

KIVIZA-Cf

Ceftriaxone, Disodium Edetate and Sulbactam powder for solution for infusion 1.5 gm

KIVIZA-Cf Forte

Ceftriaxone, Disodium Edetate and Sulbactam powder for solution for infusion 3 gm



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DESCRIPTION:

KIVIZA-Cf & KIVIZA-Cf Forte, a novel combination of ceftriaxone, sulbactam and disodium ethylene-diamine-tetraacetic acid (EDTA) as Antibiotic Adjuvant Entity (AAE), which helps to combat Antimicrobial resistance caused by Extended-spectrum beta-lactamase (ESBL) and metallo-beta-lactamase (MBL)-producing strains.

COMPOSITION:

KIVIZA-Cf 1.5 gm

Ceftriaxone Sodium IP (Equivalent to Ceftriaxone).....1000 mg

Sulbactam Sodium IP (Equivalent to Sulbactam).....500 mg

Disodium EDTA IP.....37 mg

KIVIZA-Cf Forte 3 gm

Ceftriaxone Sodium IP (Equivalent to Ceftriaxone).....2000 mg

Sulbactam Sodium IP (Equivalent to Sulbactam).....1000 mg

Disodium EDTA IP.....74 mg

INDICATIONS:

- » Lower Respiratory Tract Infections including community acquired pneumonia (CAP)
- » Infections of Bones and Joints, Surgical prophylaxis
- » Intra-abdominal Infections including abdominal sepsis
- » Urinary Tract Infections (UTIs)
- » Skin and Soft Tissue Infections
- » Nosocomial and community-acquired infections caused by ESBL/MBL-producing strains.

MODE OF ACTION:

- 1. Ceftriaxone:-** Inhibits bacterial cell wall synthesis, targeting gram-positive and gram-negative microorganisms.
- 2. Sulbactam:-** Acts as a β -lactamase inhibitor, preventing enzyme-mediated destruction of ceftriaxone and restoring antibacterial efficacy and shows moderate intrinsic activity against susceptible strains.
- 3. Disodium Edetate (EDTA):-** A non-antibiotic adjuvant that breaks antibiotic resistance and acts as a catalyst to the synergy between β -lactams and β -lactamase inhibitors.

DOSAGE AND ADMINISTRATION:

- » The usual adult dose is 1.5–3 g per day, given every 24 hours or in two divided doses, and can be increased to a maximum of 6 g per day in severe infections. The recommended treatment is from 5 to 14 days.
- » For Renal impairment, reduce dosage as per creatinine clearance levels: Pre-terminal renal failure (Creatinine clearance < 10 mL/min): Daily dosage should be limited to ≤ 3 g.
- » Reconstitute with 10 mL of sterile water for injection (1.5 gm) & 20 mL for injection (3 gm). Mix until clear solution, Administer via slow IV infusion over a period of 90 minutes.

PRESENTATION: It is available as single dose glass vial.



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