Augmentin 1 gm film-coated tablets Safety information[1]

- The most commonly reported adverse drug reactions are Mucocutaneous candidiasis, diarrhoea, nausea and vomiting. Nausea is more often associated with higher oral doses. If gastrointestinal reactions are evident, they may be reduced by taking Augmentin at the start of a meal.
- AUGMENTIN is contra-indicated in patients with a history of hypersensitivity to beta-lactams, e.g. penicillins and cephalosporins. Before initiating therapy with amoxicillin-clavulanate, careful enquiry should be made concerning previous hypersensitivity reactions to penicillins, cephalosporins, or other allergens. AUGMENTIN is contra-indicated in patients with a previous history of AUGMENTIN-associated jaundice/hepatic dysfunction.
- Prolonged use may also occasionally result in overgrowth of non-susceptible organisms
- Should be used with caution in patients with evidence of hepatic dysfunction.
- In patients with renal impairment the dosage should be adjusted.
- AUGMENTIN should be used in accordance with local official antibiotic- prescribing guidelines and local susceptability data

AS RELENTLESS AS YOU Augmentin (amoxicillin/clavulanic acid)

HY0019A4805/112022
05/02/2024

Augmentin (Amoxicillin / Clavulanic acid) 1 g/125 mg Sachet
PRESCRIBING INFORMATION

Abbreviated Prescribing Information prepared to meet the requirements of the GSK International Pharmaceutical Promotional and Marketing Policy.

AUGMENTIN 1 g/125 mg ADULTS, powder for oral suspension in single-dose sachet (amoxicillin/ clavulanic acid 8:1)

COMPOSITION: Amoxicillin (As amoxicillin trihydrate) 1000 mg and Clavulanic acid (As potassium clavulanate) 125 mg Per single-dose sachet.

Indications: AUGMENTIN is indicated in the treatment of the following infective processes in adults and children: Acute bacterial sinusitis (clinically diagnosed), Acute otitis media, Exacerbation of chronic bronchitis (clinically diagnosed), Community-acquired acute pneumonia, Cystitis, Pyelonephritis, Skin and soft tissue infections, particularly cellulites, animal bites, severe dental abscesses with spreading cellulites, Bone and joint infections, especially osteomyelitis. Official recommendations on the proper use of antibacterial agents should be strictly adhered to.

Dosage and administration method: Doses refer to the amount of amoxicillin/ clavulanic acid, unless otherwise indicated. The dose of AUGMENTIN selected for treatment of a particular infection should take into account: Involved pathogens and their individual sensitivity to antibacterial agents, Infection severity and focus, Patient age, weight and renal function. Other AUGMENTIN formulas (e.g. with larger doses of amoxicillin or different amoxicillin/clavulanic acid ratios) should be considered, if deemed necessary. In adults and children ≥ 40 kg, this AUGMENTIN formula provides a daily dose of amoxicillin 2000 mg/clavulanic acid 250 mg if taken twice daily. Alternatively, it provides amoxicillin 3000 mg/ clavulanic acid 375 mg, if taken three times daily, if administered according to the recommendations hereafter. In children < 40 kg, this AUGMENTIN formula provides a maximum daily dose of amoxicillin 1600-3000 mg/clavulanic acid 200-400 mg, when administered according to the recommendations hereafter. For higher amoxicillin doses, a different AUGMENTIN formulation should be used to avoid the accumulation of unduly large doses of clavulanic acid. Treatment duration depends on patient response to therapy. Some infectious processes (e.g. osteomyelitis) require longer treatment. In any case, treatment should not extend beyond 14 days without seeking medical advice.

Adults and children ≥ 40 kg: Recommended doses: Standard dose (for all indications): 1000 mg/125 mg three times daily; Smaller dose – (particularly in skin and soft infections as well as mild sinusitis): 1000 mg/125 mg twice daily.

Children < 40 kg: In children, use AUGMENTIN tablets, suspension or pediatric sachet. Recommended dose: from 40 mg/5 mg/kg/day to 80 mg/10 mg/kg/day (do not exceed 3000 mg/375 mg per day) in three doses, depending on the severity of infection.

Older patients: No dose adjustment is required.

Renal failure patients: No dosage adjustment is required in patients with creatinine clearance (CrCl) above 30 ml/min. However, in patients with creatinine clearance below 30 ml/min, AUGMENTIN formulas with an amoxicillin/clavulanic acid ratio of 8:1 are not recommended, since no dosage adjustment is possible.

Liver failure patients: Use with caution and follow up liver functions regularly.

Route and methods of administration: AUGMENTIN is administered orally. AUGMENTIN is recommended at the beginning of meals to reduce GIT intolerance and improve absorption of amoxicillin/clavulanic acid. Treatment may be initiated parenterally using product profile formula IV, and continued with a suitable oral formula. Pour contents of the single-dose sachet in half a glass of water prior to intake.

Contraindications: Hypersensitivity to active substances, penicillin or any of its excipients. History of severe acute hypersensitivity (e.g. anaphylaxis) to any beta-lactam (e.g cephalosporins, carbapeneme or monolactam). History of jaundice/hepatic injury linked to amoxicillin/clavulanic acid.

Warnings and special precautions: Detailed history of hypersensitivity reaction to penillin, cephalosporins or other beta lactams must be obtained prior to initiation of amoxicillin/clavulanic acid therapy. Serious and occasionally fatal hypersensitivity reactions (including anaphylactoid and severe cutaneous adverse reactions) have been reported in patients on penicillin therapy. Such reactions are more likely to happen in patients with history of hypersensitivity to penicillin and atopic individuals. Any allergic manifestation requires stopping amoxicillin/clavulanic acid therapy and initiation of an alternative suitable therapy. In infectious processes with amoxicillin-sensitive microorganisms,

amoxicillin/clavulanic acid should be replaced with amoxicillin in compliance with recommended practices. This AUGMENTIN formula is deemed unsuitable if pathogens are known to be beta lactam resistant and, without beta lactamase, inhibited by clavulanic acid. Such formula is unsuitable for penicillin-resistant *S. pneumoniae* infections. Convulsions are likely to occur in renal failure patients and patients receiving high doses of AUGMENTIN. Amoxicillin/clavulanic acid is better avoided in suspected infectious mononucleosis since polymorphic eruptions have been reported following the administration of amoxicillin. Cutaneous allergic reactions are likely when treatment is associated with concomitant allopurinol administration. Prolonged use of AUGMENTIN may lead to the appearance of large numbers of resistant microorganisms. The early appearance of generalized erythema with fever and pustules may be a symptom of Generalize Acute Pustular Exanthema (GAPE). In such case, AUGMENTIN treatment should be immediately discontinued and any further use of amoxicillin is contraindicated in this patient. Amoxicillin/clavulanic acid should be use with caution in liver failure patients. Hepatic effects have been reported in males and elderly patients after prolonged treatment with AUGMENTIN and rarely in children. In all cases, signs and symptoms were reported during or shortly after discontinuation of treatment and rarely several weeks after discontinuation of treatment. However, all signs and symptoms were generally self-limited and reversible. Only in very rare cases have hepatic effects been severe or have led to death. In nearly all cases, patients had been known to suffer from subclinical serious pathology or were under concomitant medication with known potential to induce hepatic side effects. Colitis associated with antibiotic therapy is common with various antibacterial agents. Severity of colitis symptoms associated with antibiotics is variable, ranging from light symptoms to threatening life. The diagnosis of colitis is to be considered in cases with diarrhea during or following the administration of various antibiotics. In colitis associated with amoxicillin/ clavulanic acid, treatment must be discontinued without delay and the patient must seek medical advice for appropriate therapy. Anti-peristaltic agents are contraindicated in this case. In prolonged treatment, it is important to monitor organ functions, especially renal functions, liver functions and hematopoiesis. In rare cases, Quick time is prolonged in patients receiving amoxicillin/ clavulanic acid. Close monitoring of bleeding time is imperative with concomitant anticoagulant therapy. Oral anticoagulant doses may require adjustment to maintain proper anticoagulation. In renal failure patients, dose adjustment must be adapted to severity of the case. Abnormal prolongation of prothrombin time (increased INR) has been reported rarely in patients receiving amoxicillin-clavulanate and oral anticoagulants. Appropriate monitoring should be undertaken when anticoagulants are prescribed concurrently. Adjustments in the dose of oral anticoagulants may be necessary to maintain the desired level of anticoagulation. In rare cases, crystalluria has been reported in patients with oliguria, especially when the antibiotic is administered parenterally. With large doses of amoxicillin, good hydration and adequate urine output must be ensured to reduce the risks of crystalluria. Urine output must be regularly checked with indwelling urinary catheters. Enzymatic glucose measurement in urine with glucose oxidase is recommended with amoxicillin therapy to avoid false positive results often encountered with non-enzymatic methods. Clavulanic acid in AUGMENTIN may be linked to non-specific IgG and albumin on RBC membrane yielding a false positive Coombs test. Positive ELISA immunoenzymatic tests for *Aspergillus Platelia* (Bio-Rad labs) have been reported in patients treated with amoxicillin/ clavulanic acid, although none of these patients was infected with *Aspergillus*. Cross reactions with non-Aspergillus polysaccharides and polyfuranoses were also reported with ELISA tests of *Aspergillus Platelia* (Bio-Rad labs). Therefore, positive results of ELISA tests in patients treated with amoxicillin/clavulanic acid must be interpreted with utmost caution and confirmed with other diagnostic methods. AUGMENTIN powder for oral suspension 1 g/125 mg contains 30 mg aspartame (E951) per sachet, and is a source of phenylalanine, which may be dangerous for phenylketonurics. AUGMENTIN also contains maltodextrin (glucose) which is contraindicated in glucose-galactose malabsorption syndrome patients (rare).

