

<u>print</u> <u>Close window</u>

### Monurol

(Fosfomycin Tromethamine) - Forest

### THERAPFUTIC CLASS

Phosphonic acid derivative

### DEA CLASS

RX

### INDICATIONS

Treatment of uncomplicated urinary tract infections (acute cystitis) in women due to susceptible strains of microorganisms.

### ADULT DOSAGE

Adults: ≥18 yrs: 1 single-dose sachet.

## **HOW SUPPLIED**

Powder: 3g/sachet

### WARNINGS/PRECAUTIONS

Avoid use of >1 single dose per episode of acute cystitis. Clostridium difficile-associated diarrhea (CDAD) reported. Other therapeutic agents may be selected if persistence or reappearance of bacteriuria occurs after treatment. Caution in elderly.

### ADVERSE REACTIONS

Diarrhea, headache, vaginitis, nausea, rhinitis, back pain.

### DRUG INTERACTIONS

Metoclopramide and other drugs that increase GI motility may decrease serum concentrations and urinary excretion.

## **PREGNANCY**

Category B, not for use in nursing.

## MECHANISM OF ACTION

Phosphonic acid derivative; inactivates enolpyruvyl transferase, irreversibly blocking condensation of uridine diphosphate-N-acetylglucosamine with p-enolpyruvate, one of the first steps in bacterial cell wall synthesis. Also reduces adherence of bacteria to uroepithelial cells.

## **PHARMACOKINETICS**

**Absorption:** Rapid; absolute bioavailability (37%) (fasted);  $C_{max}$ =26.1 $\mu$ g/mL, 17.6 $\mu$ g/mL (fed);  $T_{max}$ =2 hrs, 4 hrs (fed). **Distribution:**  $V_d$ =136.1L; crosses placental barrier. **Elimination:** Urine (38% unchanged), feces (18% unchanged);  $T_{1/2}$ =5.7 hrs.

## **ASSESSMENT**

Assess for hypersensitivity, pregnancy/nursing status, and for possible drug interactions. Obtain urine specimens for culture and susceptibility testing prior to therapy.

# **MONITORING**

Monitor for CDAD and other adverse reactions. Monitor for persistence or reappearance of bacteriuria after therapy. Obtain urine specimens for culture and susceptibility testing after completion of therapy.

## PATIENT COUNSELING

Instruct to take with or without food. Advise to seek medical attention if symptoms do not improve within 2-3 days. Inform that diarrhea is a common problem that usually ends when antibiotic is d/c. Advise that watery and bloody stools (with or without stomach cramps and fever) may develop even as late as ≥2 months after last dose; notify physician immediately if this occurs.

## ADMINISTRATION/STORAGE

**Administration:** Oral route. Do not take in dry form. Pour contents of single-dose sachet into 3-4 oz. of water (1/2 cup); stir to dissolve (do not use hot water). Take immediately after dissolving. **Storage:** 25°C (77°F); excursions permitted to 15-30°C (59-86°F).