

# MOXIAIM

400mg  
Tablets

(Moxifloxacin)

موکسی ایم ۴۰۰ ملی گرام  
(موکسی فلاکساسین)

## COMPOSITION MOXIAIM (Moxifloxacin)

Each film-coated tablet contains:

Moxifloxacin as hydrochloride Chloride 400mg

## CLINICAL PHARMACOLOGY

Mechanism of Action

Moxifloxacin is bactericidal against a range of Gram-positive and Gram-negative organisms. Such activity arises through the inhibition of DNA gyrase (topoisomerase II) and topoisomerase IV, which bacteria require for DNA replication, transcription, repair and recombination. Moxifloxacin contains the C8-methoxy moiety that augments its antibacterial activity and reduces the possibility of Gram-positive mutations. Because the 8-furoquinolones use a different mechanism of action than do the aminoglycosides, beta-lactams, Inacrolides, or tetracyclines, there has been no cross resistance between the quinolones and these antimicrobial agents.

## Pharmacokinetics

Moxifloxacin is readily absorbed from the gastrointestinal tract with an absolute bioavailability of about 90%. It is widely distributed throughout the body tissues and is approximately 50% bound to plasma proteins. Moxifloxacin has an elimination half life of approximately 12 hours, allowing once daily dosing. It is metabolised principally via sulphate and glucuronide conjugation. About 45% of the drug is excreted in the urine and the faeces as unchanged drug. The sulphate conjugate is excreted primarily in the faeces and the glucuronide exclusively in the urine.

## THERAPEUTIC INDICATIONS

MOXIAIM (Moxifloxacin) tablet are indicated for the treatment of following bacterial infections;

- Acute bacterial sinusitis
- Acute bacterial exacerbation of chronic bronchitis
- Community acquired pneumonia.
- Un-complicated skin and skin structure infections
- Complicated skin and skin structure infections

## DOSAGE AND ADMINISTRATION

The usual adult dose of Moxiaim (Moxifloxacin) is 400mg once every 24 hours. The duration of therapy depends on the type and severity of infection as described in the table below.

Infection	Daily Dose	Duration
Acute bacterial sinusitis	400g	7 days
Acute bacterial exacerbation of chronic bronchitis	400g	5-10 days
Community acquired Pneumonia	400g	10 days
Uncomplicated skin and skin structure infections	400g	7 days
Complicated skin and skin structure infections	400g	7-21 days

## ADVERSE REACTION

Moxifloxacin was usually well tolerated. Most adverse reactions were mild to moderate. The most common adverse reactions were nausea and diarrhoea.

Common:

Headache, dizziness, abdominal pain, vomiting, QT prolongation in patients with hypokalaemia, increase in transaminases, superinfection due to resistant bacteria.

Rare:

Dysphagia, pseudomembranous colitis, ventricular tachyarrhythmias, syncope, hypertension, hypotension, vasodilatation, tinnitus, hypoesthesia, smell disorder, abnormal dreams, disturbed coordination, seizures, disturbed attention,

speech disorders, amnesia, anaphylaxis, allergic edema/angioedema, hyperglycaemia, hyperuricemia, motional liability, depression, hallucination, prothrombin time prolonged.

### CONTRAINDICATIONS

Moxifloxacin is contraindicated in patients

-With hypersensitivity to moxifloxacin or other quinolone and any components of this medication.

-Less than 18 years of age.

-Pregnancy and lactation.

-With history of tendon disease/disorder relation to quinolones treatment.

-With impaired liver function and in patients with transaminases >5 fold ULN.

With congenital or documented acquired QT prolongation. hypokalaemia.

-With electrolyte disturbances, particularly in uncorrected

-With clinically relevant bradycardia.

With clinically relevant heart failure with reduced left-

ventricular ejection fraction.

-With previous history of symptomatic arrhythmias.

- Receiving Class IA (e.g. quinidine, procainamide) or Class III (amiodarone, sotalol) antiarrhythmic agents or other drugs that prolong the QT interval.

-With rare hereditary problems of galactose intolerance, the Lapp lactase deficiency or

glucose-galactose malabsorption should not take this medicine.

### Precautions

-As with all quinolones, moxifloxacin should be used with caution in patients with known or suspected CNS disorders or in the presence of other risk factors that may predispose to seizures or lower the threshold.

- Pseudomembranous colitis has been reported with nearly all antibacterial agents and may range in severity from mild to life threatening. Therefore, it is important to consider this diagnosis in patients who present with diarrhoea subsequent to the administration of antibacterial agents.

-Tendon inflammation and/or rupture have been reported with quinolone antibiotics. Risk may be increased with concurrent corticosteroids, particularly in the elderly. Discontinue at first signs or symptoms of tendon pain.

- Use with caution in diabetes as glucose regulation may be altered.

Patients with a family history of, or actual glucose-6- phosphate dehydrogenase deficiency are prone to haemolytic reactions when treated with quinolones. Therefore, moxifloxacin should be used with caution in these patients.

Severe hypersensitivity reactions, including anaphylaxis, have occurred with quinolone therapy. If an allergic reaction occurs discontinue drug immediately.

Quinolones should be used with caution as they may exacerbate myasthenia gravis.

Peripheral neuropathy may rarely occur.

Elderly patients with renal disorders should use moxifloxacin with caution if they are unable to maintain adequate fluid intake because dehydration may increase the risk of renal failure.

- Liver function tests/investigations should be performed in cases where indications of liver dysfunction occur.

If vision becomes impaired or any effects on the eyes are noted, immediately eye specialist should be consulted

**Precaution** Moxiam tablets 400mg 1\*5's pack.

### PRECAUTION:

- Use as prescribed by the physician.
- Keep out of the reach of children.
- Store at room temperature.
- Protect from direct sunlight, heat & moisture.

ہدایات:

دوا ڈاکٹر کی ہدایت کے مطابق استعمال کریں۔

بچوں کی پہنچ سے دور رکھیں۔

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برسات اور گرمی کی روشنی، گرمی اور نمی سے محفوظ رکھیں۔



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