Interactions with other drugs and other forms of interaction: Oral anticoagulants: Oral anticoagulants are often administered with penicillin antibiotics without any interaction reported. However, occasional increases in INR were reported in patients under acenocoumarol or warfarin and concurrent treatment with amoxicillin. If both agents must be administered together, Quick time or INR must be monitored as amoxicillin is added or withdrawn along with adjustment of oral anticoagulant doses.

Augmentin (Amoxicillin / Clavulanic acid) 1 g/125 mg Sachet
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Methotrexate: Penicillins often reduce methotrexate excretion and may increase its toxicity.

Probenecid: Concomitant probenecid therapy is not recommended with amoxicillin, since probenecid reduces tubular secretion of amoxicillin and consequently increase serum concentrations of amoxicillin, but not clavulanic acid.

Mycophenolate mofetil: In patients treated with mycophenolate mofetil, its active metabolite concentrations – mycophenolic acid (MPA) – are reduced by about 50% after oral amoxicillin and clavulanic acid. However, this reduction does not warrant adjustment of MPA dosage, especially with the absence of any clinical signs of graft dysfunction. Clinical follow-up and close monitoring are required for a few days after the discontinuation of antibiotic therapy.

Pregnancy and breast-feeding: Pregnancy: Animal studies have not demonstrated direct or indirect hazards on pregnancy and/or embryonic/fetal development, nor on delivery and/or postnatal growth. Limited data on amoxicillin/clavulanic acid administration to pregnant patients have not shown any increase in congenital malformations in the fetus. A single study on pregnant patients suffering from premature rupture of the membranes may show some association between amoxicillin/clavulanic acid and necrotizing enterocolitis in newborns. As a rule, unless the physician considers such therapy necessary, it is advisable to avoid AUGMENTIN during pregnancy.

Breast feeding: Both antibiotics are excreted in human milk (effects of clavulanic acid on breast-fed infants are not known). Diarrhea and mucus membrane fungal infections are likely to occur in breast-fed infants and may require stopping breast-feeding. Amoxicillin-clavulanic acid during the period of breast feeding should only be considered after evaluation of the benefit/risk ratio evaluation by the physician.

Effects on driving vehicles and operating machinery: No studies were conducted on the effects of AUGMENTIN on driving vehicles or operating machines. However, unwanted side effects (e.g. allergic reactions, dizziness, convulsions) may increase hazards while driving vehicles or operating machines.

Side-effects: The most common unwanted side-effects are : diarrhea, nausea and vomiting.

Infections and infestations	
Mucocutaneous Candidiasis	Common
Excessive insensitive microorganisms	Undetermined
Hematological and lymphatic system disorders	
Reversible leucopenia (including neutropenia)	Rare
Thrombocytopenia	Rare
Reversible agranulocytosis	Very rare
Hemolytic anemia	Very rare
Prolonged bleeding time and Quick time[1]	Very rare
Immune system disorders[10]	
Angioneurotic oedema	Very rare
Anaphylaxis	Very rare
Serum illness	Very rare
Hypersensitive Vasculitis	Very rare
Nervous system disorders	
Dizziness	Uncommon
Encephalitis	Uncommon
Reversible hypersensitivity	Very rare
Convulsions [2]	Very rare
Aseptic meningitis	Undetermined
GIT side effects	
Diarrhea	Very Common
Nausea[3]	Common
Vomiting	Common
Indigestion	Uncommon
Antibiotic induced colitis[4]	Very rare
Glossitis	Undetermined

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Hepatobiliary disorders	
Raised AST and/or ALT[5]	Uncommon
Hepatitis[6]	Very rare
Cholestatic jaundice[6]	Very rare
Skin and subcutaneous tissue disorders[7]	
Skin eruption(s)	Uncommon
Pruritus	Uncommon
Urticaria	Uncommon
Polymorphic erythema	Rare
Stevens-Johnson syndrome	Very rare
Hyperacute necrotizing epidermolysis	Very rare
Bullous or exfloliative dermatitis	Very rare
Acute Generalized Exanthematous Pustulosis (AGEP)[9] and drug reaction with eosinophilia and systemic symptoms (DRESS)	Very rare
Urinary and renal disorders :	
Interstitial nephritis	Very rare
Crystalluria[8]	Very rare

[1] Item 4.4

[2] Item 4.4

[3] Nausea is often associated with large oral doses• GIT symptoms may be less severe if AUGMENTIN is taken at the begining of a meal.

[4] Including pseudo-membranous and hemorrhagic coliti (item 4.4)

[5] Moderate AST and/or AL T elevations were reported with beta lactamin antibiotics, but no significance was linked to such observation.

[6] Effects observed with other penicillen and cephalosporins (item 4.4).

[7] Discontinue treatment with allergic/ atopic dermatitis (Item 4.4) .

[8] Item 4.9

[9] Item 4.4

[10] Items 4.3 and 4.4

Overdosage: Overdosage signs and symptoms: The most common signs and symptoms occurring with overdosage are gastrointestinal symptoms and electrolyte imbalance. Crystalluria may lead to renal failure in rare cases treated with amoxicillin. Occasional convulsions may occur in renal failure patients or with high doses of AUGMENTIN. Amoxicillin may precipitate on urinary catheters especially when injected intravenously in large doses. Indwelling urinary catheters should be regularly checked for patency.

Treatment of toxicity: Gastrointestinal symptoms and signs are treated symptomatically. However, electrolyte imbalance requires close follow-up and monitoring of serum electrolytes. Hemodialysis is an efficient treatment for amoxicillin and clavulanic acid overdoses.

Full Prescribing Information is available on request. Please read the full prescribing information prior to administration.

Ministry of Health Augmentin 1 g / 125 mg powder for oral suspension in single dose sachets leaflet approval date: 17-4-2018

1. Always read the full prescribing information
2. Healthcare professionals are asked to report any suspected adverse reactions to the Egyptian Pharmaco-Vigilance Center (EPVC).

