

CEFTEZOLE, A NEW CEPHALOSPORIN C DERIVATIVE

II. DISTRIBUTION AND EXCRETION IN PARENTERAL ADMINISTRATION

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The distribution of ceftazidime in blood and tissues and its excretion after intramuscular or intravenous administration of single doses of 10 and 20 mg/kg were compared with those of cefazolin, cephaloridine and cephalothin. Blood levels of ceftazidime in rats and rabbits were lower than those of cefazolin, and higher than those of cephaloridine and cephalothin. Retention time of ceftazidime in the blood was somewhat shorter than that of cefazolin. However, blood levels of ceftazidime in dogs were nearly the same as those of cefazolin and cephaloridine. The rate of urinary excretion of ceftazidime in 24-hour urine after administration in rats and rabbits was found to be higher than those of the other antibiotics tested. In dogs, however, the rate of urinary excretion of ceftazidime was nearly the same as that of cefazolin and higher than those of cephaloridine and cephalothin. The biliary excretion of ceftazidime in rats and dogs was much higher than those of cephaloridine and cephalothin, but lower than that of cefazolin. Tissue distribution of ceftazidime in rats was compared with that of the other antibiotics by intramuscular and intravenous administration. The initial level of ceftazidime in the kidneys was found to be substantially higher than those of the other antibiotics. The initial level of ceftazidime in the liver and lungs was also slightly higher than those of the other drugs when administered intramuscularly. Tissue levels of ceftazidime were somewhat lower than those of cefazolin in rabbits after intravenous administration. Ceftazidime attained a higher maximum level in rat lymph by intramuscular administration than the other antibiotics tested. The maximum concentration of ceftazidime present in the exudate in the rat inflammatory pouch was higher than that of cefazolin. In rabbits with cerebrospinal meningitis induced by infection of *Streptococcus pyogenes*, the level of ceftazidime in the cerebrospinal fluid was several times higher than that in normal rabbits. The serum level and urinary excretion of ceftazidime was examined in 6 healthy male volunteers after intramuscular administration of a single dose of 500 mg. Ceftazidime attained a mean maximum serum level of 22.9 $\mu\text{g/ml}$ 30 minutes after administration and disappeared from the blood in about 6 hours. It was excreted rapidly in the urine. The concentration in 1-hour urine was the highest (mean level: 2,667 $\mu\text{g/ml}$) and the total excretion rate was 92.6%. No metabolites with antimicrobial activity were observed in the urine. No changes in the pattern of plasma level and urinary excretion and no accumulation in the tissues were observed after repeated intramuscular administration of 20 mg/kg of ceftazidime in rabbits, 26 times, for 14 days.

As described in the preceding report,¹⁾ investigations of *in vitro* and *in vivo* antimicrobial activities of ceftazidime confirmed that ceftazidime was highly active against a wide range of gram-positive and gram-negative bacteria, except *Serratia*, *Pseudomonas* and some other cephalosporin-resistant groups.

This report describes investigations of the blood level, urinary and biliary excretion, and tissue distribution of ceftazidime compared with other related antibiotics in rats, rabbits and dogs, as well as healthy human volunteers.

Materials and Methods

1. Antibiotics.

Ceftazole sodium (CTZ, Fujisawa Research Laboratories and Chugai Research Laboratories), cefazolin sodium (CEZ, Fujisawa Pharmaceutical Co.), cephaloridine (CER, Eli Lilly and Co.), and cephalothin sodium (CET, Eli Lilly and Co.).

2. Animals.

Rats: Sprague-Dawley (S.D.) strain, male, weighing 150~310 g or Wistar-Imamichi strain, male, weighing 200~280 g.

Rabbits: JW/CSK, male, weighing 2.0~3.2 kg.

Dogs: Beagles, female, weighing 8.6~11.2 kg.

3. Microbioassay method.

The concentration of antibiotics was determined by the agar-plate diffusion method using paper-discs. A nutrient agar plate containing 2×10^8 spores per ml of *Bacillus subtilis* ATCC 6633 was used. Paper-discs (Toyo Roshi Co., diameter 8 mm, "thick" type) were dipped in the standard or the test solution. After excess solution was removed, the discs were placed on the agar plate. The diameters of inhibitory zones were measured after incubation at 37°C for 20 hours, and the concentration of antibiotics was calculated from a standard curve.

4. Determination of serum, plasma and urinary levels of antibiotic in animals.

After each antibiotic was administered intramuscularly or intravenously, blood and urine samples were collected at fixed times. Serum or plasma was separated from the blood, the latter by centrifuging a mixture consisting of nine volumes of blood and one volume of 3.9% sodium citrate solution. The concentration of each antibiotic was determined by the paper-disc method described. In the preparation of the standard dilution series of each drug, serum and plasma of the test animals were used for determination of serum and plasma levels, and 1/15 M phosphate buffered saline (pH 7.0) (abbreviated as PBS) was used for determination of urinary levels.

