

**Recommended dosing regimens of Pefloxacin,
produced by Kraspharma OJSC, in patients with normal renal function**

Indication	Daily dose regimen	Way of administration	Duration of treatment
Bacterial meningitis (probably caused by <i>N. meningitides</i> or other gram-negative Bacteria)	800 mg – loading dose, then 400 mg every 8-12 hours	IV	Dependent on pathogens: <i>N. meningitides</i> – 4-5 days; Other gram-negative bacteria – up to 14 days
Biliary tract infection (cholangitis, cholecystitis)	800 mg – loading dose, then 400 mg every 12 hours + metronidazole 500 mg every 8 hours ¹	IV	10-14 days
Peritonitis	800 mg – loading dose, then 400 mg every 12 hours + metronidazole 500 mg every 8 hours ¹	IV	7-10 days
Complicated UTIs ² (including pyelitis, pyelonephritis, paranephritis)	800 mg – loading dose, then 400 mg every 12 hours	IV	10-14 days
Skin and soft tissues infections, especially in patients with beta-lactam allergy	800 mg – loading dose, then 400 mg every 12 hours	IV	7-10 days
Bacterial gastrointestinal infections, including escherichiosis, shigellosis, cholera, salmonellosis, typhoid fever, paratyphoids A, B and C, yersiniosis	800 mg – loading dose, then 400 mg every 12 hours	IV	3-5 days

Infections in immunocompromised patients	800 mg – loading dose, then 400 mg every 8 hours +/- amikacin 5 mg/kg every 8 hours or 7.5 mg/kg every 12 hours	IV	14-21 days
Perioperative antibiotic prophylaxis	400-800 mg, start infusion 30-60 min. prior to surgery +/- metronidazole 500 mg, start infusion 60-90 min. prior to surgery ¹	IV IV ³	

¹ Pefloxacin solution for infusion and metronidazole solution for infusion may be administered sequentially of one another if the infusion lines are flushed between infusions with a compatible fluid. Similarly, simultaneous administration down separate lumens of a multilumen venous access device is acceptable. Administration via a Y-site is not acceptable as there will be mixing of the drugs within the line

² UTIs - urinary tract infections

³ Metronidazole 500mg/100ml should be infused intravenously at an approximate rate of 5 ml/minute (or 0.5 g infused over 20 to 30 min)