HY0019A4805/112022
05/02/2024

Augmentin (Amoxicillin / Clavulanic acid) 1 gm Tablets
PRESCRIBING INFORMATION

Abbreviated Prescribing Information (GDS26/IPI13) and prepared to meet the requirements of the GSK International Pharmaceutical Promotional and Marketing Policy.

AUGMENTIN 1 gm Tablets

Active Ingredients: *AUGMENTIN* 1 g tablets: Each tablet contains 875 mg amoxicillin (as amoxicillin trihydrate) and 125 mg clavulanic acid (as potassium clavulanate).

Indications: *AUGMENTIN* is an antibiotic agent with a notably broad spectrum of activity against the commonly occurring bacterial pathogens in general practice and hospital. The Beta-lactamase inhibitory action of clavulanate extends the spectrum of amoxicillin to embrace a wider range of organisms, including many resistant to other Beta-lactam antibiotics. *AUGMENTIN 1* g (875/125 mg) tablets are indicated for short-term treatment of bacterial infections of the upper and lower respiratory tract (including ENT), genito-urinary tract, skin and soft tissues, bones and joints, and other infections including dental infections, septic abortion, puerperal sepsis. For a list of susceptible organisms, refer to full prescribing information.

Dosage and administration: Dosage depends on the age and renal function of the patient and the severity of the infection. To minimise potential gastrointestinal intolerance, administer at the start of a meal. The absorption of AUGMENTIN is optimised when taken at the start of a meal. Treatment should not be extended beyond 14 days without review. Therapy can be started parenterally and continued with an oral preparation. Tablets should be swallowed whole without chewing. If required, tablets may be broken in half and swallowed without chewing. AUGMENTIN tablets are not recommended in children of 12 years and under. *Adults and Children over 12 years:* The usual recommended daily dosage is: Severe infections: One AUGMENTIN 1 g tablet every 12 hours. Therapy can be started parenterally and continued with an oral preparation. *Dosage in Renal Impairment:* No adjustment in dose is required in patients with creatinine clearance (CrCl) greater than 30 mL/min. The AUGMENTIN 1g tablet should only be used in patients with a creatinine clearance (CrCl) rate of more than 30 mL/min. *Dosage in Hepatic Impairment:* Dose with caution, monitor hepatic function at regular intervals.

Contraindications: *AUGMENTIN* is contra-indicated in patients with a history of hypersensitivity to beta-lactams, e.g. penicillins and cephalosporins. *AUGMENTIN* is contra-indicated in patients with a previous history of *AUGMENTIN*-associated jaundice/hepatic dysfunction.

Warnings and Precautions: Before initiating therapy with *AUGMENTIN* careful enquiry should be made concerning previous hypersensitivity reactions to penicillins or cephalosporins or allergens. Serious and occasionally fatal hypersensitivity reactions (including anaphylactoid and severe cutaneous adverse reactions) have been reported in patients on penicillin therapy. These reactions are more likely to occur in individuals with a history of penicillin hypersensitivity. If an allergic reaction occurs, *AUGMENTIN* therapy must be discontinued, and appropriate alternative therapy instituted. Serious anaphylactic reactions require immediate emergency treatment with adrenaline. Oxygen, intravenous (i.v.) steroids and airway management (including intubation) may also be required. *AUGMENTIN* should be avoided if infectious mononucleosis is suspected since the occurrence of a morbilliform rash has been associated with this condition following the use of amoxicillin. Prolonged use may also occasionally result in overgrowth of non-susceptible organisms. Pseudomembranous colitis has been reported with the use of antibiotics and may range in severity from mild to life-threatening. Therefore, it is important to consider its diagnosis in patients who develop diarrhoea during or after antibiotic use. If prolonged or significant diarrhoea occurs or the patient experiences abdominal cramps, treatment should be discontinued immediately, and the patient investigated further. Abnormal prolongation of prothrombin time (increased INR) has been reported rarely in patients receiving *AUGMENTIN* and oral anticoagulants. Appropriate monitoring should be undertaken when anticoagulants are prescribed concurrently. Adjustment in the dose of oral anticoagulants may be necessary to maintain the desired level of anticoagulation. Changes in liver function tests have been observed in some patients receiving AUGMENTIN. The clinical significance of these changes is uncertain. AUGMENTIN should be used with caution in patients with evidence of hepatic dysfunction. Cholestatic jaundice, which may be severe, but is usually reversible, has been reported rarely. Signs and symptoms may not become apparent for up to six weeks after treatment has ceased. In patients with renal impairment *AUGMENTIN* dosage should be adjusted. In patients with reduced urine output, crystalluria has been observed very rarely, predominantly with parenteral therapy. During the administration of high doses of amoxicillin, it is advisable to maintain adequate fluid intake and

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urinary output in order to reduce the possibility of amoxicillin crystalluria.

Interactions: Concomitant use of probenecid is not recommended. Concomitant use with *AUGMENTIN* may result in increased and prolonged blood levels of amoxicillin but not of clavulanate. In common with other antibiotics, *AUGMENTIN* may affect the gut flora, leading to lower oestrogen reabsorption and reduced efficacy of combined oral contraceptives. In the literature there are rare cases of increased international normalised ratio in patients maintained on acenocoumarol or warfarin and prescribed a course of amoxicillin. If co-administration is necessary, the prothrombin time or international normalised ratio should be carefully monitored with the addition or withdrawal of *AUGMENTIN*. In patients receiving mycophenolate mofetil, reduction in pre-dose concentration of the active metabolite mycophenolic acid of approximately 50% has been reported following commencement of oral amoxicillin plus clavulanic acid. The change in pre-dose level may not accurately represent changes in overall MPA exposure.

Pregnancy and Lactation: In a single study in women with pre-term, premature rupture of the foetal membrane (pPROM), it was reported that prophylactic treatment with *AUGMENTIN* may be associated with an increased risk of necrotising enterocolitis in neonates. Use should be avoided in pregnancy, especially during the first trimester, unless considered essential by the physician. *AUGMENTIN* may be administered during the period of lactation. With the exception of the risk of sensitisation, associated with the excretion of trace quantities in breast milk, there are no detrimental effects for the infant.

Effects on Ability to Drive and Use Machines: Adverse effects on the ability to drive or operate machinery have not been observed.

Adverse Reactions: Infections and infestations*:* Common: Mucocutaneous candidiasis. Blood and lymphatic system disorders: Rare: eversible leucopenia (including neutropenia) and thrombocytopenia. Very rare: reversible agranulocytosis and haemolytic anaemia. Immune system disorders: Very rare: Angioneurotic oedema, anaphylaxis, serum sickness-like syndrome, hypersensitivity vasculitis. Nervous system disorders: Uncommon: Dizziness, headache. Very rare: Reversible hyperactivity, aseptic meningitis, convulsions Convulsions may occur in patients with impaired renal function or in those receiving high doses. Gastrointestinal disorders: Adults: Very common: Diarrhoea. Common: Nausea, vomiting. Children: Common: Diarrhoea, nausea, vomiting. All populations: Nausea is more often associated with higher oral dosages. If gastrointestinal reactions are evident, they may be reduced by taking *AUGMENTIN* at the start of a meal. Uncommon: Indigestion. Very rare: Antibiotic-associated colitis (including pseudomembranous colitis and haemorrhagic colitis). Black hairy tongue. Hepatobiliary disorders: Uncommon: A moderate rise in AST and/or ALT has been noted. Very rare: Hepatitis and cholestatic jaundice. Hepatic events have been reported predominantly in males and elderly patients and may be associated with prolonged treatment. These events have been very rarely reported in children. Signs and symptoms usually occur during or shortly after treatment but in some cases may not become apparent until several weeks after treatment has ceased. These are usually reversible. Hepatic events may be severe and in extremely rare circumstances, deaths have been reported. These have almost always occurred in patients with serious underlying disease or taking concomitant medications known to have the potential for hepatic effects. Skin and subcutaneous tissue disorders: Uncommon Skin rash, pruritus, urticaria. Rare: Erythema multiforme. Very rare: Stevens-Johnson syndrome, toxic epidermal necrolysis, bullous exfoliative-dermatitis, acute generalised exanthemous pustulosis (AGEP), and drug reaction with eosinophilia and systemic symptoms (DRESS). If any hypersensitivity dermatitis reaction occurs, treatment should be discontinued. Renal and urinary disorders: Very rare: Interstitial nephritis, crystalluria.

