

This only can help to organize the most important points during revision

<p>Sulfonamides (SMX)</p>	<p>Inhibit Dihydropteroate synthetase enzyme Metabolized by acetylation process of liver Hemolytic Anemia by hypersensitivity and G6PD deficiency Displace bilirubin (Kernicterus) Potentiate warfarin and oral hypoglycemic</p>
<p>Trimethoprim (TMP)</p>	<p>Concentrates in the prostatic fluid Megaloblastic anemia Folate supplementation for pregnant Not given for pts with folate deficiency</p>
<p>Nitrofurantoin</p>	<p>Effective against <i>E. coli</i> and <i>Staph. saprophyticus</i> bacteria reduce it to an active agent Acidic urine enhance drug activity Turns urine to a dark orange-brown must be taken with food nystagmus, Hemolytic anemia (G6PD deficiency) can't be given to a pregnant women after 38wks can't be used for upper UT or systemic infections</p>
<p>Tetracyclines (Doxycycline)</p>	<p>Binds reversibly to 30 s subunit Food (Ca, Mg, Fe, AL) impair its absorption If there's epigastric pain (give with food) Thrombophlebitis (IV), Hepatic toxicity (if prolonged) Phototoxicity, Superinfections Brown discoloration of teeth, growth inhibition of bones (children) Contraindicated on children below 10yrs Treat Mycoplasma & Chlamydia UTI'S, Prostatitis</p>
<p>Aminoglycosides (Gentamycin)</p>	<p>binds irreversibly to 30S subunit Poorly absorbed orally (given parenterally) Excreted unchanged in urine More active in alkaline medium Ototoxicity Nephrotoxicity Neuromuscular blocking effect Severe infections (<i>pseudomonas</i> or <i>Enterobacter</i>)</p>
<p>3rdG Cephalosporin (Ceftriaxone, Cefazidime)</p>	<p>They are given parenterally Given in severe / complicated UTIs Acute prostatitis</p>
<p>Fluoroquinolones (Ciprofloxacin, Levofloxacin)</p>	<p>Inhibits DNA gyrase enzyme UTI's by multidrug resistance as <i>pseudomonas</i> Prostatitis Confusion, insomnia Damage of growing cartilage (Arthropathy)</p>