5. Serum level and urinary excretion in human volunteers.

Six healthy male volunteers (body weight 55~57 kg) were given a single dose of 500 mg of ceftazole intramuscularly, and serum and urine samples were collected at fixed times. In the preparation of the standard dilution series of the drug, human serum or PBS was used.

6. Identification of active substances in human urine.

Ceftazole was administered intramuscularly to two healthy volunteers in a single dose of 500 mg. The urine was collected for the first 2 hours and examined by thin-layer chromatography and bioautography. In the thin-layer chromatography, the following solvent systems were used.

n-Butanol - pyridine - water (3:2:1)

Methanol - *n*-propanol - water (6:1:2)

n-Butanol - ethanol - water (4:1:2)

Cellulose thin-layer plate (Avicel SF, 5 × 20 cm, Funakoshi Yakuhin Co.) was used as adsorbent. In the bioautography, thin-layer plates developed with the above solvent systems were dried, and the plates were placed on the nutrient agar plates containing 10^8 spores of *Bacillus subtilis* ATCC 6633 per ml for 20 minutes. After removing the thin-layer plates, the agar plates were incubated at 37°C for 18 hours to detect the active substances.

7. Determination of biliary excretion in animals.

Rats and dogs were operated under anesthetization with ether and pentobarbital, respectively, and the biliary ducts were cannulated with polyethylene tubes for collecting the bile samples. Rats were administered 20 mg/kg of ceftazole and related antibiotics intramuscularly or intravenously after awakening from anesthesia. Dogs were administered 20 mg/kg of the antibiotics intramuscularly under anesthetization. Bile samples were collected at fixed intervals for 24 hours after administration. PBS was used for preparation of the standard dilution series of the drugs.

8. Preparation of tissues.

Three to 12 rats per group were used. After each antibiotic was administered intramuscularly or intravenously in the rats, the animals were sacrificed by cervical dislocation at fixed intervals. The

liver, kidneys, lungs, heart and spleen were excised, washed with PBS and homogenized with four-fold volumes of the buffer, in a Waring Blender. The homogenates were then centrifuged at $5,000 \times g$ for 10 minutes to obtain the supernatant. Blood samples were simultaneously collected and separated into sera.

A similar procedure was applied in examining the tissue distribution after intravenous administration in rabbits (3 rabbits per group).

Rat serum or rabbit plasma and the supernatant of rat and rabbit tissues were used in preparation of the standard dilution series.

9. Determination of lymph levels in rats.

According to the method of BOLLMAN *et al.*,²⁾ rats were operated under anesthetization with ether, and the thoracic lymph ducts under the inferior aorta were cannulated with polyethylene tubes. Six hours after the operation, 20 mg/kg of each antibiotic was administered intramuscularly in the rats, and lymph samples were collected at fixed intervals. Simultaneously, blood samples were soaked into paper-discs which had been dipped in 10% sodium citrate solution and dried, to determine the antibiotic concentration in the plasma. In preparation of standard dilution series of drugs, rat lymph and plasma were used.

10. Determination of the exudate levels in the aseptic inflammatory pouch of rats.

According to the method of ROBERT *et al.*,³⁾ an inflammatory pouch was induced in rats by injecting 25 ml of air and then 1 ml of olive oil containing 1% croton oil subcutaneously on their backs. On the 5th~8th days after induction of inflammation, 20~80 mg/kg of each antibiotic was administered intramuscularly in the rats. At fixed intervals, 0.25~0.4 ml of each exudate was extracted. The exudate of the pouch was used to prepare the standard dilution series of the drugs.

11. Determination of the level in the cerebrospinal fluid of rabbits.

The level of ceftazidime in the cerebrospinal fluid after intravenous administration of 50 mg/kg was determined in rabbits infected with *S. pyogenes* and in normal ones.

An overnight culture of *S. pyogenes* strain JU-13 in heart infusion broth containing 1% of yeast extract, diluted ten-fold with physiological saline, was used as the bacterial suspension for infection. Experiments were carried out on rabbits anesthetized with urethane.

In the experiments with infected rabbits, ceftazidime was administered 24 hours after inoculation with 0.1 ml of the bacterial suspension (1×10^6 viable units/ml) into the cerebrospinal fluid and the cerebrospinal fluid was extracted at fixed intervals. Similarly, ceftazidime was administered intravenously to normal rabbits and the cerebrospinal fluid was also extracted. PBS was used for preparation of the standard dilution series of the drugs.

Rabbit blood agar plates were used to count the viable cells of *S. pyogenes* in the fluid. Body temperature was measured in the rectum.

12. Plasma levels and urinary excretion during repeated long-term administration in rabbits.

Twenty mg/kg of ceftazidime was administered intramuscularly in rabbits, twice a day as a rule, for 14 days (26 times in total). Plasma levels were determined on the 1st, 7th, 17th and the last day of administration, and urinary excretion on the 1st and the last day of administration.

