Chloramphenicol Intravenous for Adults

Who can administer

May be administered by registered competent doctor or nurse/midwife

Important information

- See monitoring requirements
- Must be approved by **micro/ID**
- **Unlicensed** preparation
- See under 'Dose' for adjustments required in **renal or hepatic impairment**

Available preparations

Chloramphenicol 1g vial

Reconstitution

Water for injection and Sodium chloride 0.9%

To produce a 10% solution add 9.2ml to 1g vial to produce a 1000mg in 10ml solution [ref 1]

Methods of intravenous administration

Slow intravenous injection

- Administer over at least 3 minutes [ref 1]

See also further information

Dose in adults

Usual dose

- Meningoccaemia: Give a stat dose of 25mg/kg and contact micro/ID for further advice [ref 2]
- Usual dose is 12.5mg/kg every six hours [ref 3]
- In exceptional cases dose can be doubled for severe infections such as septicaemia and meningitis, providing high doses reduced as soon as clinically indicated.[ref 3]
- **Avoid repeated courses and prolonged treatment**

Renal impairment

- eGFR less than 10mL/min - use usual dose but use only if no alternative [ref 2]
- Increased risk of bone marrow depression. Monitor closely.
- See below re monitoring of levels [ref 3]

Hepatic impairment

- **Avoid if possible** - increased risk of bone-marrow depression; consider reducing dose and monitor levels (but see below) [ref 3]

Monitoring

- **Baseline FBC** required before and every two days during treatment as chloramphenicol can cause severe bone marrow depression
- Serious and fatal blood dyscrasias (aplastic anaemia, hypoplastic anaemia, thrombocytopenia, granulocytopenia) have occurred after both short and long-term use
- Note: an irreversible type of marrow depression leading to **aplastic anaemia** with a high rate of mortality can occur weeks or months after therapy [ref 4]
- Plasma concentration monitoring recommended in the elderly and in hepatic and renal impairment - **however, not routinely available**
- **Recommended plasma concentration**[ref 3]
  - **Peak** (2 hours after intravenous administration)10 to 25mg/L
  - **Trough** (just before dose is due) less than 15mg/L

Further information

- If required, chloramphenicol can be added to either Sodium chloride 0.9% and given as an infusion over 15 to 60 minutes. The volume is determined by patient's fluid requirements [ref 1]

Storage

Store below 25^{0}C

References

UK SPC 14/10/2022 (assessed via Medusa)

1. Injectable medicines information guide downloaded from Medusa 15/04/2025

2. GAPP app guidelines

3. BNF accessed online 04/08/2026

4. Martindale- downloaded via http://www.medicinescomplete.com 15/04/2025

Therapeutic classification

Antibiotic