

# **BACTROBAN CREAM**

## **Mupirocin calcium**

### **QUALITATIVE AND QUANTITATIVE COMPOSITION**

Mupirocin calcium equivalent to 2% w/w mupirocin free acid.

### **PHARMACEUTICAL FORM**

White cream for topical administration in a multi-use tube.

### **CLINICAL PARTICULARS**

#### **Therapeutic indications**

*BACTROBAN* Cream is indicated for the topical treatment of secondarily infected traumatic lesions such as small lacerations, sutured wounds or abrasions due to susceptible strains of *Staphylococcus aureus* and *Streptococcus pyogenes*.

#### **Posology and method of administration**

##### **Dosage**

*Adults/children/elderly*

3 times a day for up to 10 days, depending on the response.

*Hepatic impairment:* No dosage adjustment is necessary.

*Renal impairment:* No dosage adjustment is necessary.

##### **Method of administration**

A small quantity of cream should be applied to the affected area with a piece of clean cotton wool or gauze swab.

The treated area may be covered by a dressing.

Do not mix with other preparations as there is a risk of dilution, resulting in a reduction in the antibacterial activity and potential loss of stability of the mupirocin in the cream.

#### **Contraindications**

*BACTROBAN* Cream should not be given to patients with a history of hypersensitivity to any of its constituents.

#### **Special warnings and special precautions for use**

*BACTROBAN* Cream is not formulated for use on mucosal surfaces.

In the rare event of a possible sensitisation reaction or severe local irritation occurring with the use of *BACTROBAN* Cream, treatment should be discontinued, the product should be washed off and appropriate alternative therapy for the infection instituted.

As with other antibacterial products, prolonged use may result in overgrowth of non-susceptible organisms.

Pseudomembranous colitis has been reported with the use of antibiotics and may range in severity from mild to life-threatening. Therefore, it is important to consider its diagnosis in patients who develop diarrhoea during or after antibiotic use. Although this is less likely to occur with topically applied mupirocin, if prolonged or significant diarrhoea occurs or the patient experiences abdominal cramps, treatment should be discontinued immediately and the patient investigated further.

*BACTROBAN* Cream is not suitable for ophthalmic use and intranasal use.

Avoid contact with the eyes. If contaminated, the eyes should be thoroughly irrigated with water until the cream residues have been removed.

## **Interaction with other medicaments and other forms of interaction**

No drug interactions have been identified.

## **Pregnancy and Lactation**

### **Fertility**

There are no data on the effects of mupirocin on human fertility. Studies in rats showed no effects on fertility (*see Pre-Clinical Safety Data*).

### **Pregnancy**

Adequate human data on use during pregnancy are not available. Studies in animals do not indicate reproductive toxicity (*see Pre-Clinical Safety Data*).

Mupirocin should only be used in pregnancy when the potential benefits outweigh the potential risks associated with treatment.

### **Lactation**

Adequate human and animal data on use during lactation are not available.

If a cracked nipple is to be treated, it should be thoroughly washed prior to breast-feeding.

## **Effects on Ability to Drive and Use Machines**

No adverse effects on the ability to drive or operate machinery have been identified.

## **Undesirable effects**

Adverse reactions are listed below by system organ class and frequency. Frequencies are defined as: very common (greater than or equal to 1/10), common (greater than or equal to 1/100, less than 1/10), uncommon (greater than or equal to 1/1000, less than 1/100),

rare (greater than or equal to 1/10,000, less than 1/1000), very rare (less than 1/10,000), including isolated reports.

Data from clinical trials was used to determine the frequency of very common to rare undesirable effects. Very rare adverse reactions were primarily determined from post-marketing experience data and therefore refer to reporting rate rather than true frequency.

**Immune system disorders:**

Very rare: Systemic allergic reactions including anaphylaxis, generalised rash, urticaria and angioedema

**Skin and subcutaneous tissue disorders:**

Common: Cutaneous hypersensitivity reactions

**Overdose**

**Symptoms and Signs**

There is currently limited experience with overdosage of *BACTROBAN* cream.

**Treatment**

There is no specific treatment for an overdose of *BACTROBAN* cream. In the event of overdose, the patient should be treated supportively with appropriate monitoring as necessary. Further management should be as clinically indicated or as recommended by the national poisons centre, where available.

**PHARMACOLOGICAL PROPERTIES**

**Pharmacodynamics**

**Pharmacodynamic properties**

*Mechanism of Action*

Mupirocin is a novel antibiotic produced through fermentation by *Pseudomonas fluorescens*. Mupirocin inhibits isoleucyl transfer-RNA synthetase, thereby arresting bacterial protein synthesis. Due to this particular mode of action and its unique chemical structure, mupirocin does not show any cross-resistance with other clinically available antibiotics.

Mupirocin has bacteriostatic properties at minimum inhibitory concentrations and bactericidal properties at the higher concentrations reached when applied locally.

