

Professional Information

SCHEDULING STATUS

S4

1. NAME OF THE MEDICINE

RANCEPH 250 CAPSULES

RANCEPH 500 CAPSULES

2. QUALITATIVE AND QUANTITATIVE COMPOSITION

RANCEPH 250 CAPSULES:

Each capsule contains:

Cefalexin monohydrate equivalent to Cefalexin anhydrous 250 mg.

Contains sugar: Lactose 17 mg per capsule.

RANCEPH 500 CAPSULES:

Each capsule contains:

Cefalexin monohydrate equivalent to Cefalexin anhydrous 500 mg.

Contains sugar: Lactose 34 mg per capsule.

3. PHARMACEUTICAL FORM

Capsule

RANCEPH 250 CAPSULES:

Dark green/white self-locked, hard gelatin capsules of size '2' imprinted with 'RX656' in black edible ink containing a white to off-white granular powder/pellet.

RANCEPH 500 CAPSULES:

Dark green/light green self-locked, hard gelatin capsules of size '0' imprinted with 'RX657' in black edible ink containing a white to off-white granular powder/pellet.

4. CLINICAL PARTICULARS

4.1 Therapeutic indications

RANCEPH CAPSULES are indicated for the treatment of the following infections caused by susceptible micro-organisms:

- Respiratory tract infections caused by *Streptococcus pneumoniae* and group A β -haemolytic *streptococci*.
- Otitis media due to *Streptococcus pneumoniae*, *H. influenzae*, *staphylococci*, *streptococci* and *N. catarrhalis*.
- Skin and soft tissue infections caused by *staphylococci* and/or *streptococci*.
- Genito-urinary tract infections, including acute prostatitis caused by *E. coli*, *P. mirabilis* and *Klebsiella*.
- Dental infections caused by *staphylococci* and/or *streptococci*.

Appropriate culture and susceptibility studies should be performed to determine susceptibility of causative organism to cefalexin. Renal function studies should be performed when indicated.

4.2 Posology and method of administration

Posology

The adult dosage ranges from 1-4 g daily in divided doses. The usual adult dosage is 250 mg every 6 hours.

For skin and soft tissue infections, streptococcal pharyngitis and mild, uncomplicated urinary tract infections, the usual dosage is 250 mg every 6 hours, or 500 mg every 12 hours.

For more severe infections or those caused by less susceptible organisms, larger doses may be needed. If daily doses of RANCEPH CAPSULES greater than 4 grams are required, parenteral cephalosporins, in appropriate doses, should be considered.

The elderly and patients with impaired renal function: As for adults. Reduce dosage if renal function is markedly impaired.

Children: The usual recommended dosage for children is 25 mg/kg/day to 50 mg/kg/day in divided doses every six hours. The use of the capsules is not feasible in young children.

In the treatment of beta-haemolytic streptococcal infections, a therapeutic dose should be administered for at least 10 days.

Method of administration

Oral administration.

4.3 Contraindications

RANCEPH CAPSULES are contra-indicated in:

- **RANCEPH CAPSULES** should not be used in patients with known hypersensitivity to the cefalexin or any of the excipients of **RANCEPH CAPSULES** (listed in section 6.1).
- Patients with known allergy to the cephalosporin group of antibiotics. (See Section 4.4)
- Pregnancy and lactation (see Section 4.6)

4.4 Special warnings and precautions for use

Before therapy with RANCEPH CAPSULES is started, careful enquiry should be made concerning previous hypersensitivity reactions to cephalosporins, penicillins or other medicine. RANCEPH CAPSULES should be administered with caution to penicillin-sensitive patients. There is evidence of cross-allergenicity between the penicillins and cephalosporins. Patients have been reported to have had severe reactions (including anaphylaxis) to both.

The diagnosis of pseudomembranous colitis must be considered in patients who develop diarrhoea in association with its use. Such colitis may be life-threatening and appropriate measures should be taken, including discontinuation of RANCEPH CAPSULES.

RANCEPH CAPSULES should be administered with caution in the presence of impaired renal function; dosage reduction may be necessary. Renal and haematological status should be monitored especially during prolonged and high-dose therapy.

RANCEPH CAPSULES may interfere with the Jaffé method of measuring creatinine concentrations and may produce falsely high values; this should be borne in mind when measuring renal function.

Positive direct Coombs' (antiglobulin) tests have been reported during treatment with the cephalosporin antibiotics and these can interfere with blood cross-matching.

A false-positive reaction for glucose in the urine may occur with Benedict's or Fehling's solutions or with copper sulphate test tablets.

4.5 Interaction with other medicines and other forms of interaction

The concomitant use of nephrotoxic medicines such as the aminoglycosides gentamicin and tobramycin may increase the risk of kidney damage with RANCEPH CAPSULES.

There is also evidence for enhanced nephrotoxicity with the loop diuretic furosemide.

The renal excretion of RANCEPH CAPSULES is inhibited by probenecid.

RANCEPH CAPSULES may decrease the efficacy of oestrogen containing contraceptives.

There may be antagonism between RANCEPH CAPSULES and bacteriostatic anti-bacterials.

4.6 Fertility, pregnancy and lactation

The safety in pregnancy and lactation has not been established.

4.7 Effects on ability to drive and use machines

RANCEPH CAPSULES may cause dizziness or drowsiness. Patients should therefore be advised not to drive or operate machinery until their individual susceptibility is known.