The rabbits were sacrificed 24 hours after the final administration and the blood, urine, liver, lungs, spleen, heart and kidneys were collected and residual antibacterial activities were determined.

Results

1. Plasma Levels in Rabbits and Dogs

Table 1 shows the results of the determination of plasma levels after ceftazidime, cefazolin, cephaloridine and cephalothin were administered intramuscularly and intravenously in rabbits and dogs.

(1) Intramuscular administration

When ceftazidime was administered at 20 mg/kg to rabbits, the maximum plasma level of ceftazidime was observed 15 minutes after administration; ceftazidime was approached the minimum at 3 hours. The maximum plasma level was the highest for cefazolin, followed by ceftazidime, cephaloridine and

Table 1. Mean concentrations of ceftazole and related antibiotics in the plasma of rabbits and dogs

Route of administration	Animal species	Dose (mg/kg)	No. of test animals	Antibiotic*	Mean plasma level ($\mu\text{g/ml}$)						
					5 min	15 min	30 min	60 min	120 min	180 min	360 min
Intramuscular	Rabbits (2.4~2.7 kg)	20	6	CTZ	51.4	54.5	41.6	20.7	5.1	1.6	ND**
				CEZ	37.1	59.2	52.1	30.3	9.2	2.2	ND**
			4	CER	18.9	26.0	35.6	22.6	9.0	2.7	ND**
				CET	21.1	26.5	22.2	7.5	1.2	0.1	ND**
	Dogs (8.6~11.2 kg)	10	4	CTZ	8.9	18.5	20.5	15.0		2.5	0.2
				CEZ	12.8	21.4	21.4	15.5		3.0	0.2
				CER	8.7	18.8	21.8	13.7		1.9	0.2
				CET	14.0	18.5	13.6	5.7		0.3	<0.1
	Dogs (9.3~10.9 kg)	20	4	CTZ	17.9	33.7	32.5	26.6		6.2	0.7
				CEZ	27.9	46.1	47.9	32.4		8.0	0.9
				CER	19.1	32.9	37.0	29.5		4.7	0.6
				CET	24.6	30.9	28.0	16.5		1.1	<0.1
					15 min	30 min	45 min	60 min	120 min	180 min	360 min
Intravenous	Rabbits (2.6~3.3 kg)	10	3	CTZ	22.1	11.3		4.9	0.5	ND**	
				CEZ	33.6	16.2		5.9	1.5	ND**	
				CER	17.8	12.3		4.8	1.1	ND**	
				CET	11.0	4.1		0.6	<0.1	ND**	
	Rabbits (2.6~3.3 kg)	20	3	CTZ	56.5	31.2	19.0	12.2		0.5	ND**
				CEZ	66.4	40.2	22.9	13.4		0.4	ND**
				CER	34.9	28.7	18.0	13.0		2.6	ND**
				CET	25.3	8.0	2.7	1.4		<0.1	ND**

* CTZ (ceftazole), CEZ (cefazolin), CER (cephaloridine), CET (cephalothin). **ND: Not done.

Table 2. Urinary excretion of ceftazidime and related antibiotics by rats, rabbits and dogs

Route of administration	Animal species	Dose (mg/kg)	No. of test animals	Antibiotic	Mean urinary level and recovery						Total recovery in 24 hours (%)	
					0~3 hrs		3~6 hrs		6~24 hrs			
					$\mu\text{g/ml}$	%	$\mu\text{g/ml}$	%	$\mu\text{g/ml}$	%		
Intramuscular	Rats (S.D. strain, 180~200 g)	10	6	CTZ	279	80.1	25.1	1.4	5.6	0.7	82.2	
				CEZ	249	67.1	48.2	2.5	8.6	2.1	71.7	
	Rats (S.D. strain, 180~200 g)	20	6	CTZ	626	76.5	76.6	1.1	16.8	1.3	78.9	
				CEZ	464	67.0	87.2	2.2	9.0	0.8	70.0	
	Rabbits (2.4~2.7 kg)	20	5	CTZ	395	84.1	48.2	8.1	0.9	0.4	92.6	
				CEZ	301	82.1	22.1	6.6	1.6	0.4	89.1	
	Dogs (9.3~10.9 kg)	10	4	CTZ	234	76.5	541	7.3	14.0	0.6	84.4	
				CEZ	234	77.3	527	5.0	20.0	0.8	83.1	
	Dogs (9.3~10.9 kg)	20	4	CER	203	69.3	357	5.5	14.0	0.6	75.4	
				CET	131	46.6	54	0.6	3.0	0.1	47.3	
	Intravenous	Rats (S.D. strain, 220~230 g)	10	3	CTZ	390	66.4	32.5	3.4	3.4	0.6	70.4
					CEZ	310	47.8	190	6.3	<0.2	—	54.1
CER					250	35.2	76.0	1.7	2.4	0.7	37.6	
CET					160	10.0	36.0	2.4	0.4	0.2	12.6	
Rats (S.D. strain, 220~230 g)		20	3	CTZ	1,060	73.4	45.0	0.9	<0.2	—	74.3	
				CEZ	630	49.5	320	9.5	31.5	6.8	65.8	
				CER	560	44.0	225	5.8	14.0	1.4	51.2	
				CET	220	9.1	76.0	2.8	5.8	0.3	12.2	
Rabbits (2.6~3.3 kg)		20	3	CTZ	219	84.4	13.1	3.2	2.1	0.4	91.0	
				CEZ	333	83.0	16.1	4.4	3.0	1.0	88.4	
				CER	191	47.4	18.9	8.2	3.3	0.8	56.4	
				CET	136	34.5	2.2	0.5	0.1	0.02	35.0	

