

● MONITORING REQUIREMENTS

- ▶ **Renal function** should be checked before treatment.
- ▶ **Hepatic function** should be checked before treatment. If there is no evidence of liver disease (and pre-treatment liver function is normal), further checks are only necessary if the patient develops fever, malaise, vomiting, jaundice or unexplained deterioration during treatment. However, hepatic function should be monitored on prolonged therapy.
- ▶ Blood counts should be monitored on prolonged therapy.
- ▶ Those with alcohol dependence should have frequent checks of hepatic function, particularly in the first 2 months. Blood counts should also be monitored in these patients.
- **PRESCRIBING AND DISPENSING INFORMATION** If treatment interruption occurs, re-introduce with low dosage and increase gradually.

● PATIENT AND CARER ADVICE

Soft contact lenses Patients or their carers should be advised that rifabutin discolours soft contact lenses.
Hepatic disorders Patients or their carers should be told how to recognise signs of liver disorder, and advised to discontinue treatment and seek immediate medical attention if symptoms such as persistent nausea, vomiting, malaise or jaundice develop.

- **MEDICINAL FORMS** There can be variation in the licensing of different medicines containing the same drug. Forms available from special-order manufacturers include: oral suspension, oral solution

Capsule

CAUTIONARY AND ADVISORY LABELS 8, 14

- ▶ **Mycobutin** (Pfizer Ltd)

Rifabutin 150 mg Mycobutin 150mg capsules | 30 capsule [PoM]
£90.38 DT = £90.38

Rifaximin

07-Feb-2019

- **DRUG ACTION** Rifaximin is a rifamycin that is poorly absorbed from the gastro-intestinal tract, and, therefore, should not be used to treat systemic infections.

● INDICATIONS AND DOSE

Travellers' diarrhoea that is not associated with fever, bloody diarrhoea, blood or leucocytes in the stool, or 8 or more unformed stools in the previous 24 hours

▶ BY MOUTH

- ▶ Adult: 200 mg every 8 hours for 3 days

Reduction in recurrence of hepatic encephalopathy

▶ BY MOUTH

- ▶ Adult: 550 mg twice daily

- **CONTRA-INDICATIONS** Intestinal obstruction

- **INTERACTIONS** → Appendix 1: rifaximin

● SIDE-EFFECTS

- ▶ **Common or very common** Arthralgia · ascites · constipation · depression · dizziness · dyspnoea · gastrointestinal discomfort · gastrointestinal disorders · headaches · muscle complaints · nausea · oedema · skin reactions · vomiting
- ▶ **Uncommon** Anaemia · anxiety · appetite decreased · asthenia · balance impaired · concentration impaired · confusion · cough · diplopia · drowsiness · dry lips · dry mouth · dry throat · ear pain · fall · haematuria · hot flush · hyperhidrosis · hyperkalaemia · increased risk of infection · lymphocytosis · memory loss · muscle weakness · nasal complaints · neutropenia · oropharyngeal pain · pain · palpitations · polymenorrhoea · respiratory disorders · seizure · sensation abnormal · sleep disorders · sunburn · taste altered · urinary disorders · urine abnormalities · vertigo
- ▶ **Rare or very rare** Hypertension · hypotension

- ▶ **Frequency not known** Angioedema · syncope · thrombocytopenia · urine discolouration

- **ALLERGY AND CROSS-SENSITIVITY** Contra-indicated if history of rifamycin hypersensitivity.

- **PREGNANCY** Manufacturer advises avoid—toxicity in animal studies.

- **BREAST FEEDING** Unlikely to be present in milk in significant amounts, but manufacturer advises avoid.

● HEPATIC IMPAIRMENT

- ▶ When used for hepatic encephalopathy Manufacturer advises caution in severe impairment (risk of increased exposure).

- **PRESCRIBING AND DISPENSING INFORMATION** Not recommended for diarrhoea associated with invasive organisms such as *Campylobacter* and *Shigella*.

● NATIONAL FUNDING/ACCESS DECISIONS

NICE decisions

- ▶ **Rifaximin for preventing episodes of overt hepatic encephalopathy (March 2015)** NICE TA337 Rifaximin (*Targaxan*®) is recommended, within its marketing authorisation, as an option for reducing the recurrence of episodes of overt hepatic encephalopathy in adults.

www.nice.org.uk/guidance/ta337

- **MEDICINAL FORMS** There can be variation in the licensing of different medicines containing the same drug. Forms available from special-order manufacturers include: oral suspension

Tablet

CAUTIONARY AND ADVISORY LABELS 9 (Xifaxanta® brand only), 14

- ▶ **Targaxan** (Norgine Pharmaceuticals Ltd)

Rifaximin 550 mg Targaxan 550mg tablets | 56 tablet [PoM]
£259.23 DT = £259.23

- ▶ **Xifaxanta** (Norgine Pharmaceuticals Ltd)

Rifaximin 200 mg Xifaxanta 200mg tablets | 9 tablet [PoM] £15.15 DT = £15.15

2.1 Anthrax

Anthrax

Treatment and post-exposure prophylaxis

Inhalation or gastro-intestinal anthrax should be treated initially with either ciprofloxacin p. 590 or, in patients over 12 years, doxycycline p. 597 [unlicensed indication] combined with one or two other antibacterials (such as amoxicillin p. 579, benzylpenicillin sodium p. 577, chloramphenicol p. 601, clarithromycin p. 567, clindamycin p. 564, imipenem with cilastatin p. 548, rifampicin p. 615 [unlicensed indication], and vancomycin p. 562). When the condition improves and the sensitivity of the *Bacillus anthracis* strain is known, treatment may be switched to a single antibacterial. Treatment should continue for 60 days because germination may be delayed.

Cutaneous anthrax should be treated with either ciprofloxacin [unlicensed indication] or doxycycline [unlicensed indication] for 7 days. Treatment may be switched to amoxicillin if the infecting strain is susceptible. Treatment may need to be extended to 60 days if exposure is due to aerosol. A combination of antibacterials for 14 days is recommended for cutaneous anthrax with systemic features, extensive oedema, or lesions of the head or neck.

Ciprofloxacin or doxycycline may be given for *post-exposure prophylaxis*. If exposure is confirmed, antibacterial prophylaxis should continue for 60 days. Antibacterial prophylaxis may be switched to amoxicillin after 10–14 days if the strain of *B. anthracis* is susceptible. Vaccination against anthrax may allow the duration of antibacterial prophylaxis to be shortened.