Overdose: Gastrointestinal symptoms and Disturbance of the fluid and electrolyte balances may be evident. Gastrointestinal symptoms may be treated symptomatically. with attention to the water electrolyte balance. Amoxicillin crystalluria, in some cases leading to renal failure, has been observed. *AUGMENTIN* can be removed from the circulation by haemodialysis.

Full Prescribing Information is available on request. Please read the full prescribing information prior to administration.
Ministry of Health Augmentin 1 gm film-coated tablets leaflet approval date: 10-3-2020

1. Always read the full prescribing information
2. Healthcare professionals are asked to report any suspected adverse reactions to the Egyptian Pharmaco-Vigilance Center (EPVC).

HY0019A4805/112022
05/02/2024

Augmentin (Amoxicillin / Clavulanic acid) Paediatric Suspension 457 mg/5 ml powder for oral suspension
PRESCRIBING INFORMATION

Abbreviated Prescribing Information (GDS26 /IPI11) and prepared to meet the requirements of the GSK International Pharmaceutical Promotional and Marketing Policy.

AUGMENTIN PAEDIATRIC SUSPENSION 457mg/5ml

Active Ingredients: Amoxicillin trihydrate – Potassium clavulanate.

Indications: AUGMENTIN 457mg/5 ml (400/57 mg/5 ml) suspension are indicated for short term treatment of bacterial infections at the following sites when amoxicillin resistant beta-lactamase producing strains are suspected as the cause. In other situations, amoxicillin alone should be considered: Upper and lower respiratory tract (including ENT), urinary tract, skin and soft tissues, and dental infections. Local susceptibility data should be consulted where available. For a list of susceptible organisms, refer to full prescribing information.

Dosage and administration: Children aged 2 years and over: Mild to moderate infections 25/3.6 mg/kg/day in two divided doses. Serious infections 45/6.4 mg/kg/day in two divided doses. Children aged 2 months to under 2 years should be dosed according to body weight. See full prescribing information for details. Children under two months: No dosage recommendations. Renal impairment: Not recommended for infants with immature renal function or patients with GFR of <30 ml/min. Hepatic impairment: Dose with caution, monitor hepatic function at regular intervals. To minimise potential gastrointestinal intolerance and optimise absorption, administer at the start of a meal. Treatment should not be extended beyond 14 days without review.

Contraindications: AUGMENTIN is contra-indicated in patients with a history of hypersensitivity to beta-lactams, e.g. penicillins and cephalosporins. AUGMENTIN is contra-indicated in patients with a previous history of AUGMENTIN-associated jaundice/hepatic dysfunction.

Warnings and Precautions: Before initiating therapy with AUGMENTIN careful enquiry should be made concerning previous hypersensitivity reactions to penicillins , cephalosporins or other allergens. Serious and occasionally fatal hypersensitivity reactions (including anaphylactoid and severe cutaneous adverse reactions) have been reported in patients on penicillin therapy. These reactions are more likely to occur in individuals with a history of penicillin hypersensitivity. If an allergic reaction occurs, AUGMENTIN therapy must be discontinued, and appropriate alternative therapy instituted. Serious anaphylactic reactions require immediate emergency treatment with adrenaline. Oxygen, intravenous (i.v.) steroids and airway management (including intubation) may also be required. AUGMENTIN should be avoided if infectious mononucleosis is suspected since the occurrence of a morbilliform rash has been associated with this condition following the use of amoxicillin. Prolonged use may also occasionally result in overgrowth of non-susceptible organisms. Pseudomembranous colitis has been reported with the use of antibiotics and may range in severity from mild to life-threatening. Therefore, it is important to consider its diagnosis in patients who develop diarrhoea during or after antibiotic use. If prolonged or significant diarrhoea occurs or the patient experiences abdominal cramps, treatment should be discontinued immediately, and the patient investigated further.Concomitant administration of amoxicillin & anticoagulants from coumarin class may prolong the bleeding time. A dose adjustment of anticoagulants may be necessary. Changes in liver function tests have been observed in some patients receiving AUGMENTIN. The clinical significance of these changes is uncertain, but AUGMENTIN should be used with caution in patients with evidence of hepatic dysfunction. Cholestatic jaundice, which may be severe, but is usually reversible, has been reported rarely. Signs and symptoms may not become apparent for up to six weeks after treatment has ceased. In patients with renal impairment AUGMENTIN dosage should be adjusted. In patients with reduced urine output, crystalluria has been observed very rarely, predominantly with parenteral therapy. During the administration of high doses of amoxicillin, it is advisable to maintain adequate fluid intake and urinary output in order to reduce the possibility of amoxicillin crystalluria. AUGMENTIN suspension contains aspartame caution in patients with phenylketonuria.

Interactions: Concomitant use of probenecid is not recommended. Concomitant use with AUGMENTIN may result in increased and prolonged blood levels of amoxicillin but not of clavulanate. Concomitant use of allopurinol during treatment with amoxicillin can increase the likelihood of allergic skin reactions. In common with other antibiotics, AUGMENTIN may

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affect the gut flora, leading to lower oestrogen reabsorption and reduced efficacy of combined oral contraceptives. In the literature, there are rare cases of increased international normalised ratio in patients maintained on acenocoumarol or warfarin and prescribed a course of amoxicillin. If co-administration is necessary, the prothrombin time or international normalised ratio should be carefully monitored with the addition or withdrawal of AUGMENTIN. In patients receiving mycophenolate mofetil, reduction in pre-dose concentration of the active metabolite mycophenolic acid of approximately 50% has been reported following commencement of oral amoxicillin plus clavulanic acid. The change in pre-dose level may not accurately represent changes in overall MPA exposure.

Pregnancy and Lactation: In a single study in women with pre-term, premature rupture of the foetal membrane (pPROM), it was reported that prophylactic treatment with AUGMENTIN may be associated with an increased risk of necrotising enterocolitis in neonates. Use should be avoided in pregnancy, especially during the first trimester, unless considered essential by the physician. AUGMENTIN may be administered during the period of lactation. With the exception of the risk of sensitisation, associated with the excretion of trace quantities in breast milk, there are no detrimental effects for the infant.

Effects on Ability to Drive and Use Machines: Adverse effects on the ability to drive or operate machinery have not been observed.

Adverse Reactions: **Infections and infestations:** Common: Mucocutaneous candidiasis.

Blood and lymphatic system disorders: Rare: reversible leucopenia (including neutropenia) and thrombocytopenia. Very rare: reversible agranulocytosis and haemolytic anaemia. Prolongation of bleeding time and prothrombin time.

Immune system disorders: Very rare: Angioneurotic oedema, anaphylaxis, serum sickness-like syndrome, hypersensitivity vasculitis.

Nervous system disorders: Uncommon: Dizziness, headache. Very rare: reversible hyperactivity, aseptic meningitis and convultions. Convulsions may occur in patients with impaired renal function or in those receiving high doses.

Gastrointestinal disorders: Adults: Very common: Diarrhoea. Common: Nausea, vomiting. Children: Common: Diarrhoea, nausea, vomiting.