cephalothin.

When administered to dogs at 10 and 20 mg/kg, maximum plasma levels of ceftazidime were observed 15~30 minutes after administration; ceftazidime was essentially absent from the blood at 6 hours. At a dose of 10 mg/kg, the maximum levels of each antibiotics were almost the same except for cephalothin; the level for cefazolin was slightly higher than those of the others.

(2) Intravenous administration

When 10 and 20 mg/kg of ceftazidime and related antibiotics were administered to rabbits, determination of the plasma levels of each antibiotic 15 minutes after administration revealed that cefazolin had the highest, followed by ceftazidime, cephaloridine and cephalothin. Thereafter, rapid decreases in plasma levels of each drug were observed with each drug disappearing from the blood within 3 hours after administration.

2. Urinary Excretion in Rats, Rabbits and Dogs

Urinary excretion of ceftazidime and related antibiotics after intramuscular and intravenous administration in rats, rabbits and dogs was examined. The results are shown in Table 2.

(1) Intramuscular administration

When 10 and 20 mg/kg of each antibiotic were administered to rats, at each dosage level of each drug, most of the antibiotic was excreted in the urine within 3 hours after administration. The percentage of ceftazidime excreted in 24-hour urine was the highest, followed by cefazolin, cephaloridine and cephalothin.

Similar results were observed when 20 mg/kg of each antibiotic was administered to rabbits.

When 10 and 20 mg/kg of each drug were administered to dogs, the amounts of ceftazidime and cefazolin excreted were nearly the same, but higher than those of cephaloridine and cephalothin.

(2) Intravenous administration

When 10 and 20 mg/kg of each antibiotic were administered to rats, most of the drug was excreted in the urine within 3 hours, with the excretion of ceftazidime was faster than those of the other antibiotics. The total excretion of ceftazidime in 24-hour urine was also higher than those of the other antibiotics.

3. Serum Level and Urinary Excretion after Intramuscular Administration in Human Volunteers

A single dose of 500 mg of ceftazidime was administered intramuscularly to six healthy adult male volunteers and the serum and urine levels were examined.

As shown in Table 3, the serum level of ceftazidime reached its maximum (mean: 22.9 $\mu\text{g/ml}$) 15~30 minutes after administration, and decreased almost below the assay range after 6 hours. When the standard dilution was carried out with PBS, lower values than with human serum were obtained.

The urine levels of antibiotic for the six subjects are shown in Table 4. The percentage of ceftazidime excreted in 24-hour urine was high (mean: 92.6%), and particularly high concentrations of antibiotic were observed in the initial period after administration, reaching 2,667 $\mu\text{g/ml}$ (mean) in 0~1-hour urine. Of additional interest, a mean antibiotic level of 5.8 $\mu\text{g/ml}$ was still observed in 6~24-hour urine.

4. Identification of Microbiologically Active Substances in Human Urine

By thin-layer chromatography of human urine using three different developing solvent systems, spots of the same R_f value as ceftazidime were observed on the bioautogram as shown in Fig. 1. These results suggested that no metabolite with antimicrobial activity was formed from ceftazidime in the human body.

Table 3. Serum levels after intramuscular administration of 500 mg of ceftazidime to human volunteers

Volunteer	Body weight (kg)	Serum level ($\mu\text{g/ml}$)					
		15 min	30 min	1 hr	2 hrs	4 hrs	6 hrs
A (male)	75	18.0*(8.4)**	22.0 (10.0)	20.8 (9.5)	16.0 (7.3)	5.5 (2.6)	1.9 (0.9)
B (male)	69	20.9 (9.8)	20.5 (9.6)	16.4 (7.5)	8.2 (3.9)	1.3 (0.6)	<0.4 (<0.2)
C (male)	60	28.3 (13.3)	22.3 (10.4)	16.8 (7.7)	8.8 (4.3)	2.0 (0.9)	<0.4 (<0.2)
D (male)	60	25.3 (11.9)	26.3 (12.1)	18.0 (8.2)	10.3 (4.8)	1.8 (0.9)	<0.4 (<0.2)
E (male)	56	22.0 (10.4)	22.5 (10.5)	17.5 (8.0)	10.6 (5.0)	2.2 (1.0)	<0.4 (<0.2)
F (male)	55	22.0 (10.4)	23.9 (11.2)	19.0 (8.7)	10.2 (4.8)	1.7 (0.8)	<0.4 (<0.2)
Mean	62.5	22.8 (10.7)	22.9 (10.6)	18.1 (8.3)	10.7 (5.0)	2.4 (1.1)	<0.7 (<0.4)
\pm S.D.	7.9	3.6 (1.7)	2.0 (0.9)	1.6 (0.7)	2.8 (1.2)	1.5 (0.7)	

