# NEONATAL MEDICATION PROTOCOLS

**ERYTHROMYCIN (ANTIMICROBIAL INDICATION)**

**NCCU Clinical Guidelines**
Perth, Western Australia

**DATE:** August 2013

<table>
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<tr>
<th>DRUG:</th>
<th>ERYTHROMYCIN (ANTIMICROBIAL INDICATION)</th>
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</table>
| PRESENTATION: | Oral suspension: 400mg/5mL  
Vial: 1g |
| ACTION & INDICATION: | Broad spectrum macrolide antimicrobial agent for the treatment of sensitive organisms including Chlamydia trachomatis, Mycoplasma and Ureaplasma. |
| DOSE: | Preterm and first week of life  
10 mg/kg/dose 12 hourly  
2–4 weeks  
10 mg/kg/dose 8 hourly  
≥5 weeks  
12.5 mg/kg/dose 6 hourly |
| PREPARATION: | Intravenous  
Diluent: Water for Injections  
Add 18.2 mL of Water for Injections to 1g vial = 50mg/mL  
Take 1 mL of the above solution and dilute it to 5 mL with Water for Injections or 0.9% Sodium chloride **(do not use Glucose solutions)** = 10 mg/mL  
Oral Suspension 400mg/5mL: Add 77 mL of Water for Irrigation to the powder in the bottle.  
For small oral doses the oral suspension may be further diluted - eg Take 0.5mL and dilute to 4mL = 10 mg/mL |
| ADMINISTRATION: | Intravenous: Infuse over 30 – 60 minutes via syringe pump.  
Oral: May be given at any time with regard to feeds. |
| ADVERSE EFFECTS: | May increase the risk of infantile hypertrophic pyloric stenosis if used in infants < 6 weeks of age. Azithromycin may be an appropriate alternative.  
Pain on injection, phlebitis  
Bradycardia, hypotension  
Gastric irritation  
May increase serum levels of digoxin, theophylline, carbamazepine  
Predisposition to prolongation of QT interval, caution with concomitant use of drugs that prolong QT interval. |
| COMMENTS: | Discard reconstituted vial immediately after use.  
Store reconstituted oral suspension in refrigerator. Discard after 10 days. |
| REFERENCES: | Paediatric Pharmacopoeia 13th Ed Royal Children’s Hospital Melbourne  
BNF for Children 2013 |

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