L-R:03/2021

CEFTOCIDIN®

MASTITIS AGUDA

Laboratorio FUNDACION
ciencia y tecnología farmacéutica

COMPOSITION: cephalexin monohydrate 2.00 g. / Neomycin sulphate 2.00 g. / Prednisolone 0.10 g. / Oily excipient c.s.p 100 ml.
THERAPEUTIC ACTION: topic intramammary antibiotic for mastitis treatment during the nursing period.
INDICATIONS:
A) Cephalexin is a wide spectrum cephalosporin that presents as fundamental characteristics:
1. The highest bioavailability of all antibiotics inside the mammary gland, thanks o its low union with milk proteins and its gran penetration- absorption power reaching the infectious focus in high concentrations.
2. t's a bactericide antibiotic highly effective against the major pathogens in the mammary gland: staphylococci, streptococci, coliforms and, especially, against strains frequently resistant to natural and synthetic penicillin (ampicillin, cloxacillin) macrolides and lincosamides.
3. It's an antibiotic that doesn't easily create resistance with sustained use.
B) Neomince Sulphate: produces a synergic effect especially against Staphylococci (1) and increases the spectrum of action of cephalexin on Gram (-) microorganisms.
C) Prednisolone: it's the only anti-inflammatory with checked efficacy in the inflammatory response reduction and the proliferation of the cicatrizant tissue in the mammary gland. Thus its aggregate prevents loss of tissue producing milk.
The **CEFTOCIDIN Mastitis Aguda®** pharmaceutical formula is completely innocuous for the mammary tissue. It was evaluated in healthy nursing mid-lactation dairy cows. In no case were observed any changes in the cell counting comparison pre and post-inoculation.
DOSE: Intrammamarian via, following the aseptic conditions. It's advisable to set up the treatment as early as possible (at the appearance of lumps on the blunt). Previous the **CEFTOCIDIN Mastitis Aguda®** supply, the case must be evacuated as much as possible, continuing with proper nipple hygiene.
Since it's a STERILE PRODUCT, the "injector with fflexing rings" must be removed from its packaging and, after discarding the cannula cap, inserted into the nipple and then, the content discharged. It's advised not to touch the sterile cannula to avoid contamination. It's recommended to massage the nipple towards its base, to allow the best dispersion of the product. This operation must be repeated every 12 hours, up to 24 hours. after symptoms remitted. This normally implies between 4 and 6 doses. It's worth clarifying, that products with a high load of anti-inflammatories, make the symptoms disappear with a dose, BUT THERE IS NO CURATION (Bacteriological) and subclinical mastitis is maintained. (1)
(1)1. Ladaga GJB, Perna RL, Moras E.V, Pont-Lezica F, de Erausquin, G; First Episode Clinical Staphylococcus aureus Mastitis. Comparison of Two Intramammary 3-day Treatments; National Mastitis Council Regional Meeting; Gents; Belgium; August 4 – 6, 20141.
WANRING: The milk from cows treated with **CEFTOCIDIN Mastitis Aguda®** must be thrown away up to 6 milkings after the last treatment.
PRESENTATION: CEFTOCIDIN Mastitis Aguda® comes in a-thermic boxes with 20 sterile injectors. The "injector with flexing rings", patented by LABORATORIO FUNDACION, prevents damage to the nipple duct, no matter how strong or abrupt its introduction.
Each injector is inside a hermetic wrapper which material preserves its sterility. This is a product irradiated in the National Atomic Energy Commission (CNEA).

SALE UNDER PRESCRIPTION

KEEP BETWEEN 15 AND 25 DEGREES - USE IN VETERINARY - KEEP AWAY FROM CHILDREN

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