* Standard dilution with human serum. ** Standard dilution with PBS (pH 7.0).

5. Biliary Excretion in Rats and Dogs

Biliary excretion was compared after intramuscular and intravenous administration of 20 mg/kg of ceftazidime and related antibiotics in rats and dogs. As shown in Table 5, the biliary excretion of ceftazidime was about 1/2 to 1/3 of that of cefazolin when administered intramuscularly and intravenously in rats, although it was much higher than those of cephaloridine and cephalothin.

When a 20 mg/kg dose of ceftazidime was administered intramuscularly in dogs, biliary excretion was somewhat lower than that of cefazolin but much higher than those of cephaloridine and cephalothin. The bile level of ceftazidime was 436 $\mu\text{g/ml}$ in 0~2-hour bile and remained at 67 $\mu\text{g/ml}$ in 4~8-hour bile.

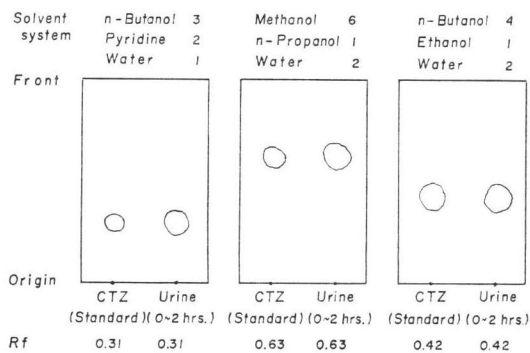
6. Tissue Distribution in Rats and Rabbits

Serum and tissue distribution of ceftazidime and related antibiotics was compared after intramuscular and intravenous administration of a 20 mg/kg dose in rats. The results are shown in Table 6.

Serum levels of antibiotics observed in rats were similar to those in rabbits. When administered intramuscularly in rats, ceftazidime was found in the various tissues tested, particularly in the kidneys, and to a lesser extent in the liver, lungs, heart and spleen in that order. The initial level of ceftazidime in the kidney was much higher than the levels of the other antibiotics tested. The initial levels of ceftazidime in the liver and lung were also slightly higher than those of the other drugs. On the other hand, the disappearance of ceftazidime was somewhat faster than that of the other drugs. When a dose of 20 mg/kg of either ceftazidime or cefazolin was administered intravenously in rabbits, the concentration of ceftazidime in the tissues was less than that of cefazolin.

Fig. 1. Bioautograms of human urine after intramuscular administration of ceftazidime.

Urine: Healthy volunteer, 500 mg
(Urine at 0~2 hours after administration)
TLC: Cellulose thin-layer plate
(Avicel SF, Funakoshi Yakuhin)



Test organism: *Bacillus subtilis* ATCC 6633

Table 4. Urinary excretion of ceftazidime after intramuscular administration of 500 mg to human volunteers

Volunteer	0~1 hr		1~2 hrs		2~3 hrs		3~6 hrs		6~24 hrs		Total recovery in 24 hrs	
	$\mu\text{g/ml}$	mg	$\mu\text{g/ml}$	mg	$\mu\text{g/ml}$	mg	$\mu\text{g/ml}$	mg	$\mu\text{g/ml}$	mg	mg	%
A	855	115.4	935	138.4	730	88.3	385	97.4	12.9	21.3	460.8	92.2
B	1,135	196.4	845	148.7	435	55.7	200	51.0	3.9	4.9	456.7	91.3
C	1,340	193.0	805	120.8	685	61.0	159	21.4	3.6	7.0	403.2	80.6
D	8,800	211.2	4,400	158.4	1,875	54.4	515	44.8	6.4	6.1	474.9	95.0
E	1,665	176.5	1,265	161.9	900	71.1	355	85.2	5.1	7.1	501.7	100.3
F	2,205	196.2	1,230	174.7	285	61.0	89	42.5	3.1	5.6	480.0	96.0
Mean	2,667	181.5	1,580	150.5	818	65.3	283	57.1	5.8	8.7	462.9	92.6
\pm S.D.	3,040	34.2	1,395	19.0	562	12.7	161	28.6	3.7	6.3	33.3	6.6

Table 5. Mean biliary excretion after administration of ceftazidime and related antibiotics (20 mg/kg) to animals.

