of diabetes mellitus. Periodic monitoring of blood glucose, thyroid function, and visual function is desirable.

Ethionamide is teratogenic in animals.

Porphyria. Ethionamide is considered to be unsafe in patients with porphyria because it has been shown to be porphyrinogenic in *animals* or *in-vitro* systems.

Interactions

The adverse effects of other antimycobacterials may be increased when ethionamide is used (see Effects on the Liver, above, and under Cycloserine, Interactions, p.260).

Alcohol. A psychotic reaction has been reported in a patient receiving ethionamide after excessive intake of alcohol. ¹

 Lansdown FS, et al. Psychotoxic reaction during ethionamide therapy. Am Rev Respir Dis 1967; 95: 1053–5.

Antimicrobial Action

Ethionamide is active only against mycobacteria including Mycobacterium tuberculosis, M. kansasii, M. leprae, and some strains of M. avium complex.

Resistance develops rapidly if used alone and there is complete cross-resistance between ethionamide and protionamide. Cross-resistance has been reported *in vitro* with isoniazid or with thio-acetazone.

Pharmacokinetics

Ethionamide has been given as a sugar-coated tablet or more recently as a more stable film-coated tablet. Both formulations are readily absorbed from the gastrointestinal tract: after an oral dose of 250 mg, sugar-coated tablets produce a peak plasma concentration of about 1.5 micrograms/mL after 1.5 hours, while filmcoated tablets give a peak plasma concentration of 2.16 micrograms/mL after about 1 hour. Distribution of ethionamide from the film-coated tablet into body tissues and fluids has not been studied, but is expected to be similar to that of the sugarcoated tablets. Ethionamide from sugar-coated tablets is widely distributed throughout body tissues and fluids. It crosses the placenta and penetrates the uninflamed meninges, appearing in the CSF in concentrations equivalent to those in serum. It is about 30% bound to plasma proteins. The half-life for the sugar-coated tablet is reported to be 2 to 3 hours and 1.92 hours for the filmcoated tablet. Ethionamide is extensively metabolised, probably in the liver, to the active sulfoxide and other inactive metabolites and less than 1% of a dose appears in the urine as unchanged drug.

Distribution. After single oral doses of ethionamide 15 or 20 mg/kg in children with tuberculous meningitis, the peak spinal fluid concentration was reached in $1 \cdot \text{to } 2 \cdot \text{hours.}^1$ A wide range of concentrations was reported but doses of 20 mg/kg were more likely to produce spinal fluid concentrations above 2.5 micrograms/mL, the concentration considered by the authors to be essential for therapeutic success.

 Donald PR, Seifart HI. Cerebrospinal fluid concentrations of ethionamide in children with tuberculous meningitis. *J Pediatr* 1989; 115: 483–6.

Uses and Administration

Ethionamide is a thioamide derivative considered to be interchangeable with protionamide. It is used with other antituberculous drugs for the treatment of tuberculosis (p.196) when resistance to primary drugs has developed. It has also been used, as a substitute for clofazimine, in regimens for the treatment of leprosy (p.176) but less toxic alternatives are now preferred.

In the treatment of resistant tuberculosis, adults may be given 15 to 20 mg/kg daily (maximum 1 g daily) orally. Ethionamide may be given in divided doses with meals, or as a single daily dose after the evening meal, or at bedtime, to minimise gastrointestinal adverse effects. For details of doses in infants, children, and adolescents, see below.

Similar doses were used for the treatment of leprosy.

Ethionamide has also been used as rectal suppositories; the hydrochloride has been given intravenously.

Administration in children. For the treatment of drug-resistant tuberculosis in infants, children, and adolescents the American Academy of Pediatrics suggests an oral dose of ethionamide 15 to 20 mg/kg (to a maximum of 1 g) daily, given in 2 to 3 divided doses.

Preparations

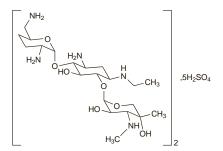
USP 31: Ethionamide Tablets.

Proprietary Preparations (details are given in Part 3)

Gr.: Trecator; India: Ethide; Myobid; S.Afr.: Ethatyl; Thai.: Eton; Turk.: Etyomid; USA: Trecator:

Etimicin Sulfate

Antibiotic 89-07; E-402. I-N-Ethyl gentamicin C_{1a} sulfate. $(C_{21}H_{43}N_5O_7)_2$, $5H_2SO_4=1445.6$. CAS — 59711-96-5 (etimicin); 362045-44-1 (etimicin sulfate).



Pharmacopoeias. In Chin

Profile

Etimicin, a derivative of gentamicin C_{1a} , is an aminoglycoside antibacterial with actions similar to those of gentamicin (p.282). It is given intravenously as the sulfate.

♦ References.

 Zhao C, et al. A randomized controlled clinical trial on etimicin, a new aminoglycoside antibiotic, versus netilmicin in the treatment of bacterial infections. Chin Med J (Engl) 2000; 113: 1026–30.

Faropenem Sodium (rINNM)

ALP-201; Faropenem sódico; Faropénem Sodique; Fropenem Sodium; Furopenem; Natrii Faropenemum; SUN-5555; SY-5555; Wy-49605; YM-044. Sodium (+)-(5R,6S)-6-[(1R)-1-hydroxye-thyl]-7-oxo-3-[(2R)-tetrahydro-2-furyl]-4-thia-1-azabicyclo[3.2.0]hept-2-ene-2-carboxylate.

Натрий Фаропенем

 $C_{12}H_{14}NaNO_5S = 307.3.$

CAS — 106560-14-9 (faropenem); 141702-36-5 (faropenem medoxomil); 122547-49-3 (faropenem sodium).

