

Penvik®

Phenoxyethyl Penicillin

Penvik® (Phenoxyethyl penicillin or penicillin V) is acid-stable and is absorbed from the upper part of the small intestine. Of different forms of Phenoxyethyl penicillin, the potassium salt of Phenoxyethyl penicillin is best absorbed. Penvik® may be given with meals but maximum absorption is achieved when drug is administered orally at least 30 minutes before or 2 hours after the meal. Phenoxyethyl penicillin offers a very convenient means of treating Gram-positive infections but is not indicated for Gram-negative infections involving the respiratory and urinary tracts. Phenoxyethyl penicillin has the distinct advantage over penicillin G in resistance to inactivation by gastric acid.

Composition:

Penvik® Tablet	: Each tablet contains Phenoxyethyl penicillin BP 250 mg (as potassium salt).
Penvik® DS Tablet	: Each tablet contains Phenoxyethyl penicillin BP 500 mg (as potassium salt).
Penvik® Dry Syrup	: Each 5 ml reconstituted syrup contains Phenoxyethyl penicillin BP 125 mg (as potassium salt).
Penvik® Forte Dry Syrup	: Each 5 ml reconstituted syrup contains Phenoxyethyl penicillin BP 250 mg (as potassium salt).

Indication :

Penvik® is indicated in the treatment of mild to moderate severe infections caused by susceptible organisms which are mostly Gram-positive. The following infections usually respond to adequate dosage of Penvik®. Streptococcal infections (without bacteraemia) : mild to moderately severe infections of upper respiratory tract, scarlet fever, mild erysipelas. Bacterial endocarditis due to L-Haemolytic streptococci (combined with streptomycin), lobar pneumonia, infections due to non-penicillase producing staphylococci. Pneumococci infections, Acute otitis media, Meningococci infections. Fusospirochetonis vincent's gingivitis and pharyngitis. Prophylaxis: Prevention of recurrence following rheumatic fever and chorea. Puerperal sepsis, Diphtheria, Anthrax, Gonococcal infections, Syphilis and yaws, Actinomycosis.

Dosage & Administration:

The dosage of Penvik® should be determined according to the sensitivity of the causative micro-organism and the severity of the infection, and adjusted to the clinical response of the patient

Adults	: 250-500 mg 6 hourly
Children	: 125-250 mg 6 hourly
Dry Syrup	: 1 -2 teaspoonful (5-10 ml) 6 hourly
Forte Syrup	: ½ -1 teaspoonful (2.5-5 ml) 6 hourly
Infants	: 62.5 -125 mg 6 hourly
Dry Syrup	: ½ -1 tea spoonful (2.5-5 ml) 6 hourly, or as prescribed by the physician.

Penv ik® is best taken with an empty stomach, preferably at least 1 hour before or 2 hours after meal.

Contraindication & Precaution:

It is contraindicated in patients known to be hypersensitive to penicillin. It is also contraindicated in severe acute infections.

Adverse reaction: Common encountered untoward effects include nausea, vomiting, epigastric distress & diarrhoea. The hypersensitivity reactions reported are skin eruptions, urticaria and other serum sickness reactions, laryngeal oedema and anaphylaxis.

Drug Interaction:

The activity of Phenoxyethyl penicillin is reduced in the presence of Zinc oxide, Magnesium oxide, Magnesium carbonate, Calamine etc. Aspirin, sulphamethoxypyridazine and sulphadiazine inhibit the serum-binding of Phenoxyethyl penicillin in vitro and in vivo. Moreover, aminoglycosides may be deactivated by Phenoxyethyl penicillin. Probencid retards the excretion of Phenoxyethyl penicillin when given concomitantly.

Use in Pregnancy and Lactation:

There are no contraindications to the use of penicillin in pregnancy. Phenoxyethyl penicillin is excreted in the breast milk which might cause allergic reaction to the infants.

Storage:

Protect from light and moisture. Store in a cool and dry place.

How Supplied:

Penv ik® Tablet : Each box containing 10 x 10 tablets in strip pack.

Penv ik® DS Tablet : Each box containing 10 x 10 tablets in strip pack.

Penv ik® 100 ml Dry Syrup : Each bottle containing dry powder to make 100 ml syrup and a measuring spoon.

Penv ik® 50 ml Dry Syrup : Each bottle containing dry powder to make 50 ml syrup and a measuring spoon.

Penv ik® Forte Dry Syrup : Each bottle containing dry powder to make 100 ml syrup and a measuring spoon.

Manufactured by:

SQUARE PHARMACEUTICALS LTD.
BANGLADESH

® Registered Trade Mark.

tcbwfK ®

tatbwg_vBj tcbwfK b

tcbwfK ® (tatbwg_vBj tcbwfK b) tiv M RxerYj wehi evnZ Kti Ges RxerYm aysm Kti | Bn i agy Mög cRUF eVKtUvi qvi Dci KvR Kti | Mög-tbtMUF eVKtUvi qv Øiv mó msµgtY Gi tkvb fngKv tbB | tcbwfK ® cVK-j xi cPKi tm webó nq bv Ges gtl Lvi qvtj Gi KvhKwi Zv bó nq bv | Dci`vb:

tcbwfK ® Uvetj U : cÖZU Uvetj tu AvtQ tatbwg_vBj tcbwfK b weic 250 mg.Mö.

(cUwmqg më unmyte) | . tcbwfK ® W Gm Uvetj U : cÖZU Uvetj tu AvtQ tatbwg_vBj tcbwfK b weic 500 mg.Mö.

