Ciprofloxacin (Cipro)

Indication(s): Gastroenteritis

Contraindications: Hypersensitivity to ciprofloxacin, or known allergy to other fluoroquinolones. Ciprofloxacin is not compatible with breastfeeding; if indicated in nursing mothers, a decision should be made to discontinue nursing or to discontinue the administration of ciprofloxacin.

Precautions: Ciprofloxacin is not recommended for use in pediatric patients (<18yo) or during pregnancy (Weigh Benefit vs. Risk). There are reports of possible tendonitis or tendon rupture associated with ciprofloxacin use. Consider discontinuation/alternate therapy if joint or tendon pain occurs.

Drug Interactions: Reports of QT Prolongation – Fluoroquinolone class effect – Review patient's current pharmacotherapy and comorbidities (cardiac) before supplying. Concurrent administration with zolpidem is not recommended (↑↑ serum zolpidem levels). Caution should be used when prescribing ciprofloxacin concomitantly with sildenafil (↑ serum sildenafil levels). Administration of an NSAID with a quinolone may increase the risk of CNS stimulation and convulsions (Monitor). Divalent or trivalent metal cations, e.g., calcium, iron salts, zinc (including within multivitamins), antacids containing aluminum or magnesium – Give 2hrs before or 6hrs after (Chelation risk).

Adverse effects: (2-20%) Vomiting, diarrhea, dizziness, insomnia, restlessness, tremor, drowsiness, headache, abdominal pain. (≤1%) Manic reactions, taste perversion, tendinopathy (report tendon pain).

Pharmacology: Inhibition of bacterial DNA

synthesis.

Dosage and Administration: <u>Traveller's Diarrhea</u> <u>Prophylaxis</u> 500mg PO once daily - Start 1 day before travel and continue until 2 days after leaving the destination; <u>Gastroenteritis Treatment</u> 500mg PO BID for 3 days.