All populations: Nausea is more often associated with higher oral dosages. If gastrointestinal reactions are evident, they may be reduced by taking *AUGMENTIN* at the start of a meal. Uncommon: Indigestion. Very rare: Antibiotic-associated colitis (including pseudomembranous colitis and haemorrhagic colitis). Black hairy tongue. Superficial tooth discolouration has been reported very rarely in children. Good oral hygiene may help to prevent tooth discolouration as it can usually be removed by brushing.

Hepatobiliary disorders: Uncommon: A moderate rise in AST and/or ALT has been noted. Very rare: Hepatitis and cholestatic jaundice. Hepatic events have been reported predominantly in males and elderly patients and may be associated with prolonged treatment. These events have been very rarely reported in children. Signs and symptoms usually occur during or shortly after treatment but in some cases, may not become apparent until several weeks after treatment has ceased. These are usually reversible. Hepatic events may be severe and in extremely rare circumstances, deaths have been reported. These have almost always occurred in patients with serious underlying disease or taking concomitant medications known to have the potential for hepatic effects.

Skin and subcutaneous tissue disorders: Uncommon Skin rash, pruritus, urticaria. Rare: Erythema multiforme. Very rare: Stevens-Johnson syndrome, toxic epidermal necrolysis, bullous exfoliative-dermatitis, acute generalised exanthemous pustulosis (AGEP), and drug reaction with eosinophilia and systemic symptoms (DRESS). If any hypersensitivity dermatitis reaction occurs, treatment should be discontinued. Renal and urinary disorders: Very rare Interstitial nephritis, crystalluria.

Overdose: Disturbance of the fluid and electrolyte balances may be evident. Gastrointestinal symptoms may be treated symptomatically. Amoxicillin crystalluria, in some cases leading to renal failure, has been observed.

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AUGMENTIN can be removed from the circulation by haemodialysis.

Full Prescribing Information is available on request. Please read the full prescribing information prior to administration.

Ministry of Health Augmentin 400 mg / 57 mg powder for oral suspension leaflet approval date: 13/2/2020.

1. Always read the full prescribing information
2. Healthcare professionals are asked to report any suspected adverse reactions to the Egyptian Pharmaco-Vigilance Center (EPVC)

HY0019A4805/112022
05/02/2024

Augmentin (Amoxicillin / Clavulanic acid) DUO SUSPENSION 228 mg/ 5 ml PRESCRIBING INFORMATION

Abbreviated Prescribing Information based on the International Prescribing Information (GDS26/IPI14) and prepared to meet the requirements of the GSK International Pharmaceutical Promotional and Marketing Policy.

AUGMENTIN DUO SUSPENSION 228 mg/5ml

Active Ingredients: Amoxicillin trihydrate – Potassium clavulanate.

Indications: AUGMENTIN 228 mg/5 ml (200/28mg/5 ml) for twice daily oral dosing, suspension is indicated for short term treatment of bacterial infections at the following sites when amoxicillin resistant beta-lactamase producing strains are suspected as the cause. In other situations, amoxicillin alone should be considered: Upper and lower respiratory tract (including ENT), genito-urinary tract, skin and soft tissues, and dental infections. For a list of susceptible organisms, refer to full prescribing information.

Dosage and administration: Dosage depends on the age, weight and renal function of the patient and the severity of the infection. Dosages are expressed throughout in terms of amoxicillin/clavulanate content except when doses are stated in terms of an individual component. To minimise potential gastrointestinal intolerance, administer at the start of a meal. The absorption of AUGMENTIN is optimised when taken at the start of a meal.
Treatment should not exceed 14 days without review. Therapy can be started parenterally and continued with an oral preparation. The usual recommended daily dosage is:

Lower dose: 25/3.6 to 45/6.4 mg/kg/day in two divided doses for mild to moderate infections (upper respiratory tract infections e.g. recurrent tonsillitis, lower respiratory infections and skin and soft tissue infections).

Higher dose: 45/6.4 to 70/10 mg/kg/day two divided doses for for the treatment of more serious infections (upper respiratory tract infections e.g. otitis media and sinusitis, lower respiratory tract infections e.g. bronchopneumonia and urinary tract infections). No clinical data are available on doses above 45/6.4 mg/kg/day in children under 2 years. There are no clinical data for AUGMENTIN suspension 228 mg/5 mL to make dosage recommendations for children under 2 months old. Renal Impairment: No adjustment in dose is required in patients with creatinine clearance greater than 30 mL/min. AUGMENTIN suspension 200/28 mg/5 ml are not recommended in patients with a creatinine clearance of less than 30 mL/min.
Hepatic Impairment: Dose with caution; monitor hepatic function at regular intervals. There is, yet, insufficient evidence on which to base a dosage recommendation.

Contraindications: AUGMENTIN is contra-indicated in patients with a history of hypersensitivity to beta-lactams, e.g. penicillins and cephalosporins. AUGMENTIN is contra-indicated in patients with a previous history of AUGMENTIN-associated jaundice/hepatic dysfunction.

Warnings and Precautions: Before initiating therapy with AUGMENTIN careful enquiry should be made concerning previous hypersensitivity reactions to penicillins or cephalosporins or other allergens. Serious and occasionally fatal hypersensitivity reactions (including anaphylactoid and severe cutaneous adverse reactions) have been reported in patients on penicillin therapy. These reactions are more likely to occur in individuals with a history of penicillin hypersensitivity. If an allergic reaction occurs, AUGMENTIN therapy must be discontinued, and appropriate alternative therapy instituted. Serious anaphylactic reactions require immediate emergency treatment with adrenaline. Oxygen, intravenous (i.v.) steroids and airway management (including intubation) may also be required.
AUGMENTIN should be avoided if infectious mononucleosis is suspected since the occurrence of a morbilliform rash has been associated with this condition following the use of amoxicillin. Prolonged use may also occasionally result in overgrowth of non-susceptible organisms. Pseudomembranous colitis has been reported with the use of antibiotics and may range in severity from mild to life-threatening. Therefore, it is important to consider its diagnosis in patients

Augmentin (Amoxicillin / Clavulanic acid) DUO SUSPENSION 228 mg/ 5 ml PRESCRIBING INFORMATION

who develop diarrhoea during or after antibiotic use. If prolonged or significant diarrhoea occurs or the patient experiences abdominal cramps, treatment should be discontinued immediately, and the patient investigated further. Abnormal prolongation of prothrombin time (increased INR) has been reported rarely in patients receiving AUGMENTIN and oral anticoagulants. Appropriate monitoring should be undertaken when anticoagulants are prescribed concurrently. Changes in liver function tests have been observed in some patients receiving AUGMENTIN. The clinical significance of these changes is uncertain, but AUGMENTIN should be used with caution in patients with evidence of hepatic dysfunction. Cholestatic jaundice, which may be severe, but is usually reversible, has been reported rarely. Signs and symptoms may not become apparent for up to six weeks after treatment has ceased. In patients with renal impairment AUGMENTIN suspension 200/28 mg/5 mL are not recommended. In patients with renal impairment AUGMENTIN dosage should be adjusted. In patients with reduced urine output, crystalluria has been observed very rarely, predominantly with parenteral therapy. During the administration of high doses of amoxicillin, it is advisable to maintain adequate fluid intake and urinary output in order to reduce the possibility of amoxicillin crystalluria. AUGMENTIN suspension contains aspartame caution in patients with phenylketonuria.