Route of administration	Animal species	Dose (mg/kg)	No. of test animals	Antibiotic	Mean biliary level and recovery						Total recovery in 24 hrs (%)		
					0~3 hrs		3~6 hrs		6~24 hrs				
					$\mu\text{g/ml}$	%	$\mu\text{g/ml}$	%	$\mu\text{g/ml}$	%			
Intramuscular	Rats (S.D. strain, 200~300 g)	20	12	CTZ	104.6	4.6	2.0	0.08	0.2	0.02	4.7		
				CEZ	281.5	12.7	31.9	1.2	3.2	0.3	14.2		
Intramuscular	Rats (S.D. strain, 200~300 g)	20	6	CER	11.7	0.6	3.3	0.1	0.6	0.04	0.7		
				CET	15.8	0.7	0.1	0.01	<0.1	—	0.7		
Intravenous	Rats (S.D. strain, 290~310 g)	20	4	CTZ	110.6	5.4	0.8	0.03	0.2	0.03	5.5		
				CEZ	262	11.6	4.7	0.2	0.4	0.03	11.8		
				CER	7.5	0.4	0.8	0.03	<0.1	—	0.4		
				CET	12.2	0.7	<0.1	—	<0.1	—	0.7		
Intramuscular	Dogs (6.4~9.6 kg)	20	3	CTZ	304	0.8	202	0.4	67.0	0.2	3.0	0.02	1.4
				CEZ	436	1.0	345	0.6	101	0.3	21.0	0.1	2.0
Intramuscular	Dogs (6.4~9.6 kg)	20	3	CER	18.0	0.03	36.0	0.04	11.0	0.03	1.0	<0.01	0.1
				CET	83.0	0.3	17.0	0.03	1.0	<0.01	0.1	<0.01	0.3

Table 6. Serum and tissue distribution after administration of ceftazidime and related antibiotics (20 mg/kg) to animals

Route of administration	Animal species	No. of test animals	Antibiotic	Time (min)	Mean serum and tissue concentrations ($\mu\text{g/ml}$ or $\mu\text{g/g}$)					
					Serum	Kidney	Liver	Lung	Heart	Spleen
Intramuscular	Rats (S.D. strain, 200~250 g)	12	CTZ	15	53.8	86.9	23.9	16.7	9.4	4.3
				30	38.2	56.0	10.9	11.3	6.7	2.5
				60	12.1	19.8	1.5	3.8	1.9	<0.5
				90	4.5	9.5	<0.5	2.1	<0.5	<0.5
			120	1.1	2.3	<0.5	<0.5	<0.5	<0.5	
			30	69.5	43.8	15.4	11.9	7.0	2.7	
		60	33.6	18.3	4.7	6.3	3.5	0.7		
		90	16.9	11.1	1.0	4.2	<0.5	<0.5		
		120	8.1	5.1	<0.5	2.5	<0.5	<0.5		
		30	24.9	54.5	7.0	9.3	6.8	3.4		
		60	11.2	25.6	6.9	4.7	2.8	2.1		
		90	5.5	17.5	5.4	2.3	1.0	0.8		
120	1.9	5.0	2.2	0.8	0.3	0.3				
30	7.3	5.2	<0.1	3.2	0.5	<0.1				
60	1.0	<0.1	<0.1	<0.1	<0.1	<0.1				
90	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1				
120	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1				
Intravenous	Rats (S.D. strain, 220~240 g)	3	CTZ	5	95.0	197	42.0	18.3	10.7	5.8
				15	54.0	85.0	25.0	8.8	5.7	3.0
				30	23.0	28.3	5.0	4.4	2.8	0.8
				60	7.2	8.9	0.7	1.3	<0.5	<0.5
			15	96.7	67.5	27.0	9.5	6.9	3.3	
			30	67.7	32.5	5.4	6.1	4.2	0.9	
		60	32.7	14.4	0.9	1.2	1.0	<0.5		
		15	34.7	74.2	9.3	11.0	5.3	3.9		
		30	22.3	51.2	9.2	10.7	2.9	2.1		
		60	4.6	12.6	4.9	2.4	0.8	0.7		
		15	12.4	8.5	0.5	5.0	0.8	1.8		
		30	1.8	3.2	<0.1	2.3	<0.1	<0.1		
	60	0.2	<0.1	<0.1	<0.1	<0.1	<0.1			
	30	28.3	177	4.3	7.1	6.3	3.1			
	60	11.2	50.5	2.8	3.2	2.6	2.2			
	30	50.5	260	6.0	9.8	10.3	4.2			
	60	15.3	70.5	1.4	3.7	3.5	2.7			

