INTRAVENOUS ADMINISTRATION OF PENICILLIN G BENZATHINE WHICH HAS BEEN ASSOCIATED WITH CARDIORESPIRATORY ARREST AND DEATH Prior to administration of this drug. carefully read the WARNINGS, ADVERSE REACTIONS, and DOSAGE AND ADMINISTRATION secti of the labeling

of the maching Anaphylaxis SERIOUS AND OCCASIONALLY FATAL HYPERSENSITIVITY (ANAPHYLACTIC) REACTIONS HAVE BEEN REPORTED IN PATIENTS ON PENICILLIN THERAPY. THESE REACTIONS ARE MORE LIKELY TO OCCUR IN INDIVIDUALS WITH A HISTORY OF PENICILLIN HYPERSENSITIVITY LINEL I O'OCCOR IN RUMATUDALS WITH A THISTORT OF FERRELLA THITTENSIONITATI NADOR A HISTORY OF SINNITATI TO MULTIPE ALLERGENS. THERE HAVE BEEN REPORTS OF INDIVIDUALS WITH A HISTORY OF PENCILLIN HYPERSENSITIVITY WHO HAVE EXPERIENCED SEVERE REACTIONS WHEN TREATED WITH CHALLOPMALD BEFORE INITIATING THERAPY WITH BICILLIN C.R CAREFUL INQUIRY SHOULD BE MADE CONCERNING PREVIOUS HYPERSENSITIVITY REACTIONS TO PENICILLINS, CEPHALOSPORINS OR OTHER ALLERGENS. IF AN ALLERGIC REACTION OCCURS, BICILLIN C-R SHOULD BE DISCONTINUED ALLEMENTS: IF AN ALLEMAN REACTION OCCORS, BALLEN OF BIODED BE DISCONTINUES AND APPROPRIATE THERAPY INSTITUTED, SERIOUS ANAPITYLACTIC REACTIONS REQUIRE IMMEDIATE ENERGENCY TREATMENT WITH EPINEPHRINE. OXYGEN, INTRAVENOUS STREODS AND AURWAY MANAGEMENT, INCLUDING INTUBATION, SHOULD ALSO BE ADMINISTERED AS INDICATED.

### Pseudomembranous Colitis

Pseudomembranous colitis has been reported with nearly all antibacterial agents, including penicillin, and may 1 sedentimination counts in secure typology with meaning at an interview angues, including penusting, and may range in severity from mild to life-frequenting. Therefore, it is important to consider this diagons in patients who present with diarrhea subsequent to the administration of any ambiacterial agent. Treatment with ambiacterial agents selects the normal form of the colon and may permit overgrowth of clostridia. Studies indicate that a toxin produced by Clostridium difficile is one primary cause of "antibiotic-associated to the selection of the selecti

colitis"

comes -After the diagnosis of pseudomembranous colitis has been established, appropriate therapeutic measures should be initiated. Mild cases of pseudomembranous colitis usually respond to drug discontinuation alone. In moderate to severe cases, consideration should be given to management with findia and electrolytes, protein supplementation, and treatment with an antibacterial drug clinically effective against C. difficile colitis.

#### Do not inject into or near an artery or nerve.

Urogenital

Nephropathy

enzathine

Do not nigees moves near an avecy or near-ingecion nito or near a nerve may result in permanent neurological damage. Inadvertent intravascular administration, including inadvertent direct intra-arterial injection or injection immediately adjocent to arteries, of Sicilla C-R and other pencillent persparations has resulted in severe neurovascular damage, including transverse myclitis with permanent paralysis, gangrene requiring amputation of digits and more proximal portions of extremities, and necrosis and sloughing at and surrounding the injection site. Such severe effects have been reported following injections into the buttock, thigh, and deltoid areas. Other site. Such severe effects have been reported following injections into the buttock, thigh, and deloid areas. Other serious complications of suspected intravacultar administration which have been reported include immediate pallor, motiling, or cyanosis of the extremity both distal and proximal to the injection site, followed by bleb formation; severe decma requiring anterior and/or posterior compartment fasciotenry in the lower extremity. The above-describe severe effects and complications have most often occurred in infants and small children. Prompt consultation with an appropriate specialist is indicated if any evidence of compromise of the bleod

#### upply occurs at, proximal to, or distal to the site of injection.1-9 (See PRECAUTIONS, and DOSAGE AND ADMINISTRATION sections.)

Do not inject intravenously or admix with other intravenous solutions. There have been reports of inadverten and the second s

marvenous assumination of pencium o cenzamine which has been associated with cardiorepiratory and death. (See DOSAGE AND ADMINSTRATION section.) Quadriceps femoris fibrosis and attophy have been reported following repeated intramuscular injectio penicillin preparations into the anterolateral thigh.

