

About your medication

C E F A C L O R

(Ceclor® , Ceclor-CD® ,
Keflor® , Keflor-CD®
375mg SR tablets,
125mg/5mL suspension
250mg/5mL suspension)

Other brands may be available

The brand you have been given is:

WHAT IS CEFACLOR?

Cefaclor is an antibiotic. It belongs to a group of medications called cephalosporins. It is only available on a doctor's prescription.

WHAT IS IT FOR?

Cefaclor is used to treat bacterial infections. Some types of infections it is used for are:

- ears, nose, throat and tonsils (upper respiratory tract)
- chest and lungs (lower respiratory tract)
- bladder and kidneys (urinary tract)
- skin.

HOW TO TAKE THIS MEDICINE

It is important that this medication is taken only as directed, and not given to other people.

Cefaclor mixture is usually given two or three times a day. The tablets are usually given twice a day. The tablets should be swallowed whole.

It does not matter if cefaclor is given with food or on an empty stomach. It may be given with food if stomach upsets occur.

It is important to give the full course of treatment.

If you are using the mixture, measure the dose accurately with a dropper, syringe or measuring glass / spoon.

WHAT TO DO IF A DOSE IS MISSED

If you miss a dose of cefaclor it can be given as soon as you remember. If it is close to the next dose, leave out the missed dose and continue as usual from that dose. Do not double up on any doses.

STORING THE MEDICINE

It is important to keep cefaclor away out of the reach of children.

Do not store the cefaclor tablets or capsules in the bathroom, near the kitchen sink or in other damp, warm places because this may make the medication less effective. Cefaclor mixture must be stored in the refrigerator.

USE OF OTHER MEDICINES

Care must be taken when using cefaclor with some other medications. Check with your doctor or pharmacist before giving any prescription medicine or medicine purchased without prescription from a pharmacy, supermarket, or health food shop

Talk to your child's doctor or pharmacist about possible interactions with any over-the-counter or complementary medicines or recreational substances (e.g. alcohol)

IMPORTANT INFORMATION

Do not stop giving cefaclor without first checking with the doctor. Finish the full course even if your child feels better after a few days.

Do not give cefaclor to your child if they have had an allergic reaction to a cephalosporin antibiotic before.

Tell your doctor or pharmacist if your child has any allergic reaction to a penicillin antibiotic.

POSSIBLE SIDE EFFECTS

Side effects can occur while taking cefaclor. Some of these are not serious and will go away with time. Others are more serious and require you to check with your doctor.

Less serious side effects include:

- nausea, vomiting or diarrhoea
- oral thrush (white, furry, sore tongue or mouth)
- vaginal thrush in girls (soreness, itchiness or discharge)

More Serious (Contact doctor as soon as possible if any of the following occur):

- severe or watery diarrhoea
- pain or swelling in the joints
- yellowing of the skin or eyes (jaundice)
- fever

Allergic reaction (Stop medicine and see doctor immediately):

- Skin rash, itching or hives, swollen mouth or lips, wheezing or difficulty breathing

IF YOU HAVE ANY QUESTIONS CONTACT



Your Child's Doctor via the RCH Switchboard on 03 9345 5522

OR

Pharmacy Department on 03 9345 5492

IN CASE OF POISONING OR OVERDOSE CONTACT

POISONS INFORMATION CENTRE 13 11 26 (24 hour service)

This leaflet answers some common questions about your child's medicine. It does not contain all available information. It does not take the place of talking to your child's doctor or pharmacist. The leaflet may differ from information in the manufacturer's Consumer Medicine Information. The information in this leaflet reflects the usage of medicine under medical supervision by patients of The Royal Children's Hospital. Medicine may be used in children in different ways or for different reasons than in adults - for more information see the leaflet "[Medicines for Children](#)". This leaflet includes information current at the time of review of the document – OCTOBER 2010.