Erythromycin lactobionate Intravenous Infusion for Adults

Who can administer

May be administered by registered competent doctor or nurse/midwife

Important information

- Longer infusion times are recommended in patients with **risk factors for arrhythmias** or previous evidence of arrhythmias
- Monitor closely for thrombophlebitis-consider **IV to PO** switch as soon as is appropriate (can use same doses orally)
- There are numerous important **interactions (including those with QTc prolonging agents)**Â - check current BNF
- See under 'Dose' for adjustments required in **renal** impairment
- **NOT** a suitable agent **for surgical prophylaxis** (GUH guidelines)

Available preparations

Erythrocin 1g vial

Reconstitution

Water for injection

- 20ml per 1g vial
- **Dilute further prior to administration**

Infusion fluids

Sodium chloride 0.9%

Methods of intravenous administration

Intermittent intravenous infusion ONLY (using an electronically controlled infusion device-due to risk of thrombophlebitis)

- Add doses of between 500mg and 1g to 250ml infusion fluid and administer over 60 minutes
- Add doses of 500mg or less to 100ml infusion fluid and administer over 60 minutes
- Longer infusion times are recommended for patients with arrhythmias
- See Further Information for details on infusion times

Fluid restricted patients (ref 2)

- Add 1g to 100ml infusion fluids, and administer via **central line.** Monitor carefully
- If catheter in ventricle can cause extension of Q-R interval

Dose in adults

Severity	Dose
Mild to moderate infections (if oral route compromised)	Give 6.25mg/kg every six hours e.g. 500mg every six hours
Severe infection	Give 12.5mg/kg (max 1g)[ref 1] every six hours

Gastrointestinal stasis [ref 3]

- Give 3mg/kg three times per day
- For use in Critical Care- see local guideline

Renal Impairment [ref 1]

eGFR (ml/minute/1.73m^2)	Dose
less than 10	Give usual dose. Monitor for ototoxicity, especially at high doses However, the BNF suggests a dose reduction may be considered in moderate to severe renal impairment (ototoxicity) [ref 3]

Hepatic impairment - Use with caution

Further information

- The manufacturers suggest an infusion time of 20 to 60 minutes - however, we suggest 60 minutes due to risk of arrhythmias and also risk of phlebitis

Storage

- Store below 25^{0}C

References

SPC 17/07/2024

1. Renaldrugdatabase accessed online December 2024

2. Critical Care Group Minimum Infusion Volumes for fluid restricted critically ill patients 2012

3: BNF accessed online Dec 17th, 2024

Therapeutic classification

Macrolide antibiotic