Fucidin®

Antistaphylococcal Antibiotic

Tablets
Sodium fusidate 250 mg

Oral Suspension
Fusidic acid 50 mg/ml

Properties
Fucidin is an antibiotic with powerful antibacterial activity against a number of gram-positive microorganisms. Staphylococci, including the strains resistant to penicillin, methicillin or other antibiotics, are particularly susceptible to Fucidin. Fucidin shows no cross-resistance to any other antibiotic agent used in clinical practice.
Fucidin is widely distributed in the organism. It is of great clinical importance that Fucidin provides high concentrations not only in areas well supplied with blood, but also in relatively avascular tissue. Concentrations exceeding the M.I.C. for Staphylococcus aureus (0.03–0.16 mcg/ml) have been found in pus, sputum, soft tissue, heart tissue, bone tissue, synovial fluid, sequestra, burn crusts, brain abscesses, and intraocularly.
Fucidin is metabolized in the liver and mainly excreted in the bile, little or none being excreted through the urine.
Fucidin is generally atoxic and can be used in many cases where other antibiotics are contraindicated, e.g. in patients allergic to penicillin or other antibiotics and in patients with impaired renal function.
Fucidin shows no cross-hypersensitivity to other antibiotics in clinical use.
In severe or deep-seated infections and when prolonged therapy is required, systemic Fucidin should generally be given concurrently with other antistaphylococcal antibiotic therapy to minimize the risk of resistance development.
Fucidin may be combined with penicillinase-stable penicillins, cephalosporins, erythromycin, rifampicin or lincomycin, and thus an additive or synergistic effect is also obtained.

Indications
Fucidin is indicated for the treatment of infections caused by susceptible organisms, especially staphylococci, e.g. osteomyelitis, septicaemia, endocarditis, cystic fibrosis, pneumonia, skin and soft tissue infections, surgical and traumatic wound infections.

Dosage:
Tablets:
Standard dosage for adults and children over 12 years:
500 mg sodium fusidate (2 tablets) 3 times daily.
Recommended dosage in skin and soft tissue infections: 250 mg sodium fusidate (1 tablet) twice daily.
Suspension:
Adults: 15 ml of suspension 3 times daily.
Children and infants: 1 ml of suspension (50 mg) per kg body weight daily divided into 3 equal doses.
1–5 years: 5 ml 3 times daily.
5–12 years: 10 ml 3 times daily.

Precautions
As Fucidin is metabolized in the liver and excreted mainly through the bile, periodic liver function tests should be carried out in patients with liver dysfunction abnormalities in the biliary pathway, or when Fucidin is given in high doses for prolonged periods, or when it is given in combination with other antibiotics which have similar excretion pathways, e.g. lincomycin and rifampicin.
In vitro, Fucidin displaces bilirubin from its albumin binding site.
The clinical significance of this finding is uncertain and kernicterus has not been observed in neonates receiving Fucidin. However, this observation should be borne in mind when the drug is given to preterm, jaundiced, acidotic or seriously ill neonates.

Pregnancy and lactation
Animal studies and many years of clinical experience suggest that Fucidin is devoid of teratogenic effects.
Fucidin passes the placenta and should be avoided during third trimester due to the theoretical risk of kernicterus. Concentrations of Fucidin found in breast milk are negligible and its use is not contraindicated in nursing mothers.

Side effects
Fucidin given orally may cause gastrointestinal disturbances (dyspepsia, nausea, vomiting diaarhoea) which can normally be avoided by giving Fucidin with meals.
Reversible jaundice has been reported in some patients after administration of Fucidin, most frequently in patients receiving intravenous Fucidin in high dosage. In some cases, instituting oral therapy may be beneficial.
If the jaundice persists, Fucidin should be withdrawn, after which the serum bilirubin will return to normal. Allergic reactions are reported in very few cases.

Overdosage
Treatment should be restricted to symptomatic and supportive measures. Dialysis is of no benefit as the drug is not significantly dialysed.

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