

## Who can administer

May be administered by registered competent doctor or nurse/midwife

## Important information

- Zanamavir is indicated for the treatment of complicated and potentially life-threatening influenza A or B virus infection when:
  - The patient's influenza virus is known or suspected to be resistant to anti-influenza medicinal products other than zanamivir <sup>(ref 1)</sup> OR
  - Other anti-viral medicinal products for treatment of influenza, are not suitable for the individual patient. <sup>(ref 1,3)</sup> AND the patient has multi-organ involvement, or requires intensive care <sup>(ref 2)</sup>
  - Use should be supervised by a consultant clinical microbiologist/virologist or infectious diseases consultant and a consultant in intensive care medicine <sup>(ref 3)</sup>
- Treatment should commence as soon as possible and usually within 6 days of the onset of symptoms <sup>(ref 2)</sup>
- See under 'Dose' for adjustments required in **renal impairment**

## Available preparations

Dectova 200mg per 20ml (10mg/mL) vial

## Reconstitution

Already in solution

## Infusion fluids

Sodium Chloride 0.9% **ONLY**

## Methods of intravenous administration

### Intermittent intravenous infusion (using an electronically controlled infusion device)

- Add the required dose to infusion fluid to make a final volume of 100ml or 250ml
  - Withdraw and discard a volume (equal to the volume of drug solution) from the infusion bag
- The infusion bag should be gently manipulated by hand to ensure it is mixed thoroughly
- Administer over 30 minutes <sup>(ref 1,3)</sup>
- See also under Further information- re administration undiluted

## Dose in adults

### Usual dose

- Give 600mg every 12 hours for 5 to 10 days <sup>(ref 2)</sup>

## Renal impairment

- See Table 1 below

Table 1: Doses in renal impairment			
CrCl (mL/min)	Initial dose	Maintenance dose	Maintenance dose schedule
50 to < 80	600mg	400mg every 12 hours	Begin Maintenance dose 12 hours AFTER initial dose
30 to < 50	600mg	250mg every 12 hours	
15 to < 30	600mg	150mg every 12 hours	Begin Maintenance dose 24 hours AFTER initial dose
< 15	600mg	60mg ( <b>SIXTY</b> ) every 12 hours	Begin Maintenance dose 48 hours AFTER initial dose

## Hepatic impairment

- No dose modification is required

## Elderly

- No dose modification is required

## Monitoring

- Monitor temperature, blood pressure, heart rate, respiratory rate, O<sup>2</sup> saturation, behavioural changes, and injection site reaction <sup>(ref 3)</sup>
- Can increase ALT and AST and cause hepatocellular injury (1%)
- Common side effects are rash, ALT/AST increase and diarrhoea <sup>(ref 1,3)</sup>

## Further information

- Can give undiluted over 30 minutes via electronically controlled device
- No dose adjustment is required for elderly patients

## Storage

Store below 25<sup>0</sup>C

## References

SPC - [Dectova](#) 01/10/2019

1. Zanamivir - BNF, accessed online via [medicines complete](#) 17/01/2024

2. [Guidance on the use of antiviral agents for the treatment and prophylaxis of Influenza](#), HSE, December 2023

3. Injectable medicines guide NHS Medusa Injectable Medicines Guide, downloaded 17/01/2024

## Therapeutic classification

Direct Acting Antivirals - Neuraminidase inhibitors - J05AH