

# CEFOPERAZONE SODIUM plus SULBACTAM

**Trade name(s)** SULPERAZON®

**Classification** cephalosporin, 3rd generation

## Indication(s)

- Susceptible infections due to *S. pneumoniae*, *S. aureus*, *S. pyogenes*, *S. epidermidis*, *H. influenzae*, *P. aeruginosa*, *K. pneumoniae*, *E. coli*, *P. mirabilis*, *Enterobacter* species, anaerobic gram-negative bacilli and gram-positive cocci
- Intra-abdominal infections including peritonitis
- Pelvic inflammatory disease, endometritis and other female genital tract infections
- Respiratory tract infections
- Septicemia
- Skin/skin structure infections
- Urinary tract infections

**Presentation** 1 G/VIAL (cefoperazone 500 mg + sulbactam 500 mg) POWDER FOR INJECTION

**Storage** Store below 25 °C. Protect from light.

**Reconstitution** Reconstitute with SWFI, D5W and 0.9%NSS 3.4 ml then diluted to 20 ml solution

**Stability** . Stability after reconstitution with SWFI is 24 hr at 2-8 °C and 25°C.

## Compatible Fluid(s)

G10W, G5W, G5S, G51/5S, G5~LRI, LRI, NS

## Incompatible Fluid(s)

## Incompatible Drug(s)

aminoglycosides, hetastarch, labetalol, meperidine (pethidine), ondansetron, perphenazine, promethazine

## Administration (Mode)

IV BOLUS.

IMI Reconstitution with SWFI 3.4 ml then add lidocaine 2 % 1 ml

## Intravenous Concentration

## Intravenous Rate

IV bolus over 3-5 minutes

IV drip over 15 to 60 minutes

## Manner of Administration and Dosage Guide

### Adult :

- Usual dose: 1-2 g/day IV/IM divided every 12 hr

- Severe or less susceptible infections: 8-12 g of cefoperazone per day IV/IM divided every 12 hr.
- Maximum recommended dose of Sulbactam is 4 grams (8 Vials(1:1)) per day

**Child** : Not FDA-approved in children

- Usual dose: (infants and children) 20-40 mg/kg/day of cefoperazone IV/IM divided every 6-12 hr, maximum 160 mg/kg/day

**Neonate**: Usual dose: (neonates : first week ) 20-40 mg/kg/day of cefoperazone IV/IM every 12 hr maximum 80 mg /kg /day

#### **Dose Adjustments**

- renal impairment: total daily dose of sulbactam not to exceed 2 g (CrCl =15-30 ml /min ), sulbactam not to exceed 1 g/day divides q 12 hr (CrCl less than 15 ml/min)
- hepatic impairment: extensively excreted in the bile; with hepatic disease or biliary obstruction, total daily dose not to exceed 4 g ( cefoperazone 2 g) unless serum concentrations can be monitored
- hemodialysis: schedule doses for after hemodialysis session

#### **Adverse Effect(s)**

##### **COMMON**

- diarrhea
- phlebitis or pain at injection site

##### **SERIOUS**

- vitamin K deficiency (rare)
- disulfiram-like reaction with alcohol intake

#### **Precaution(s)**

- hypersensitivity to penicillins
- vitamin K deficiency; risk factors include poor nutritional status, malabsorption states, alcoholism, prolonged hyperalimentation regimens
- alcohol consumption; disulfiram-like reactions after alcohol consumption within 72 hr of cefoperazone administration

#### **Additional Information**

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#### **Reference(s)**

1. เอกสารกำกับยา Sulperazon®
2. MICROMEDEX(R) Healthcare Series Vol. 117 expires 9/2003