### DOSAGE AND DIRECTIONS FOR USE:

DUSAGE AND DIRECTIONS POR USE: Streptocecal Infections Group A. Infections of the upper-respiratory tract, skin and soft-tissue infections, scarlet fever, and erysipelas. The following does are recommended: Adults and prediatric patients over 60 lbs. in weight: 2,400,000 units. Pediatric patients from 30 to 60 lbs. '300,000 units. Pediatric patients unit hbs. recomposed doesno is unit how into the a circule assettion units are mitling VOTE: Trontomers with the assettioned doesno is units to the strength of the strength o

NOTE: Treatment with the recommended dosage is usually given at a single session using multiple IM site:

when indicated. An alternative dosage schedule may be used, giving one-half (1/2) the total dose on day 1 and when indicated. An alternative dosage schedule may be used, giving one-half (1/2) the total dose on day one-half (1/2) on day 3. This will also insure the penicilite main required over a 10-day period; hower alternate schedule should be used only when the physician can be assured of the patient's cooperation. **Paeumeoccell Infections (except pneumoccell metinglits)** 60,000 units in pediatine patients and 1,200,000 units in adults, repeated every 2 or 3 days ur temperature is normal for 48 hours. Other forms of penicillin may be necessary for severe cases. ery 2 or 3 days until the

Method of Administration

Bicillin C-R is intended for Intramuscular Injection ONLY. Do not inject into or near an artery or nerve, or sly or admix with other intravenous solutions. (See WARNINGS secti intrave

maravenously or anima with other maravenous autonome, (see with ALVANS section), Because of the high concentration of suspended material in this product, the needle may be blocked if the injection is not made at a slow, steady rate. Parenternal drug products should be impected visually for particulate matter and discoloration prior to administration whenever solution and container permit.

#### SIDE EFFECTS

As with other penicillins, untoward reactions of the sensitivity phenomena are likely to occur, particularly in As with outer pentatining, innovant reactions of the sensitivity prenoticenta are takeny to occur, particularly individuals who have previously demonstrated hypersensitivity to penticillins or in those with a history allergy, astima, hay fever, or utricaria. The following have been reported with parenteral penticillin G: General

Hypersensitivity reactions including the following: skin eruptions (maculopapular to exfoliative dermatitis), urticaria, laryngeal edema, fever, eosinophilia; other serum sickness-like reactions (including chills, fever urticaria, laryngeal edema, lever, osanophilasi, olter serum sichness-like reactions (including chills, lever, oedma, arthraliga, and prostation); and anaphylaxia itolating abcck death. Note: Uricaria, dories kin nabes, and serum sichness-like reactions may be controlled with anthistamines and, if necessary, systemic corticoateroids. Whenever such reactions occur, penicillin G abcudd be diacontinued unless, in the opinion of the physician, the condition being treated is life-threatening and amenable only to therapy with penicillin G. Serious anaphylactic reactions require immediate emergency treatment with opinephrine. Oxygen, intravenous steroids, and airway management, including intubation, should albo be administered as indicated. Gastrointestinal: Pseudomembranous colitis. Onster of pseudomembranous colitis symptoms may occur during anothemetichneous differ. MONDOIG series and anothemetic anothemetic and anothemetic anothemetic anothemetic and anothemetic anot or after antibacterial treatment. (See WARNINGS section.)

Hematologic Hemolytic

215\*175mm

nemia, leukopenia, thrombocyto

Neuropathy

Castronitestinal: Nausea, voming, bioed in stori), mistinal necrosis. Hemic and Lymphatic: Lymphadronopathy. Injection Site: Injection site reactions including pain, inflammation, lump, abscess, necrosis, edema, homorhage, cellulatik, hopersensitivity, arothyle, celymous, and akin uleer. Neurovascular reactions including warmth, vasopasare, pallor, montling, gangrene, numbness of the extremities, cyanosis of the extremities, and neurovascular damage. Metabolic: Elevatod BUN, creatinine, and SGOT.

Musculoskeletal: Joint disorder, periostitis; exacerbation of arthritis; myoglobinuria; rhabdomyolysis Nervous System: Nervousness: tremors: dizziness: somnolence: confusion: anxiety: euphoria: transverse Nervous System: Nervousness, tremors, dizziness, sonnolence; confusion; anxiety, cuphoris; transverse nyelitis; seizures; coran. A syndrome manifested by a variety of CNS symptoms such as severe againtion with confusion, visual and auditory hallucinations, and a fear of impending death (Hoigne's syndrome), has been reported after administration of penicillin G procesine and, less commonly, after injection of the combination of penicillin G benzen-hine and penicillin G procesine. Other symptoms associated with this syndrome, such as psychosis, seizures, dizziness, tinnitus, cyanosis, palpitations, tachycardia, and/or abnormal perception in taste. also may occur

ular hyperirritability or convulsive seizures

The following adverse events have been temporally associated with parenteral administrations of penicillin G

bezzathine: Body as a Whole: Hypersensitivity reactions including allergic vasculitis, pruritis, fatigue, asthenia, and pain; aggravation of existing disorder; headache. Cardiowascular: Cardiac arrest; hypotension; tachycardia; palpitations; pulmonary hypertension; pulmonary embolism; vasculiticin; vasovagit areatics; cerebrovascul; accident; space. Gastrointestinal: Nausea, vomiting; blood in stool; intestinal necrosis.

Respiratory: Hypoxia; apnea; dyspnea

Skin: Diapho Snecial Senses: Blurred vision: blindness

enic bladder; hematuria; proteinuria; renal failure; impotence; pri

### OVERDOSAGE AND PARTICULARS OF ITS TREATMENT

#### sage has the potential to cause a PRESENTATION

STORAGE INSTRUCTIONS Store below 25°C. Protect from light. Keep out of reach of children.