

# Cefiderocol Sulfate Tosylate Intravenous Infusion for Adults



## Who can administer

- May be administered by registered competent doctor or nurse/midwife

## Important information

- **Risk of under-dosing** if **displacement value not accounted for** see table 1
- Restricted to Microbiology or Infectious Diseases advice only (**Red-light antimicrobial**)
- If documented immediate, or severe delayed hypersensitivity **REACTION to PENICILLIN or CEPHALOSPORIN: DO NOT GIVE THIS DRUG**
- See under 'Dose' for adjustments required in **renal impairment**
- Note **high salt content**. A 2g dose is approximately 35% of WHO adult recommended maximum daily dietary intake. Refer to SPC for further information

## Available preparations

Fetroja 1g vial

## Reconstitution

- Add 10mL of sodium chloride 0.9% or glucose 5% to each 1g vial, taken from the same bag
- Shake vial gently to dissolve powder and stand vial until surface foaming disappears (usually within 2 minutes)
- Dilute further prior to administration by returning the reconstituted vials to the bag- see dosing table below for further details

## Infusion fluids

Sodium Chloride 0.9% or Glucose 5%

## Methods of intravenous administration

### Intermittent intravenous infusion (Table 1)

- Add required dose to infusion fluid (volume below) and administer over 3 hours

| Cefiderocol dose | Number of 1g cefiderocol vials to be reconstituted | Volume to withdraw from reconstituted vial(s)                         | Total volume of cefiderocol solution required for further dilution.<br>Remove this volume for an infusion bag (minimum bag volume 100ml) and replace with the drug solution |
|------------------|--|---|---|
| 2g               | 2 vials  | 11.2 mL (entire contents) from both vials                             | 22.4mL  |
| 1.5g             | 2 vials  | 11.2 mL (entire contents) from first vial AND 5.6 mL from second vial | 16.8mL  |
| 1g               | 1 vial   | 11.2 mL (entire contents)   | 11.2mL  |
| 0.75g            | 1 vial   | 8.4 mL  | 8.4mL   |

- Do not use discoloured solutions or solutions with visible particulates

## Dose in adults

### Usual Dose (Table 2)<sup>(ref 1)</sup>

- Give 2g every 8 hours
- An increased frequency can be used in severe infection, based on renal function (see table below). However this must be done on a case by case basis in discussion with micro/ID
- **Creatinine clearance must be calculated using Cockcroft and Gault equation rather than using eGFR**

| CrCl (mL/min) | Dose  | Frequency      |
|---------------|-------|----------------|
| >120ml/min    | 2g    | Every 6 hours  |
| 60 to 120     | 2g    | Every 8 hours  |
| 30 to 60      | 1.5g  | Every 8 hours  |
| 15 to 30      | 1g    | Every 8 hours  |
| <15           | 0.75g | Every 12 hours |

## Storage

Store in a refrigerator 2° to 8°C

## References

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1: Sanford guide- checked 24/11/2011

## Therapeutic classification

Antimicrobial