7. Lymph Level in Rats

Concentrations of ceftazidime in the lymph after administration of a single dose of 20 mg/kg to rats were compared with those of cefazolin and cephaloridine. As shown in Table 7, ceftazidime reached a higher concentration 1 hour after administration than did cefazolin and cephaloridine. Thereafter, the decrease in the concentration of ceftazidime was slightly faster than that of cefazolin. A considerable amount of ceftazidime was found in the lymph 5 hours after administration despite its disappearance from

Table 7. Concentration of ceftazidime and related antibiotics in the lymph of rats*

Antibiotic	Mean lymph concentration ($\mu\text{g/ml}$)					
	0~1/2 hr	1/2~1 hr	1~2 hrs	2~3 hrs	3~5 hrs	5~8 hrs
CTZ	20.0	20.6	16.6	11.8	4.0	0.8
CEZ	15.4	16.6	15.0	11.0	6.2	2.5
CER	7.5	11.0	9.5	5.3	0.4	<0.3

* Wistar-Imamichi strain, weighing 260~280 g, 3 rats/group.
Antibiotics were administered intramuscularly (20 mg/kg).

Table 8. Concentrations of ceftazidime and related antibiotics in the exudates in rat inflammatory pouches*

Route of administration	Antibiotic	Mean exudate concentration ($\mu\text{g/ml}$)					
		1/4 hr	1/2 hr	1 hr	2 hrs	3 hrs	5 hrs
Intramuscular	CTZ	0.8	2.6	3.4	3.5	2.5	1.4
	CEZ	0.6	1.4	2.2	2.4	2.6	1.6
	CER	3.0	4.0	5.8	4.3	2.7	1.2
	CET	0.3	0.4	0.4	0.4	0.3	<0.3
Intravenous	CTZ	4.3	5.6	6.0	4.6	3.0	1.4
	CEZ	2.0	3.9	5.0	4.8	3.9	2.0
	CER	2.8	4.8	6.8	5.6	3.0	0.9
	CET	1.1	1.4	1.4	0.8	0.5	<0.3

* Wistar-Imamichi strain rats, weighing 200~240 g, 7 rats/group
Antibiotics were injected at 20 mg/kg on the 5th day (intravenous injection) or 8th day (intramuscular injection) after induction of inflammation.

the blood.

8. Exudate Level in Rat Aseptic Inflammatory Pouches

On the 8th day after the induction of subcutaneous aseptic inflammatory pouches in rats, 20 mg/kg of ceftazidime and related antibiotics were administered intramuscularly and the exudate levels of the antibiotics were determined. Similarly, exudate levels of the drugs were examined after intravenous administration of a 20 mg/kg dose to rats with inflammatory pouches on the 5th day after induction. As shown in Table 8, ceftazidime attained a maximum 1 to 2 hours after administration, a concentration that was somewhat lower than that of cephaloridine but slightly higher than that of cefazolin. When the antibiotics were administered intravenously, the maximum concentrations in the exudates were higher than when the antibiotics were given by intramuscular administration.

The concentrations of ceftazidime in the exudates after intravenous administration of 20, 40 and 80

Fig. 2. Concentration of ceftazidime in rat exudates*

* S.D. strain rats, weighing 140~160 g, 4 rats/group, 7 day-pouch after inflammatory induction.

Antibiotics administered intravenously.

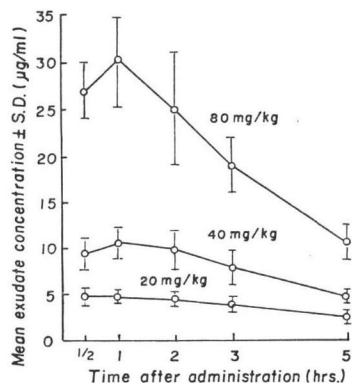


Table 9. Cerebrospinal fluid concentration after intravenous administration of ceftazidime (50 mg/kg) in rabbits*

Exp. group	Mean cerebrospinal fluid concentration \pm S.D. ($\mu\text{g/ml}$)					Body temp. ($^{\circ}\text{C}$) (immediately before administration)
	1/2 hr	1 hr	2 hrs	3 hrs	4 hrs	
<i>S. pyogenes</i> JU-13 infected rabbits**	4.1 ± 0.5	3.2 ± 0.4	2.2 ± 0.1	1.7 ± 0.2	1.5 ± 0.3	40.9~41.5
Normal rabbits	0.6 ± 0.3	0.9 ± 0.4	1.1 ± 0.7	0.8 ± 0.5	0.3 ± 0.2	38.9~39.1

* Weighing 2.6~3.2 kg, 3 rabbits/group.

** Rabbits were injected with 10^6 viable units (v.u.) of *S. pyogenes* JU-13 into the cerebrospinal fluid 24 hours before administration.