(cUwmqg më unmyte) | tcbwfK ® WB weic : weic cÖZi ci cÖZ 5 mg.wj .tZ AvtQ tatbwg_vBj tcbwfK b

weic 125 mg.Mö.

(cUwmqg më unmyte) | tcbwfK ® dUWB weic : weic cÖZi ci cÖZ 5 mg.wj .tZ AvtQ tatbwg_vBj tcbwfK b weic 250 mg.Mö. (cUwmqg më unmyte) |

wt`Rbv: tcbwfK ® mste`bkxj RxerY-cavbZ Mög cRUF eVKtUvi qv Øiv mó g.y gvSvix ev Zxe msµgtY wt`RKZ | wbæelYZ msµgY wj tZ mvavi YZ tcbwfK ® wt`RKZ |

t÷PvK°j msµgY: kymZtšj Dci fvAM g.y gvSvix | Zxe msµgtY -vitj U Rj Ges g.y Gwi wmtcj vñ-G

tcbwfK® e'eüZ nqj |

Gj - wntgyj vBwUK t÷ctUvK°vm Øiv mó ü` wctEi gvsmckxi cñvn (Endocarditis), wbDtgwibqy (Lobar Pneumonia), t÷dvBtj vK°vm (hviv tcbwfK bR Zix Kti bv) Øiv mó msµgY, wbDtgwK°vm msµgY,

gaKtY® cñvn (Otitis media) tgbbtRvK°vm msµgY |

dñmv - úBtivKtUvmm: `wtZi gwoi cñvn (Vincent's gingivitis), dñvi stmi cñvn (Pharyngitis) |

wi DtgwUK Rfi i cñZtivta wcditcivj tmcm, wcti wi qv, Gb_i, MtbvK°j msµgY, wmdwj m, BA°vm Ges GKUtbvgBtKvmm |

tmeb weia Ges gytv :

cñB eq- : 250-500 mg.Mö. 6 NEv ci ci

AdñB eq- : 125-250mg.Mö. 6 NEv ci ci

WB mivc : 1-2 Pv PgP (5-10 mg.wj.) 6 NÈv ci ci
 tdu©mivc : -1 Pv PgP (2 -5 mg.wj.) 6 NÈv ci ci
 Kij : 62 -125 mg.M. 6 NÈv cici
 WB mivc : -1 Pv PgP (2 -5 mg.wj.) 6 NÈv ci ci A_ev wPKrmfKi ci vgk©Abjhvqx |
 tcbifK ® Lwj tctU tmeb Kiv metPtq fyj | Avnvtii 1 NÈv cteA_ev 2 NÈv cti tmeb Kiv fyj |
 AbjthMxZv I mZKZv :
 tcbimuj tbi cIZ AwZ mste` bkyj ti vMf` i tPf` eenvi Kiv hñte bv |
 cvk©cIZµq :
 eng, eng eng fve, cvK-j xi A~wQ~, D`vngq dñZ t` Lv w` Z cti | AwZ mste` bkyj dñqri gta` ZfKi
 i®Zv, j wimstmi tku_ l wimvg wmkfwm BZw` t` Lv w` Z cti |
 l l tai mwt wewµq :
 wRsK A- vBW, gñMfbumqvg KvtebU, Kvj vgiBb BZw` Øvi v tdtbw. wg_vBj tcbimuj b Gi KvhRvwi Zv nm
 cvq| Gmci b, muj dv tgf_wi cvBwi WwRb Ges muj dvBw_tWj tdtbw. wg_vBj tcbimuj b Gi BbfifU |
 BbfifU tmev evBwOs evaMf` Kti | GQov tdtbw. wg_vBj tcbimuj b Øvi GgvBtBvMfKmvBfWi KvhRvwi Zv
 mñYfjc bñ Kti | GKf` tmebi dtj tcbimuj, tdtbw. wg_vBj tcbimuj b Gi wbtmi Y evaMf` Kti |
 Mf`e~vq eenvi :
 Mf`e~vq tcbimuj b eenvi tKv b dñf` R tbB | Zf`e gvZ`f` tdtbw. wg_vBj tcbimuj b wbtmZ nq h
 beRvZfKi Gj wRK wewµq NUvZ cti |
 msi PjY :
 Avtj v I Av~Zv t_fK `fj i vLbj i® I WÈv ~vfb msi PjY Ki "b |
 miei vn :
 tcbifK ® Uvetj U : cIZ evf. AvfQ 10x10U Uvetj U ÷ic cñKs-G |
 tcbifK ® wGm Uvetj U : cIZ evf. AvfQ 10x10U Uvetj U ÷ic cñKs-G | tcbifK ® 100
 mg.wj. WB mivc : 100 mg.wj. mivc ^Zix Kivi Rb` dñqRbxq cñi gvY i®
 cvDWi cñigvcK PgP mn KufPi terZfj ||
 tcbifK ® 50 mg.wj. WB mivc : 50 mg.wj. mivc ^Zix Kivi Rb` dñqRbxq cñi gvY i®
 cvDWi cñigvcK PgP mn KufPi terZfj |
 tcbifK ® tdu©WB mivc : 100 mg.wj. mivc ^Zix Kivi Rb` dñqRbxq cñi gvY i®
 cvDWi cñigvcK PgP mn KufPi terZfj |

cñZKvi K:

~qri dñqRbxq DñUKvj m wj wgtUW
 evsj v` k

®ti wR ÷wW©tUWgvK©