 $\label{proposition} \textbf{Pharmacopoeias.} \ \textit{Jpn} \ \text{includes the hemipental hydrate}.$

Profile

Faropenem is a penem antibacterial that is given orally as the sodium salt for the treatment of susceptible infections.

Faropenem medoxomil (*USAN*) (Bay-56-6854) is being investigated for the treatment of respiratory-tract infections and uncomplicated skin and skin structure infections. NOTE. Faropenem medoxomil has also been referred to as faropenem daloxate although such use of the term daloxate is not in keeping with *INN* nomenclature conventions.

♦ References.

- Critchley IA, et al. Activities of faropenem, an oral β-lactam, against recent US isolates of Streptococcus pneumoniae, Haemophilus influenzae, and Moraxella catarrhalis. Antimicrob Agents Chemother 2002; 46: 550-5.
- von Eiff C, et al. Comparative in vitro activity of faropenem against staphylococci. J Antimicrob Chemother 2002; 50: 277–80.
- Milatovic D, et al. In vitro activity of faropenem against 5460 clinical bacterial isolates from Europe. J Antimicrob Chemother 2002; 50: 293–9.
- Wexler HM, et al. In vitro activities of faropenem against 579 strains of anaerobic bacteria. Antimicrob Agents Chemother 2002; 46: 3669–75.
- Jones ME, et al. Activity of faropenem, a new furanem, against European respiratory pathogens collected during 2000-2001: a comparison with other beta-lactam agents. J Antimicrob Chemother 2003; 51: 196-9.
- Gettig JP, et al. Faropenem medoxomil. Ann Pharmacother 2008; 42: 80–90.

Preparations

Proprietary Preparations (details are given in Part 3)

Jpn: Farom.

Fleroxacin (BAN, USAN, HNN)

AM-833; Fleroksasiini; Fléroxacine; Fleroxacino; Fleroxacinum; Ro-23-6240; Ro-23-6240/000. 6,8-Difluoro-I-(2-fluoroethyl)-I,4-dihydro-7-(4-methyl-I-piperazinyl)-4-oxo-3-quinolinecarboxylic acid.

Флероксацин

 $C_{17}H_{18}F_3N_3O_3 = 369.3.$ CAS - 79660-72-3. ATC - J01MA08.ATC Vet - QJ01MA08.

Pharmacopoeias. In Chin.

Profile

Fleroxacin is a fluoroquinolone antibacterial with actions and uses similar to those of ciprofloxacin (p.243), but is reported to have greater systemic bioavailability and a longer half-life. It is given orally for the treatment of susceptible infections in usual doses of 200 to 300 mg once daily. It has also been given by intravenous infusion.

The incidence of adverse effects associated with fleroxacin has been relatively high.

◊ General references.

 Balfour JA, et al. Fleroxacin: a review of its pharmacology and therapeutic efficacy in various infections. Drugs 1995; 49: 794–850.

Adverse effects. References to adverse effects associated with fleroxacin.

- Bowie WR, et al. Adverse reactions in a dose-ranging study with a new long-acting fluoroquinolone, fleroxacin. Antimicrob Agents Chemother 1989; 33: 1778–82.
- Geddes AM. Safety of fleroxacin in clinical trials. Am J Med 1993; 94 (suppl 3A): 201S–203S.
- Kimura M, et al. Photosensitivity induced by fleroxacin. Clin Exp Dermatol 1996; 21: 46–7.

Breast feeding. The American Academy of Pediatrics¹ states that fleroxacin is usually compatible with breast feeding. However, in a study,² in which women were given a single 400-mg dose and breast feeding was withheld for 48 hours, it was concluded that although a breast-fed infant would only receive a moderate amount (maximum 10 mg daily), fleroxacin should not be used in breast-feeding mothers due to the potential for adverse effects such as arthropathy in the infant.

- American Academy of Pediatrics. The transfer of drugs and other chemicals into human milk. *Pediatrics* 2001; 108: 776–89. Correction. *ibid.*; 1029. Also available at: http://aappolicy.aappublications.org/cgi/content/full/pediatrics%3b108/3776 (accessed 26/05/04)
- Dan M, et al. Penetration of fleroxacin into breast milk and pharmacokinetics in lactating women. Antimicrob Agents Chemother 1993; 37: 293–6.

Preparations

Proprietary Preparations (details are given in Part 3)

Ger.: Quinodis†; Jpn: Megalocin.

Flomoxef Sodium (rINNM)

Flomoxef sódico; Flomoxef Sodique; Natrii Flomoxefum; 6315-S. 7R-7-[2-(Difluoromethylthio)acetamido]-3-[1-(2-hydroxyethyl)-1*H*-tetrazol-5-ylthiomethyl]-7-methoxy-1-oxa-3-cephem-4-carboxylic acid sodium.

Натрий Фломоксеф

 $C_{15}H_{17}F_2N_6NaO_7S_2 = 518.4.$

CAS — 99665-00-6 (flomoxef); 92823-03-5 (flomoxef sodium).

Pharmacopoeias. In Jpn.

Profile

Flomoxef is an oxacephalosporin or oxacephem antibacterial with properties similar to latamoxef (p.292). It is given intravenously as the sodium salt and doses are expressed in terms of flomoxef; 1.04 g of flomoxef sodium is equivalent to about 1 g of flomoxef. The usual dose is 1 to 2 g daily in two divided doses.

Preparations

Proprietary Preparations (details are given in Part 3)

Ipn: Flumarin.