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 1 minute (ref 1)

See also further information

Dose in adults

Usual dose

- Give a stat dose of 25mg/kg and contact micro/ID for further advice (ref 2)
- Dose is 12.5mg/kg to 25mg/kg every six hours (ref 3,4)
- Doses at the higher end of range (25mg/kg)are used for serious infections such as septicaemia and meningitis provided high doses are reduced as soon as clinically indicated
- Maximum dose 4g daily (ref 4,5). 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% or Glucose 5% and given as an infusion over 20-30 minutes and volume is determined by patient's fluid requirements (ref 1)

Storage

Store below 25°C

References

UK Kemicetine SPC 08/09/2021

- 1. Injectable medicines information guide downloaded from Medusa 20/01/2023
- 2. GAPP app guidelines 2021
- 3. BNF accessed online 20/01/2023
- 4. Martindale- downloaded via http://www.medicinescomplete.com20/01/2023
- 5: Uptodate, downloaded 20/01/2023

Therapeutic classification

Antibiotic