rifaximin (ri-fak-si-min)

**Side Effects**

**Classification**
- **Therapeutic**: anti-infection
- **Pharmacologic**: rifamycins

**Pregnancy Category** C

**Indications**
- Travelers' diarrhea due to noninvasive strains of *Escherichia coli*. Reduction in risk of overt hepatic encephalopathy recurrence.

**Action**
- Inhibits bacterial RNA synthesis by binding to bacterial DNA-dependent RNA polymerase.

**Therapeutic Effects**
- Decreased severity of travelers' diarrhea. Decreased episodes of overt hepatic encephalopathy.

**Spectrum**
- *Escherichia coli* (enterotoxigenic and enteroaggregative strains).

**Pharmacokinetics**
- **Absorption**: Poorly absorbed (< 0.4%), action is primarily in GI tract.
- **Distribution**: 80–90% concentrated in gut.
- **Metabolism and Excretion**: Almost exclusively excreted unchanged in feces.
- **Half-life**: 6 hr.

**TIME/ACTION PROFILE**

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<th>ROUTE</th>
<th>ONSET</th>
<th>PEAK</th>
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**Contraindications/Precautions**
- **Contraindicated in**: Hypersensitivity to rifaximin or other rifamycins; Diarrhea with fever or bloody stools; Diarrhea caused by other infections agents; Lactation: Potential for adverse effects in the infant. Switch to formula for duration of treatment. Use Cautiously in: OB: Use only if benefit to mother outweighs risk to fetus; Pedi: Safety not established in children <18 yr (hepatic encephalopathy) or <12 yr (travelers' diarrhea).

**Adverse Reactions/Side Effects**
- **CNS**: dizziness.
- **CV**: peripheral edema.
- **GI**: PSEUDOMEMBRANOUS COLITIS.

**Interactions**
- **Drug-Drug**: Although rifaximin induces the CYP 3A4 enzyme system, since it is not absorbed, drug interactions are unlikely.

**Route/Dosage**
- **Travelers' Diarrhea**
  - PO (Adults and Children ≥12 yr): 200 mg three times daily for 3 days.

- **Hepatic Encephalopathy**
  - PO (Adults): 550 mg twice daily.

**NURSING IMPLICATIONS**

**Assessment**
- **Traveler's Diarrhea**: Assess frequency and consistency of stools and bowel sounds prior to and during therapy.
- **Hepatic Encephalopathy**: Assess mental status periodically during therapy.

**Patient/Family Teaching**
- Caution patient to stop taking rifaximin if diarrhea symptoms persist or worsen. If bloody diarrhea or fever occur, contact health care professional immediately.
get worse, persist more than 24–48 hr, or are accompanied by fever or blood in the stool. Consult health care professional if these occur. Advise patient not to treat diarrhea without consulting health care professional. May occur up to several weeks after discontinuation of medication.

- May cause dizziness. Caution patient to avoid driving and other activities requiring alertness until response to medication is known.
- Advise female patients to notify health care professional if pregnant or if pregnancy is suspected, or if breast feeding.

**Evaluation/Desired Outcomes**
- Decreased severity of travelers' diarrhea
- Reduction in risk of overt hepatic encephalopathy recurrence

Why was this drug prescribed for your patient?