Interactions: Concomitant use of probenecid is not recommended. Concomitant use with AUGMENTIN may result in increased and prolonged blood levels of amoxicillin but not of clavulanate. In common with other antibiotics, AUGMENTIN may affect the gut flora, leading to lower oestrogen reabsorption and reduced efficacy of combined oral contraceptives. In the literature there are rare cases of increased international normalised ratio in patients maintained on acenocoumarol or warfarin and prescribed a course of amoxicillin. If co-administration is necessary, the prothrombin time or international normalised ratio should be carefully monitored with the addition or withdrawal of AUGMENTIN. In patients receiving mycophenolate mofetil, reduction in pre-dose concentration of the active metabolite mycophenolic acid of approximately 50% has been reported following commencement of oral amoxicillin plus clavulanic acid. The change in pre-dose level may not accurately represent changes in overall MPA exposure.

Pregnancy and Lactation: In a single study in women with pre-term, premature rupture of the foetal membrane (pPROM), it was reported that prophylactic treatment with AUGMENTIN may be associated with an increased risk of necrotising enterocolitis in neonates. Use should be avoided in pregnancy, especially during the first trimester, unless considered essential by the physician. AUGMENTIN may be administered during the period of lactation.

Effects on Ability to Drive and Use Machines: Adverse effects on the ability to drive or operate machinery have not been observed.

Adverse Reactions: Infections and infestations: Common: Mucocutaneous candidiasis.

Blood and lymphatic system disorders: Rare: leucopenia (including neutropenia) and thrombocytopenia. Very rare: agranulocytosis and haemolytic anaemia.

Immune system disorders: Very rare: Angioneurotic oedema, anaphylaxis, serum sickness-like syndrome, hypersensitivity vasculitis.

Nervous system disorders: Uncommon: Dizziness, headache. Very rare: reversible yperactivity, aseptic meningitis and convultions. Convulsions may occur in patients with impaired renal function or in those receiving high doses.

Gastrointestinal disorders: Adults: Very common: Diarrhoea. Common: Nausea, vomiting. Children: Common: Diarrhoea, nausea, vomiting.

All populations: Nausea is more often associated with higher oral dosages. If gastrointestinal reactions are evident, they may be reduced by taking AUGMENTIN at the start of a meal. Uncommon: Indigestion. Very rare: Antibiotic-associated colitis (including pseudomembranous colitis and haemorrhagic colitis). Black hairy tongue.

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Hepatobiliary disorders: Uncommon: A moderate rise in AST and/or ALT has been noted. Very rare: Hepatitis and cholestatic jaundice. Hepatic events have been reported predominantly in males and elderly patients and may be associated with prolonged treatment. These events have been very rarely reported in children. Signs and symptoms usually occur during or shortly after treatment but in some cases, may not become apparent until several weeks after treatment has ceased. These are usually reversible. Hepatic events may be severe and in extremely rare circumstances, deaths have been reported. These have almost always occurred in patients with serious underlying disease or taking concomitant medications known to have the potential for hepatic effects.

Skin and subcutaneous tissue disorders: Uncommon Skin rash, pruritus, urticaria. Rare: Erythema multiforme. Very rare: Stevens-Johnson syndrome, toxic epidermal necrolysis, bullous exfoliative-dermatitis, acute generalised exanthemous pustulosis (AGEP), and drug reaction with eosinophilia and systemic symptoms (DRESS). If any hypersensitivity dermatitis reaction occurs, treatment should be discontinued. Renal and urinary disorders: Very rare Interstitial nephritis, crystalluria.

Overdose: Disturbance of the fluid and electrolyte balances may be evident. Gastrointestinal symptoms may be treated symptomatically. Amoxicillin crystalluria, in some cases leading to renal failure, has been observed. AUGMENTIN can be removed from the circulation by haemodialysis.

Full Prescribing Information is available on request. Please read the full prescribing information prior to administration.

Ministry of Health Augmentin DUO SUSPENSION 200/28mg/5 ml leaflet approval date: 16-12-2019

1. Always read the full prescribing information
2. Healthcare professionals are asked to report any suspected adverse reactions to the Egyptian Pharmaco-Vigilance Center (EPVC)

AS RELENTLESS AS YOU Augmentin (amoxicillin/clavulanic acid)

HY0019A4805/112022
05/02/2024

AUGMENTIN (Amoxicillin / Clavulanic acid) ES 600 POWDER FOR ORAL SUSPENSION PRESCRIBING INFORMATION

Abbreviated Prescribing Information based on the International Prescribing Information (GDS24/IPI 11) and prepared to meet the requirements of the GSK International Pharmaceutical Promotional and Marketing Policy.

AUGMENTIN ES **Amoxicillin trihydrate - Potassium clavulanate.**

COMPOSITION: ***AUGMENTIN ES*** Each 5 ml Suspension after reconstitution contains: Amoxicillin trihydrate 759.043 mg Eq. to Amoxicillin 652.75 mg. Potassium clavulanate / silicon dioxide 1:1 blend 122.945 mg Eq. to clavulanic acid 50.41 mg. *Overages of Amoxicillin and potassium clavulanate are utilized for Co-Amoxiclav 600 mg/42.9 mg/ 5 ml for oral suspension.

Indications: ***AUGMENTIN*** should be used in accordance with local official antibiotic-prescribing guidelines and local susceptibility data. ***AUGMENTIN ES*** is indicated for the short-term treatment of bacterial infections in paediatric patients at the following sites when caused by ***AUGMENTIN***-susceptible organisms: Upper respiratory tract infections (including ENT) e.g. Acute Otitis Media (AOM), persistent AOM, or recurrent AOM due to Streptococcus pneumoniae. Tonsillo-pharyngitis and sinusitis typically caused by Streptococcus pneumoniae, Haemophilus influenzae, Moraxella catarrhalis and Streptococcus pyogenes. Lower respiratory tract infections e.g. lobar and bronchopneumonia typically caused by Streptococcus pneumoniae, Haemophilus influenzae# and Moraxella catarrhalis. Skin and soft tissue infections typically caused by Staphylococcus aureus and Streptococcus pyogenes. Some members of these species of bacteria produce beta-lactamase, rendering them insensitive to amoxicillin alone. Susceptibility to ***AUGMENTIN*** will vary with geography and time. Local susceptibility data should be consulted where available, and microbiological sampling and susceptibility testing performed where necessary.

Dosage and administration: **Paediatric patients 3 months and older:** The recommended dose for AUGMENTIN ES is 90/6.4mg/kg/day in two divided doses at 12-hourly intervals for 10 days. There is no experience in paediatric patients weighing > 40kg, or in adults. There are no clinical data on ***AUGMENTIN ES*** in children under 3 months of age. ***AUGMENTIN ES*** does not contain the same amount of clavulanate (as the potassium salt) as any of the other AUGMENTIN suspensions. ***AUGMENTIN ES*** contains 42.9 mg of clavulanic acid per 5 ml whereas *AUGMENTIN* 200 mg/5 ml suspension contains 28.5 mg of clavulanic acid per 5 ml and the 400 mg/5 ml suspension contains 57 mg of clavulanic acid per 5 ml. Therefore, *AUGMENTIN* 200 mg/5 ml and 400 mg/5 ml suspensions should not be substituted for ***AUGMENTIN ES***, as they are not interchangeable.

Hepatic Impairment: Dose with caution; monitor hepatic function at regular intervals. There are insufficient data on which to base a dosage recommendation.

Renal Impairment: There are no dosing recommendations for ***AUGMENTIN ES*** in patients with renal impairment.

Method of Administration: To minimise the potential for gastrointestinal intolerance, ***AUGMENTIN ES*** should be taken at the start of a meal. The absorption of *AUGMENTIN* is optimized when taken at the start of a meal. Treatment should not be extended beyond 14 days without review. Therapy can be started parenterally and continued with an oral preparation. SHAKE ORAL SUSPENSION WELL BEFORE USING.

Contraindications: *AUGMENTIN* is contra-indicated in patients with a history of hypersensitivity to beta-lactams, e.g. penicillins and cephalosporins. *AUGMENTIN* is contra-indicated in patients with a previous history of *AUGMENTIN*-associated jaundice/hepatic dysfunction.

