

# COTIMET®

(CO-TRIMOXAZOLE)

## Indications:

Chronic Bronchitis, Pneumocystis Jirovecii Pneumonia, Shigellosis, Traveler's Diarrhea, Urinary Tract Infections, Acne Vulgaris (off-label), Community Acquired Pneumonia (off-label)

## Pharmacological Category:

Sulfonamide Derivative

## Pregnancy:

Teratogenic risk in first trimester (trimethoprim a folate antagonist) exists. Neonatal haemolysis and methaemoglobinemia in third trimester; fear of increased risk of kernicterus in neonates appears to be unfounded.

## Lactation:

Small risk of kernicterus in jaundiced infants and of haemolysis in G6PD-deficient infants exists. (due to sulfamethoxazole)

## Side effects:

Common adverse effects are as follows:  
Nausea, diarrhea, headache, hyperkalaemia, rash

## Contraindications:

- Known hypersensitivity
- Age <2 months
- CrCl <15 mL/min when renal function status cannot be monitored
- Documented megaloblastic or folate deficiency anemia
- Significant hepatic impairment
- History of drug-induced immune thrombocytopenia with use of trimethoprim and/or sulfonamides

## Interactions:

In elderly patients concurrently-receiving certain diuretics, primarily thiazides, an increased incidence of thrombocytopenia with purpura has been reported. This drug may prolong the prothrombin time in patients who are receiving the anticoagulant warfarin. This interaction should be kept in mind when this is given to patients already on anticoagulant therapy, and the coagulation time should be reassessed. Co-trimoxazole may inhibit the hepatic metabolism of phenytoin. When administering these drugs concurrently, one should be alert for possible excessive phenytoin effect. Sulfonamides can also displace methotrexate from plasma protein binding sites and can compete with the renal transport of methotrexate, thus increasing free methotrexate concentrations. There have been reports of

marked but reversible nephrotoxicity with co-administration of this drug and cyclosporine in renal transplant recipients. Increased digoxin blood levels can occur with concomitant therapy, especially in elderly patients. Serum digoxin levels should be monitored. Increased sulfamethoxazole blood levels may occur in patients who are receiving indomethacin. Occasional reports suggest that patients receiving pyrimethamine as malaria prophylaxis in doses exceeding 25 mg weekly may develop megaloblastic anemia if this drug is prescribed. The efficacy of tricyclic antidepressants can decrease when co-administered. Like other sulfonamide-containing drugs, co-trimoxazole potentiates the effect of oral hypoglycemics.

## Dose:

- General:

Adult: 960 mg (2 tablets) every 12 hours

Pediatric:

6 weeks-5 months, 120 mg every 12 hours

6 months- 5 years, 240 mg every 12 hours

6-12 years, 480 mg every 12 hours

- Treatment of Pneumocystis Jirovecii

## infections:

Adult and Child over 4 Weeks: 120 mg/kg daily in 2-4 divided doses for 14-21 days

- prophylaxis of Pneumocystis Jirovecii:

960 mg once daily (may be reduced to 480 mg once daily to improve toler-

ance) or 960 mg on alternate days (3 times a week) or 960 mg twice daily on alternate days (3 times a week)

Child 6 weeks- 5 months: 120 mg twice daily on 3 consecutive or alternate days per week or on 7 days per week, 6 months- 5 years: 240 mg, 6-12 years 480 mg

## Administration:

Swallow the tablets with plenty of water, after a meal to prevent upset stomach. It is important to drink plenty of fluids while you are taking Co-trimoxazole.

If you forget to take a dose, take it as soon as you remember, but if it is almost time for your next dose, skip the missed dose and continue as usual. Do not take a double dose to make up for a missed dose.

## Dosage Form:



Each oral tablet contains 400 mg sulfamethoxazole + 80 mg trimethoprim

## References:

- 1) British National Formulary 68, September 2014- March 2015, page 389
- 2) Lexicomp, s Drug Reference Handbooks, American Pharmacists Association, 20th edition, pages 1642-1644
- 3) <http://www.mhra.gov.uk/home/groups/spcpil/documents/spcpil/con1500615503102.pdf>
- 4) <http://reference.medscape.com/drug/bactrim-trimethoprim-sulfamethoxazole-342543>
- 5) [https://www.accessdata.fda.gov/drugsatfda\\_docs/label/2003/17377slr057\\_Bactrim\\_lbl.pdf](https://www.accessdata.fda.gov/drugsatfda_docs/label/2003/17377slr057_Bactrim_lbl.pdf)