CROTAN

Crotamiton 10% Cream

Scabies is a common public health problem with an estimated prevalence of 300 million, infestation can cause considerable discomfort and intense itching and appeared to be no difference in clinical cure rates between crotamiton and gamma benzene hexachloride for treating scabies.[1]

Scabicidal and antipruritic actions

Established efficacy and safety

Quality with economy

Dosage and Administration:

In Pruritus: Massage gently into affected area until medication is completely absorbed. Repeat as needed.

In Scabies:

1. *Take a routine bath. Thoroughly massage crotan into the skin from chin to toes including folds and creases.*
2. *A second application is advisable 24 hours later.*
3. *Clothing and bed linen should be changed the next day. Contaminated clothing and bed linen may be dry cleaned, or washed in hot cycle of washing machine.*
4. *A cleansing bath should be taken 48 hours after the last application.*

Brief Prescribing information:

Composition: Crotan contains crotamiton10% w/w in cream for topical use. **Clinical Pharmacology:** Crotamiton has scabicidal and antipruritic actions. The mechanisms of these actions are not known. **Indications and usage:** For eradication of scabies (Sarcoptes scabies) and for symptomatic treatment of pruritic skin. **Contraindications:** Crotamiton should not be applied topically to patients who develops a sensitivity or are allergic to it or who manifest a primary irritation response to topical medications. **Warning:** If severe irritation or sensitization develops, treatment with this product should be discontinued and appropriate therapy instituted. **Precautions:** *General:* Crotamiton should not be applied in the eyes or mouth because it may cause irritation. It should not be applied to acutely inflamed skin or raw or weeping surfaces until the acute inflammation has subsided. *Pregnancy: Crotamiton should be given to a pregnant women only if clearly needed. Paediatric use:* Safety and effectiveness in children have not been established. **Adverse reactions:** Allergic sensitivity or primary irritation reactions may occur in some patients. **Overdosage:** There is no specific information in the effect of overtreatment with repeated topical applications in humans. Acute toxicity (after accidental oral administration in children): highest known doses ingested: Cream: children-2g (age 1 ½ years): A death was reported but cause was not confirmed signs and symptoms (of oral ingestion): Burning sensation in the mouth, irritation of the buccal, esophageal and gastric mucosa, vomiting, abdominal pain. **Treatment:** There is no specific antidote if taken orally. General measures to eliminate the drug and reduce its absorption, combined with symptomatic treatment, are recommended.

Reference: Walker Gj et al. Interventions for treating scabies. Cochrane Database Syst Rev 2000; (2); CD 000320 Ralated Articles, Books, Link Out.

Crotamiton is probably safe in the treatment of scabies.

Reference: Elgart ML. A risk-benefit assessment of agents used in the treatment of scabies. Drug saf 1996 Jun; 14(6); 386-93 Related Articles, Books, Link Out.

"Medicines For All"

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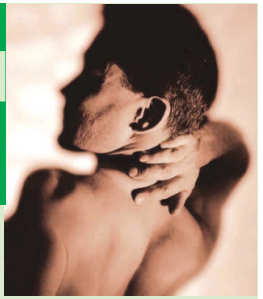
ISO 9001:2000

Help Your Patient getting rid of it....

Crotan Cream 20gm

CLOTRIM

Clotrimazole 1% Cream



The efficacy and tolerance of eberconazole 1% cream was compared with clotrimazole 1% cream, applied twice daily for four consecutive weeks. There were no differences between the groups in terms of the range and mean duration of infection. At the end of therapy and on follow-up in skin candidiasis the proportion of patients with effective treatment was 73% and 50% for clotrimazole and eberconazole, respectively.

Clotrim Cream 10gm

Clotrim Cream 20gm

Clotrim Solution

Broad spectrum antifungal

Effective and safe in children

Quality with economy

Dosage and Administration:

Gently massage sufficient clotrimazole into the affected and surrounding skin area twice a day in the morning and evening.Clinical improvement with relief of pruritus usually occurs within the first week of the treatment with clotrimazole. If patient shows no clinical improvement after 4 weeks of treatment, diagnosis should be reviewed.

Brief Prescribing information:

Composition: Clotrim contains clotrimazole 1% w/w in cream and solution for topical use. **Clinical Pharmacology:** Clotrimazole is a broad spectrum antifungal agent that is used for the treatment of dermal infections caused by various species of pathogenic dermatophytes yeasts, and Malassezia furfur. The primary action of clotrimazole is against dividing and growing organisms. **Indications and Usage:** Clotrimazole (Clotrimazole cream and solution 1%) indicated for the topical treatment of candidiasis due to candida albicans and tinea versicolor due to Malassezia furfurs. Clotrimazole also indicated for the topical treatment of the following dermal infections: tinea pedis, tinea cruris, and tinea corporis due to Trichophyton rubrum, Trichophyton mentagrophytes, Epidermophyton floccosum, and Microsporum canis. **Contraindications:** Clotrimazole product are contraindicated in individuals who have shown hypersensitivity to any of their components. **Warnings:** Clotrimazole products are not for ophthalmic use. **Precautions:** General: If irritation of sensitivity develops with the use of clotrimazole, treatment should be discontinued and appropriate therapy instituted. ***The patients should be advised to:*** 1. Use the medication for the full treatment time even though the symptoms may have improved. Notify the physician if there is no improvement after 4 weeks of treatment. 2. Inform the physician if the area of application shows signs of increased irritation (redness, itching, burning, blistering, oozing) indicative of possible sensitization. 3. Avoid sources of infection or reinfection. ***Laboratory Tests:*** If there is lack of response to clotrimazole appropriate microbiological studies should be repeated to confirm the diagnosis and rule out other pathogens before instituting another course of antimycotic therapy. ***Usage in pregnancy:*** Clotrimazole is very poorly absorbed following dermal application or intravaginal administration to humans. Use of vaginally applied clotrimazole in pregnant women in their second and third trimesters has not been associated with ill effects. There are, however, no adequate and well-controlled studies in pregnant women during the first trimester of pregnancy. ***Nursing Mothers:*** It is not known whether this drug is excreted in human milk, Because many drugs are excreted in human milk, caution should be exercised when clotrimazole is use by a nursing women. ***Pediatric Use:*** Safety and effectiveness in children have been established for clotrimazole when used as indicated and in the recommended dosage. **Adverse reactions:** The following adverse reactions have been reported in connection with the use of clotrimazole erythema, stinging, blistering, peeling, edema, pruritus, urticaria, burning, and general irritation of the skin. **Overdosage:** Acute overdosage with topical application of clotrimazole is unlikely & would not expected to lead to a life threatening situation.

Reference: Del palacio Aetal. A double-blind randomized comparative trial eberconazole 1% cream versus clotrimazole 1% cream twice daily in candida and dermatophyte skin infections. Mycoses 2001; 44(5): 173-80 Related Articles, Books, Link Out.