Consumer Medicine Information

What is in this leaflet?

Please read this leaflet carefully before you give ZINNAT suspension to your child.

This leaflet answers some common questions about ZINNAT suspension. It does not contain all of the available information.

It does not take the place of talking to your doctor or pharmacist.

All medicines have risks and benefits. Your doctor has weighed the expected benefits of your child taking ZINNAT suspension against the risks this medicine could have for him/her.

If you have any concerns about your child taking this medicine, ask your doctor or pharmacist.

Keep this leaflet with the medicine until your child has finished the course of ZINNAT suspension.

You may need to read it again.

What is ZINNAT suspension used for?

ZINNAT suspension belongs to a group of medicines called cephalosporin antibiotics.

The active ingredient in ZINNAT suspension (cefuroxime axetil) works by killing bacteria (germs) that cause infections such as infections of the ear, throat and tonsils.

Your doctor may have prescribed ZINNAT suspension for another reason.

ZINNAT suspension is not addictive.

Before your child takes ZINNAT suspension

ZINNAT suspension must not be given if:

- your child has ever had an allergic reaction to cefuroxime axetil or any of the ingredients listed toward the end of this leaflet. (See "What are the side effects?" and "Ingredients"). Some of the symptoms of allergic reaction may include skin rash, itchiness, shortness of breath, swelling of the face, lips or tongue.
- your child has had a serious allergic reaction to penicillins.
- there may be an increased risk of your child being allergic to ZINNAT suspension if he/she is allergic to penicillins.
- if you are not sure whether to give ZINNAT suspension to your child, contact your doctor.
- the expiry date (EXP) printed on the pack has passed.
- the packaging is torn or shows signs of tampering

Tell your doctor if:

You must tell your doctor if:

- your child has had an allergic reaction to any antibiotics in the past.
- your child is allergic to foods, dyes, preservatives or any other medicines. (including cephalosporins or penicillins)
- your child has had to stop taking other medicine for his/her infection.

- your child is diabetic.
 ZINNAT suspension contains sugar which
 - ZINNAT suspension contains sugar which the doctor will need to consider when treating your child.
- your child's urine is tested for sugar.
 ZINNAT suspension may interfere with some urine tests.
- · your child has kidney problems.
- Your child has ever had any health problems or medical conditions, including: glandular fever, blood disorders such as leukaemia and liver or kidney problems.

Taking other medicines

- Tell your doctor if your child is taking any other medicines, including medicines you buy without a prescription from the pharmacy, supermarket or health food shop.
- Some medicines may interfere with ZINNAT. These may include antibiotics and digestion tablets.
- Your doctor or pharmacist may have information on medicines to be careful with or to avoid while taking ZINNAT.

How to give ZINNAT suspension to your child

How much to give

Give the complete course of ZINNAT suspension as directed by the doctor or pharmacist. Do not stop just because your child feels better, as the medicine may not have killed all the germs and your child may start feeling unwell again.

In infants and children (3 months to 2 years), it may be preferable to adjust dosage according to weight and age. The dose of ZINNAT oral suspension recommended for children with tonsillitis and/or pharyngitis is 10mg/kg twice daily to a maximum of 250mg daily. The dose of ZINNAT oral suspension recommended for children with an ear infection (otitis media) is 15mg/kg twice daily.

Depending on the illness or how you or your child responds to treatment, the starting dose may be changed or more than one course of treatment may be needed.

Follow all directions given to you by your doctor and pharmacist carefully. These directions may differ from the information contained in this leaflet. If you do not understand the instructions on the bottle, ask your doctor or pharmacist for help.

How to give it

Always SHAKE THE BOTTLE before giving ZINNAT. The dose of suspension should then be measured out and swallowed straight away. The suspension can be diluted in cold fruit juice or milk drinks then given immediately. Do not mix ZINNAT suspension with hot liquids.

Before you give the first dose to your child, allow the suspension supplied by your pharmacist to stand for a least one hour.

Using a dosing syringe

- 1. Shake the bottle
- Remove the bottle cap and push the bung firmly into the top of the bottle.
- Push the dosing syringe firmly into the top of the bung.
- Turn the bottle upside down.

- Pull the plunger of the syringe back so that the medicine is drawn from the bottle into the syringe. Pull the plunger back to the point on the scale that corresponds to the dose prescribed for your child.
 Contact your doctor or pharmacist if you are
- draw into the syringe.Turn the bottle back the right way up and carefully remove the syringe from the bung, holding it by the barrel rather than the plunger.

at all confused about how much medicine to

- 7. Gently put the tip of the syringe into the child's mouth, to the inside of the child's
- Slowly and gently push the plunger down to gently squirt the medicine into the inside of your child's cheek. Allow them to swallow it.
- 9. Remove the syringe from your child's mouth.
- 10. Remove the bung and replace the lid on the bottle.
- 11. Rinse the bung and syringe in warm water and leave to dry.
- 12. Repeat the above for each dose as instructed by your doctor or pharmacist.

When to give it

ZINNAT suspension works better when taken with food.

How long to give it for

ZINNAT suspension should be given for 5 to 10 days. Your doctor may prescribe a different duration of treatment.

Use in children

ZINNAT suspension should not be given to children younger than 3 months of age unless the doctor says so.

If you take too much (overdose)

Immediately telephone your doctor or Poisons Information Centre (telephone 131126) for advice, if you think your child or anyone else may have taken too much ZINNAT suspension, even if there are no signs of discomfort or poisoning. They may need urgent medical attention.

