Oritavancin intravenous infusion for Adults

Who can administer

May be administered by registered competent doctor or nurse/midwife

Important information

- Red light antimicrobial- requires Micro/ID pre-approval
- **There are two strengths of Oritavancin - the 1200mg is stocked in GUH at the moment.Â If the other strength is being used- it is important to note that there are different reconstitution requirements, different compatible diluents and the rate of administration is different**
- See under Dose for adjustments required in **Renal impairment**
- Caution if known hypersensitivity to other glycopeptides (e.g. vancomycin) as cross-sensitivity may occur
- Note: **Infusion related reactions** including flushing of the upper body, urticaria, pruritis and/or rash can occur. Stopping or slowing the infusion may result in cessation of these symptoms
- Oritavancin has been shown to **interfere with certain laboratory coagulation tests**. Oritavancin concentrations that are found in the blood of patients following administration of a single dose have been shown to artificially prolong aPTT for up to 120 hours, PT and INR for up to 12 hours (making the monitoring of the anticoagulation effect of warfarin unreliable up to 12 hours after an oritavancin dose), Activated Clotting Time for up to 24 hours, Silica Clot Time for up to 18 hours, and dilute Russell's Viper Venom Test for up to 72 hours.

Available preparations

Tenkasi (Oritavancin) 1200mg vial

Reconstitution

Water for injection
40mL per 1200mg vial

(see under Important information above if **1200mg** vial not being used)

- **Do NOT shake.** To avoid foaming it is recommended that WFI should be added carefully, along the walls of the vials gently swirling the vial until the powder is dissolved
- **Dilute further prior to administration**
- Withdraw and discard 40mL from 250mL infusion bag and add 40mL drug solution.Â Mix gently.
- Final concentration is 4.8mg in 1mL

Infusion fluids

Sodium chloride 0.9% or Glucose 5%
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Methods of intravenous administration

Intermittent intravenous infusion (using an electronically controlled infusion device)

- Administer over 60 minutes

Dose in adults

For the treatment of acute bacterial skin and skin structure infections (ABSSSI) in adults (licensed indication)

- Give 1.2g (1200mg) as a single dose

Other infections:

- Alternative dosing regimens may be used if recommended for off-label use in other types of infection by a Microbiology or Infectious Diseases consultant

Renal impairment

- CrCl less than 10 ml/minute (not on regular haemodialysis)
    - No dose adjustment required [ref 1]
- On regular intermittent haemodialysis (three times per week):
    - No dose adjustment required

Hepatic impairment

- No dose adjustment required

Monitoring

- Note: **Infusion related reactionsÂ** including flushing of the upper body, urticaria, pruritis and/or rash can occur. Stopping or slowing the infusion may result in cessation of these symptoms

Storage

Store below 25^{0}C

References

SPC -Tenkasi 13/01/2020 - accessed online via EMEA June 24th 2025

1: Renal drug database - accessed online June 24th 2025

Therapeutic classification

Lipoglycopeptide