Warnings and Precautions: Before initiating therapy with *AUGMENTIN* careful enquiry should be made concerning previous hypersensitivity reactions to penicillins or cephalosporins or other allergens. Serious and occasionally fatal hypersensitivity reactions (including anaphylactoid and severe cutaneous adverse reactions) have been reported in patients on penicillin therapy. These reactions are more likely to occur in individuals with a history of penicillin hypersensitivity. If an allergic reaction occurs, AUGMENTIN therapy must be discontinued and appropriate alternative therapy instituted. Serious anaphylactic reactions require immediate emergency treatment with adrenaline. Oxygen, intravenous (i.v.) steroids and airway management (including intubation) may also be required. *AUGMENTIN*

should be avoided if infectious mononucleosis is suspected since the occurrence of a morbilliform rash has been associated with this condition following the use of amoxicillin. Prolonged use may also occasionally result in overgrowth of non-susceptible organisms. Pseudomembranous colitis has been reported with the use of antibiotics and may range in severity from mild to life-threatening. Therefore, it is important to consider its diagnosis in patients who develop diarrhoea during or after antibiotic use. If prolonged or significant diarrhoea occurs or the patient experiences abdominal cramps, treatment should be discontinued immediately and the patient investigated further. Abnormal prolongation of prothrombin time (increased INR) has been reported rarely in patients receiving *AUGMENTIN* and oral anticoagulants. Appropriate monitoring should be undertaken when anticoagulants are prescribed concurrently. Changes in liver function tests have been observed in some patients receiving AUGMENTIN. The clinical significance of these changes is uncertain, but AUGMENTIN should be used with caution in patients with evidence of hepatic dysfunction. Cholestatic jaundice, which may be severe, but is usually reversible, has been reported rarely. Signs and symptoms may not become apparent for up to six weeks after treatment has ceased. In patients with renal impairment *AUGMENTIN* dosage should be adjusted. In patients with reduced urine output, crystalluria has been observed very rarely, predominantly with parenteral therapy. During the administration of high doses of amoxicillin, it is advisable to maintain adequate fluid intake and urinary output in order to reduce the possibility of amoxicillin crystalluria. *AUGMENTIN* suspension contains aspartame caution in patients with phenylketonuria.

Interactions: Concomitant use of probenecid is not recommended. Concomitant use with *AUGMENTIN* may result in increased and prolonged blood levels of amoxicillin but not of clavulanate. In common with other antibiotics, *AUGMENTIN* may affect the gut flora, leading to lower oestrogen reabsorption and reduced efficacy of combined oral contraceptives. In the literature there are rare cases of increased international normalised ratio in patients maintained on acenocoumarol or warfarin and prescribed a course of amoxicillin. If co-administration is necessary, the prothrombin time or international normalised ratio should be carefully monitored with the addition or withdrawal of *AUGMENTIN*. In patients receiving mycophenolate mofetil, reduction in pre-dose concentration of the active metabolite mycophenolic acid of approximately 50% has been reported following commencement of oral amoxicillin plus clavulanic acid. The change in pre-dose level may not accurately represent changes in overall MPA exposure.

Pregnancy and Lactation: In a single study in women with pre-term, premature rupture of the foetal membrane (pPROM), it was reported that prophylactic treatment with *AUGMENTIN* may be associated with an increased risk of necrotising enterocolitis in neonates. Use should be avoided in pregnancy, especially during the first trimester, unless considered essential by the physician. *AUGMENTIN* may be administered during the period of lactation.

Effects on Ability to Drive and Use Machines: Adverse effects on the ability to drive or operate machinery have not been observed.

Adverse Reactions: Infections and infestations*:* Common: Mucocutaneous candidiasis. Blood and lymphatic system disorders: Rare: leucopenia (including neutropenia) and thrombocytopenia. Very rare: agranulocytosis and haemolytic anaemia. Immune system disorders: Very rare: Angioneurotic oedema, anaphylaxis, serum sickness-like syndrome, hypersensitivity vasculitis. Nervous system disorders: Uncommon: Dizziness, headache . Very rare: Reversible hyperactivity, aseptic meningitis, convulsions. Convulsions may occur in patients with impaired renal function or in those receiving high doses. Gastrointestinal disorders: Adults: Very common: Diarrhoea. Common: Nausea, vomiting. Children: Common: Diarrhoea, nausea, vomiting. All populations: Nausea is more often associated with higher oral dosages. If gastrointestinal reactions are evident, they may be reduced by taking *AUGMENTIN* at the start of a meal. Uncommon: Indigestion. Very rare: Antibiotic-associated colitis (including pseudomembranous colitis and haemorrhagic colitis). Black hairy tongue. Hepatobiliary disorders: Uncommon: A moderate rise in AST and/or ALT has been noted. Very rare: Hepatitis and cholestatic jaundice. Hepatic events have been reported predominantly in males and elderly patients and may be associated with prolonged treatment. These events have been very rarely reported in children. Signs and symptoms usually

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occur during or shortly after treatment but in some cases may not become apparent until several weeks after treatment has ceased. These are usually reversible. Hepatic events may be severe and in extremely rare circumstances, deaths have been reported. These have almost always occurred in patients with serious underlying disease or taking concomitant medications known to have the potential for hepatic effects. Skin and subcutaneous tissue disorders: Uncommon Skin rash, pruritus, urticaria. Rare: Erythema multiforme. Very rare: Stevens-Johnson syndrome, toxic epidermal necrolysis, bullous exfoliative-dermatitis, acute generalised exanthemous pustulosis (AGEP), and drug reaction with eosinophilia and systemic symptoms (DRESS). If any hypersensitivity dermatitis reaction occurs, treatment should be discontinued. Renal and urinary disorders: Very rare: Interstitial nephritis, crystalluria.

Overdose: Disturbance of the fluid and electrolyte balances may be evident. Gastrointestinal symptoms may be treated symptomatically. Amoxicillin crystalluria, in some cases leading to renal failure, has been observed. *AUGMENTIN* can be removed from the circulation by haemodialysis.

Full Prescribing Information is available on request. Please read the full prescribing information prior to administration.

Ministry of Health Augmentin ES 600 powder for oral suspension leaflet approval date: 27-4-2020

1. Always read the full prescribing information
2. Healthcare professionals are asked to report any suspected adverse reactions to the Egyptian Pharmaco-Vigilance Center (EPVC).

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05/02/2024

AUGMENTIN (Amoxicillin / Clavulanic acid) INFANT DROPS PRESCRIBING INFORMATION

Abbreviated Prescribing Information based on the International Prescribing Information (GDS26/IPI14) and prepared to meet the requirements of the GSK International Pharmaceutical Promotional and Marketing Policy.

AUGMENTIN INFANT DROPS

Composition: AUGMENTIN infant drops when reconstituted each 1 ml contains 50 mg amoxicillin (as amoxicillin trihydrate) and 12.5 mg clavulanic acid (as potassium clavulanate).

Indications: AUGMENTIN infant drops are indicated for short term treatment of bacterial infections at the following sites when amoxicillin resistant beta-lactamase producing strains are suspected as the cause. In other situations, amoxicillin alone should be considered: Upper and lower respiratory tract (including ENT), genito-urinary tract, skin and soft tissues, and dental infections. For a list of susceptible organisms, refer to full prescribing information.

