# Information For the User Clindamycin (600mg) Clinzadin 600 Injection

# Clindamycin (600mg) Injection

#### Composition

Each vial contains:

 Clindamycin (as Clindamycin Phosphate) – 600 mg

## **Excipients:**

• Sodium chloride, water for injection, and other suitable excipients.

## Description

Clindamycin is a lincosamide antibiotic that works by inhibiting bacterial protein synthesis. It is effective against a wide spectrum of aerobic and anaerobic Gram-positive bacteria. Clindamycin is commonly used for treating serious bacterial infections that require parenteral therapy.

## Indications

Clindamycin 600 mg injection is indicated for the treatment of the following serious bacterial infections:

- Severe skin and soft tissue infections (e.g., abscesses, cellulitis)
- Bone and joint infections (e.g., osteomyelitis)
- Respiratory tract infections (e.g., pneumonia, lung abscesses)
- Intra-abdominal infections (e.g., peritonitis)
- Pelvic infections (e.g., pelvic inflammatory disease)
- Severe infections caused by anaerobic bacteria
- Toxoplasmosis (in combination with other drugs)

#### **Dosage and Administration**

- Adults:
  - The usual dosage for serious infections is 600 mg every 6-8 hours, administered via intravenous infusion or slow intravenous injection.
  - For severe infections, the dose may be increased to 900 mg every 6-8 hours.
  - The maximum dose should not exceed 2.7 g per day.
- Pediatric patients:
  - The recommended dose is 10 to 40 mg/kg/day, divided into 3 or 4 doses.
  - In severe cases, the dose may go up to 40 mg/kg/day.
  - Maximum dose for children is based on clinical condition and severity of infection.
  - **Renal or Hepatic Impairment:** 
    - Caution should be exercised in patients with hepatic dysfunction as Clindamycin is metabolized by the liver.
    - Renal adjustment is not usually required unless the patient has significant renal failure.

#### Administration:

- Intravenous (IV) Infusion: Dilute the appropriate dose in an IV solution (e.g., sterile water for injection, saline), and infuse over 30 to 60 minutes.
- Intravenous (IV) Push: For smaller doses, Clindamycin can be administered as a slow IV push. Do not exceed 10 mg/min.

#### **Mechanism of Action**

Clindamycin inhibits bacterial protein synthesis by binding to the 50S ribosomal subunit of susceptible bacteria, blocking their ability to produce essential proteins. This action is bacteriostatic (stopping bacterial growth) at low concentrations and bactericidal (killing bacteria) at higher concentrations.

# Contraindications

- Hypersensitivity to clindamycin, lincomycin, or any of the components in the formulation.
- History of severe gastrointestinal disorders, particularly colitis (including Clostridium difficile-associated diarrhea).
- Severe allergic reactions (e.g., anaphylaxis) to clindamycin or other ingredients.

Warnings and Precautions

- Clostridium difficile-associated diarrhea (CDAD): Prolonged use of Clindamycin may lead to overgrowth of C. difficile, causing severe, life-threatening diarrhea.
- Liver Dysfunction: Use with caution in patients with liver impairment. Regular liver function tests should be considered during therapy.
- Renal Dysfunction: Although no specific dose adjustment is usually needed in renal failure, caution is advised in severely impaired patients.
- Hypersensitivity Reactions: Watch for signs of severe allergic reactions such as anaphylaxis, angioedema, and skin rashes. Discontinue treatment immediately if any of these occur.
- Superinfections: Prolonged antibiotic therapy can lead to infections by non-susceptible organisms, including fungi. Monitor patients for any new symptoms.

## Side Effects

**Common Side Effects:** 

- Gastrointestinal: nausea, vomiting, abdominal pain, diarrhea
- Skin: rash, pruritus
- Injection site reactions: pain, redness, or swelling

- Clostridium difficile-associated diarrhea (CDAD), which can lead to colitis
- Severe allergic reactions (e.g., anaphylaxis, angioedema)
- Liver toxicity: jaundice, elevated liver enzymes, and liver failure
- Blood disorders: leukopenia, eosinophilia, thrombocytopenia, and agranulocytosis
- Stevens-Johnson syndrome (rare but serious skin reaction)

#### **Drug Interactions**

- Erythromycin: Concomitant use of erythromycin can reduce the effectiveness of Clindamycin.
- Neuromuscular blocking agents: Clindamycin may potentiate the effects of neuromuscular blockers, increasing the risk of respiratory depression.
- Cyclosporine: Concurrent use can increase the serum levels of cyclosporine, potentially leading to toxicity.

#### Storage

- Store at 15°C to 25°C (59°F to 77°F).
- Protect from light and moisture.
- Do not freeze.
- After dilution for infusion, use within 24 hours if stored at room temperature or within 48 hours if refrigerated.

Note: Always consult a healthcare professional for the appropriate dose, particularly for patients with liver or kidney impairments. If any unusual reactions or side effects occur, seek immediate medical advice.

Manufactured in India for:



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**Serious Side Effects:**