If you are not sure what to do, contact your doctor or pharmacist.

While you are giving ZINNAT suspension

Things you must do

Tell your doctor if, for any reason, your child has not been given the medicine exactly as directed. Otherwise, your doctor may think that it was not working as it should and change your child's treatment unnecessarily

If your child is about to be started on any new medicines tell the doctor or pharmacist that you he/she is taking ZINNAT suspension.

If your child's symptoms do not improve within a few days, or if they become worse, tell your doctor.

If your child develops itching with swelling or skin rash, or difficulty breathing while taking ZINNAT, do not give more ZINNAT and contact your doctor immediately. If your child gets severe diarrhoea tell your doctor, pharmacist or nurse immediately. Do this even if it occurs several weeks after ZINNAT has stopped. Diarrhoea may mean that your child has a serious condition affecting the bowel. They may need urgent medical care. Do not give any diarrhoea medicine without first checking with your doctor.

If your child gets a white mouth or tongue while taking or soon after stopping ZINNAT, tell your doctor. Also tell your doctor if your child gets vaginal itching or discharge. This may mean your child has a fungal infection called thrush. Sometimes the use of ZINNAT allows fungi to grow and the above symptoms to occur. ZINNAT does not work against fungi.

If your child's urine has to be tested for sugar while using ZINNAT or if your child has to have any blood tests tell your doctor your child is taking ZINNAT.

If you miss a dose

If it is almost time for your child's next dose, skip the dose you missed and give the next dose when you are meant to. Otherwise, give it as soon as you remember, then go back to giving it as you would normally.

Do not give a double dose to make up for the dose that your child missed.

Things you must not do

Do not give this medicine to anyone else, even if their symptoms seem similar to your child's.

Do not use ZINNAT suspension to treat any other complaints unless the doctor says to.

Do not stop giving ZINNAT because your child is feeling better, unless advised by the doctor. If the full course prescribed by your doctor is not taken, all of the bacteria causing your child's infection may not be killed.

Side effects

Check with your doctor as soon as possible if you think your child is experiencing any side effects or allergic reactions due to being given ZINNAT suspension, even if the problem is not listed below.

Like other medicines, ZINNAT suspension can cause some side-effects. If they occur, they are most likely to be minor and temporary. However, some may be serious and need medical attention.

The most commonly reported side-effects are:

- diarrhoea
- nausea or vomiting
- nappy rash
- stomach pain
- headache
- dizziness
- fungal infections (such as candida)

Tell your doctor immediately if you notice any of the following:

- skin rash, which may blister, and looks like small targets (central dark spots surrounded by a paler area, with a dark ring around the edge) erythema multiforme
- a widespread rash with blisters and skin peeling on much of the body (toxic epidermal necrolysis), particularly around the mouth, nose, eyes and genitals (Stevens-Johnson syndrome)
- if your child gets diarrhoea over a long period, even if it occurs sometime after you have stopped giving ZINNAT.

If any of the following symptoms are experienced stop giving ZINNAT and tell the doctor immediately:

- · severe sickness, diarrhoea or stomach pains
- bleeding from the rectum
- · yellowing of the skin or eyes.

If you think your child is having an allergic reaction to ZINNAT suspension, TELL YOUR DOCTOR STRAIGHT AWAY or go to the casualty department at your nearest hospital. Symptoms usually include some or all of the following:

- wheezing.
- swelling of the lips/mouth,
- difficulty in breathing,
- lumpy rash (hives) or
- fainting

This is not a complete list of all possible sideeffects. Others may occur in some people and there may be some side-effects not yet known.

Do not be alarmed by this list of possible sideeffects. Your child may not experience any of them.

After using ZINNAT suspension

Do not keep the bottle of ZINNAT suspension longer than 10 days after it has been made up and store in the fridge between $2^{\circ}C$ and $8^{\circ}C$.

Keep this medicine where children cannot reach it, such as in a locked cupboard.

Keep ZINNAT suspension in a cool, dry place where it stays below $30^{\circ} C$.

Do not leave in a car, on a window sill or in the bathroom.

Return any unused or expired medicine to your pharmacist.

Product description

What ZINNAT suspension looks like

ZINNAT suspension comes as a white to offwhite, tutti-frutti flavoured liquid in amber glass bottles.

Ingredients

Each 5mL of ZINNAT suspension contains either 125mg or 250mg of the active ingredient cefuroxime (as cefuroxime axetil).

ZINNAT suspension also contains the following inactive ingredients: sugar (sucrose), stearic acid, tutti-frutti flavour and povidone. ZINNAT 125mg/5mL suspension also includes acesulfame potassium, aspartame and xanthan gum.

Supplier

Your ZINNAT suspension is supplied by:

Aspen Pharmacare Australia Pty Ltd

34-36 Chandos Street St Leonards NSW 2065

Australia

Where to go for further information

Pharmaceutical companies are not in a position to give people an individual diagnosis or medical advice. Your doctor or pharmacist is the best person to give you advice on the treatment of your condition.

This leaflet was prepared on 27 April 2011.

The information provided applies only to: ZINNAT® suspension.

ZINNAT® is a registered trade mark of Aspen Global Incorporated.

- ZINNAT 125mg/5mL suspension bottle: AUST R 178687
- ZINNAT 250mg/5mL suspension, bottle: AUST R 81301

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