

# Ethambutol Intravenous for Adults

## Who can administer

May be administered by registered competent doctor or nurse/midwife

## Important information

- Unlicensed preparation
- Must be diluted before administration via IV infusion. High peak levels increase risk of damage to eyesight so **DO NOT GIVE undiluted**

## Available preparations

EMB-Fatol 1g in 10ml vial

## Reconstitution

Already in solution

**Dilute further prior to administration**

## Infusion fluids

Sodium chloride 0.9% or Glucose 5%

## Methods of intravenous administration

### Slow intravenous infusion

- Add required dose to 500ml infusion solution and administer over at least 2 hours <sup>(ref 1)</sup>
- Slow infusion required, as high peak levels increase risk of damage to eyesight

## Dose in adults

### Usual dose

- Use the same dose by intravenous infusion as would be given orally
- Switch to oral therapy as soon as possible

### Renal impairment <sup>(ref 2)</sup>

GFR (mL/min/1.73m <sup>2</sup> )	Dose	Alternative dose
<b>Greater than 20</b>	Usual dose	
<b>10 to 20</b>	15 mg/kg every 24 to 36 hours	7.5 to 15 mg/kg/day
<b>less than 10</b>	15 mg/kg every 48 hours	5 to 7.5 mg/kg/day

## Monitoring

- Hypersensitivity syndrome has been reported (skin reaction, eosinophilia plus one or more of the

following: hepatitis, pneumonitis, nephritis, myocarditis, pericarditis). Fever and lymphadenopathy may be present.

- Anaphylactoid reactions have been reported
- Ethambutol can cause optic neuritis and must be discontinued in patients who report changes in their eyesight, as it can cause irreversible visual damage (blindness) if treatment is not discontinued in a timely manner.
- Monitor renal and hepatic function

## Storage

Store below 25°C

## References

1: Medusa UK Injectable Medicines guide downloaded 17th Jan 2023

2: Renaldrugdatabase.com, downloaded 17th Jan 2023

## Therapeutic classification

Anti-tuberculosis agent