Dosage and administration: Dosage depends on the weight and renal function of the patient and the severity of the infection. Dosages are expressed throughout in terms of amoxicillin/clavulanate content except when doses are stated in terms of an individual component. To minimise potential gastrointestinal intolerance, administer at the start of a meal. The absorption of AUGMENTIN is optimised when taken at the start of a meal. Treatment should not be extended beyond 14 days without review. Therapy can be started parenterally and continued with an oral preparation. The usual recommended daily dosage is: Lower dose: 20/5 mg/kg/day in three divided doses for mild to moderate infections (upper respiratory tract infections e.g. recurrent tonsillitis, lower respiratory infections and skin and soft tissue infections). Higher dose: 40/10 mg/kg/day in three divided doses for the treatment of more serious infections (upper respiratory tract infections e.g. otitis media and sinusitis, lower respiratory tract infections e.g. bronchopneumonia and urinary tract infections). Renal impairment: Dose is adjusted, See full prescribing information for details. Hepatic impairment: Dose with caution; monitor hepatic function at regular intervals.

Contraindications: AUGMENTIN is contra-indicated in patients with a history of hypersensitivity to beta-lactams, e.g. penicillins and cephalosporins. AUGMENTIN is contra-indicated in patients with a previous history of AUGMENTIN-associated jaundice/hepatic dysfunction.

Warnings and Precautions: Before initiating therapy with AUGMENTIN careful enquiry should be made concerning previous hypersensitivity reactions to penicillins or cephalosporins. Serious and occasionally fatal hypersensitivity reactions (including anaphylactoid and severe cutaneous adverse reactions) have been reported in patients on penicillin therapy. These reactions are more likely to occur in individuals with a history of penicillin hypersensitivity. If an allergic reaction occurs, AUGMENTIN therapy must be discontinued and appropriate alternative therapy instituted. Serious anaphylactic reactions require immediate emergency treatment with adrenaline. Oxygen, intravenous (i.v.) steroids and airway management (including intubation) may also be required. AUGMENTIN should be avoided if infectious mononucleosis is suspected since the occurrence of a morbilliform rash has been associated with this condition following the use of amoxicillin. Prolonged use may also occasionally result in overgrowth of non-susceptible organisms. Pseudomembranous colitis has been reported with the use of antibiotics and may range in severity from mild to life-threatening. Therefore, it is important to consider its diagnosis in patients who develop diarrhoea during or after antibiotic use. If prolonged or significant diarrhoea occurs or the patient experiences abdominal cramps, treatment should be discontinued immediately and the patient investigated further. Abnormal prolongation of prothrombin time (increased INR) has been reported rarely in patients receiving AUGMENTIN and oral anticoagulants. Appropriate monitoring should be undertaken when anticoagulants are prescribed concurrently. Changes in liver function tests have been observed in some patients receiving AUGMENTIN. The clinical significance of these changes is uncertain, but AUGMENTIN should be used with caution in patients with evidence of hepatic dysfunction. Cholestatic jaundice, which may be severe, but is usually reversible, has been reported rarely. Signs and symptoms may not become apparent for up to six weeks after treatment has ceased. In

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patients with renal impairment AUGMENTIN dosage should be adjusted. In patients with reduced urine output, crystalluria has been observed very rarely, predominantly with parenteral therapy. During the administration of high doses of amoxicillin, it is advisable to maintain adequate fluid intake and urinary output in order to reduce the possibility of amoxicillin crystalluria. AUGMENTIN suspension contains aspartame caution in patients with phenylketonuria.

Interactions: Concomitant use of probenecid is not recommended. Concomitant use with AUGMENTIN may result in increased and prolonged blood levels of amoxicillin but not of clavulanate. In common with other antibiotics, AUGMENTIN may affect the gut flora, leading to lower oestrogen reabsorption and reduced efficacy of combined oral contraceptives. In the literature there are rare cases of increased international normalised ratio in patients maintained on acenocoumarol or warfarin and prescribed a course of amoxicillin. If co-administration is necessary, the prothrombin time or international normalised ratio should be carefully monitored with the addition or withdrawal of AUGMENTIN. In patients receiving mycophenolate mofetil, reduction in pre-dose concentration of the active metabolite mycophenolic acid of approximately 50% has been reported following commencement of oral amoxicillin plus clavulanic acid. The change in pre-dose level may not accurately represent changes in overall MPA exposure.

Pregnancy and Lactation: In a single study in women with pre-term, premature rupture of the foetal membrane (pPROM), it was reported that prophylactic treatment with AUGMENTIN may be associated with an increased risk of necrotising enterocolitis in neonates. Use should be avoided in pregnancy, especially during the first trimester, unless considered essential by the physician. AUGMENTIN may be administered during the period of lactation.

Effects on Ability to Drive and Use Machines: Adverse effects on the ability to drive or operate machinery have not been observed.

Adverse Reactions: Infections and infestations: Common: Mucocutaneous candidiasis.

Blood and lymphatic system disorders: Rare: leucopenia (including neutropenia) and thrombocytopenia. Very rare: agranulocytosis and haemolytic anaemia.

Immune system disorders: Very rare: Angioneurotic oedema, anaphylaxis, serum sickness-like syndrome, hypersensitivity vasculitis.

Nervous system disorders: Uncommon: Dizziness, headache. Very rare: reversible yperactivity, aseptic meningitis and convultions. Convulsions may occur in patients with impaired renal function or in those receiving high doses.

Gastrointestinal disorders: Adults: Very common: Diarrhoea. Common: Nausea, vomiting. Children: Common: Diarrhoea, nausea, vomiting.
All populations: Nausea is more often associated with higher oral dosages. If gastrointestinal reactions are evident, they may be reduced by taking AUGMENTIN at the start of a meal. Uncommon: Indigestion. Very rare: Antibiotic-associated colitis (including pseudomembranous colitis and haemorrhagic colitis). Black hairy tongue.

Hepatobiliary disorders: Uncommon: A moderate rise in AST and/or ALT has been noted. Very rare: Hepatitis and cholestatic jaundice. Hepatic events have been reported predominantly in males and elderly patients and may be associated with prolonged treatment. These events have been very rarely reported in children. Signs and symptoms usually occur during or shortly after treatment but in some cases, may not become apparent until several weeks after treatment has ceased. These are usually reversible. Hepatic events may be severe and in extremely rare circumstances, deaths have been reported. These have almost always occurred in patients with serious underlying disease or taking concomitant medications known to have the potential for hepatic effects.

Skin and subcutaneous tissue disorders: Uncommon Skin rash, pruritus, urticaria. Rare: Erythema multiforme. Very rare: Stevens-Johnson syndrome, toxic epidermal necrolysis, bullous exfoliative-dermatitis, acute generalised

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exanthemous pustulosis (AGEP), and drug rea ction with eosinophilia and systemic symptoms (DRESS). If any hypersensitivity dermatitis reaction occurs, treatment should be discontinued. Renal and urinary disorders: Very rare Interstitial nephritis, crystalluria.

Overdose: Disturbance of the fluid and electrolyte balances may be evident. Gastrointestinal symptoms may be treated symptomatically. Amoxicillin crystalluria, in some cases leading to renal failure, has been observed. AUGMENTIN can be removed from the circulation by haemodialysis. Storage: The dry powder should be stored in unopened containers in a dry place at below 25°C. Reconstituted suspensions should be stored in a refrigerator (2-8°C) and used within seven days.

Full Prescribing Information is available on request. Please read the full prescribing information prior to administration.
Ministry of Health Augmentin INFANT DROPS leaflet approval date: 13-4-2020

1. Always read the full prescribing information
2. Healthcare professionals are asked to report any suspected adverse reactions to the Egyptian Pharmaco-Vigilance Center (EPVC)

For full prescribing information, see data sheet or contact:
GlaxoSmithKline S.A.E. Building no. 46, Block (J), Fifth District, Boomerang,New Cairo, Egypt.
Tel.: +202 26185000
Adverse events should be reported to GlaxoSmithKline on +202 26185150
Or by e-mail: ae.egypt@gsk.com

EDA Approval Code: HY0019A4805/112022 **Invalidation Date:** 06/02/2024 **CL Code:** PM-EG-ACA-EML-220057

AS RELENTLESS AS YOU Augmentin (amoxicillin/clavulanic acid)

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