*Pharmacodynamic Effects*

Mupirocin is a topical antibacterial agent showing *in vivo* activity against *Staphylococcus aureus* (including methicillin-resistant strains), *S. epidermidis* and beta-haemolytic *Streptococcus* species.

The *in vitro* spectrum of activity includes the following bacteria:

**Commonly Susceptible Species:**

*Staphylococcus aureus*<sup>1,2</sup>  
*Staphylococcus epidermidis*<sup>1,2</sup>  
Coagulase-negative *staphylococci*<sup>2</sup>  
*Streptococcus* species  
*Haemophilus influenzae*  
*Neisseria gonorrhoeae*  
*Neisseria meningitidis*  
*Moraxella catarrhalis*  
*Pasteurella multocida*.

<sup>1</sup>Clinical efficacy has been demonstrated for susceptible isolates in approved clinical indications.

<sup>2</sup>Including beta-lactamase producing strains and methicillin-resistant strains

**Resistant Species:**

*Corynebacterium* species  
*Enterobacteriaceae*  
Gram negative non-fermenting rods  
*Micrococcus* species  
Anaerobes

**Mupirocin susceptibility (MIC) breakpoints for *Staphylococcus* spp.**

Susceptible: less than or equal to 1 microgram/ml

Intermediate: 2 to 256 micrograms/ml

Resistant: greater than 256 micrograms/ml

**Resistance mechanisms:**

Low-level resistance in staphylococci (MICs 8 to 256 micrograms/ml) has been shown to be due to changes in the native isoleucyl tRNA synthetase enzyme. High-level resistance in staphylococci (MICs greater than or equal to 512 micrograms/ml) has been shown to be due to a distinct, plasmid encoded isoleucyl tRNA synthetase enzyme. Intrinsic resistance in Gram-negative organisms such as the *Enterobacteriaceae* could be due to poor penetration into the bacterial cell.

## Pharmacokinetic properties

### *Absorption*

Systemic absorption of mupirocin through intact human skin is low although it may occur through broken/diseased skin. However, clinical trials have shown that when given systemically, it is metabolised to the microbiologically inactive metabolite monic acid and rapidly excreted.

### *Elimination*

Mupirocin is rapidly eliminated from the body by metabolism to its inactive metabolite monic acid which is rapidly excreted by the kidney.

## Pre-Clinical Safety Data

### Carcinogenesis/mutagenesis

#### *Carcinogenesis*

Carcinogenicity studies with mupirocin have not been conducted.

#### *Genotoxicity*

Mupirocin was not mutagenic in *Salmonella typhimurium* or *Escherichia coli* (Ames assay). In a Yahagi assay, small increases in *Salmonella typhimurium* TA98 were observed at highly cytotoxic concentrations. In an *in vitro* mammalian gene mutation assay (MLA), no increase in mutation frequency was observed in the absence of metabolic activation. In the presence of metabolic activation, small increases in mutation frequency were observed at highly cytotoxic concentrations. However, no effects were observed in yeast cell assays for gene conversion/mutation, an *in vitro* human lymphocyte assay or in an *in vitro* unscheduled DNA synthesis (UDS) assay. Furthermore, an *in vivo* mouse micronucleus assay (chromosome damage) and a rat Comet assay (DNA strand breakage) were negative, indicating the small increases observed at highly cytotoxic concentrations *in vitro* do not translate to the *in vivo* situation.

### Reproductive Toxicology

#### *Fertility*

Mupirocin administered subcutaneously to male rats 10 weeks prior to mating and to female rats 15 days prior to mating until 20 days post coitum at doses up to 100 mg/kg/day had no effect on fertility.

#### *Pregnancy*

In embryo-foetal development studies in rats there was no evidence of developmental toxicity at subcutaneous doses up to 375 mg/kg/day.

In an embryo-foetal development study in rabbits at subcutaneous doses up to 160 mg/kg/day, maternal toxicity (impaired weight gain and severe injection site irritation) at the high dose resulted in abortion or poor litter performance. However, there was no evidence of developmental toxicity in foetuses of rabbits maintaining pregnancy to term.

## **PHARMACEUTICAL PARTICULARS**

### **List of Excipients**

Xanthan gum, Liquid paraffin, Cetomacrogol 1000, Stearyl alcohol, Cetyl alcohol, Phenoxyethanol, Benzyl alcohol, Purified water.

### **Incompatibilities**

None identified.

### **Shelf-Life**

The expiry date is indicated on the packaging.

### **Special Precautions for Storage**

*BACTROBAN* Cream must be stored at room temperature (below 25°C) up to the expiry date.

Do not freeze.

### **Nature and Contents of Container**

Squeezable aluminium tubes with a screw cap containing 5 g and 15 g.

### **Instructions for Use/Handling**

No special instructions.

Any product remaining at the end of treatment should be discarded.

Wash your hands after application.

Manufactured by:  
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