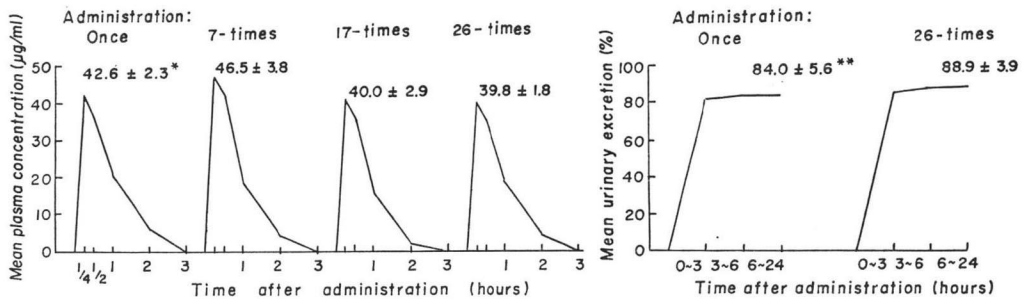
Viable cell count in cerebrospinal fluid immediately before administration: $5.0 \times 10^2 \sim 9.5 \times 10^3$ v.u./ml.

Fig. 3. Effect of repeated intramuscular administration of ceftazidime to rabbits* (20 mg \times 2/day) on plasma concentrations and excretion in the urine.

Rabbits: Weighing 2.6~3.2 kg, 3 rabbits/group

* Mean peak level \pm S.D. ($\mu\text{g/ml}$)

** Mean urinary excretion rate in 0~24 hour-urine \pm S.D. (%)



mg/kg doses were examined using rats with inflammatory pouches on the 7th day after induction. As shown in Fig. 2, a dose-response relationship was observed between the maximum concentration and the dose.

9. Level in the Cerebrospinal Fluid of Rabbits

The cerebrospinal fluid level of ceftazidime was determined using normal rabbits and those with cerebrospinal meningitis induced by infecting with *S. pyogenes*.

Twenty-four hours after inoculation of *S. pyogenes*, the viable cell counts in the fluid were about 1×10^3 viable units/ml, and the mean body temperature was 41.2°C , about 2°C higher than that of normal rabbits, which clearly indicates the establishment of meningitis. After administration of 50 mg/kg of ceftazidime intravenously to rabbits, the concentration of antibiotic in the cerebrospinal fluid was determined. The results are shown in Table 9. The concentrations present in rabbits infected with *S. pyogenes* were found to be several times higher than that in normal rabbits.

10. Plasma Level and Urinary Excretion in Repeated Long-term Administration in Rabbits

The changes in plasma concentrations and rate of urinary excretion were examined when 20 mg/kg of ceftazidime was administered 26 times intramuscularly in rabbits for 14 days. As shown in Fig. 3, there was no change in the patterns of plasma level and urinary excretion throughout the period of

the experiment. Moreover, the levels of ceftazidime in the blood, urine, kidneys, liver, lungs, spleen and heart 24 hours after the last administration were all below the assay range, indicating there were no residues in the various tissues.

Discussion

As reported in the preceding paper,¹⁾ ceftazidime has a chemical structure similar to that of cefazolin. Antimicrobial tests conducted *in vitro* showed that ceftazidime, in its activities against clinical isolates of gram-negative bacteria, especially *Klebsiella* spp. and *E. coli*, was essentially equivalent to cefazolin and more potent than cephaloridine and cephalothin. The extent of binding of ceftazidime to human serum protein was somewhat lower than that of cefazolin.

In this report, a comparative study of blood, lymph and various tissue levels, as well as urinary and biliary excretion of ceftazidime, cefazolin^{4,5)} and related antibiotics was conducted in rats, rabbits and dogs when the antibiotics were administered intramuscularly and intravenously.

In the animal studies ceftazidime concentrations in the blood decreased more rapidly than did concentrations of cefazolin. Furthermore, the excretion of ceftazidime was faster than that of cefazolin. When ceftazidime was administered intramuscularly to human volunteers in a single dose of 500 mg, it was found that ceftazidime disappeared from the blood 6 hours after administration. Ceftazidime was excreted rapidly by humans, 79.5% in the first three hours. The initial concentration of antibiotics in the urine was high. It was also confirmed by bioautography that ceftazidime was excreted in human urine in the active form undergoing minimal metabolism. It is concluded that ceftazidime could be especially effective in the treatment of clinical urinary infections.

Biliary excretion of ceftazidime in rats and dogs was found to be somewhat lower than that of cefazolin but much higher than those of cephaloridine and cephalothin.

The pattern of tissue distribution of ceftazidime was found to be similar to that of cefazolin but the former was distributed more rapidly and the rate of decrease in the tissue was also faster.

Peak levels of ceftazidime in lymph and the exudate of inflammatory pouches were slightly higher than those obtained with cefazolin. These results also imply good distribution of ceftazidime in various tissues.

It was found that repeated administration of ceftazidime to rabbits did not affect the pattern of the blood level and urinary excretion. Therefore, it is probable that repeated administration of ceftazidime to humans is unlikely to cause toxic manifestation related to accumulation of the antibiotic in various tissues.

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