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

Fetcroja 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 infusionÂ

• 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 Â	Volume to withdraw from reconstituted vial(s)Â	Total volume of cefiderocol solution required for further dilution in at least 100mL infusion fluidÂ
2gÂ	2 vials	11.2 mL (entire contents) from both vials	22.4mL
1.5g Â	2 vials Â	11.2 mL (entire contents) from first vial AND 5.6 mL from second vialÂ	16.8mL
lg Â	1 vialÂ	11.2 mL (entire contents)Â Â	11.2mL
0.75g Â	1 vialÂ	8.4 mLÂ	8.4mL

• Do not use discoloured solutions or solutions with visible particulates

Dose in adults

Usual DoseÂ

- 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)Â	Dose Â	Frequency		
>120ml/min	2g Â	Every 6 hours		
60 to 120Â	2gÂ	Every 8 hours		
30 to 60Â	1.5g	Every 8 hours		
15 to 30Â	lgÂ	Every 8 hours		
<15	0.75gÂ	Every 12 hours		

Storage

Store in a refrigerator 2° to 8° C

References

SPC downloaded from EMEA 17th Dec 2024

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Therapeutic classification

Antimicrobial