

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 PIL for further information

Available preparations

Fetroja 1g vial

Reconstitution

- Use an infusion bag containing 100mL or more
- Withdraw 10mL from this infusion bag to reconstitute each vial
- 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 Table 1 below for further details**

Infusion fluids

Sodium Chloride 0.9% or Glucose 5%

Methods of intravenous administration

Intermittent intravenous infusion

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

Table 1: Preparation of infusion

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 in at least 100mL infusion fluid
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

- 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**

Table 2: Renal dose adjustment

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

SPC downloaded from EMEA 17th Dec 2024

Therapeutic classification

Antimicrobial