RANCEPH CAPSULES contains lactose.

Patients with rare hereditary problems of galactose intolerance, total lactase deficiency or glucose-galactose malabsorption should not take RANCEPH CAPSULES.

4.8 Undesirable effects

System Organ Class	Frequent	Less frequent
Blood and the lymphatic system disorders	Eosinophilia.	Haemolytic anaemia, neutropaenia and thrombocytopenia.
Immune system disorders		Hypersensitivity reactions, including skin rashes, urticaria, eosinophilia, fever, reactions resembling serum sickness, and anaphylaxis.
Nervous system disorders	Headache.	Dizziness and drowsiness. Convulsions and confusion have been associated with high doses, especially in patients with renal impairment.
Gastro-intestinal disorders	Nausea, vomiting and diarrhoea.	Abdominal cramps, pseudomembranous colitis and overgrowth of non-susceptible organisms have been reported.

Hepato-biliary disorders		Hepatitis and cholestatic jaundice.
Renal and urinary disorders		Nephrotoxicity, acute renal tubular necrosis, acute interstitial nephritis
Reproductive system and breast disorders		Vulval candidiasis.
General disorders and administration site conditions		Fatigue.
Investigations		Positive response to the Coombs' (antiglobulin) test; transient increases in liver enzyme values.

Reporting of suspected adverse reactions

Reporting suspected adverse reactions after authorisation of the medicine is important. It allows continued monitoring of the benefit/risk balance of the medicine. Health care providers are asked to report any suspected adverse reactions to SAHPRA via the “6.04 Adverse Drug Reactions Reporting Form”, found online under SAHPRA’s publications: <https://www.sahpra.org.za/>

4.9 Overdose

See Section 4.8.

Treatment is symptomatic and supportive. Cephalexin is removed by haemodialysis and peritoneal dialysis.

5. PHARMACOLOGICAL PROPERTIES

5.1 Pharmacodynamic properties

Category and class: A 20.1.1 Broad and medium spectrum antibiotics.

Pharmacotherapeutic group: Antibacterials for systemic use, First-generation cephalosporins, ATC code: J01DB

Cefalexin is a first generation cephalosporin antibacterial. Cefalexin is a broad spectrum bactericidal antibiotic. It acts by inhibiting bacterial cell-wall synthesis.

Cefalexin is active against Gram positive and Gram negative organisms *in vitro*.

Most strains of *enterococci* (*Streptococcus faecalis*) and a few strains of *staphylococci* are resistant to cefalexin. It is not active against most strains of *Enterobacter* species, *P. morganii* and *P. vulgaris*. It has no activity against *Pseudomonas* or *Herellea* species.

When tested by *in vitro* methods, *staphylococci* exhibit cross-resistance between cefalexin and methicillin-type antibiotics.

In vitro sensitivity does not necessarily imply *in vivo* efficacy.

5.2 Pharmacokinetic properties

It is rapidly absorbed from the upper gastro-intestinal tract, giving peak levels at 1 hour and following food at 2 hours. Following doses of 250 mg and 500 mg average serum levels of about 9 and 18 µg per ml respectively were obtained at one hour.

Over 90 % is recovered unchanged in urine within 8 hours. Peak urine concentrations are 1000 µg per ml during this period following a 250 mg dosage of cefalexin.

The serum half-life of cefalexin is 0,9 to 1,2 hours but is prolonged in neonates. In uraemic patients the half-life may increase to 5-30 hours.

6. PHARMACEUTICAL PARTICULARS

6.1 List of excipients

RANCEPH 250 CAPSULES

- Lactose,
- Magnesium stearate.

RANCEPH 500 CAPSULES

- Lactose,
- Magnesium stearate

6.2 Incompatibilities

Not applicable

6.3 Shelf life

36 months

6.4 Special precautions for storage

Store at or below 25 °C, protected from moisture.

6.5 Nature and contents of container

RANCEPH 250 CAPSULES:

Carton containing 2 x 10 capsules in blister strips. Carton containing 10 x 10 capsules in blister strips.

RANCEPH 500 CAPSULES:

Carton containing 2 x 10 capsules in blister strips. Carton containing 10 x 10 capsules in blister strips.

6.6 Special precautions for disposal

No special requirements for disposal

7. HOLDER OF CERTIFICATE OF REGISTRATION

RANBAXY PHARMACEUTICALS (PTY) LTD.

14 LAUTRE ROAD

STORMILL EXT.1

ROODEPOORT 1724

SOUTH AFRICA

8. REGISTRATION NUMBER(S)

RANCEPH 250 CAPSULES: 30/20.1.1/0334

RANCEPH 500 CAPSULES: 30/20.1.1/0335

Ranceph 250 Capsules:

Namibia: NS2; Reg No.: 04/20.1.1/0610

Botswana: S2; Reg No.: BOT0901582

Ranceph 500 Capsules:

Namibia: NS2; Reg No.: 04/20.1.1/0611

Botswana: S2; Reg No.: BOT0901583

9. DATE OF FIRST AUTHORISATION/RENEWAL OF THE AUTHORISATION

RANCEPH 250 CAPSULES: 18 February 1997

RANCEPH 500 CAPSULES: 28 November 1997

10. DATE OF REVISION OF THE TEXT

05 December 2022